Notice of Meeting and Agenda

Cabinet

Venue: Council Chambers,
Midlothian House, Dalkeith, EH22 1DN

Date: Tuesday, 21 May 2019

Time: 11:00

Director, Resources

Contact:
Clerk Name: Gordon Aitken
Clerk Telephone: 0131 271 3159
Clerk Email: gordon.aitken@midlothian.gov.uk

Further Information:

This is a meeting which is open to members of the public.

(A) TO CONSIDER RESOLVING TO DEAL WITH THE UNDERNOTED BUSINESS IN PRIVATE IN TERMS OF PARAGRAPHS 6, 9 AND 11 OF PART 1 OF SCHEDULE 7A TO THE LOCAL GOVERNMENT (SCOTLAND) ACT 1973 - THE RELEVANT REPORTS ARE THEREFORE NOT FOR PUBLICATION; AND(B) TO NOTE THAT NOTWITHSTANDING ANY SUCH RESOLUTION, INFORMATION MAY STILL REQUIRE TO BE RELEASED UNDER THE FREEDOM OF INFORMATION (SCOTLAND) ACT 2002 OR THE ENVIRONMENTAL INFORMATION REGULATIONS 2004.

6   Private Reports

6.1 Minute of Metting of the Joint Consultative Group of 19 March 2019

- 11. Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office-holders under, the authority

6.2 Loanhead Police Station - Proposed Purchase by Housing - Report by Joint Director, Health and Social Care

- 6. Information relating to the financial or business affairs of any particular person (other than the authority).

- 9. Any terms proposed or to be proposed by or to the authority in the course of negotiations for a contract for the acquisition or disposal of property or the supply of goods or services.

7 Date of Next Meeting

The next meeting will be held on Tuesday 3 September 2019 at 11.00am

Cabinet

Date	Time	Venue
9 April 2019	11.00 am	Council Chambers, Midlothian House, Buccleuch Street, Dalkeith

Present:

Councillor Muirhead – Depute Convener	
Councillor Imrie	
Councillor Curran	
Councillor Hackett	

Religious Representatives:

Mr Vic Bourne	
Mrs Elizabeth Morton	

1   Apologies

Apologies were received on behalf of Councillor Milligan (Convenor)

2   Order of Business

The Clerk advised that the Depute Convener had agreed to consider Item No 6.2 "Irrecoverable Debt Write-Off - Report by Acting Head of Customer and Housing Services" as the first item of business to be considered due to the attendance of Fiona Law, City of Edinburgh Council to provide information on this matter to the Cabinet. As this was a Private report the Cabinet agreed to immediately proceed to private session in order to consider this matter as well as the other private business on the Agenda.

Exclusion of Members of the Public

In view of the nature of the business to be transacted, the Cabinet agreed that the public be excluded from the meeting during discussion of the undernoted items, as contained in the Addendum hereto, as there might be disclosed exempt information as defined in paragraphs 1, 6 and 11 of Part I of Schedule 7A to the Local Government (Scotland) Act 1973:-

6.1 Minutes of Meeting of the Midlothian Joint Consultative Group of 5 February 2019 – Noted.

6.2 Irrecoverable Debt Write-Off – Agreed Recommendations contained within the report.

3   Declarations of interest

No declarations of interest were received.

4   Minutes of Previous Meetings

The Minutes of Meeting of the Cabinet held on 26 February 2019 were submitted and approved as a correct record.

5.   Reports

Agenda No.	Report Title	Presented by:
5.1	Inspection of Hawthorn Family Learning Centre	Head of Children's Services
Outline of report and summary of discussion		

The report outlined the outcome of the above unannounced inspection as carried out by the Care Inspectorate in November 2018.

Based on the findings of this inspection the Care Inspectorate awarded the following grades:

Quality of Care and Support	Grade 6 – Excellent
Quality of Environment	Grade 5 – Very Good
Quality of Staffing	Not assessed
Quality of Management and Leadership	Not assessed

The Inspection Team noted the following strengths:

- A considerable strength of the experienced and well qualified staff team was their ability to work together sharing the joint goals of supporting children to reach their potential and of empowering families.

- Well established links with support services together with confident staff who were experienced in identifying when children would benefit from additional support, led to timeous referrals.

- Staff had built strong positive attachments with children and care was taken to ensure that when children moved into and on from the service this was done with full regard to their specific needs and was not rushed, contributing to children feeling secure and confident.

- Staff respected children and supported their independence by reviewing the layout of the playrooms so that children could move around freely.

- Staff were kind and caring in all of their interactions with children which helped the very young children to experience a sense of achievement and self-worth.

The Inspection Team reported that the authority could do better in the following area:

- The manager and staff should continue to make the changes identified to the environment ensuring that it meets the needs of the younger age group. This statement was around the 2 year olds moving into a bigger at the time of the Inspection, and there were a few finishing touches still required to be done to the room. These have now been completed.

The Care Inspectorate concluded that Hawthorn Family Learning Centre continues to maintain the excellent level of care and learning opportunities offered to all children and families.

The Head of Children's Services was heard in amplification of this report during which she paid tribute to Head Teacher Evelyn Brownright who would be retiring from her post after 30 years' service.

Councillor Muirhead also took the opportunity to praise the outstanding service and contribution of Ms Brownright and expressed on behalf of the Cabinet their appreciation of this work and wished her a very happy retirement.

Decision
(a)To note the content of the inspection report;

(b)To pass this report to the Performance, Review and Scrutiny Committee for its consideration; and

(c)To congratulate the Head Teacher, the management and staff connected with Hawthorn Family Learning Centre on the excellent work being carried out at the Centre.

Action
Director, Education, Communities and Economy

Agenda No	Report Title	Presented by:
5.2	School Session Dates for the Academic Year 2020/21	Acting Head of Education

Outline of report and summary of discussion

The report advised that the authority was required to set school session dates each year with regard to statutory attendance. The purpose of this report was to obtain the agreement of Cabinet for the proposed session dates for the 2020/21 academic year. The Acting Head of Education was heard in amplification of this report during which she confirmed that the school session dates proposed for 2020/21 coincided with both Edinburgh and East Lothian on the timing of the return to school in August and on the timing of the October, Christmas, February and Easter breaks. The last day of the school session would be Thursday 1 July 2021 in Midlothian compared with Friday 2 July in Edinburgh and East Lothian.

Decision

To agree the school session dates for 2020/21 as detailed as an appendix to the report.

Action

Acting Head of Education

Agenda No	Report Title	Presented by:
5.3	Early Learning and Childcare Expansion Update and Admission Policy	Acting Head of Education

Outline of report and summary of discussion

The purpose of the report was to provide an update on progress with the expansion in early learning and childcare (ELC) to 1140 hours, advise of an increase in the hourly rate paid to funded providers, advise of the council becoming a signatory to the national position statement on outdoor learning and recommend a change in the council's admission policy with effect from academic year 2019/20 so that children born between March and August become entitled to a place from August.

The Acting Head of Education was heard in amplification of the report after which there was a general discussion on these matters.

Decision

(a)To note the progress towards implementation of the expansion to 1140 hours of early learning and childcare;

(b)To note the increase in hourly rate for 3 and 4 year old 600 hour places at funded provider settings and childminders to £4.50 from August 2019;

(c)To revise the admission policy to the hybrid model with effect from academic year 2019/20, whereby children who turn three between March and August become entitled to an early learning and childcare place from August and children born in the remaining months (with the exception of November, who start in January) become entitled from the month following their birthday;

(d)To note that Midlothian Council had become a signatory to Scotland's Outdoor Play & Learning Coalition Position Statement; and

(e)To pass this report to Council for noting.	
Action	
Acting Head of Education	

Agenda No	Report Title	Presented by:
5.4	Procurement and Commercial Improvement Programme	Head of Finance and Integrated Service Support
Outline of report and summary of discussion		

The PCIP replaced the Procurement Capability Assessment (PCA) model previously used by the Scottish Government to promote the sharing of best practice and continuous improvement in procurement across the Scottish Public Sector. The new regime would continue to assess public sector organisations by reviewing and auditing evidence on how the organisation has delivered its procurement.

Some key changes between the PCIP and the PCA were:

- Organisation can submit some key evidence 6 weeks in advance of their PCIP assessment date;

- The PCIP has a new question set and is scored in bands from F1-F11 (the highest score being F1);

- Individual percentage scores will be given to each organisation but these will not be shared with other organisations;

- There are three models of the PCIP; Full, Medium and Lite assessments; and

- The model that the organisation will be assessed against is dependent on spend and number of contracts delivered.

  The Scottish Government have been clear that the PCIP is not comparable to the PCA and that previous scores from the PCA should not be used as a target for the 2019 assessment. The question set is more demanding and challenges organisations at the top level of procurement delivery.

The PCIP encompassed four key areas of review which were as follows:

- Procurement leadership and governance

- Procurement development and tender;

- Contracting processes; and

- Purchase processes.

The Acting Director, Resources was heard in amplification of the report after which there was a general discussion on this matter.

Decision
(a)To note the Council's PCIP assessment outcome for the 2018 assessment;   (b)To refer this report to Audit Committee for its interest; and   (c) To refer this report to the PRS Committee for its interest

Action
Head of Finance and Integrated Service Support

Agenda No	Report Title	Presented by:
5.5	New Build Council Housing – Local Letting Initiative	Joint Director, Health and Social Care

Outline of report and summary of discussion

The report proposed a Local Letting Initiative (LLI) to be used for the allocation of housing at Woodburn Terrace, Dalkeith.

The report advised that the total housing mix of the development was as shown below:

Table 1: Housing Mix at Woodburn Terrace, Dalkeith

Property Type	Number of Properties
1 Bed, 2 Person Tenement Flat	6
2 Bed, 3 Person Cottage Flat	4
Total	10

In order to allocate these units in a way that ensured a balanced and sustainable community it was recommended that the following criteria were used to allocate the first let of these units. The Housing Services team will allocate properties in the following order of priority until all properties have been allocated:

- Allocate to existing council housing tenants who are on the General Needs List and are resident in the Dalkeith area.

- Allocate to Homeless and General Needs List Applicants who have chosen Dalkeith as one of their area choices whilst ensuring that, of the total allocations for this development, a target of 60% of the homes at this development are allocated to households who were resident in Dalkeith as of March 2019.

To ensure sustainability of tenancies, properties woul be allocated to households on the Housing List who do not have a history of anti-social behaviour.

The Joint Director, Health and Social Care was heard in amplification of the report after which there was a general discussion on this matter.

Decision

To approve a Local Letting Initiative as detailed within the report for the allocation of housing at Woodburn Terrace, Dalkeith to ensure the creation of a sustainable, balanced community.

Action
Joint Director, Health and Social Care

Agenda No	Report Title	Presented by:
5.6	Midlothian Active Travel Strategy	Acting Director, Resources

Outline of report and summary of discussion

The purpose of the report was to seek agreement for the adoption of the Midlothian Active Travel Strategy.

The report advised that increasing the number of journeys made by foot or by bicycle helped achieve many local and national outcomes and aligned well with policy objectives for improving health, creating better places for people, tackling congestion and pollution, and increasing access to jobs and services. National, regional and local plans provide a framework to work towards achieving these outcomes and increasing active travel levels. These include the National Walking Strategy and Cycling Action Plan for Scotland (CAPS), as well as the Single Midlothian Plan and the Midlothian Local Development Plan, all of which this strategy aimed to support.

Two rounds of public and stakeholder consultation which shaped the development of the strategy were held. The nature of responses received included:

- Support for the action plan set in the strategy and the proposed and aspirational routes.

- Comments regarding the need for more segregated cycling infrastructure and the need to improve particular junctions.

- Review of speed limits, specifically the introduction of 20mph in town centres.

- Segregated cycling infrastructure should be in place along main roads as opposed to advisory cycle lanes.

- Working collaboratively with neighbouring local authorities especially City of Edinburgh Council on improving cross-county routes.

- The need to maintain active travel routes regularly, especially in autumn and winter months.

- The need for active travel paths to be fully accessible by mobility scooters, wheelchairs and buggies.

- Many comments about the need for segregated cycling infrastructure along the A701, A702, A703 and improvements to the Hillend and Straiton junctions.

- The need for segregated active travel routes in the vicinity of Sheriffhall roundabout.

- Eskbank Toll regarded as a barrier to cycling and the call for active travel infrastructure along the A7.

- Safe cycling routes from Gorebridge, Newtongrange to Dalkeith, Bonnyrigg and Edinburgh.

Acting Director, Resources was heard in amplification of the report after which there was a general discussion on this matter.
Decision
To adopt the Midlothian Active Travel Strategy.
Action
Acting Director, Resources

The meeting terminated at 12noon.

Inspection of Bonnyrigg Primary School and Nursery Class

Report by Maria Lloyd, Acting Head of Education

1   Purpose of Report
This report outlines the outcome of the above inspection as carried out by Education Scotland which was communicated in their letter dated 12 March 2019.

2   Background

2.1   Bonnyrigg Primary School and Nursery Class was inspected in November 2018. The report was published on 12 March 2019. A copy is included in appendix one.

2.2   Following inspection, Education Scotland gathers evaluations of the core quality indicators to keep track of how well all Scottish Early, Learning and Childcare settings and schools are doing. The short inspection model was used for this visit as decided by Education Scotland. This visit had a specific focus on QI 2.3 and 3.2 for both Primary School and Nursery Class. Education Scotland published a statement as part of this report on the confidence they had in the school's capacity to continue to improve.

Noted below are the evaluations for Bonnyrigg Primary School and Nursery Class:

School

QI 2.3 Learning, Teaching and Assessment	Good
QI 3.2 Raising attainment and achievement	Good

Nursery Class

QI 2.3 Learning, Teaching and Assessment	Satisfactory
QI 3.2 Securing Children's Progress	Satisfactory

2.3   **The inspection team found the following strengths in the school's work.**

- Caring, nurturing relationships between children and staff. This is leading to children feeling safe, happy and included. Children are very proud of their school and nursery class

- Strong teamwork amongst staff. Staff are very supportive of one another and work well collectively to meet children's needs

- Children's understanding of the qualities required to be a good learner

- Teacher's use of effective questioning to engage children in their learning and help monitor their progress

2.4` **The following areas for improvement were identified and discussed with the headteacher and a representative from Midlothian Council.**

- Raise attainment in Literacy and English taking better account of children's prior learning

- Ensure all learning experiences consistently provide sufficient challenge for all learners including increased opportunities for children to lead their own learning

- Senior leaders need to continue to improve their approaches in monitoring children's progress across the school and nursery. This will help show clear evidence of improvement as a result of self-evaluation

2.5 **Conclusion**

As outlined in the inspection letter, Education Scotland is confident that the school has effective arrangements for ensuring continuous improvement in the quality of education for all learners. As a result Education Scotland will not return to the school with regard to this particular inspection.

3 **Report Implications**

3.1 **Resource**
Actions related to the Summarised Inspection Findings (SIF) will form part of the school's improvement plan and will be monitored through the quality assurance process.

3.2 **Risk**

Education Scotland visits a sample of nursery, primary and secondary schools every year to find out how they are performing. A report is published which informs parents about the key strengths of the school, its capacity for further improvement and sets out the main points for action.

Monitoring, review and evaluation of progress by School Group Managers and Senior Education Managers is the control measure in place to reduce the risk of failure of any school to demonstrate its capacity to improve. In the case of this report, the school will continue to receive the same level of support as other schools as detailed in the 3-18 Improvement Team's quality assurance calendar. This will ensure that the school continues to improve.

3.3 **Single Midlothian Plan and Business Transformation**

Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
X Getting it right for every Midlothian child
X Improving opportunities in Midlothian
☐ Sustainable growth

☐ Business transformation and Best Value
☐ None of the above

3.4 Impact on Performance and Outcomes

The setting will continue to improve its work in line with its improvement plan and the Education Service will continue to challenge and support the setting in relation to developing and implementing a range of quality improvement strategies.

3.5 Adopting a Preventative Approach

The Education (Scotland) Act aims to take preventative action in order to close the attainment versus deprivation gap by implementing key policies and programmes which are designed to target support to children and young people from disadvantaged communities. Midlothian is highly committed to closing the attainment gap which compliments the strategies employed by Midlothian which are highlighted in the National Improvement Framework (NIF) report which was initially presented to Council on 3 November 2015. The NIF is updated annually and reported to the Scottish Government.

3.6 Involving Communities and Other Stakeholders

Copies of the report have been made available to Elected Members, parents of children currently in the school and other interested parties.

3.7 Ensuring Equalities

The School Improvement Plan will be screened for equalities implications.

3.8 Supporting Sustainable Development

The School Improvement Plan allows for sustainable development and improvement.

3.9 IT Issues

There are no IT implications.

4 Recommendations

Cabinet is asked to:

(i)   Note the content of the inspection report
(ii)   Congratulate the staff, pupils and parents on the positive outcome of this inspection
(iii)   Note the key strengths outlined in the report
(ii)   Note the areas for improvement outlined in the report
(iii)   Note that Education Scotland will not return to the school with regard to this particular inspection
(iv)   Pass this report to the Performance, Review and Scrutiny Committee for its consideration.

30 April 2019

Report Contact: Nicola McDowell
Tel No: 0131 271 3726
E-mail: nicola.mcdowell@midlothian.gov.uk

Dear Parent/Carer

In November 2018, a team of inspectors from Education Scotland visited Bonnyrigg Primary School and Nursery Class. During our visit, we talked to parents/carers and children and worked closely with the headteacher and staff.

The inspection team found the following strengths in the school's work.

- Caring, nurturing relationships between children and staff. This is leading to children feeling safe, happy and included. Children are very proud of their school and nursery class.

- Strong teamwork amongst staff. Staff are very supportive of one another and work well collectively to meet children's needs.

- Children's understanding of the qualities required to be a good learner.

- Teachers' use of effective questioning to engage children in their learning and help monitor their progress.

The following areas for improvement were identified and discussed with the headteacher and a representative from Midlothian Council.

- Raise attainment in literacy and English taking better account of children's prior learning.

- Ensure all learning experiences consistently provide sufficient challenge for all learners including increased opportunities for children to lead their own learning.

- Senior leaders need to continue to improve their approaches in monitoring children's progress across the school and nursery. This will help show clear evidence of improvement as a result of self-evaluation.

We gathered evidence to enable us to evaluate the school's work using quality indicators from [How good is our school? (4th edition)](#) and [How good is our early learning and childcare?](#). Quality indicators help schools, local authorities and inspectors to judge what is working well and what needs to be improved. Following the inspection of each school, the Scottish Government gathers details of our evaluations to keep track of how well Scottish schools are doing.

Here are Education Scotland's evaluations for Bonnyrigg Primary School and Nursery Class

Quality indicators for the primary school	Evaluation
Learning, teaching and assessment	**good**
Raising attainment and achievement	**good**
Descriptions of the evaluations are available from: [How good is our school? (4th edition), Appendix 3: The six-point scale](#)	

Quality indicators for the nursery class	Evaluation
Learning, teaching and assessment	**satisfactory**
Securing children's progress	**satisfactory**
Descriptions of the evaluations are available from: [How good is our early learning and childcare? Appendix 1: The six-point scale](#)	

A more detailed document called Summarised Inspection Findings (SIF) will be available on the Education Scotland website at:
https://education.gov.scot/inspection-reports/midlothian/5542022

What happens next?

We are confident that the school has the capacity to continue to improve and so we will make no more visits in connection with this inspection. Midlothian Council will inform parents/carers about the school's progress as part of its arrangements for reporting on the quality of its schools.

Steven McPherson
HM Inspector

Inspection of Gorebridge Primary School and Nursery Class

Report by Maria Lloyd, Acting Head of Education

1   Purpose of Report

This report outlines the outcome of the above inspection as carried out by Education Scotland which was communicated in their letter dated 26 March 2019.

2   Background

2.1   Gorebridge Primary School and Nursery Class was inspected in January 2019. The report was published on 26 March 2019. A copy is included in appendix one.

2.2   Following inspection, Education Scotland gathers evaluations of the core quality indicators to keep track of how well all Scottish Early, Learning and Childcare settings and schools are doing. This visit had a specific focus for Primary on QI 1.3, 2.3, 3.2 and 3.1. For the Nursery class the visit had a specific focus on QI 1.3, 2.3, 3.2 and 3.1. Education Scotland published a statement about the confidence they had in the school's capacity to continue to improve.

Noted below are the evaluations for Gorebridge Primary School and Nursery Class:

School

QI 1.3 Leadership of Change	Satisfactory
QI 2.3 Learning, Teaching and Assessment	Satisfactory
QI 3.2 Raising Attainment and Achievement	Satisfactory
QI 3.1 Ensuring Wellbeing, Equality and Inclusion	Satisfactory

Nursery Class

QI 1.3 Leadership of Change	Satisfactory
QI 2.3 Learning, Teaching and Assessment	Satisfactory
QI 3.2 Securing Children's Progress	Satisfactory
QI 3.1 Ensuring Wellbeing, Equality and Inclusion	Satisfactory

2.3   **The inspection team found the following strengths in the school's work.**

- Children who are motivated and enthusiastic learners and take great pride in their school.

- The newly-appointed headteacher who has a clear vision for the school and is beginning to bring about positive change. He is building on the strong relationships and partnerships across the school community to support continued improvements.

- The senior leadership team and staff across the primary stages and nursery class who provide a supportive and nurturing ethos for children and their families.

- Partnership working within Newbattle Learning Community which takes good account of children and families. In particular, the early intervention and prevention project which is working well with families and leading to positive outcomes.

2.4   The following areas for improvement were identified and discussed with the headteacher and a representative from Midlothian Council.

- Continue to develop greater consistency in learning and teaching across the primary stages and nursery class to enable all children to make the best possible progress.

- Improve approaches to tracking and monitoring children's progress. To support this to be robust and reliable, continue to develop approaches to assessment and moderation.

- Continue to develop the curriculum as planned. In doing so, increase opportunities for outdoor learning and the use of digital technologies to support learning.

- Continue to review approaches to recording safeguarding and wellbeing concerns across the primary stages and nursery class.

2.5   Requirements/recommendations made by Care Inspectorate for the nursery class

Nursery Class

Quality of care and support	Adequate
Quality of environment	Good
Quality of staffing	Adequate
Quality of management and leadership	Adequate

During the previous Care Inspectorate inspection in February 2016 the setting had no requirements and three recommendations. From these, two recommendations have been met and one has not been met. Outstanding issues relating to the previous inspection are carried forward in this inspection relating the nursery having clear and consistent systems in place for the recording and administration of medication. As a result of the January 2019 inspection, there is one requirement and two recommendations.

Requirements
- In order to ensure children are effectively safeguarded the provider must review the child protection policy and procedures so that there is a clear and consistent process for acting upon and recording concerns by 1 March 2019. The provider must review all children's files and the systems used to record concerns to ensure that they provide clear information in line with current best practice guidance by 1 March 2019. This is in order to comply with Regulation 4(1)(a) Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 and ensure that care and support are consistent with the Health and Social Care Standards, which state that 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

Recommendations
- To ensure that staff effectively support and track children's learning, observations and next steps in children's learning folios should be improved. The service should support staff to develop their understanding of how to assess children's learning and record quality observations so that they can effectively monitor and

track children's progress. This is to ensure care and support is consistent with the Health and Social Care Standards, which state that 'I am supported to achieve my potential in education' (HSCS 1.27).

- To ensure children's health and wellbeing is maintained, the nursery should ensure clear and consistent systems are in place for the recording and administration of medication. They should ensure that records clearly identify the symptoms and plan of action to be taken. The medication policy should be updated to ensure it provides clarity on the recording, administration, and storage of medication in line with current best practice. This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which states 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

2.6 Conclusion

As outlined in the inspection letter, Education Scotland is confident that the school has effective arrangements for ensuring continuous improvement in the quality of education for all learners. As a result Education Scotland will not return to the school with regard to this particular inspection.

3 Report Implications

3.1 Resource
A Schools Group Manager will continue to directly support the school to improve performance in QIs 1.3, 2.3, 3.2 and 3.1. Actions related to the Summarised Inspection Findings (SIF) will form part of the school's improvement plan and will be monitored through the quality assurance process.

The Early Years team will directly support the Nursery with the resulting requirements and recommendations.

3.2 Risk

Education Scotland visits a sample of nursery, primary and secondary schools every year to find out how they are performing. A report is published which informs parents about the key strengths of the school, its capacity for further improvement and sets out the main points for action.

Monitoring, review and evaluation of progress by School Group Managers and Senior Education Managers is the control measure in place to reduce the risk of failure of any school to demonstrate its capacity to improve. In the case of this report, the school will continue to receive the same level of support as other schools as detailed in the 3-18 Improvement Team's quality assurance calendar. This will ensure that the school continues to improve.

3.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
X Getting it right for every Midlothian child

X Improving opportunities in Midlothian
☐ Sustainable growth
☐ Business transformation and Best Value
☐ None of the above

3.4 Impact on Performance and Outcomes

The setting will continue to improve its work in line with its improvement plan and the Education Service will continue to challenge and support the setting in relation to developing and implementing a range of quality improvement strategies.

3.5 Adopting a Preventative Approach

The Education (Scotland) Act aims to take preventative action in order to close the attainment versus deprivation gap by implementing key policies and programmes which are designed to target support to children and young people from disadvantaged communities. Midlothian is highly committed to closing the attainment gap which compliments the strategies employed by Midlothian which are highlighted in the National Improvement Framework (NIF) report which was initially presented to Council on 3 November 2015. The NIF is updated annually and reported to the Scottish Government.

3.6 Involving Communities and Other Stakeholders

Copies of the report have been made available to Elected Members, parents of children currently in the school and other interested parties.

3.7 Ensuring Equalities

The School Improvement Plan will be screened for equalities implications.

3.8 Supporting Sustainable Development

The School Improvement Plan allows for sustainable development and improvement.

3.9 IT Issues

There are no IT implications.

4 Recommendations

Cabinet is asked to:

(i)   Note the content of the inspection report
(ii)   Congratulate the staff, pupils and parents on the positive outcome of this inspection
(iii)   Note the key strengths outlined in the report
(ii)   Note the areas for improvement which will be supported by Schools Group Managers and the Early Years team to improve
(iii)   Note the requirements and recommendations for the Care Inspectorate
(iv)   Note that Education Scotland will not return to the school with regard to this particular inspection
(v)   Pass this report to the Performance, Review and Scrutiny Committee for its consideration.

30 April 2019

Report Contact: Nicola McDowell
Tel No: 0131 271 3726
E-mail: nicola.mcdowell@midlothian.gov.uk

26 March 2019

Dear Parent/Carer

In January 2019, a team of inspectors from Education Scotland and the Care Inspectorate visited Gorebridge Primary School and Nursery Class. During our visit, we talked to parents/carers and children and worked closely with the headteacher and staff.

The inspection team found the following strengths in the school's work.

- Children who are motivated and enthusiastic learners and take great pride in their school.

- The newly-appointed headteacher who has a clear vision for the school and is beginning to bring about positive change. He is building on the strong relationships and partnerships across the school community to support continued improvements.

- The senior leadership team and staff across the primary stages and nursery class who provide a supportive and nurturing ethos for children and their families.

- Partnership working within Newbattle Learning Community which takes good account of children and families. In particular, the early intervention and prevention project which is working well with families and leading to positive outcomes.

The following areas for improvement were identified and discussed with the headteacher and a representative from Midlothian Council.

- Continue to develop greater consistency in learning and teaching across the primary stages and nursery class to enable all children to make the best possible progress.

- Improve approaches to tracking and monitoring children's progress. To support this to be robust and reliable, continue to develop approaches to assessment and moderation.

- Continue to develop the curriculum as planned. In doing so, increase opportunities for outdoor learning and the use of digital technologies to support learning.

- Continue to review approaches to recording safeguarding and wellbeing concerns across the primary stages and nursery class.

We gathered evidence to enable us to evaluate the school's work using four quality indicators from [How good is our school? (4th edition)](#) and [How good is our early learning and childcare?](#). Quality indicators help schools, local authorities and inspectors to judge what is working well and what needs to be improved. Following the inspection of each school, the Scottish Government gathers details of our evaluations to keep track of how well Scottish schools are doing.

Here are Education Scotland's evaluations for Gorebridge Primary School and Nursery Class

Quality indicators for the primary stages	Evaluation
Leadership of change	**satisfactory**
Learning, teaching and assessment	**satisfactory**
Raising attainment and achievement	**satisfactory**
Ensuring wellbeing, equality and inclusion	**satisfactory**
Descriptions of the evaluations are available from: [How good is our school? (4th edition), Appendix 3: The six-point scale](#)	

Quality indicators for the nursery class	Evaluation
Leadership of change	**satisfactory**
Learning, teaching and assessment	**satisfactory**
Securing children's progress	**satisfactory**
Ensuring wellbeing, equality and inclusion	**satisfactory**
Descriptions of the evaluations are available from: [How good is our early learning and childcare? Appendix 1: The six-point scale](#)	

Here are the Care Inspectorate's gradings for the nursery class

Care Inspectorate standards	Grade
Quality of care and support	**adequate**
Quality of environment	**good**
Quality of staffing	**adequate**
Quality of management and leadership	**adequate**

Requirements/recommendations made by Care Inspectorate for the nursery class

During the previous Care Inspectorate inspection, the setting had no requirements and three recommendations. From these, two recommendations have been met and one has not been met. Outstanding issues relating to the previous inspection are carried forward in this inspection. As a result of this inspection, there is one requirement and two recommendations.

Requirements

- In order to ensure children are effectively safeguarded the provider must review the child protection policy and procedures so that there is a clear and consistent process for acting upon and recording concerns by 1 March 2019. The provider must review all children's files and the systems used to record concerns to ensure that they provide clear information in line with current best practice guidance by 1 March 2019. This is in order to comply with Regulation 4(1)(a) Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 and ensure that care and support are consistent with the Health and Social Care Standards, which state that 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

Recommendations

- To ensure that staff effectively support and track children's learning, observations and next steps in children's learning folios should be improved. The service should support staff to develop their understanding of how to assess children's learning and record quality observations so that they can effectively monitor and track children's progress. This is to ensure care and support is consistent with the Health and Social Care Standards, which state that 'I am supported to achieve my potential in education' (HSCS 1.27).

- To ensure children's health and wellbeing is maintained, the nursery should ensure clear and consistent systems are in place for the recording and administration of medication. They should ensure that records clearly identify the symptoms and plan of action to be taken. The medication policy should be updated to ensure it provides clarity on the recording, administration, and storage of medication in line with current best practice. This

is in order to ensure that care and support is consistent with the Health and Social Care Standards, which states 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

A more detailed document called Summarised Inspection Findings (SIF) will be available on the Education Scotland website at:
https://education.gov.scot/inspection-reports/midlothian/5543428.

What happens next?

We are confident that the school has the capacity to continue to improve and so we will make no more visits in connection with this inspection. Midlothian Council will inform parents/carers about the school's progress as part of its arrangements for reporting on the quality of its schools.

Jackie Maley
HM Inspector

Sarah McGahey
Care Inspector

Inspection of St David's High School

Report by Maria Lloyd, Acting Head of Education

1   Purpose of Report

This report outlines the outcome of the above inspection as carried out by Education Scotland which was communicated in their letter dated 30 April 2019.

2   Background

2.1   St David's High School was inspected in February 2019. The report was published on 30 April 2019. A copy is included in appendix one.

2.2   Following inspection, Education Scotland gathers evaluations of the core quality indicators to keep track of how well all Scottish Early, Learning and Childcare settings and schools are doing. The short inspection model was used for this visit as decided by Education Scotland. This visit had a specific focus on QI 1.3, 2.3, 3.2 and 3.1. Education Scotland published a statement as part of this report on the confidence they had in the school's capacity to continue to improve.

Noted below are the evaluations for St David's High School:

QI 1.3 Leadership of change	Very Good
QI 2.3 Learning, teaching and assessment	Good
QI 3.2 Raising attainment and achievement	Good
QI 3.1 Ensuring wellbeing, equality and inclusion	Very Good

2.3   **The inspection team found the following strengths in the school's work.**

- The headteacher has provided inspiration and aspiration to the school community. The shared vision and values, ASPIRE, provide a very strong sense of direction and purpose for St David's High School.

- A culture of empowerment exists where staff at all levels and young people take on leadership roles to take forward school improvements. Commendably all staff are initiating changes which are helping to ensure positive outcomes for young people. This is resulting in young people who attain well and are being well supported to achieve.

- The very effective work of the integrated pupil support team is leading to improvements in wellbeing, and young people feeling highly included and valued. They work together with partners in a creative, flexible and imaginative way to meet the needs of young people and their families.

- Highly effective approaches to parental engagement that result in parents having improved confidence in supporting their children's learning and development. School based family and parent support activities have a clear and consistent goal of improving wellbeing and learning.

2.4 **The following areas for improvement were identified and discussed with the headteacher and a representative from Midlothian Council.**

- To build on the existing enthusiasm and collaborative practices of staff to continue improving the consistency of learning, teaching and assessment.

- Teachers should continue to develop approaches to assessing and monitoring young people's progress in the broad general education. This will support all young people to understand their own strengths and identify next steps in learning. Evidence from assessment should be used to plan effective interventions to raise attainment of young people.

- Senior leaders should review the curriculum to ensure that young people benefit fully from learning opportunities that meet their needs. For example, further developing partnership working to provide appropriate pathways for all learners.

2.5 **Conclusion**

As outlined in the inspection letter, Education Scotland is confident that the school has effective arrangements for ensuring continuous improvement in the quality of education for all learners. As a result Education Scotland will not return to the school with regard to this particular inspection.

3 **Report Implications**

3.1 **Resource**
Actions related to the Summarised Inspection Findings (SIF) will form part of the school's improvement plan and will be monitored through the quality assurance process. Good practice from this report will be shared across schools and via the South East Improvement Collaborative.

3.2 **Risk**

Education Scotland visits a sample of nursery, primary and secondary schools every year to find out how they are performing. A report is published which informs parents about the key strengths of the school, its capacity for further improvement and sets out the main points for action.

Monitoring, review and evaluation of progress by School Group Managers and Senior Education Managers is the control measure in place to reduce the risk of failure of any school to demonstrate its capacity to improve. In the case of this report, the school will continue to receive the same level of support as other schools as detailed in the 3-18 Improvement Team's quality assurance calendar. This will ensure that the school continues to improve.

3.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- X Getting it right for every Midlothian child
- X Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☐ Business transformation and Best Value
- ☐ None of the above

3.4 Impact on Performance and Outcomes

The setting will continue to improve its work in line with its improvement plan and the Education Service will continue to challenge and support the setting in relation to developing and implementing a range of quality improvement strategies.

3.5 Adopting a Preventative Approach

The Education (Scotland) Act aims to take preventative action in order to close the attainment versus deprivation gap by implementing key policies and programmes which are designed to target support to children and young people from disadvantaged communities. Midlothian is highly committed to closing the attainment gap which compliments the strategies employed by Midlothian which are highlighted in the National Improvement Framework (NIF) report which was initially presented to Council on 3 November 2015. The NIF is updated annually and reported to the Scottish Government.

3.6 Involving Communities and Other Stakeholders

Copies of the report have been made available to Elected Members, parents of children currently in the school and other interested parties.

3.7 Ensuring Equalities

The School Improvement Plan will be screened for equalities implications.

3.8 Supporting Sustainable Development

The School Improvement Plan allows for sustainable development and improvement.

3.9 IT Issues

There are no IT implications.

4 Recommendations

Cabinet is asked to:

(i)   Note the content of the inspection report
(ii) Congratulate the staff, pupils and parents on the very positive outcome of this inspection
(iii) Note the key strengths outlined in the report
(ii) Note the areas for improvement outlined in the report

(iii)   Note that Education Scotland will not return to the school with regard to this particular inspection

(iv)   Pass this report to the Performance, Review and Scrutiny Committee for its consideration.

30 April 2019

Report Contact: **Nicola McDowell**
Tel No: **0131 271 3726**
E-mail: **nicola.mcdowell@midlothian.gov.uk**

30 April 2019

Dear Parent/Carer

In February 2019, a team of inspectors from Education Scotland visited St David's RC High School. During our visit, we talked to parents/carers and young people and worked closely with the headteacher and staff.

The inspection team found the following strengths in the school's work.

- The headteacher has provided inspiration and aspiration to the school community. The shared vision and values, ASPIRE, provide a very strong sense of direction and purpose for St David's High School.

- A culture of empowerment exists where staff at all levels and young people take on leadership roles to take forward school improvements. Commendably all staff are initiating changes which are helping to ensure positive outcomes for young people. This is resulting in young people who attain well and are being well supported to achieve.

- The very effective work of the integrated pupil support team is leading to improvements in wellbeing, and young people feeling highly included and valued. They work together with partners in a creative, flexible and imaginative way to meet the needs of young people and their families.

- Highly effective approaches to parental engagement that result in parents having improved confidence in supporting their children's learning and development. School based family and parent support activities have a clear and consistent goal of improving wellbeing and learning.

The following areas for improvement were identified and discussed with the headteacher and a representative from Midlothian Council.

- To build on the existing enthusiasm and collaborative practices of staff to continue improving the consistency of learning, teaching and assessment.

- Teachers should continue to develop approaches to assessing and monitoring young people's progress in the broad general education. This will support all young people to understand their own strengths and identify next steps in learning. Evidence from assessment should be used to plan effective interventions to raise attainment of young people.

- Senior leaders should review the curriculum to ensure that young people benefit fully from learning opportunities that meet their needs. For example, further developing partnership working to provide appropriate pathways for all learners.

We gathered evidence to enable us to evaluate the school's work using four quality indicators from How good is our school? (4th edition). Quality indicators help schools, local authorities and inspectors to judge what is working well and what needs to be improved. Following the inspection of each school, the Scottish Government gathers details of our evaluations to keep track of how well Scottish schools are doing.

Here are Education Scotland's evaluations for St David's RC High School

Quality indicators	Evaluation
Leadership of change	**very good**
Learning, teaching and assessment	**good**
Raising attainment and achievement	**good**
Ensuring wellbeing, equality and inclusion	**very good**
Descriptions of the evaluations are available from: How good is our school? (4th edition), Appendix 3: The six-point scale	

A more detailed document called Summarised Inspection Findings (SIF) will be available on the Education Scotland website at:
https://education.gov.scot/inspection-reports/midlothian/5546230

What happens next?

We are confident that the school has the capacity to continue to improve and so we will make no more visits in connection with this inspection. Midlothian Council will inform parents/carers about the school's progress as part of its arrangements for reporting on the quality of its schools.

John Reilly
HM Inspector

Further Inspection (Record of Visit ROV) of St Luke's Primary School

Report by Maria Lloyd, Acting Head of Education

1   Purpose of Report
This report outlines the outcome of the above inspection as carried out by Education Scotland which was communicated in their letter dated 5 March 2019.

2   Background

2.1   St Luke's Primary School was inspected in November 2018. The report was published on 5 March 2019. A copy is included in appendix one.

2.2   During the school's inspection in June 2017, Education Scotland identified a number of areas for improvement which were agreed with the school and Council Officers. As they were not sufficiently confident at that time about the school's capacity to continue to improve, they visited the school again in November 2018.

2.3   The main points for action from the original inspection in June 2017, which formed the focus of the further visit were:

1. Staff should increase the opportunities for children to be actively involved in planning and assessing their own learning to increase their understanding of the purpose of learning.

In November 2018, the inspection team identified the following strengths and progress during their further visit:

- Teachers plan effectively for children's learning and are increasingly developing confidence in using National Benchmarks to assess how well children are progressing across their learning.
-
- They make good use of a wide range of assessment information and analyse this to inform learning groups and support for those who require additional help in their learning.

- Senior leaders have taken a systematic approach to school improvement and developed strong approaches to self-evaluation. They have taken steps to build on improvements through rigorous monitoring and evidence gathering.

- The headteacher is effective in her role and is successfully leading changes in a well-judged and measured way.

- The school's vision has children's achievements and learning at the centre of all it does.

- Teachers and support staff work tirelessly to support children in their achievements.

- The school's positive ethos results from the shared ambition the staff team has for children.

- The headteacher and staff are approachable and enable parents to raise any concerns they may have.

- The school is responsive and welcoming.

   The following areas were identified for further development during the visit:

- Continue to develop consistency in high quality learning and teaching and share good practice. Ongoing professional dialogue through continued moderation activities and the use of assessment to inform next steps in learning will, over time, lead to progression in all curricular areas.

- Continue to build on the promising start made to children's use and understanding of the language of learning.

2. **Staff should work collaboratively to realise the whole school vision of raising attainment in a learning environment where staff and pupils have high expectations of themselves and each other**

   In November 2018, the inspection team identified the following strengths and progress during their further visit:

- It is clear that the school has an improved and shared understanding and commitment to raising attainment and achievement for all learners

- The headteacher has maintained a relentless focus on raising expectations, improving consistency in learning and teaching and ensuring achievement for all

- As result, the school is successfully addressing this area for improvement identified in the original inspection

   The following areas were identified for further development during the visit:

- Sustain a strong focus on professional dialogue and children's progress

- Build on the positive start to tracking children's achievements. Involve children more in reviewing the particular skills they are developing as a result of their achievements

- As planned continue to develop approaches to teaching writing to ensure children make the best possible progress

2.6   Conclusion

As outlined in the inspection letter, Education Scotland is confident that the school has effective arrangements for ensuring continuous improvement in the quality of education for all learners. As a result Education Scotland will not return to the school with regard to this particular inspection.

3   Report Implications

3.1   Resource

Areas for development will be in the school's improvement plan and will be monitored through the quality assurance process.

3.2   Risk

Education Scotland visits a sample of nursery, primary and secondary schools every year to find out how they are performing. A report is published which informs parents about the key strengths of the school, its capacity for further improvement and sets out the main points for action.

Monitoring, review and evaluation of progress by School Group Managers and Senior Education Managers is the control measure in place to reduce the risk of failure of any school to demonstrate its capacity to improve. In the case of this report, the school will continue to receive the same level of support as other schools as detailed in the 3-18 Improvement Team's quality assurance calendar. This will ensure that the school continues to improve.

3.3   Single Midlothian Plan and Business Transformation

Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
X Getting it right for every Midlothian child
X Improving opportunities in Midlothian
☐ Sustainable growth
☐ Business transformation and Best Value
☐ None of the above

3.4   Impact on Performance and Outcomes

The setting will continue to improve its work in line with its improvement plan and the Education Service will continue to challenge and support the setting in relation to developing and implementing a range of quality improvement strategies.

3.5   Adopting a Preventative Approach

The Education (Scotland) Act aims to take preventative action in order to close the attainment versus deprivation gap by implementing key policies and programmes which are designed to target support to children and young people from disadvantaged communities. Midlothian is highly committed to closing the attainment gap which compliments the strategies employed by Midlothian which are highlighted in the National Improvement Framework report which was presented to Council on 3 November 2015.

3.6   Involving Communities and Other Stakeholders

Copies of the report have been made available to Elected Members, parents of children currently in the school and other interested parties.

3.7   Ensuring Equalities

The School Improvement Plan will be screened for equalities implications.

3.8   Supporting Sustainable Development

The School Improvement Plan allows for sustainable development and improvement.

3.9   IT Issues

There are no IT implications.

4   Recommendations

Cabinet is asked to:

(i)   Note the content of the inspection report
(ii)   Congratulate the staff, pupils and parents on the very positive outcome of this further Education Scotland visit
(iii)   Note the key strengths and progress outlined in the report
(ii)   Note the areas for improvement outlined in the report
(iii)   Note that Education Scotland will not return to the school with regard to this particular inspection
(iv)   Pass this report to the Performance, Review and Scrutiny Committee for its consideration.

30 April 2019

Report Contact:	**Nicola McDowell**
Tel No:	**0131 271 3726**
E-mail:	**nicola.mcdowell@midlothian.gov.uk**

Further inspection: record of visit (ROV)

Purpose and audience

- This document (called the Further Inspection – Record of Visit or ROV) is provided within one working week of the publication of the letter to support the headteacher/head of setting in leading improvement. The findings and evidence in the ROV provide detail which will be helpful in guiding further planning and implementation of improvement.

- The ROV is provided for use by the education authority and headteacher/head of seting to which it refers. It is a technical document designed for use by education professionals.

- The ROV is not intended to be copied and distributed in its entirety. Headteachers/heads of setting should use their judgement in sharing particular sections of the document confidentially with others as appropriate to their areas of responsibility and interests.

Contents

- The ROV is the set of notes used by the inspection team for the discussion of findings meeting on the final day of the continuing engagement visit. It may also contain further information that was prepared in advance of the meeting but which may not have been required in the discussion.

- The information in this ROV has been checked and edited to ensure that individual members of staff below appropriate levels of seniority and individual learners, or small groups of learners, cannot be identified and that it conforms to Scottish Government guidelines on the disclosure of data.

- The ROV is not an exclusive record of all of the evidence which underpins the evaluations as expressed in the published letter, and should not be regarded as such.

Sources of evidence for the ROV

- In all inspections, inspectors visit learning activities in contexts appropriate to the establishment. They observe learning experiences and teaching, and talk to staff and children about learning and achievement, and other aspects as appropriate to the inspection. Inspectors evaluate children's achievements in different aspects of the curriculum, using direct observation, sampling of learners' work, and additional data as appropriate to the sector. Inspectors also have a range of professional discussions with staff who have responsibility for managing the educational provision, and other staff as appropriate. They take account of stakeholders' views, including those gathered through pre-further inspection questionnaires when these are used in a further inspection, and discussions with parents and other members of the community, as appropriate to the sector.

- Further inspections begin with the senior staff of the establishment sharing their self-evaluation evidence with the inspection team, showing how they are bringing about

improvement. This evidence contributes to evaluations of the progress made since the original inspection.

- The ROV may contain references to the way that Curriculum for Excellence is being taken forward in the context of the establishment. This may include progress in planning, prioritising and reviewing the curriculum, through the use of self-evaluation and improvement planning, and in applying key ideas and principles from Curriculum for Excellence. It may also include how the setting is working with partners and with its own staff to enable them to learn together to develop their understanding of Curriculum for Excellence ideas and put them into practice, supported by a plan for continuing professional development. There may be references to how Curriculum for Excellence Experiences and Outcomes are being used to improve learning and achievement and how individual teachers are contributing to literacy and/or numeracy and aspects of health and wellbeing. The ROV may also refer to how staff identify and measure improvements in learners' experiences and in standards of achievement; how they communicate with and involve parents, and how they collaborate to plan and support learners' progress. The extent to which references to Curriculum for Excellence are made in the ROV will depend on the range and nature of the areas for improvement which were previously set out in the letter sent to parents following the original inspection and which are used to shape the further inspection.

Education Scotland
Foghlam Alba

Further inspection: record of visit (ROV)

School/Centre Name	St Luke's Primary School
MI undertaking visit	Jackie Malye
Date(s) of visit	27/28 November 2018
Publication date of original letter	12 December 2017
Letter publication date	5 March 2019
ROV sharing date (date ROV is sent out to EA/HT/HoC/CPPC)	8 March 2019

Staff should increase the opportunities for children to be actively involved in planning and assessing their own learning to increase their understanding of the purpose of learning.

Strengths and progress identified during the visit:
Teachers plan effectively for children's learning and are increasingly developing confidence in using National Benchmarks to assess how well children are progressing across their learning. They make good use of a wide range of assessment information and analyse this to inform learning groups and support for those who require additional help in their learning.

Senior leaders have taken a systematic approach to school improvement and developed strong approaches to self-evaluation. They have taken steps to build on improvements through rigorous monitoring and evidence gathering.
The headteacher is effective in her role and is successfully leading changes in a well-judged and measured way. The school is taking steps to ensure children understand themselves as learners. The school's vision has children's achievements and learning at the centre of all it does.

Since the original inspection, staff have successfully involved children widely in the life of the school. The impact of the various roles and responsibilities children take across the school, is seen through the very positive relationships and attitude to learning. Children are well behaved, mannerly and respectful. The Anti-bullying Ambassadors are well supported through clear guidance and expectations of behaviour. This has led to a positive school environment where children feel ready to learn.

Across the school there is a positive learning climate which is enabling children to make the best possible progress. In most lessons, children know what they are learning and what is expected of them in taking responsibilities for their own learning. In the very good practice observed, expectations are high, children know when they are successful and teacher questioning is skilled in providing challenge and feedback about learning.

Teachers and support staff work tirelessly to support children in their achievements. The school's positive ethos results from the shared ambition the staff team has for children. Parents are involved in the life of the school and in supporting children's learning in a variety of effective ways. The headteacher and staff are approachable and enable parents to raise any concerns they may have. This is particularly effective at transition points and also when children experience some temporary difficulties in their learning. The school is responsive and welcoming. Parents value the opportunities to attend school to share children's learning. The use of a digital application is helping generate dialogue between children and parents. This helps motivate leaners to achieve and succeed. Parents and children are partners in learning and achievements are celebrated. They enjoy the discussions about progress at the parent consultation evenings.

Areas for further development identified during the visit:
Continue to develop consistency in high quality learning and teaching and share good practice. Ongoing professional dialogue through continued moderation activities and the use of assessment to inform next steps in learning will, over time, lead to progression in all curricular areas.
Continue to build on the promising start made to children's use and understanding of the language of learning.

Staff should work collaboratively to realise the whole school vision of raising attainment in a learning environment where staff and pupils have high expectations of themselves and each other.

Strengths and progress identified during the visit:

It is clear that the school has an improved and shared understanding and commitment to raising attainment and achievement for all learners. The headteacher has maintained a relentless focus on raising expectations, improving consistency in learning and teaching and ensuring achievement for all. As result, the school is successfully addressing this area for improvement identified in the original inspection.

Following the original inspection, the headteacher and staff team revisited the school's motto, 'we believe, we achieve' to ensure that this underpinned all aspects of their work. As a result, staff can articulate how they are helping to promote this in all that they do. Children also have a greater understanding of how staff are helping them to 'believe and achieve'.

In classes teachers have higher expectations of learners. This is clearly evident in the way lessons are planned and delivered. Children are able to explain how they are progressing in their learning and what their individual next steps are. They are proud of their learning profiles and how these demonstrate their achievements.

New approaches to reporting to parents/carers have been established which enable children and parents to play a greater role in reviewing progress and identifying next steps in learning. Parents report that they appreciate the way they are now more informed and involved their child's learning. Helpfully the home-school practitioner also plays a significant role in promoting

family engagement in learning. Along with senior leaders she has helped improve children's attendance at school as well as supporting a number of children to arrive at school on time.

Across the school staff demonstrate a great commitment to supporting children to achieve. They strive to ensure children are given appropriate support to help them achieve success. Interventions such as the breakfast club, led by the home – school practitioner and teaching staff is successfully ensuring all children are given the opportunity for a positive start to the day. For a few children other arrangements are in place to ensure they can also access breakfast when they arrive at school.

The headteacher has maintained a very sharp focus on raising attainment and has introduced a wide range of interventions and approaches to achieve this. This includes developing a more effective way of gathering and using data. She has developed a number of tracking tools which help to present a much clearer picture of children's progress. As a result, children now receive prompt support and challenge as appropriate. Termly tracking meetings are valued by teachers who view these as very supportive. Helpfully, the support for learning teacher is also in attendance and plays a key role at these meetings. Teachers are becoming more confident in the use of data. They report that they believe they are now better equipped to analyse and make use of the data to maximise the progress children are making. They have a broader understanding of each child's particular circumstances and the different challenges faced by some of their children and families.

A range of targeted interventions have been put in place to support learners and to raise attainment. These include, 'Talk Boost', STEP physical literacy programme, Fresh Start, communication and skills group, readiness to learn group for P1 and Seasons for Growth groups. In addition a range of new approaches to teaching reading and numeracy have been introduced. The school has made a positive start in monitoring and evaluating the impact of interventions and new approaches.

Positively, approaches to planning children's learning have also been developed to ensure children make continuous progress across their learning. Staff now make effective use of assessment information to ensure lessons are well differentiated. They have made a positive start in using the National Benchmarks to assess all areas of the curriculum. Assessment has become an integral part of learning and teaching. As staff have become more confident and skilled in planning learning, paper work and record keeping to support planning has been streamlined.

As staff have grown in confidence in making use of assessment information they report they are no beginning to make more reliable professional judgements about achievement of a level. They have continued to work with colleagues within and out with the school to support this area of their work. Positive steps have been taken to develop staff's understanding and use of holistic assessments.

New approaches to recognise and celebrate achievement have been developed. This includes achievement assemblies, achievement books, praise cards, certificates and positive phone calls home to parents and carers. These developments are helping to create a strong culture for

promoting success. As recognised by staff they now should develop a system to track children's achievements to ensure all children enjoy a broader range of success.

Staff now play a greater role in leading school improvement. Teaching and support staff all undertake a leadership role. Children are also encouraged to take forward school improvements and are proud of how they have influenced positive change. As their confidence has grown staff have become more outward looking and share their practice with other colleagues and learn from best practice in other schools. For example, in recognition of their work in taking forward improvement staff have been invited to share aspects of their work at local authority events.

Of particular note is the school's commendable work in improving approaches to behaviour management. This has significantly improved the school ethos. Across the school children enjoy respectful relationships with each other and with staff. Positive relationships in classes and across the school is a particularly strong feature of St Luke's PS. Information gathered from pre-inspection questionnaires demonstrate that almost all children feel safe in the school and believe that staff deal with bullying well. This is a significant improvement from information gathered in the original inspection's questionnaires. This is a result of the more consistently applied approaches to behaviour management which are understood by the whole school community.

Literacy
Overall across the school, most children are making good progress in listening and talking. At the early level most children listen to their teacher and follow instructions well. Towards the end of first level most children listen well to each other in pairs and groups as they complete tasks. They ask and respond appropriately to each other. Towards the end of second level most children demonstrate well developed skills in listening and talking. When discussing favourite texts, they contribute relevant ideas and opinions. They listen respectfully to each other, building on the contributions of each other well. In reading most children across the school are making good progress. Children display a love of reading and can readily identify their favourite author and book. A significant number of new approaches to teaching reading have been put in place. There are early indications that these are having a positive impact on children's progress in reading. At early level, most children demonstrate a good understanding of letters and sounds. They make good attempts at blending and making their own words. By the first level children are becoming more fluent and can identify the different strategies they use to decode unfamiliar words. Towards the end of the second level children can discuss different texts to describe their favourite author's style. Overall, the majority of children are making good progress in writing. The school recognise that this is an area for development and have started to take steps to address this.

Numeracy and mathematics:
At early level, most children are attaining well and gaining confidence in numeracy. They are progressing in their skills and developing a range of practical ways to understand the processes of addition and subtraction. Those children who have recently achieved the early level are building on prior learning and developing mathematical language leading towards the four processes. At first level, the majority of children are developing confidence in recording times using analogue clocks and digital notation. They are growing in confidence and accuracy in

making addition and subtraction calculations using three digit numbers. Towards the end of second level, most children are achieving very well. They make effective use of a range of strategies to make calculations using four digit numbers. This is especially effective when applying knowledge to word problems. Most children are developing a sophisticated knowledge and understanding of mathematical language.

The school has an appropriate focus on skills progression which is leading to consistency in how well children achieve across Curriculum for Excellence levels.

Areas for further development identified during the visit:

Sustain a strong focus on professional dialogue and children's progress. In doing so continue to develop consistency of expectation across the school.

Build on the positive start to tracking children's achievements. Involve children more in reviewing the particular skills they are developing as a result of their achievements.

As planned continue to develop approaches to teaching writing to ensure children make the best possible progress. In doing so achieving consistency of expectations across the staff team will be necessary.

What happens next?

The school has made good progress since the original inspection. We are confident that the school has the capacity to continue to improve and so we will make no more visits in connection with this inspection. Midlothian Council will inform parents about the school's progress as part of its arrangements for reporting on the quality of its centres.

Inspection of Midlothian Adoption Service

Report by Joan Tranent, Head of Children's Services

1   Purpose of Report

This report outlines the outcome of the above announced (short notice) Inspection of Midlothian Adoption Service as carried out by the Care Inspectorate in February 2019.

2   Background

2.1   Midlothian Council Adoption Services is co-located with other children's services based at 7 Eskdaill Court and provides an adoption service for children and young people aged 0-18 years. Whilst the fostering and adoption service are inspected as separate services, the inspections happen at the same time and it is one team who manage all the work.

2.2   The Care Inspectorate is the Independent scrutiny and improvement body for care services in Scotland. They inspect all registered care services and local authority social work departments on a regular basis to ensure that providers are meeting standards required and are working to improve the quality of care for everyone. Every time they inspect these services they produce an inspection report.

2.3   Based on the findings of this Inspection the Care Inspectorate awarded the following grades on the three areas it inspected:

Quality of Care and Support	Grade 3 - Adequate
Quality of Staffing	Grade 3 – Adequate
Quality of Management & Leadership	Grade 3 – Adequate

2.4   The report and grades represent the Care Inspectorate's assessment of the quality of the areas of performance which were examined during the announced inspection.

3.0   Findings from Inspection

3.1   Strengths

- Adopters told us they received important information about children, including about their health, birth families and early life experiences and that this helped them to be sure about their ability to provide a safe and loving family life.

- Secure, nurturing relationships, stable living situations and healthy active lifestyles, supported children to grow in confidence. Access to photos and videos, memory boxes, social stories and life story records meant children were well supported in understanding the

important changes in their lives and in developing their sense of identity.

- Adopters had experienced a thorough preparation to adopt course. There were various opportunities for adopters to provide feedback and views to the agency, including for example through feedback questionnaires after preparation to adopt courses or panel attendance.

- The improvement plan was well written and comprehensive. It detailed the improvement work identified by the agency and clarified some priority development areas for the future.

- Although there was an overall reduction of adoption work since the last inspection, overall they saw that panel processes were being carried out well and in a way which supported quality monitoring of practice and reporting.

3.2   Areas for development

- Whilst most adopted children were being protected from harm, there was a very small number of children in greater need of care and protection. Whilst the agency had responded quickly to protect children and to carefully consider reasons for adoption disruptions this then resulted in unplanned moves which impacted on their well-being and longer term outcomes.

- Adopters commented that their own assessment timescale could be improved. They referred to unnecessary delays caused by staff changes and lack of staff experience which in turn led to delays in decision making and in achieving adoption plans at an earlier stage for some children.

- Similar to the fostering report safer recruitment processes were highlighted in particular with Human Resources not having records in relation to locum members of staff. No cyclical PVG checks in place.

- Whilst staff training was being undertaken, they were maintained within different systems which meant that management did not have a clear overview.

- Management's systems should be used more effectively and new systems could be developed to provide more of an overview of the agency. This would act to support improvements, for example relating to out-with approval procedures being followed, frequency of carer reviews and ensuring foster carer agreements are in place.

- The Care Inspectorate made 4 requirements and 3 recommendations which are highlighted within the attached action plan. All the requirements and recommendations shall be undertaken within the timescales specified on the plan.

4. Summary

Overall this is a disappointing Inspection report where grades have dropped in every area. In discussion with the Care Inspectorate the challenges and changes were fully discussed to give some context around the unusual set of circumstances that we faced over the past 12 months.

This said we appointed a new manager in September 2018 and already the team and carers are evidencing positive changes in practice. The manager is a reliable and experienced member of staff who shall offer much needed continuity and stability to the team whilst also ensuring that they drive forward the performance of the service.

5. Report Implications

5.1 Resource
There are no resource issues arising from this report.

5.2 Risk
The Care Inspectorate regulate all care services in Scotland using the National Care Standards, set out by the Scottish Government, as a benchmark for how each type of service should perform. These standards are the minimum that children and young people should expect when using care services.

If the standards are not being fully met, the Care Inspectorate would note this in the inspection report and require the service manager to address these. The Care Inspectorate could impose an additional condition on the service's registration if the provider persistently, substantially or seriously fails to meet the standards or breaches a regulation. They also have the power to issue an improvement notice detailing the required improvement to be made and the timescale for this.

Monitoring, review and evaluation of progress by officers in Children's Services is the control measure in place to reduce the risk of failure of the care services and to demonstrate their capacity to improve.

5.3 Single Midlothian Plan and Business Transformation
Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
☒ Getting it right for every Midlothian child
☐ Improving opportunities in Midlothian
☐ Sustainable growth
☐ Business transformation and Best Value
☐ None of the above

5.4 Impact on Performance and Outcomes

The action plan outlines the work that is required to happen within set timescales. The progress of this shall be monitored during monthly meetings with the Head of Service.

5.5 Adopting a Preventative Approach

The Service will continue to improve its work in line with its improvement plan. The Education, Communities and Economy Directorate will continue to challenge and support the Service in relation to developing and implementing a range of quality improvement strategies.

5.6 Involving Communities and Other Stakeholders

As part of their inspection process the Care Inspectorate met with 5 adopters and 4 adoptive families. They met 2 children whose plans were for adoption.

5.7 Ensuring Equalities

An action Plan has been prepared to address the areas for improvement recommended in the report. The action place will be screened for equalities implications.

5.8 Supporting Sustainable Development

The Service Improvement Plan allows for sustainable development and improvement.

4.9 IT Issues

There are no IT issues.

5 Recommendations

Cabinet are requested to:

- Note the content of the Inspection Report.
- Pass this report to the Performance, Review and Scrutiny Committee for its consideration.

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Background Papers:

Midlothian Adoption Action Plan 2019/20   (Appendix 1)
Care Inspectorate Report dated 8 February 2019   (Appendix 2)

Quality of care and support						
ACTIONS	**TIMESCALE**	**LEAD**	**OUTCOME**	**MEASUREMENT**	**RED AMBER GREEN**	**UPDATE**
Ensure systems are in place to ensure children in external placements are provided with safe care of a high quality	27 May 19	Team Leader /Learning & Development/ Public Protection Unit	Midlothian Council must ensure that the health and wellbeing of children is always appropriately managed. In order to achieve this the service must ensure that effective working practices are established to assess and monitor risks for children placed for adoption (requirement 1)	management overview/ audit of ALL children who are adopted in external placements *(Linked to the recruitment of local adopters/nearby LA's)*		
Develop a training needs analysis to identify areas of professional development for the team (linked to requirement 1)	27 May 19	Team Leader	Midlothian Council must ensure that the health and wellbeing of children is always appropriately managed. In order to achieve this, the service must ensure foster carers receive sufficient and regular child and adult Protection training. (requirement 2)	All foster carers and prospective adopters undergo child protection training All foster carers and prospective adopters undergo adult support and protection training Individual and collective records located in one system		
Develop a training needs analysis to identify areas of professional development for the team (requirement1)	27 May 19	Team Leader	Midlothian Council to ensure that all family placement team staff members and the manager undertake appropriate child and adult support and protection training in line with the agency policy to ensure the safety and wellbeing of children and young people. (requirement 3)	All staff undergo child protection training All staff undergo adult support and protection training		

Strengthen systems for ensuring procedures are followed in line with local and national policy (requirement 1)	27 May 19	Service Manager/ Team Leader	Midlothian Council must ensure that quality assurance systems are robust and used effectively in order to identify areas for improvement (requirement 4)	100% of outwith authority are reviewed by a manager 100% of cares are reviewed within appropriate timescales 100% of files are monitored and reviewed		
Develop a regular system for notifying the CI of notifiable incidents (as above)		Service Manager/ Team Leader		100% of notifications are made as appropriate		
Strengthen the function of the foster panel (recommendation 1)		Service Manager/ Team Leader/ Ind. Chair		4 X per annum development day 100% appraisal/annual reviews in place		
Develop a learning and development programme for foster care panel members and chair (recommendations 1)		Service Manager/ Team Leader		Panel Learning and development programme in place		
Develop more opportunities to recruit local adopters	Mar 20	Service Manager/ Team Leader	The service should raise awareness of the need for more adopters to come forward to enable the needs of more children to be met. (recommendation 1)	Strengthen existing recruitment strategy to target local adopters		
Strengthen timescales for approving adopters	Mar 20	Service Manager/ Team Leader	Assessment of adopters should be carried out within reasonable time scales. (recommendation 1)	90% adopters approved within 10 months System in place to monitor progress		

Develop and monitor robust recruitment record keeping practices (recommendation1)	Mar 20

Mar 20 | HR/Managers | To promote the safety and wellbeing of children and young people Midlothian Council must ensure appropriate recruitment and record keeping. (Recommendation 2) | All new recruits have a file that contains necessary paperwork in line with safer recruitment | | |
Develop a robust process for ensuring staff learning and development needs is contained in one systems		Team Leader /Service Manager		All staff are entered on the new system		
Strengthen the function of the fostering and adoption panel (recommendation 1)		Service Manager/ Team Leader/ Ind. Chairs	Midlothian Council should implement annual reviews and a learning and development programme for foster panel members and chair. (Recommendation 3)	4 X per annum development day 100% appraisal/annual reviews in place		
Develop a learning and development programme for fostering and adoption panel members and chair (recommendations 1)		Service Manager/ Team Leader		Panel Learning and development programme in place		

Midlothian Council Adoption Service
Adoption Service

7 Eskdaill Court
Dalkeith
EH22 1AG

Telephone: 0131 270 7500

Type of inspection:
Announced (short notice)

Completed on:
8 February 2019

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2004083727

HAPPY TO **TRANSLATE**

About the service

Midlothian Council Adoption Agency has been registered with the Care Inspectorate since the Care Inspectorate was formed in 2011. It was previously registered with the Care Commission.

A service is provided for children and young people, aged from birth to 18 years, and their families who are assessed as being in need of this service. The agency recruits and supports adoptive parents to provide families for those children who cannot live with their birth parents or extended family members and who need permanent alternative care through adoption.

Midlothian Adoption Service aims to "...recruit, train and support a range of adopters who are committed, empathic and knowledgeable and who can permanent homes to children and young people in Midlothian. Midlothian Council aims to ensure that children who are not able to live with their birth families grow up in safe, secure, nurturing families where they are enabled to develop to their full potential. We are committed to ensuring adopted children have access to a range of experiences which enable them to achieve their full potential and live happy and fulfilling lives. We are further committed to ensuring that adopted children have a clear, honest, coherent account of their life history that promotes development of a positive sense of self-esteem. "

Managers told us that the service was emerging from a period of transition following a service review. There had been significant change among family placement team staff and three changes of team manager since our last inspection visit in November 2017.

As the findings in this inspection are based on a sample of children and young people, we cannot assure the quality of experience for every single child receiving a service. An inspection of the fostering service took place at the same time as this inspection and a separate report for that service is available.

What people told us

We spoke with 5 adopters comprising 4 adoptive families in total. Three of these families had been assessed by Midlothian Council Adoption Agency and 1 family had been assessed by another agency and had been matched with children assessed and registered for adoption by Midlothian Council. We met 2 children whose plans were for adoption.

Children told us:
" (social worker name) is going to find me a new mummy and daddy "
" I like riding my bike "
" Sometimes I go to football and I get to go on my tablet "
" I go to nursery and I play with my friends "
"... I like to eat green crispies and dance and play the drum with drumsticks and the tambourine"

Adopters told us:
" I am very happy with all support and help I have at hand"
" I feel the service does well with matching children and carers".
"I feel communication between supervising and placement social workers is good".
" It was a tough process, lots of changes in social worker and we were in the process for over a year and a half. We were initially allocated a locum who just did not get on with the work. Nice enough... but not effective or

reliable. Our approval panel was postponed several times by panel chair as there was not sufficient information within the assessment report"

" Some important information was not explained clearly - adoption allowances".

" We wouldn't do it again, the process has really put us off"

" Our childs social worker was brilliant, really kept us in the loop"

" We had no support while our supervising social worker was off sick"

" The transition was well managed and our daughter was ready to move, she is now thriving and has developed friendships and is enjoying school and life within our family"

" We got a quick response to our initial enquiry but then had a long wait until the preparation group".

"Good quality preparation, this was excellent, helpful and a real eye opener"

"The home study was an invaluable process, gave us lots of information and we were well prepared for the panel".

" Panel members put us at ease"

" We had a delay with medicals as our GP refused to do this."

" We know about post adoption support and about the training available for us, our social worker keeps us informed".

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at the annual return for the year January to December 2018 which was submitted during the inspection visit. We also looked at the service improvement plan as well as quality monitoring information in relation to children's plans and an annual report produced by the permanence and adoption panel.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

What the service does well

Overall we found that most children were protected from harm, neglect and abuse in their adoptive placements. Full assessments including criminal records checks, health and finance supported the agency to make decisions about the capacity of the adopter to meet the child's needs throughout their life time. Adopters told us they received important information about children, including about their health, birth families and early life experiences and that this helped them to be sure about their ability to provide a safe and loving family life for a child.

Children enjoyed good access to primary healthcare services ensuring regular monitoring and review of their health needs. Adopters were supported to register their children with a GP, dentist and health visiting service. Access to specialist services including for example speech and language therapy, were supported so that adopters could be involved in stimulating learning and development from the earliest opportunity.

Secure, nurturing relationships, stable living situations and healthy active lifestyles, supported children to grow in confidence. Access to introduction photos and videos, memory boxes, social stories and life story records meant

children were well supported in understanding the important changes in their lives and in developing their sense of identity.

Child centred coordination plans enabled arrangements for children's introductions to their new families to be led by the child's readiness to be adopted. We saw an example of this process being informed by foster carers and social works who knew the child well and could gauge when a rest day was needed in order for the child to make sense of the changes that were happening.

Since our last inspection the agency had assessed and approved a small number of adoptive parents for children. They had made good use of Scotland's Adoption Register, Activity Days and Exchange days to support children to find their adoptive parents and for adoptive parents to find their child or children. The agency recognised the importance of on going support to adoptive families through post approval training, adoption allowances and support for children to have contact with birth families as directed within the adoption orders granted by the Courts.

We sampled a small number of reports which assessed a child's need for permanence and found these to be of a satisfactory quality. The need for siblings to be adopted together where appropriate and birth parents views were generally well recorded in the child's assessment report, through Looked After Child Reviews and in adoption panel minutes.

Adopters had experienced a thorough preparation to adopt course. This helped prospective adopters learn about children and the impact of early separation and trauma throughout children's lives. It also supported them to be clear about legal adoption processes and to be more prepared for their approval panel, family finding, linking and matching and coordination arrangements.

Social workers within the family placement team were responsible for the recruitment, assessment, preparation and support of adopters and adoptive families. They were also responsible for post adoption support and for coordinating any contact arrangements with birth families. Social workers within the children and families practice teams were responsible for carrying out children's assessments and for preparing children for adoption. We heard that social workers from both teams worked closely to find families and to support linking, matching and coordination of children's moves.

We noted there had been significant staff changes within the family placement team following a service review and since our last inspection and the team of 7 staff members (including 3 locum staff members) was now in place. We sampled 2 staff files which showed that safer recruitment practice and checks were completed for permanent staff members before employment.

We found that there was a range of skills and experience within the team in relation to child care and assessment and social work, however, some staff members had limited experience of adoption work and the service acknowledged that staff confidence in this area needed to grow. This was being supported by regular team meetings, team development sessions and consultation sessions in relation to case work.
Staff told us that they were motivated and committed to providing a quality service. They received regular supervision from the manager of the service and this provided opportunity for them to seek advice and to reflect on practice and learning. Training needs were also being discussed and noted within supervision records.

There was a clear management vision for improving services for children in Midlothian and a clear plan was in place focussed on permanence: keeping children at home; within their wider family or in stable alternative family care including adoption. We saw that the agency was working in partnership with CELCIS and partners to implement a PACE programme and that this was leading to reducing delay in decision making and assessment for a significant number of looked after children. The agency had seen a rise in the number of children returning

home following earlier assessment and this had in turn led to a reduction in the numbers of children being identified for permanent alternative care, including through adoption.

We saw there were some management systems in place to monitor the quality of work within the service. Second opinion visits, management overview of assessments and reports, regular management meetings with panel chairs and careful consideration of complaints and disruptions were supporting organisational learning and the opportunity for improvement.
The development plan was well written and comprehensive. It detailed the improvement work identified by the agency and clarified some priority development areas for the future.
The agency had two agency decision makers who were responsible for making decisions about children being registered for adoption and about the approval of adopters and matching of adopters with children. We found that agency decision makers were making decisions without delay based on panel recommendations and that these decisions were being notified to panel attendees by letter.

The agency decision makers along with the manager responsible for the service and the chair of the permanence panel were also responsible for carrying out disruption meetings and for investigating complaints about the service. We saw that these processes were leading to the identification of areas for improvement and the agency acknowledged the need to ensure sufficient independence was being maintained by those undertaking these roles.
Although there had been an overall reduction in adoption work since the last inspection, the permanence and adoption panel had been meeting regularly to consider assessments and to make recommendations to the agency decision maker. Overall we saw that panel processes were being carried out well and in a way which supported quality monitoring of practice and reporting. Panel members and social workers we spoke to and records we looked at demonstrated that the panel were sufficiently independent to robustly challenge staff when further information or detail was needed. Panel members told us that more recently there had been improvement in the quality of information being provided to panel and that this was reducing the need for panels to be postponed.

We found there were various opportunities for adopters to provide feedback about their experience and views to the agency, including for example through feedback questionnaires after preparation to adopt courses or panel attendance. We also noted that more recently a small number of adopters and their children had attended a participation event organised by a 'Champions coordinator'.

We noted that a recommendation made during our last inspection visit had been met.

What the service could do better

Although we saw that most adopted children were being protected from harm, we found that a small number of children were in greater need of care and protection. (See requirement 1)
Midlothian Council must ensure that the health and wellbeing of children is always appropriately managed. In order to achieve this the service must ensure that effective working practices are established to assess and monitor risks for children placed for adoption.

Although we saw that the agency had responded quickly to protect children and to carefully consider reasons for adoption disruptions we found some children had experienced unplanned moves in care and this had impacted on their well being and had the potential to impact on longer term experiences and outcomes. We suggested

that the service consider more actively recruiting a range of adopters to offer increased matching opportunities for children from the earliest stage, including through recruitment of concurrent foster carers, to ensure that moves in care and the subsequent emotional impact can be reduced. (See recommendation 1).

Adopters commented that their own assessment timescales could be improved. They told us about unnecessary delays caused by staff changes and lack of staff experience in assessment work. This had led to delays in decision making and in achieving adoption plans at an earlier stage for some children. (See recommendation 1).

Although we saw that a comprehensive post approval plan had been developed in partnership with neighbouring authorities, we found some gaps in foster carer training, including in child protection. In order to ensure the safety and well being of children prior to their placement with adopters and until an adoption order is granted, all foster carers must be sufficiently and regularly trained in child protection. (See requirement 2).

We found that post adoption support plans and children's post adoption records were being developed and used. We encouraged the service to continue to raise awareness of post adoption supports with adopters and to continue with this practice.

Although we were able to see safer recruitment processes were in place in the 2 staff records we sampled (including a robust format for references and follow up phone calls being made to referees) we were unable to see that records were being held by the Human Resources department in relation to locum members of staff or in relation to the internal appointment of the manager of the service. In addition to this we found that there were no cyclical PVG checks in place for staff members. Although the agency PVG policy indicated that retrospective checks should be undertaken, we did not see that this had been implemented.

In addition we noted that the agency safer recruitment policy had not been reviewed to take into account more recent changes to the law including GDPR. To promote the safety and well being of children and young people and to ensure appropriate record keeping we encouraged the agency to make improvements in all of the areas highlighted, taking into account of our Safer Recruitment through Better Recruitment Guidance. (See recommendation 1).

When we looked at staff training records we found that these were being maintained within different systems including within an online portal and within individual staff supervision records. This meant that the management team did not yet have a clear overview of staff training undertaken or of training needs. In order to ensure children and families can be confident in the service provided to them we asked the service to carry out a training needs analysis and to ensure that staff are provided with all relevant training including child protection training. (See requirement 1).

So that the agency could ensure that the views of people with direct experience of adoption can be taken into account in recruitment decisions, we encouraged the agency to consider more ways to offer this opportunity to adopters or adoptees.

We considered that management systems should be used more effectively and that new systems could be developed to provide more of an overview of the agency. This would act to support improvements, for example relating to outwith approval procedures being followed, frequency of carer reviews and ensuring foster carer agreements are in place. There should also be more consistent and effective use of file auditing (for children, foster carers and for staff) and accuracy in recording for incident and accident reporting and of child protection records. This will additionally inform better notification reporting to the Care Inspectorate. (See Requirement 1).

Whilst overall we saw that panel processes were being carried out well and in a way which supported quality monitoring of practice and reporting, we noted that annual reviews and training plans should be introduced to

ensure that learning and development is appropriate for the role of being a panel member and chair. (See Recommendation 1)

We noted that one recommendation made in the last inspection report remained outstanding and this has been continued within this report.

In conclusion we saw that there were strengths in this agency, however these just outweighed the areas for improvement in terms of the impact on people who used the service. We noted the good plans in place to drive improvement and acknowledged that the agency was emerging from a period of transition. In order to ensure continued and sustainable improvements in experiences and outcomes for children and families, we have asked the service to take action to improve in a number of important areas including in child protection, safer recruitment and training of staff and in areas of management and leadership. This has informed our evaluation of quality as being adequate for the themes of care and support, staffing and management and leadership.

Requirements

Number of requirements: 4

1. Midlothian Council must ensure that the health and wellbeing of children is always appropriately managed. In order to achieve this the service must ensure that effective working practices are established to assess and monitor risks for children placed for adoption.

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - Welfare of Users.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20)

Timescale: Immediate upon receipt of this report.

2. Midlothian Council must ensure that the health and wellbeing of children is always appropriately managed. In order to achieve this, the service must ensure foster carers receive sufficient and regular child and adult protection training.

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - 'A provider must make proper provision for the health, welfare and safety of service users'.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20) and "I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organisational codes".(HSCS 3.24)

Timescale: This must be achieved by 27 May 2019.

3. Midlothian Council must ensure that all family placement team staff members and the manager undertake appropriate child and adult support and protection training in line with the agency policy to ensure the safety

and wellbeing of children and young people. In addition, a training needs analysis should be undertaken to identify areas of professional development for the team.

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - A provider must make proper provision for the health, welfare and safety of service users.'

This is to ensure that staffing is consistent with the Health and Social Care Standard which state "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14) and "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

Timescale: This must be achieved by 27 May 2019.

4. Midlothian Council must ensure that quality assurance systems are robust and used effectively in order to identify areas for improvement. In addition they must notify the care inspectorate as detailed in the document: "Records that all registered care services (except childminding) must keep and guidance on notification reporting (2012)"

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - 'A provider must make proper provision for the health, welfare and safety of service users.'

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected." HSCS 4.18) and "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19)

Timescale: This must be achieved by 27 May 2019.

Recommendations

Number of recommendations: 3

1. The service should raise awareness of the need for more adopters to come forward to enable the needs of more children to be met. Assessment of adopters should be carried out within reasonable time scales.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state " as a child or young person needing permanent alternative care , I experience this without unnecessary delay" (HSCS 1.16).

2. To promote the safety and wellbeing of children and young people Midlothian Council must ensure appropriate recruitment record keeping. This is to ensure that staffing is consistent with the Health and Social Care Standards which state "I am confident that the people who support me have been appropriately and safely recruited." (HSCS 4.24)

3. Midlothian Council should implement annual reviews and a learning and development programme for foster panel members and chair. This is to ensure that the quality of management and leadership is consistent with the Health and Social Care Standard which states "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The service should ensure that post adoption work is completed for each child.

The 'Life Story' work should be completed with the adopter and child, if appropriate, to ensure that adopters have a comprehensive life story for their child.

A later life letter should be completed by the social worker or person who was witness to the child's journey.

National Care Standards adoption agencies. Standard 9: getting help.

This recommendation was made on 2 February 2016.

Action taken on previous recommendation

As at February 2016, the Linking and coordination procedures have been changed to formalise the need for later life letter and life story book to be available to adopters at the point of the third coordination. This agreed and minuted at both the linking and coordination meetings.

Hard copies of the life story book and later life letters will be held by the family placement team admin in order that service users have access to this information in the event that 5 originals are lost.

We saw improvement in this area, adopters we spoke with advised that they were informed about the importance of life story work at preparation stages. We could see from reading minutes of meetings that life story work had been identified and discussed. One team manager informed us that they were actively involved in completing life story/later life letters for a child whose case we were tracking.

We were satisfied that this recommendation has been met.

Recommendation 2

The service should ensure that clear written agreements are in place about how children will be supported and these should be shared appropriately with adopters.

National Care Standards adoption agencies. Standard 8: after you move in.

This recommendation was made on 2 February 2016.

Action taken on previous recommendation

Adoption Support Plans are to be drafted for the matching panel. Workers will be clear from the point of a permanence LAAC what support a child is likely to need and this must be planned for.

We saw some improvement in this area, and examined three adoption support plans during the Inspection. However for one case tracked no support plan was in place, therefore this recommendation will continue.

See new Recommendation 1
To ensure that adopters are informed of the full range of support services available to their child, adoption support plans should be drafted for the matching panel as stated in the services' action plan.
National Care Standards adoption agencies. Standard 8: after you move in.

Recommendation 3

The service should adopt a more comprehensive plan of service improvement linked to an annual report of the whole Agency.

National Care Standards adoption agencies. Standard 32: providing a good quality service.

This recommendation was made on 2 February 2016.

Action taken on previous recommendation

FPT team leaders will write an annual report which will be published on MLC website and distributed to stakeholders. The will link with the Children's Services Plan and with the FPT Adoption Service Development Plan

The service should share reports and their future priorities with people who use the service and their stakeholders.

All annual reports and action plans will be sent to adopters, stakeholders and published on the MLC website.

We had sight of the annual report however some adopters we spoke with informed that they had not received a copy. We discussed this with management, and advised them to look at how these plans could be distributed in a more meaningful manner.

Met.

Inspection and grading history

Date	Type	Gradings	
17 Nov 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
18 Nov 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
16 May 2014	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
27 May 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 4 - Good 3 - Adequate
22 May 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 4 - Good 4 - Good
23 Feb 2011	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 3 - Adequate

Date	Type	Gradings	
15 Mar 2010	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 4 - Good 3 - Adequate
5 Mar 2009	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 2 - Weak 2 - Weak

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Inspection of Midlothian Fostering Service

Report by Joan Tranent, Head of Children's Services

1   Purpose of Report

This report outlines the outcome of the above announced (short notice) Inspection on Midlothian Fostering Service as carried out by the Care Inspectorate in February 2019.

2   Background

2.1   Midlothian Council Fostering Services is co-located with other children's services based at 7 Eskdaill Court and provides a fostering service for children and young people aged 0-18 years. Whilst the fostering and adoption service are inspected as separate services, the inspections happen at the same time and it is one team who manage all the work.

2.2   The Care Inspectorate is the Independent scrutiny and improvement body for care services in Scotland. They inspect all registered care services and local authority social work departments on a regular basis to ensure that providers are meeting standards required and are working to improve the quality of care for everyone. Every time they inspect these services they produce an inspection report.

2.3   Based on the findings of this Inspection the Care Inspectorate awarded the following grades on the three areas it inspected:

> Quality of Care and Support   Grade 4 - Good
> Quality of Staffing   Grade 3 – Adequate
> Quality of Management & Leadership   Grade 3 – Adequate

2.4   The report and grades represent the Care Inspectorate's assessment of the quality of the areas of performance which were examined during the announced inspection.

3.0   Findings from Inspection

3.1   Care & Support - Strengths

The findings from the Inspection in the area of Care & Support noted the following strengths:

- An increasing number of children and young people who were assessed as being in need of permanent alternative care were experiencing this without delay.

- We observed close, loving and trusting relationships between children, young people and their carers. This was clearly supported by the stable, legally secure and enduring nature of their placements.

- Whilst aware that there have been disruptions to placements which can have a negative impact on young people's experiences and outcomes, however the systems in place allow an overview and degree of scrutiny which then informs learning and service and practice development.

- They found good examples of carers being consistently and positively involved with birth family of young people through supporting contact, establishing relationships and having appropriate sensitive and helpful conversations. Carers also spoke positively about their recruitment and preparation experiences, expressing that it offered valuable insight into their role as carers.

- Young people's views were regularly sought and the development of Mind of my Own app was a further attempt to make this process more accessible and meaningful.

   Care & Support – Development

- Whilst some carers training was up to date this was not the case for all. Some areas of mandatory training, including child protection were seen to be inconsistently attended and out of date. Also there was no adult support and protection training recorded as being undertaken. Given the new duties on children's services in relation to continuing care this is an area which is new to many carers.

- Some risk assessments and safer caring policies were not found to incorporate all information available and were not always being updated at regular intervals or timeously.

   In conclusion for Care and Support:

   The Inspection team found a number of important strengths in this agency which taken together clearly outweighed the areas for improvement in terms of the impact on people who used the service. They noted good plans in place to drive improvement and acknowledged that the agency as emerging from a period of transition. The Care Inspectorate made one requirement and one recommendation in relation to this part of the service which are evidenced in the attached action plan.

3.2   **Quality of Staffing - Strengths**

- The Inspection team found that staff were enthusiastic and motivated to establish positive working relationships with carers and to consolidate the team following significant staff changes.

- Staff reported they were motivated and committed to providing a quality service. They received regular supervision and annual appraisal from

the new manager of the service. Training needs were also being discussed and noted within appraisal records.

- There was a breadth of skills and experience within the team in relation to child care, assessment and social work however some staff had limited experience of fostering work and the service acknowledged that staff confidence needs to grow in this area.

- Support was offered to staff in the form of regular team meetings, team development sessions and consultations sessions in relation to case work.

- The Inspection team found very positive working relationships between the foster team and the social work teams. There was evidence of examples of good joint working practices supporting positive outcomes for children and young people, carers and birth families.

Quality of Staffing – Development

- Safer recruitment processes in consultation with HR. Whilst initial PVG checks have been undertaken, there was no cyclical PVG checks in place. The safer recruitment policy requires to be reviewed and take account of changes to the law including GDPR.

- Alongside the work of staff prioritising their relationships with carers, they also need to actively develop relationships with children and young people alongside this to more effectively support caring household.

- Management to ensure they have a clear overview of staff training records, currently they are stored in different systems. Therefore a training needs analysis is required to ensure that staff are provided with relevant training.

In conclusion the quality of staffing was found to have strengths which just outweighed the areas for improvement in terms of the impact on people who used the services. It was acknowledged that there were good plans in place to drive improvement. There was one requirement and two recommendations made which are evidenced on our action plan.

3.3 Quality of Management - Strengths

The Care Inspectorate team acknowledged that the service has experienced a number of significant challenges and changes since the last inspection, including staff absence (front line and management), staffing changes, and operating in an environment of uncertainty and changes in leadership style and practice. The impact of these issues on the team, service delivery and capacity for improvement over this period was fully discussed with the management team during the course of the inspection and at feedback.

- In recent months further changes have offered the opportunity to identify these area required to drive forward improvements and start to

address the negative impact of these events. There is evidence of a clear drive to re-establish positive, trusting relationships between the service and their carers and also to consolidate the team itself.

- The fostering panel processes were being carried out well in a way which supported quality monitoring of practice and reporting.   Panel members spoke of the improvement in the quality of information being provided to the panel.

Quality of Management - Development

- Management systems should be used more effectively and new systems developed to provide an overview of the agency.   There should be a more consistent and effective use of file auditing and accuracy in recording for incident and accident reporting and of child protection records. This would inform better notification reporting to the Care Inspectorate.

- The service needs to undertake some policy review and update work. The draft continuing care policy requires further development and structures for implementation required to be progressed to ensure the service develops in line with the continuing care agenda.

    In summary the strengths just outweighed the areas for improvement in terms of impact on people who used the service.   There was one requirement in this area which is evidenced in our attached action plan.

4.   Summary

Overall this is a disappointing Inspection report where grades have dropped except for the care and support offered to foster carers. In discussion with the Care Inspectorate the challenges and changes were fully discussed to give some context around the unusual set of circumstances that we faced over the past 12 months.

This said we have had a new manager in post since September 2018 and already the team and carers are evidencing the positive changes being made. The manager is a reliable and experienced worker who shall offer much needed continuity and stability to the team whilst also ensuring that they drive forward the performance of the service.

5.   Report Implications

5.1   Resource
        There are no resource issues arising from this report.

5.2   Risk
        The Care Inspectorate regulate all care services in Scotland using the National Care Standards, set out by the Scottish Government, as a benchmark for how each type of service should perform. These standards are the minimum that children and young people should expect when using care services.

If the standards are not being fully met, the Care Inspectorate would note this in the inspection report and require the service manager to address these. The Care Inspectorate could impose an additional condition on the service's registration if the provider persistently, substantially or seriously fails to meet the standards or breaches a regulation. They also have the power to issue an improvement notice detailing the required improvement to be made and the timescale for this.

Monitoring, review and evaluation of progress by officers in Children's Services is the control measure in place to reduce the risk of failure of the care services and to demonstrate their capacity to improve.

5.3   Single Midlothian Plan and Business Transformation
Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
☒ Getting it right for every Midlothian child
☐ Improving opportunities in Midlothian
☐ Sustainable growth
☐ Business transformation and Best Value
☐ None of the above

5.4   Impact on Performance and Outcomes
The action plan outlines the work that is required to happen within set timescales. The progress of this shall be monitored during monthly meetings with the Head of Service.

5.5   Adopting a Preventative Approach
The Service will continue to improve its work in line with its improvement plan. The Education, Communities and Economy Directorate will continue to challenge and support the Service in relation to developing and implementing a range of quality improvement strategies.

5.6   Involving Communities and Other Stakeholders
As part of their inspection process the Care Inspectorate met with five foster carers and seven children and young people. They also observed a foster carer support group meeting attendees.

5.7   Ensuring Equalities
An action Plan has been prepared to address the areas for improvement recommended in the report. The action place will be screened for equalities implications.

5.8   Supporting Sustainable Development
The Service Improvement Plan allows for sustainable development and improvement.

5.9   IT Issues
There are no IT issues.

6   Recommendations

Cabinet are requested to:

- Note the content of the Inspection Report.
- Pass this report to the Performance, Review and Scrutiny Committee for its consideration.

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Background Papers:

Midlothian Fostering Action Plan 2019/2020   (Appendix 1)
Care Inspectorate Report dated 8 February 2019   (Appendix 2)

Midlothian Fostering Action Plan 2019/2020

ACTIONS	TIMESCALE	LEAD	OUTCOME	MEASUREMENT	RED AMBER GREEN	UPDATE
Develop a robust Learning and Development Framework for foster carers mandatory training *(Care and Support: Requirement 1)*	27 May 19	Team Leader /Learning & Development/ Public Protection Unit	All foster carers are trained, competent and skilled to meet the needs of the children and young people they are caring for	All foster carers will undergo Child protection level 1 / refresher training

100% of all foster carer will undergo Adult Support and Protection training | | |
| Develop a training needs analysis to identify areas of professional development for the team. Ensure Individual Training Records for each member of staff are held together with team training records to ensure consistent and varied staff development *(Staffing: Requirement1)* | 27 May 19 | Team Leader | Early identification of gaps in training for staff. Clear overview of all staff training to management | All staff undergo child protection training

All staff undergo adult support and protection training | | |
| Implement annual reviews of foster carers in line with national care standards *(Management and Leadership: Recommendation 1)* | March 20 | Service Manager/Team Leader/ Supervising social workers | Reassurance that all foster carers are reviewed annually thereby identifying any issues at early stage | All foster carers will be reviewed annually either informally at home or at panel.

Mosaic records will evidence these are taking place | | |
| Develop and deliver on a learning and development programme for panel members and chairs *(Management and Leadership: Recommendation 1)* | 27 May 19 | Service Manager/ Team Leader/ Ind. Chairs | Panel members and chairs are trained, competent and skilled in their role. | Panel learning and development programme in place

Panel members invited to joint FPT training

4 X per annum development day | | |

				100% appraisal/annual reviews in place		
Ensure documents relating to risk management (risk assessments/safer caring policies) are produced and updated timeously and interface effectively (*Care and Support: Recommendation 1*)	March 20	All TL's and managers	Timeously reporting which iforms robust care planning and support	All foster carer files will undergo a file audit on an annual basis – Mosaic reporting. 4 x per annum supervision to ensure risk management is reflected in the care planning process		
Develop and monitor robust recruitment record keeping practices *(Staffing: Recommendation1)*	March 20	HR/Managers	Confirmation that all staff are appropriately and safely recruited	100% of new recruits have a file that contains necessary paperwork in line with safer recruitment		
Strengthen the relationships with Supervising Social Workers and the children placed in foster care households *(Staffing: Recommendation 2)*	March 20	Team Leader/ Supervising Social Workers	Ensure that the FPT staff know the children placed with their carers so they can contribute to making decisions about their current or future care and support	100% of case file audits and supervision notes evidence this is taking place 100% of foster carers case file and supervision highlight the link between the child's needs and foster support and learning		
Strengthen quality assurance systems for ensuring procedures are followed in line with local and national policy *(Management and Leadership: Requirement 1)*	27 May 19	Service Manager/Team Leader	Develop new system to provide an overview of the agency to include outwith approval procedure, auditing, & recording of incident & accident reporting.	100% of outwith authority placements are reviewed by a manager 100% of cares are reviewed within appropriate timescales All relevant files are monitored and reviewed – Mosaic report		

Strengthen the existing system for undertaking appropriate policy updates to ensure continuous improvement *(Management and Leadership: Recommendation 2)*	27 May 19	Service Manager/Team Leader	Completed Policy for Continuing Care.	Evidence that Council policies are being regularly reviewed		
Develop and implement a local continuing care policy, working in partnership with children's services (*Management and Leadership: Recommendation 2)*	27 May 19	Service Manager/Team Leader	Completed Policy for Continuing Care.	Policy in place and communicated to all staff and carers Registered as an adult placement service		

Midlothian Council Fostering Service
Fostering Service

Family Placement Team
7 Eskdaill Court
Dalkeith
EH22 1AG

Telephone: 0131 270 5678

Type of inspection:
Announced (short notice)

Completed on:
8 February 2019

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2004083731

HAPPY TO **TRANSLATE**

About the service

Midlothian Council Fostering Service has been registered with the Care Inspectorate since the Care Inspectorate was formed in 2011. It was previously registered with the Care Commission.

Midlothian Council provides a fostering and family placement service for children and young people aged from 0 to 18 year and their families, who are assessed as in need of this. The service is responsible for the recruitment, assessment and support of carer families to provide a fostering service to a range of children throughout the area of Midlothian. It is co-located with other children's services.

Managers told us that the service was emerging from a period of transition following a service review. There had been significant staffing changes within the family placement team, including changes of team manager since our last inspection visit.

Midlothian Council Fostering Service aims and objectives state that the service:

- aims to recruit, train and support a range of foster carers who are committed, empathic and knowledgeable and who can provide placements for children and young people in Midlothian.
- are committed to finding safe, secure and stable homes for children who are not able to remain with their own family, and to provide opportunities for looked after and accommodated children and young people to have access to a range of experiences which enable them to achieve their full potential and live happy and fulfilling lives.

They advise their mission statement is as follows:

'Our vision is to work in partnership with carers within an environment of learning and compassion, to keep safe and nurture our most vulnerable children, and enable them to reach their potential.'

What people told us

We examined feedback from a number of sources, including email questionnaire responses from four foster carers. We met with five foster carers and seven children and young people at their homes during the course of the inspection and also observed a foster carer support group, meeting with attendees. Children and young people we visited were seen to have close, loving relationships with their carers and we identified many positive outcomes through our observations and interactions with them.

Most foster carers spoke of the significant challenges in relation to the family placement team since the time of the last inspection but were optimistic about recent positive changes being sustained. Some comments from foster carers are provided below:

"It's been quite a positive change, they're trying really hard."

"I feel like I don't really know her (supervising social worker) that well. Because she's new to it as well.....I feel like we're learning together."

"I feel the service does well with matching young people to carers and I also feel communication between supervising and placement social workers is good."

"I feel the service does ensure the health, education and well-being needs of the young people are met."

"I feel very listened to as a foster carer and in almost all my encounters, my views have been taken into consideration."

"I know going forward the family placement team are trying their hardest to get things right. I fully appreciate this is a big task and won't happen overnight."

As the findings in this inspection are based on a sample of children and young people, we cannot assure the quality of experience for every single child receiving a service.

An inspection of the adoption service took place at the same time as this inspection and a separate report for that service is available.

Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection. We looked at the annual return for the year January to December 2018 which was submitted during the inspection visit. We also looked at the service improvement plan, as well as quality monitoring information in relation to children's plans and an annual report produced by the permanence and adoption panel.

From this inspection we graded this service as:

Quality of care and support   4 - Good
Quality of staffing   3 - Adequate
Quality of management and leadership 3 - Adequate

Quality of care and support

Findings from the inspection

An increasing number of children and young people who were assessed as being in need of permanent alternative care were experiencing this without unnecessary delay. Children and young people we met with were offered a strong sense of security and were in permanent/long term placements with carers, some having been there for a significant number of years. We observed close, loving and trusting relationships between children, young people and their carers. This was clearly supported by the stable, legally secure and enduring nature of their placements.

We were aware that disruptions had taken place within the service which will have a negative impact on young people's experiences and outcomes. However, systems are in place to have an overview of these and scrutinise information to inform learning and service and practice development. We would encourage the service to continue this.

Full assessments, including appropriate checks, supported the agency to make decisions about the capacity and

skills of the carers in meeting children's needs. Through assessments we sampled and feedback from the panel chair, panel members and agency decision makers, we were reassured as to improvement in the quality of assessments since the last inspection.

Carers spoke positively about their recruitment and preparation experiences, expressing that it offered them valuable insight into their role as carers. In the main, carers spoke positively about how the information they received, prior to any placement, gave them important information about children and young people and supported them to meet their needs.

We found some good examples of carers being consistently and positively involved with birth family of young people through supporting contact, establishing good relationships, having appropriate, sensitive and helpful conversations. This, in turn, assisted children to retain positive relationships and contact experiences within a safe and supportive context of people working together respectfully.

In the main, children and young people were seen to have good support from their placing social workers. It appeared that some had benefited from consistent and positive relationships with these workers over time, affording an additional level of support to the family as a whole. In circumstances where there has been limited contact with the family placement team worker, this supportive relationship has been seen as invaluable by the carers. Children and young people we met with were generally experiencing care and support which was consistent and stable because people were working well together; for example, we saw that multi-agency meetings were regularly taking place.

Young people experienced good access to primary health care, ensuring regular monitoring and review of their health needs. Some children and young people we met with experienced additional health needs, some complex in nature. We found that, in most cases, these were being met robustly through carers' expertise and extensive knowledge of the young people and close liaison and working relationships with the team around the child.

Young people we met with were seen to be enjoying and succeeding in their early and further education and training experiences. There was evidence of positive working relationships between carers and these services which supported this. Similarly, evidence of some good inter-agency working was noted which supported these placements and young people reaching their potential.

We saw various examples of children and young people leading an active life and being encouraged and supported to engage in activities of their choice. This was seen to promote their physical health and well-being, social development, confidence, sense of achievement and opportunities for fun.

Children and young people were seen to be gaining increasing confidence and an understanding of personal responsibility through the development of age and stage appropriate independence skills. These were seen to be supported and promoted by carers and professionals.

Young people's views were regularly sought and the development of the MOMO (Mind of my Own) tool was a further attempt to make this process more accessible and meaningful. While there are no existing support groups for children and young people using the service, the Champions Group and Mini Champs offered opportunities for older young people to participate in the service.

Areas for development

It appears that, while some carers' training was up to date and they were seen to be consistently very involved in training, this was not the case for all. In particular, some areas of mandatory training, including child protection, were seen to be inconsistently attended and very out of date for some carers. It was also noted on the

information provided to us that no adult support and protection training was recorded as being undertaken. This will be crucial in meeting the needs of older young people currently living with previous foster carers and also moving forward the continuing care agenda. (See requirement 1)

Some risk assessments and safer caring policies were not found to incorporate all information available and were not always being updated at regular intervals or timeously when new information became available. To ensure the safety and wellbeing of young people and inform robust care planning and support, we encouraged the service to address these issues. (See recommendation 1)

In conclusion, we saw that there were a number of important strengths in this agency which, taken together, clearly outweighed the areas for improvement in terms of the impact on people who used the service. We noted the good plans in place to drive improvement and acknowledged that the agency was emerging from a period of transition. In order to ensure continued and sustainable improvements in experiences and outcomes for children and families, we have asked the service to take action to improve in a number of important areas, including protection training for foster carers, care planning and risk management. This has informed our evaluation of quality as being good for the theme of care and support.

Requirements

Number of requirements: 1

1. Midlothian Council must ensure that the health and well-being of children is always appropriately managed. In order to achieve this, the service must ensure foster carers receive sufficient and regular child and adult protection training.

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - 'A provider must make proper provision for the health, welfare and safety of service users'.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20) and "I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organisational codes". (HSCS 3.24)

Timescale: This must be achieved by 27 May 2019.

Recommendations

Number of recommendations: 1

1. Midlothian Council should ensure a joined up approach to care planning and risk management, where relevant documents are produced and updated timeously and interface effectively. This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I experience high quality care and support because people have the necessary information and resources". (HSCS 4.27)

Grade: 4 - good

Quality of staffing

Findings from the inspection

Staff were enthusiastic and motivated to establish positive working relationships with carers and to consolidate the team following significant staff changes since the time of the last inspection. We sampled staff files which showed that safer recruitment practice and checks were completed for permanent staff members before employment.

Staff told us that they were motivated and committed to providing a quality service. They received regular supervision and annual appraisal from the manager of the service. This provided opportunity for them to seek advice and to reflect on practice and learning. Training needs were also being discussed and noted within supervision and appraisal records.

We found that there was a breadth of skills and experience within the team in relation to child care, assessment and social work; however, some staff members had limited experience of fostering work and the service acknowledged that staff confidence in this area needed to grow. This was being supported by regular team meetings, team development sessions and consultation sessions in relation to case work.

Discussion with social workers within the children and families practice teams identified very positive working relationships and examples of good joint working practices supporting positive outcomes for children and young people, carers and birth families. Discussions with carers also confirmed that workers were operating well together to meet the needs of young people in placement.

Areas for development

Although we were able to see safer recruitment processes were in place in the staff records we sampled, we were unable to see that records were being held by the Human Resources department in relation to locum members of staff or in relation to the internal appointment of the manager of the service. In addition to this, we found that there were no cyclical PVG checks in place for staff members. Although the agency PVG policy indicated that retrospective checks should be undertaken, we did not see that this had been implemented.

In addition, we noted that the agency safer recruitment policy had not been reviewed to take into account more recent changes to the law including GDPR. To promote the safety and well-being of children and young people and to ensure appropriate record keeping, we encouraged the agency to make improvements in all of the areas highlighted, taking into account the 'Safer Recruitment through Better Recruitment Guidance'. (See recommendation 1)

While staff recognised the importance of, and were prioritising relationships with carers, we would encourage the service to actively develop relationships with children and young people alongside this to more effectively support caring households. It would ensure that they are clear about the needs, choices and wishes of children and that they know them when involved in making decisions about their current or future care and support. (See recommendation 2)

Staff were not always confident in their expertise in certain areas and relied upon guidance from their manager and support from experienced previous team members. The implementation of regular, specific targeted training/workshops to ensure a shared level of knowledge within the team would act to enhance staff confidence and practice. We also found no evidence of any staff adult support and protection training having taken place, which was inconsistent with the training development plan. To ensure the safety and wellbeing of

children and young people, we asked the service to ensure that all staff members and the manager undertake appropriate child and adult support and protection training in line with the agency policy. (See requirement 1)

When we looked at staff training records, we found that these were being maintained within different systems including within an online portal and within individual staff supervision records. This meant that the management team did not yet have a clear overview of staff training undertaken or of training needs. In order to ensure children and families can be confident in the service provided to them, we asked the service to carry out a training needs analysis and to ensure that staff are provided with all relevant training, including carrying out assessments of foster carers and in report writing in relation to those assessments. (See also requirement 1)

In conclusion, we saw that there were strengths in this agency, however these just outweighed the areas for improvement in terms of the impact on people who used the service. We noted the good plans in place to drive improvement and acknowledged that the agency was emerging from a period of transition. In order to ensure continued and sustainable improvements in experiences and outcomes for children and families, we have asked the service to take action to improve in a number of important areas including in training of staff, safer recruitment and ongoing development of relationships with children and young people in caring households. This has informed our evaluation of quality as being adequate for the theme of staffing.

Requirements

Number of requirements: 1

1. Midlothian Council must ensure that all family placement team staff members and the manager undertake appropriate child and adult support and protection training in line with the agency policy to ensure the safety and well-being of children and young people. In addition, a training needs analysis should be undertaken to identify areas of professional development for the team.

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - A provider must make proper provision for the health, welfare and safety of service users.'

This is to ensure that staffing is consistent with the Health and Social Care Standard which states "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14) and "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

Timescale: This must be achieved by 27 May 2019.

Recommendations

Number of recommendations: 2

1. To promote the safety and wellbeing of children and young people, Midlothian Council should ensure appropriate recruitment record keeping. This is to ensure that staffing is consistent with the Health and Social Care Standards which state "I am confident that the people who support me have been appropriately and safely recruited." (HSCS 4.24)

2. Midlothian Council should ensure that the consolidation of positive, supportive relationships between staff and foster caring households includes children and young people living there. This is to ensure that staffing is consistent with the Health and Social Care Standards which state "My care and support is provided by people who know my needs, choices and wishes, even if there are changes in the service or organisation". (HSCS 4.15)

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

The service have experienced a number of significant challenges and changes since the time of the last inspection, including staff absence (front line and senior management), staffing changes, operating within an environment of uncertainty and changes in leadership style and practice. The subsequent impact of these issues on the team, service delivery and capacity for improvement over this period was discussed with the management team during the course of the inspection and at feedback.

In recent months, further changes have offered the opportunity to identify the areas required to drive forward improvements and start to address the negative impact of these events. There is a clear drive to re-establish positive, trusting relationships between the service and their carers and also to consolidate the team itself.

Overall, we saw that panel processes were being carried out well and in a way which supported quality monitoring of practice and reporting. Panel members and social workers we spoke to and records we looked at demonstrated that the panel were sufficiently independent to robustly challenge staff when further information or detail was needed. Panel members told us that more recently there had been improvement in the quality of information being provided to the panel and that this was reducing the need for panels to be postponed.

Areas for development

We considered that management systems should be used more effectively and that new systems could be developed to provide more of an overview of the agency. This would act to support improvements; for example, relating to outwith approval procedures being followed, frequency of carer reviews and ensuring foster carer agreements are in place. There should also be more consistent and effective use of file auditing (for children, foster carers and for staff) and accuracy in recording for incident and accident reporting and of child protection records. This will additionally inform better notification reporting to the Care Inspectorate. (See requirement 1).

Whilst, overall, we saw that panel processes were being carried out well and in a way which supported quality monitoring of practice and reporting, we noted that annual reviews and training plans should be introduced to ensure that learning and development is appropriate for the role of being a panel member and chair. (See recommendation 1)

We would encourage the service to undertake some policy review and update work. In addition to this, the draft continuing care policy requires further development and structures for implementation required to be progressed to ensure the service develops in line with the continuing care agenda. (See recommendation 2)

In conclusion, we saw that there were strengths in this agency; however, these just outweighed the areas for improvement in terms of the impact on people who used the service. We noted the good plans in place to drive

improvement and acknowledged that the agency was emerging from a period of transition. In order to ensure continued and sustainable improvements in experiences and outcomes for children and families, we have asked the service to take action to improve in a number of important areas, including quality assurance systems and notifications to the Care Inspectorate, learning and development of foster panel members and chair and policy review and updates. This has informed our evaluation of quality as being adequate for the theme of management and leadership.

Requirements

Number of requirements: 1

1. Midlothian Council must ensure that quality assurance systems are robust and used effectively in order to identify areas for improvement. In addition they must notify the care inspectorate as detailed in the document: "Records that all registered care services (except childminding) must keep and guidance on notification reporting (2012)."

This is necessary in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) - 'A provider must make proper provision for the health, welfare and safety of service users.'

This is to ensure that management and leadership is consistent with the Health and Social Care Standards which state "I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected." HSCS 4.18) and "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

Timescale: This must be achieved by 27 May 2019.

Recommendations

Number of recommendations: 2

1. Midlothian Council should implement annual reviews and a learning and development programme for foster panel members and chair. This is to ensure that the quality of management and leadership is consistent with the Health and Social Care Standards which state "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

2. Midlothian Council should undertake appropriate policy updates within the context of the Family Placement Team to ensure continuous improvement. This should include the progression of policy development and practice implementation in respect of continuing care. This is to ensure the quality of management and leadership is consistent with the Health and Social Care Standards which state, "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19) and "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS4.11)

Grade: 3 - adequate

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

To ensure that children and young people are being looked after by carers who feel well supported the service should review the provision of support groups and properly implement supervision of carers in line with their own policy.

National Care standards, Standard 2(3) and Standard 5(8).

This recommendation was made on 17 November 2017.

Action taken on previous recommendation

Support Groups: These are due to be progressed and work has been undertaken or is being undertaken to finalise plans for this and commence groups imminently. Carers are aware of these developments and welcome them. **Met.**

Supervision of Carers: there have been some barriers to this being achieved at particular points over the last year (staff absence and changes) and therefore not all carers were in receipt of regular contact or supervision from a supervising social worker. However, it was noted that supervision of carers was more recently found to be taking place more regularly again following a period of stability in the team. **Met.**

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
17 Nov 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed Not assessed 4 - Good
18 Nov 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
26 Aug 2014	Announced	Care and support Environment Staffing	4 - Good Not assessed 4 - Good

Date	Type	Gradings	
		Management and leadership	4 - Good
16 May 2014	Announced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	3 - Adequate
27 May 2013	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
22 May 2012	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
23 Feb 2011	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
15 Mar 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
5 Mar 2009	Announced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

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

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Inspection of Midlothian Council Highbank Intermediate Care Service

Report by Morag Barrow, Head of Primary Care and Older People's Services

1   Purpose of Report

This report provides an overview of the recent Care Inspection report on Highbank Intermediate Care facility inspection. It also provides a summary of the action plan for the service improvements.

2   Background

2.1   Midlothian Health and Social Care Intermediate Care Service was inspected in March 2019 by the Care Inspectorate, as a registered Care Home for people aged over 65. The report was published on 23 April 2019, and is in the process of being distributed to all Elected Members of the Cabinet for their information. The inspection covered 5 key areas of the Scotland's Health and Social Care Standards attributed to care home services. These include:

- How well do we support people's wellbeing?
- How good is our leadership?
- How good is our staffing?
- How good is our setting?
- How well is our care and support planned?

Highbank Care home provides an Intermediate Care facility to support residents of Midlothian receiving care and support to prevent a hospital admission, or support a planned discharge. Whist the model of care is well received, and impacts significantly on performance around admission prevention, and delays to discharge, the premises is not fit for purpose. It should be noted that the premises was originally a Residential Care Home, and not designed with rehabilitation/reablement approach to all care. As a result, the Care Inspectorate Inspection has scored down to grade 3 on environment, and the Care Inspectorate have advised this will remain the case until a new facility is in place. Since the last inspection in April 2018, bathrooms have been upgraded and are to a good standard. Other parts of the home have been redecorated to provide a more homely environment for people, and this work continues.

The ongoing Grade 3 on environment demonstrates the necessity for the re-provisioning of Highbank Intermediate care facility and this is currently underway with an approximate completion date of between 18 months and 2 years.

Highbank Care home was originally built as a residential home over 30 years ago. As time has progressed, the home had had a significant change of usage responding to around 600 admissions and discharges each year to prevent avoidable hospital admissions and facilitate earlier discharge with a rehabilitation focus with the aim of supporting service users back home to live as independently as possible. This is a valuable asset to Midlothian.

Following the inspection, a report was published that details findings and outlines any areas for recommendation and/or requirements for improvement. An action plan, with a specified timescale was developed to address identified areas for improvement. This action plan has been implemented to track and monitor progress, and identify that timescales are being met.

The inspection report grades the areas of inspection from 1 (Unsatisfactory), to 6 (Excellent). This inspection report graded the 5 areas below:

How well do we support people's wellbeing?	**3 - Adequate**
How good is our leadership?	**4 - Good**
How good is our staffing?	**3 - Adequate**
How good is our setting?	**3 - Adequate**
How well is our care and support planned?	**2 - Weak**

3   Conclusion

The Care Inspectorate outlined at the beginning of the inspection report feedback from current residents which include:

"I like being here as it keeps me safe."

"The staff are kind and caring."

"The staff look very busy a lot of the time. I do not think there is enough of them however."

"I am a little bored during the day as there is a lack of activities taking place to keep me occupied."
"
"I feel my dad is being looked after well. He always presents himself as clean and tidy."

"Some areas of the building would benefit from some decoration, for example my bedroom."

The majority of people were happy with staff who supported them, showing them dignity and respect at all times. Communication between relatives and the service was good and they were regularly updated of any changes in people's health needs.

It was highlighted that people knew who to approach if they wished to raise a concern or complaint and records of complaints showed these were addressed well.

Positively, the Inspector highlighted "overall, people were positive about the management of the service. We found the manager was very open and responsive, managing the home and staff in a calm manner. The manager, along with the assistant managers had a good general overview of people's care and support needs and this is important in relation to the manager having confidence that people are achieving positive outcomes".

4   Report Implications

4.1   Resource

There are no financial and human resource implications associated with this report.

4.2   Risk

The Care Inspectorate inspects all registered services on a regular basis with announced and unannounced inspections. A report is published which informs all stakeholders about the key strengths of the service, areas for improvement and sets out the main points for action.

Following the publication of that report it is accessible to the public via the Care Inspectorate website, and by requesting a hard copy. It is also on display in Highbank for staff and visitors to access and review progress.

Highbank intermediate care facility is not fit for purpose and planning is well underway for the new building (a 40 bed unit on the current Dundas site in Bonnyrigg). This will support local residents to receive intermediate care close to home.

4.3   Requirements:

There are three areas for improvement in the inspection report and three requirements.

The requirements are:

1.   In order to ensure peoples care and support needs are continuously met as agreed, the service provider must ensure that staff numbers are appropriate for the health, welfare and safety of service users

Action Plan:

A report has been submitted to Adult Social Care DMT requesting a review of staffing hours and rota hours. A new proposed rota regarding staff shifts and cover is being explored with a view to increasing staffing levels and reducing agency usage. This will promote consistency of care for client and staff wellbeing. The service has been fortunate to secure regular agency workers the majority of the time to provide continuity and ensure a safe staffing ratio.

The benefits of the proposed night staff and rota review are providing a more sustainable and favourable rota for staff and residents, promoting care and support within the reablement model of care, staff consistency, increased availability of staff on the floor (therefore a reduction in agency staff use).

2.   The service must ensure that the premises are in a good state of repair externally and internally and are decorated and maintained to a standard appropriate for the care service.

Action Plan:

The hours of the MLC Handyman in Highbank have been increased. He will continue to ensure that the needs of residents are met in terms of decoration and refreshing rooms. In addition, he is ensuring that areas for decoration are completed and actioned. Highbank have had new pictures within lounge areas, and new residents are encouraged to bring personal items from home (however acknowledging that this is a short term stay facility). As highlighted in the inspection report, work is well underway in a variety of areas relating to the new build Highbank, and architects have proposed designs which are being considered. As previously stated, the facility is unlikely to be graded higher due to the constraints of a building that is unfit for purpose. Hence the necessity for a new build, which has been prioritised within the MLC Capital plan.

3.   In order to ensure peoples', care and support needs are continuously met as agreed, the service provider must review their needs with their involvement (or others as felt appropriate and agreed) on a six-monthly basis, or more often as when required or changes in need are identified.

Action Plan:

The 3 long term residents have been reviewed since inspection, and planning for these reviews was underway at the time of the inspection by social workers. A regular plan is in place to ensure that reviews take place formally by social workers. The staff team in Highbank are very responsive to residents or families requesting a review and will action this with the multidisciplinary team when necessary.

In relation to residents who are residing temporarily within an intermediate care bed, a full time occupational therapist is now based at Highbank. Along with the staff team (who have received training to provide care within the reablement model), goals and outcomes are reviewed on a daily basis in order to support adults in achieving their goals and desired destination (e.g. a return home or progress with a specific task).

4.4   The areas of improvement request:

1.   The provider should ensure that people are supported and not left alone for periods of time with minimal or no engagement from staff.

Action Plan

The team understands that this was one witnessed occasion, however there is now an activities coordinator in post who is taking the lead on - the development of meaningful and appropriate activities (with Occupational Therapy support), ensuring that adults are encouraged to participate (if they wish to), ensuring that there are events for adults and their families to attend (for example, a recent mother's day afternoon tea). The activities coordinator is also ensuring that the activities are well advertised (for example within main forum areas, dining rooms, in the lift) so residents and families are aware of what is happening. The coordinator is now responsible for the residents social support plan and will update this regularly to reflect activities and interventions. At the time of the inspection a recruitment process was underway to fill the recently vacated activities coordinator post, and the successful applicant was due to start the following week.

2.   The provider should ensure staff receive regular formal support and supervision, including observations of practice and reflective practice discussions as in accordance to their policies procedures

Action Plan:

As part of personal improvement plans, the management team are ensuring that staff receives protected, regular and planned supervision sessions. These will also be recorded within the staff file. It has been acknowledged that Highbank staff have been under considerable pressure as the flow of residents from hospital and community admissions has increased (circa 400 admissions per year). Admission and discharge processes are being explored in order to make the management team more efficient and ensure that protected time is being provided to staff for support, supervision and observations.

3.   The provider should ensure that appropriate communication tools are in place for staff which does not impinge on the comfort and wellbeing of people.

Action Plan:

This relates to the tannoy system within Highbank. This is used for fire drill purposes or to request emergency assistance if staff have an emergency with a resident. Feedback has been taken on board, and staff will no longer use the tannoy system. Other processes are in place now.

There is now a full time Occupational Therapist within Highbank Intermediate Care facility, ensuring that all goals and outcomes are clearly recorded and that all risk assessments are always up to date. Residents are also receiving timely assessments and rehabilitation goal setting which is key to implementing the core principles of intermediate care, these being:

• Help people avoid going into hospital unnecessarily,
• Help people to be as independent as possible after a stay in hospital,
• Prevent people from having to move into a care home until they really need to.

(Maximising Recovery, Promoting Independence: An Intermediate Care Framework for Scotland, July 2012)

The service had advised the Inspectorate of the paperwork required (relating to residents in long term care) was not fit for purpose) prior to the inspections. The service had offered

to develop a new suite of documentation and ask that the Inspectorate review these to support implementation. This was agreed and underway at time of inspection.

These support plans are being developed to replace the current support plans which were described as "rather lengthy and in many cases would be a challenge for staff to work with people to keep these up to date or in any great detail. The service provider has recognised this too and through our working relationship can support the service to develop in this area, direct them to good resources to assist to ensure support plans agreed with people are fit for purpose, meaningful and people's outcomes can be measured whilst using the service".

The team are working within the timescales highlighted by 30 day Action Model. This is an area of great challenge as the support plans in use during this current inspection period were requested by previous inspectors. The management team are looking at short term resolution to ensuring care planning is clear, consistent and meaningful, alongside a longer term plan of exploring/implementing an electronic care planning software, if financially viable. This software in other inspection reports for other services has been held in high regard by the Care Inspectorate.

The date for these requirements to be met is 30 June 2019. The team are confident that all requirements will be met by this date.

The report regarding the rota and staffing review will be considered by Adult Social Care DMT in April 2019 and will follow due process in terms of consultation timescales.

5   Consultation

Copies of the Inspection report have been made available to Elected Members and staff members and notified to families/carers and other interested parties.

6   Equalities

There are no apparent equalities issues.

7   Sustainability

The Midlothian Older People strategy 2016-2019 focuses on improving access to services and exploring opportunities to keep people safe and well in their own home and community. This underpins the vision and contribution of Highbank Intermediate Care facility.

8   Technology issues

There are no Technology issues arising from this report.

9   Recommendations

The Cabinet is asked to:
- Note the content of the report and progress made and forward to PRS for information.
- Note that many Care Home standards are not fir for purpose for a fast flowing Intermediate care unit.
- Note that the service already had plans underway to address issues relating to care documentation
- Note that improvements in environment are limited by the facility no longer being fit for purpose, and that MLC have prioritised a re-provision within the Capital plan.

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April 2019

Highbank
Care Home Service

9a Bonnyrigg Road
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Telephone: 0131 270 5640

Type of inspection: Unannounced
Inspection completed on: 12 March 2018

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Care service number:
CS2003011087

HAPPY TO **TRANSLATE**

About the service

This service was first registered with the Care Inspectorate in December 2015.

It is situated in Eskbank, Dalkeith, and is close to shops and local amenities. Highbank is run and managed by Midlothian Council. The home is made up of six units, each with lounge/dining areas. Highbank currently provides long-term care to three residents and offers rehabilitation services, intermediate care, including assessment and interim stays, and respite stays to other people using the service. There is an area which has been equipped to provide physiotherapy and rehabilitation programmes.

The service tells us their statement of purpose is as follows: "Highbank is a Care home and opened in 1987 and was traditionally a long term care home. In 2011 Highbank changed and now focuses on short term care which accommodates 40 short term clients located in 6 units throughout the home.

The purpose of these beds is to prevent unnecessary hospital admissions and to allow clients to remain at home for longer. This also reduces delayed discharges in hospitals. Through rehab and assessment processes we can ensure that the best possible outcome can be reached for clients whether it be support put in place such as packages of care or equipment to allow a successful discharge home or if the client has now reached the stage of requiring longer term care. The respite service is there to support clients who are still living at home and to assist in the prevention of carer stress."

What people told us

Prior to the inspection we received two completed questionnaires from people who use the service and four completed questionnaires from relatives. Both people who use the service strongly agreed that overall they were happy with their care and support. One person said "Excellent care and support. In care home after discharge from hospital after a fall".

We received four completed questionnaires from relatives, with three strongly in agreement that overall they were happy with their care and one relative in agreement that overall they were happy with the care that was received. One relative said "My Aunt was only in Highbank for three short weeks but I cannot fault the staff". One relative also commented "Main concern is (my relative) just sat in the same chair day in and day out."

While on inspection we spoke with ten people and ten relatives. People and relatives were mostly very positive about their experiences and the facilities; however, some people did make some negative comments about the quality of the communication between the service and relatives and also about the facilities.

Self assessment

The Care Inspectorate did not ask for a self assessment this year.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	3 - Adequate
Quality of staffing	not assessed
Quality of management and leadership	not assessed

What the service does well

We heard from people that they were able to choose how their care was provided. This meant that they could choose a cooked breakfast if they wanted, could choose something that wasn't on the menu for lunch or tea, could go to bed or get up when they wanted and could choose if they wanted to use certain safety equipment.

It was good to see in the rehabilitation part of the service that people were encouraged to be as independent as possible. We saw staff encouraging people to do exercises as advised by the physiotherapist. Also, we saw that staff had a written goal orientated exercise plan to follow with people to help them in their rehabilitation. It is important that people are assisted to be as independent as they can be as this maximises people's dignity and respect.

We saw examples of staff being warm and caring towards people. Staff were good at spotting what people might need before they asked for it and when help was provided it was done is a discreet, respectful and reassuring way. We also found that staff were recruited safely.

We found that people enjoyed the activities they joined in with and at this time were content and engaged. We saw some examples of staff doing activities likes jigsaws on a one to one basis. It is good that people are assisted to be occupied as this can improve wellbeing. We will look at this again at a future inspection.

Some people were encouraged to manage their own medication and other people were helped to improve their confidence in doing so as part of planning to return home. This is good as it helps prepare people for returning home where there may be less support available on a daily basis.

We saw that people had their own rooms. There was a system in place to safely organise the laundry and the care home appeared clean and smelled fresh. We could see that most safety checks had been completed, though the service could not confirm if the gas heating system had been checked recently.

Most of the people and their relatives that we spoke with were very happy with the care and support they received.

What the service could do better

The service was performing adequately with regard to the environment and good for care and support. We have made two requirements and five recommendations.

We found that the bathing facilities needed to be improved. Only three of the six bathrooms could be used for

bathing. This meant that people had to visit a bathroom in another unit, which sometimes meant they had to pass through a communal lounge. We found this to be undignified and impractical. We heard from people and staff that these facilities do not meet people's needs nor promote their independence. We have made a requirement about this.

We saw that the inside and the outside of the care home was in need of improvement. This included flooring in a bathroom, replastering walls, repainting walls and door jams, replacing worn out chairs and bedside tables, finishing ramps outside and tidying up the garden. This is important as a safe, well maintained, homely environment effects wellbeing. We have made a requirement about this.

The service provided care to people long term and short term, though this was not reflected in the service's aims and objectives. We saw people who were living with dementia, yet parts of the home did not help people who could be forgetful, to move around easily and be as independent as possible. We also found that the service was not as homely as we would expect with many staff notices displayed, risk assessments and restrictive visiting times. A homely environment is more familiar for people which can increase feelings of wellbeing. We have made a recommendation about this.

We saw that some people's needs were not reviewed. When people's needs were reviewed they often were by telephone and not a face to face meeting. For people that were living at the service temporarily we heard that people's goals and plans were discussed weekly and that over time people's plans could change. However, we could see no evidence of this in the support plan. We have made a recommendation about this.

We heard that people were asked about using safety equipment, though we could not see this recorded in the support plan in an individual and specific way. We found that some people's support plans were not detailed enough. This is important as staff can meet people's outcomes best when they know a lot about people. We found almost no evidence that people were involved in planning their care as documentation was not signed to tell us that people had discussed and agreed the plan. There was little information available to staff to tell them what help people needed and how they wanted this help. We have made a recommendation about this.

We found that the way that the service checked the medicine it kept in stock could be improved. Some medicines need more frequent checking than others as they have a stronger effect and need to be monitored more closely. This makes sure that medicines are used in the way they were intended to be used. In order to maximise safety for people we have made a recommendation about this.

Requirements

Number of requirements: 2

1. The service should ensure that bathing facilities are improved to ensure they are fit to be used and are suitable for the purpose of achieving the aims and objectives of the care service. The service should:
a) consult with people and relatives
b) provide an action plan.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirement for Care Services) Regulations 2011 (SSI 2011/210), regulation 14 (1) (d).

Timescales: An updated action plan with timescales for the start and completion of facilities improvement to be sent to the Care Inspectorate by 14 May 2018.

2. The service should ensure that the premises are in in a good state of repair externally and internally and are decorated and maintained to a standard appropriate for the care service. The service should:
a) consult with people and relatives about inside and outside areas
b) provide an action plan.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirement for Care Services) Regulations 2011 (SSI 2011/210), regulation 10 (2) (b) and (d).

Timescales: An updated action plan with timescales for the start and completion of environmental improvement to be sent to the Care Inspectorate by 14 May 2018.

Recommendations

Number of recommendations: 4

1. It is recommended that the service makes a more homely and dementia friendly environment, suitable for people with age related vision changes.

National Care Standards, Care Homes for Older People, Standard 4 - Your Environment.

2. It is recommended that the service reviews people's needs regularly. This includes reviewing when care needs change significantly, every six months, face to face, regularly recording people's goals.

National Care Standards, Care Homes for Older People, Standard 6 - Your Support Arrangements.

3. It is recommended that the service improves its care planning and involves people in this process. This includes:
- greater detail of people's needs in care records, especially details on life history, leisure activities and hobbies
- greater detail on specific safety eqipment identified for specific needs
- written agreements for all safety equipment in use which could be considered a form of restraint
- availability of sufficient information for care staff at all times
- people to sign to say they are happy with their care plans.

National Care Standards, Care Homes for Older People, Standard 6 - Your Support Arrangements.

4. It is recommended that the service ensures that controlled drugs and their records are well managed. This means that stock should be checked on administration and on a regular basis.

National Care Standards, Care Homes for Older People, Standard 15 - Keeping Well - medication.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Inspection and grading history

Date	Type	Gradings	
11 Jan 2017	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
21 Oct 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
11 Feb 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
18 Mar 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
27 May 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	4 - Good
18 Sep 2012	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	4 - Good
8 May 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	3 - Adequate

Date	Type	Gradings	
15 Feb 2012	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate Not assessed 3 - Adequate
23 Aug 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
10 Dec 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
5 Aug 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
4 Mar 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good Not assessed
3 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 5 - Very good 5 - Very good
13 Feb 2009	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed 4 - Good Not assessed 3 - Adequate
6 Aug 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 3 - Adequate

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Inspection of Midlothian Council Newbyres Village Care Home

Report by Allister Short, Joint Director, Health and Social Care

1   Purpose of Report

This report provides an overview of the recent Care Inspection report on Newbyres Care Village inspection.

2   Background

2.1   Midlothian Health and Social Care Partnership's care home facility - Newbyres was inspected in March 2019 by the Care Inspectorate as a registered care home for people aged over 65. The report was published on 23/04/19 and is in the process of being distributed to all Elected Members of the Cabinet for their information. The inspection format was undertaken under the new Care Inspectorate Heath and Social Care standards for care homes.
It covered the following themes:-

- How well do we support people's wellbeing?
- How good is our staffing?
- How well is our care and support planned?

Newbyres provides a care home service to enable people who require significant care and support to live in a homely environment being supported to maximise their independence to maintain their health and wellbeing. There is a high demand for the care home and the waiting list is currently closed due to the large number of people waiting for a place as it continues to be a very popular care home in Midlothian.

2.2   Following the inspection, a report was published that details findings and outlines any areas for improvement and/or requirements for improvement. An action plan, with a specified timescale was developed to address identified areas for improvement. This action plan has been implemented to track and monitor progress, and identify that timescales are being met. There were no previous recommendations or requirements however there were two areas for improvement despite receiving high grades in these areas.

The areas for improvement are:-

- Ensuring there are sufficient staff covering all areas of the care home when staff are taking their break. Although it is noted the staffing levels are sufficient for the home consideration needs to be given to managing staff breaks more effectively.

- Formal 6 monthly reviews of care support plans. It was acknowledged that there are monthly updates to care plans and regular monitoring but there needs to be a more formal process to this.

Both these areas for improvement have already been addressed with formal care plan reviews in place; along with a staff break plan developed.

2.3.1   The inspection report grades the areas of inspection from 1 (Unsatisfactory), to 6 (Excellent). This inspection report graded the three areas as follows:

- How well do we support people's wellbeing? 5 Very good
- How good is our staffing? 4 Good
- How well is our care and support planned? 5 Very good

3 Conclusion

The Care Inspectorate outlined at the beginning that feedback from the residents he spoke to was very positive stating:-

"All of the residents we spoke with praised the quality of their care and the staff team. They described the staff as very professional and spent time getting to know them well. They told us how much they enjoyed their homely environment and had a good quality of life in their home and the wider community through the activities they were involved in and how much they liked where they stayed".

This demonstrates that residents in Newbyres do receive a very good service and the remainder of the inspection report also highlights the positive feedback from residents' families along with the positive assessment of the management of the home.

4 Report Implications

4.1 Resource

There are no financial and human resource implications associated with this report.

4.2 Risk

The Care Inspectorate inspects all registered services on a regular basis with announced and unannounced inspections. A report is published which informs all stakeholders about the key strengths of the service, areas for improvement and sets out the main points for action.

Following the publication of that report it is accessible to the public via the Care Inspectorate website, and by requesting a hard copy. It is also on display in Newbyres for staff and visitors to access and review progress.

4.3 Policy

Strategy

A Care home strategy for Midlothian 2019- 2021has been compiled that sets a vision to develop, support, provide training, guidance and feedback to all our care home in Midlothian to achieve the highest standard of care possible. With the increased number of professionals and roles to the Midlothian Care Home support team this has demonstrated already an increase to grades of other previously struggling care homes, a closer partnership working where care homes are being more open and collaborative when faced with specific challenges.

Consultation

Copies of the Inspection report will be made available to Elected Members, and staff members, and notified to families/carers and other interested parties.

Equalities

There are no apparent equalities issues.

Sustainability

The Midlothian Older People strategy 2016-2019 focuses on improving access to services and exploring opportunities to keep people safe and well in their own home and community. This has set a foundation to build the care home strategy on and drive quality and improvement on an ongoing basis.

5 Technology issues

There are no Technology issues arising from this report.

6 Recommendations

The Cabinet is asked to:

(i) Note the content of the report and progress made and forward to PRS for information.

Report Contact: Anthea Fraser
anthea.fraser@midlothian.gov.uk

Newbyres Village
Care Home Service

20 Gore Avenue
Gorebridge
EH23 4TZ

Telephone: 0131 270 5656/7

Type of inspection:
Unannounced

Completed on:
15 March 2019

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Service no:
CS2007167115

About the service

This service has been registered since May 2008.

Newbyres Village is a care home in Gorebridge, Midlothian. It is registered to provide accommodation for up to 60 older people and one bedroom is set aside to offer short breaks (respite).

The home is all on one level in five separate residential wings named "streets". There is also a wing that houses the kitchen and laundry. The home has been planned in a "village" layout with five streets, named First, Second, Third, Fourth and Fifth Street.

Each street can accommodate up to 12 residents and has a sitting/dining room, a small sitting room, small kitchen area and bathrooms and toilets. Each resident has a bedroom with en suite shower and toilet and a patio door to the gardens. The service has maximised the use of any space available and has created additional homely environments for residents including a 1960's style lounge, a sensory room and most recently a small shop. The home is within walking distance of local services such as shops, churches, the library and bus stops.

A mission statement was in place for the service:
"Health and Social Care working together to develop a professional and flexible workforce who fully understands the core values that make a service unique in delivering the highest standard of care to our residents. Together we respect each resident as an individual and feel honoured to work within their home.

We will strive to make their home welcoming, friendly, warm and safe from harm. Together we will build meaningful relationships and continue to improve and develop the service we provide."

What people told us

All of the residents we spoke with praised the quality of their care and the staff team. They described the staff as very professional and spent time getting to know them well. They told us how much they enjoyed their homely environment and had a good quality of life in their home and the wider community through the activities they were involved in and how much they liked where they stayed.

Relatives also told us of how happy they were with the quality of care provided to their loved ones. Some did feel that the staffing levels should be reviewed to ensure there was a presence from staff at all times in the lounge areas. We have commented on this further within this inspection report.

Overall, people were positive about the management of the service. We found the manager to be open and responsive, managing the home and staff in a calm manner. The manager, along with the assistant manager had a good general overview of people's care and support needs and this is important in relation to the manager having confidence that people are achieving positive outcomes.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good

How good is our leadership?	not assessed
How good is our staffing?	4 - Good
How good is our setting?	not assessed
How well is our care and support planned?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?	**5 - Very Good**

Supported people and their relatives told us that they felt the staff had good values and had been recruited well to the service to provide a positive culture within the home. This creates a warm and friendly environment for people where dignity and respect are shown. This was very much the case during our observations during the course of our inspection.

It was clear to us that good working relationships have been established and the staff knew the care and support needs of people well, due to the comprehensive personal plans and guidelines in place. Staff consistency is important to people, especially those with dementia and the service was performing well to try and achieve this as much as possible.

There was a range of activities for people to have the opportunity to become involved in and was open to relatives and friends too. This supports people to maintain positive relationships. A weekly programme was in place and people could choose what they wanted to do. Although large group activities were held daily, smaller groups and individual activities were also available. The activities team worked very well with people, exploring their interests and tailoring any activities to their individual wishes.

The model and delivery of the service allows for very responsive care to be delivered to people. In addition to the district nurses based on site, there was very good input from other health professionals including regular General Practitioner visits.

Speaking with relatives, we learnt of many good examples of how staff were quick to identify any deterioration in health and worked promptly to put appropriate measures in place and ensure good communication was maintained.

Person centred practices was embedded within the day-to-day delivery of the service and included activity planning, food tasting for menu planning and the recruitment of staff.

There were also very good quality assurance systems in place which included observations of practice and checking that health-related documentation was completed well and kept up to date. This is important as it allowed for the manager to monitor the performance of the service in meeting people's wellbeing, identify any issues and address them in a timely manner.

When we looked at the medication records, we did identify some gaps with staff not always recording when they had administered them to people. This was not to say that they did not, and steps have been introduced to avoid staff being distracted by others whilst performing their duties. However, records must be completed, and the manager was addressing this with staff in line with their relevant policies. This also applied to staff supporting people to maintain good oral care.

Overall, we assessed the service as performing at a very good level to meet the wellbeing of people and their desired outcomes with using the service.

How good is our leadership?

This key question was not assessed.

How good is our staff team?   4 - Good

Staff performed well together, and morale was positive. They felt supported by their colleagues and had confidence in the management of the service. Some staff did tell us that they would like a greater management presence in the streets of the home and we fed this back to the manager.

Relatives told us that they would value a management presence at weekends, and we learnt that the service was recruiting an additional assistant manager to address this. It is important as relatives often visited people over the weekend and having a manager at these times will further enhance the communication between the service and families.

We carried out observations of practice and on occasion, there were no staff visually seen in the lounge areas of the home due to them meeting the personal care needs of individuals. Some of the relatives we spoke with also voiced their concern about the lack of staff at times.

The health and care needs of people varied; however, many were at risk of falling and some can present challenging behaviour. Therefore, there is a degree of enhanced risk to people when staff were not always available.

Although the service had correctly assessed the required staffing levels based on people's needs using a recognised dependency tool, the assessment is only based on the primary care for people and not the additional duties including administering medication, keeping records up to date and mealtime assistance. The provider should therefore review their staffing levels to ensure they are correct to fully meet the needs of people and deployed appropriately. (Please see area for improvement 1).

Areas for improvement

1. The provider should ensure that resident's needs are fully met by having the right number of people to care for them. This includes the assessment of staffing to undertake duties in addition to direct care. For example; administering medication and updating support plans.

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "My needs are met by the right number of people." (HSCS 3.15).

How good is our setting?

This key question was not assessed.

How well is our care and support planned?   5 - Very Good

Personal plans should give clear direction about how to meet the care and support needs of people as well as details of their personal interests and preferences. The care related documentation we sampled was found to be of a high standard. It was evident that supported people, their relatives and health professionals were actively involved in the assessment of needs and developing a personal plan. The care planning reflected the culture of promoting independence and choice as much as possible.

Although personal plans were kept up to date and reflected the care being delivered, there was a lack of formal reviews being held with supported people, their relatives and others as appropriate. It is important as reflected in the Health and Social Care Standards that people are fully involved in developing and reviewing their personal plan and reflecting on how well the service is meeting their individual wishes and outcomes. Please see area for improvement 2).

Areas for improvement

1. The provider should review people's care and support needs with them on a six-monthly basis, or as and when required or changes occur. This ensures people receive the correct level of care and the right time.

This is to ensure the care and support is consistent with the Health and Social Care Standards which state: "I am fully involved in developing and reviewing my personal plan in a way which is always available to me." (HSCS 2.17).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good

1.3 People's health benefits from their care and support	5 - Very Good

How good is our staff team?	**4 - Good**
3.3 Staffing levels and mix meet people's needs, with staff working well together	4 - Good

How well is our care and support planned?	**5 - Very Good**
5.1 Assessment and care planning reflects people's planning needs and wishes	5 - Very Good

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Pupil Equity Fund

Report by Maria Lloyd, Acting Head of Education

1.   Purpose of the Report

The purpose of this report is to present the Pupil Equity Fund allocation for Midlothian schools from the Scottish Government. The total allocation for Midlothian schools is £2,253,240 which is slightly higher than last year's total of £2,244,000.

Pupil Equity Funding is additional funding from the Scottish Government's £750 million Attainment Scotland Fund, allocated directly to schools and targeted at closing the poverty related attainment gap. This funding is to be spent at the discretion of Head Teachers working in partnership with each other and their local authority. In 2018/19, Scotland's schools received a share of over £122 million, which has been maintained this session.

The Pupil Equity Funding school level allocations for 2019/20 have been published and are attached as appendix 1 in this report.

Every council area is benefitting from Pupil Equity Funding and over 96% of schools in Scotland have been allocated funding. The 2019/20 funding allocation has been calculated using the most recently available Healthy Living Survey and Pupil Census data and is based on:

- The estimated number of P1-P3 pupils who would be registered for free school meals using the national eligibility criteria. This will be done by taking the proportion of pupils registered for free school meals in primary schools in 2014 and then applying those to the 2018 school rolls for P1 to P3.

- The estimated number of P4-P7 and S1-3 pupils who are registered for free school meals.

- The estimated number of special school pupils in the P1-S3 age range registered for free school meals.

Publicly funded primary, secondary and special schools will receive £1,200 in 2019/20 for each child in Primary 1 to S3, or equivalent, who is registered for free school meals under national eligibility criteria.

The approach to estimating free school meal registrations will be kept under review as the Government seeks to improve the quality of data for identifying children living in households affected by poverty.

Funding for 2019/20 will be paid by the Government to local authorities by means of a ring-fenced grant which will clearly indicate the amounts that

should be allocated directly to each school. Local authorities will confirm arrangements for draw down at school level.

Last year the Government used a "smoothing mechanism" to ensure that schools did not receive less than 90% of their allocation in 2017/18. If schools did receive less than 90% of their previous allocation then their new allocation was "topped up" to 90% of the previous year.

This year there will also be a "smoothing mechanism". This year the mechanism will ensure the new allocation does not fall below 90% of last year's allocation before it was topped up in 2018/19. This means the mechanism will "top up" the new allocation to 90% of the previous year's before the smoothing mechanism. Smoothing this way ensures that the funding levels more accurately reflect existing school roll and deprivation levels, but may mean that a small number of schools see a more than 10% reduction.

5 Midlothian schools have been topped up this session using this mechanism. 15 schools are receiving a lower level of funding than last session – this could be a result of less pupils being entitled to free school meals, less pupils being registered by parents/carers for free school meals or due to an anomaly in P1-P3 figures.

Updated National Operational Guidance has been published to help schools plan how they will most effectively invest their Pupil Equity Funding allocation to improve the educational outcomes of children affected by poverty.

2.   Background

The school level allocations for the Pupil Equity Fund were announced by the Scottish Government In February 2019. A copy of the Scottish Government press release, along with this year's allocations can be found at the following link:

www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund.

As with last year, in some cases, due to potentially disclosive information, the allocations on the published spreadsheet are redacted with a '*'. In addition, school level allocations in Scotland can be found at the following link:

http://www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund/Schoolallocations

In Midlothian we welcome the commitment to a relentless focus on closing the attainment gap. The Single Midlothian Plan is committed to reducing inequalities. In the Education service, we are using the 4 National Priorities from the National Improvement Framework as our key drivers for improvement. Priority 2 is 'Closing the Poverty Related Attainment Gap between the Most and Least Disadvantaged Children'. We continue to build on our ambition to create a world-class education system through equity and excellence, and we are relentless in our focus to interrupt the cycle of poverty at the same time as improving attainment overall.

2.1   Effective Use of Pupil Equity Funding

As per the National Guidance, Head Teachers are accountable to the local authority for the use of their allocated funding and will be expected to incorporate details of Pupil Equity Funding into their existing reporting processes in their annual SQIPs (Standards and Quality Improvement Plans) and to their Parent Councils. PEF Plans will be readily available on individual school websites.

Schools made very effective use of Pupil Equity Funding last session, planning appropriate and innovative targeted interventions, detailed in the Cabinet Report of October 2018. For those learners living in SIMD 1 and 2 in P1, P4, P7 and S3, all measures increased from the previous session with the exception of P7 Listening and Talking which decreased by 4%.

3.   Report Implications

3.1   Resource
The Pupil Equity Fund allocation for Midlothian schools totals £2,253,240. A copy of the school level allocations is included in Appendix 1.

The Education Service has issued the detailed national guidance to schools in order to support schools to use their Pupil Equity Funding to best effect, identifying their 'gap' effectively and planning appropriate targeted interventions. This guidance continues to promote the following core principles:

- Head Teachers must have access to the full amount of the allocated Pupil Equity Funding.
- The Pupil Equity Funding must enable schools to deliver activities, interventions or resources which are clearly additional to those which were already planned.
- Head Teachers should work in partnership with each other, and their local authority, to agree the use of the funding. Schools must take account of the statutory responsibilities of the authority to deliver educational improvement, secure best value, and the authority's role as employer. Additional guidance from Finance and Procurement is available.
- The operation of Pupil Equity Funding should articulate as closely to existing planning and reporting procedures as possible – e.g. through School Improvement Planning and Standards and Quality Reports
- Parents and carers, children and young people and other key stakeholders should be involved in the planning process.
- Funding must provide targeted support for children and young people affected by poverty to achieve their full potential. Although Pupil Equity Funding is allocated on the basis of free school meal eligibility, Head Teachers can use their professional judgement to bring additional children in to the targeted interventions.
- Head Teachers must base their use of the funding on a clear contextual analysis which identifies the poverty related attainment gap in their schools and plans must be grounded in evidence of what is known to be effective at raising attainment for children affected by poverty.

- Schools must have plans in place at the outset to evaluate the impact of the funding.

A copy of the latest national guidance can be found in Appendix 2.

The Head of Education will also ensure that the Pupil Equity Fund is reported on quarterly as part of the Education Service quarterly reporting. In addition, the impact of the Pupil Equity Fund will also be reported in the attainment report which is presented to Council in April each year.

3.2 Risk

We continue to welcome the relentless focus on closing the attainment gap in Education but we recognise that this requires a total Midlothian approach. Therefore we continue to recognise the critical role that other services, including the Community Planning Partnerships and the third sector, play in supporting education to interrupt the cycle of poverty. Schools will continue to plan *in school* and *out of school* interventions across the three themes of learning and teaching; communities and families and leadership. In addition schools must have plans in place at the outset to evaluate the impact of the funding. The following 5 key indicators will be used in order to evaluate impact: attendance, exclusions, literacy, numeracy, health and well-being, attainment measures across the broad general education, engagement and participation

3.3 Single Midlothian Plan and Business Transformation

The ambition of the Pupil Equity Fund is already clearly embedded in the Single Midlothian Plan – reducing inequalities. Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
☒ Getting it right for every Midlothian child
☒ Improving opportunities in Midlothian
☐ Sustainable growth
☐ Business transformation and Best Value
☐ None of the above

3.4 Key Priorities within the Single Midlothian Plan

GIRFEC 5: Our people will be successful learners, confident individuals, effective contributors and responsible citizens.

3.5 Impact on Performance and Outcomes

To close the gap by improving 'attainment versus deprivation' and 'attainment for all' outcomes for children and young people.

3.6 Adopting a Preventative Approach

This report aims to take preventative action in order to interrupt the cycle of poverty by closing the attainment versus deprivation gap and implementing key programmes and interventions which are designed to target support to children and young people from disadvantaged communities.

3.7 Involving Communities and Other Stakeholders

Schools, as part of their planning cycle, will involve communities and stakeholders.

3.8 Ensuring Equalities

The recommendations in this report should continue to promote equity of attainment for disadvantaged children and support the steps being taken towards narrowing the attainment gap by imposing duties on education authorities and the Scottish Ministers in relation to reducing pupils' inequalities of educational outcome together with a duty to report on progress.

3.9 Supporting Sustainable Development

There are no impacts arising directly from this report.

3.10 IT Issues

The national guidance contains further advice on IT stating that: Pupil Equity Funding can be used to procure digital technologies, including hardware and software, when its allocation and use is particularly focused on supporting children and young people affected by poverty to achieve their full potential. The Scottish Government provides access to a range of national procurement frameworks for the purchase of digital technology products and devices, including a range of desktops, laptops and tablets. The frameworks offer a direct route to market and significant savings against RRP.

To prevent issues arising with compatibility and connectivity, schools seeking to purchase digital technology should do so in close consultation with the IT Department at their local authority.

4 Recommendations

Cabinet is requested:

- to note the Pupil Equity Fund allocation for Midlothian for Session 2019/20.
- to note that, as stated in the national guidance, the Head Teacher will be accountable to their local authority for the use of Pupil Equity Funding within their school. To ensure transparency, schools will be expected to incorporate details of their Pupil Equity Funding plans into existing reporting processes to their Parent Council and Forum, including in their School Improvement Plans and Standards and Quality Reports. These reports should be publicly available so that parents can understand what is happening in their school. These will form part of the schools standard and quality report
- to note that ongoing progress will be reported through the quarterly reporting cycle and the attainment report to Council in November each year
- to note that PEF underspend was reported to Scottish Government in September 2018 and this will form a yearly report while schools are in receipt of PEF.

30 April 2019

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Supporting Papers for on-going reviews in Scottish Education:

The school level allocations for the Pupil Equity fund were announced by the Scottish Government on 29 January 2018: www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund.

Operational Guidance from Scottish Government: www.gov.scot/Topics/Education/Schools/Raisingeducationalattainment/pupilequityfund.

Education (Scotland) Act 2016: http://www.legislation.gov.uk/asp/2016/8/pdfs/asp_20160008_en.pdf

Appendix 1
Midlothian Pupil Equity Funding
School Level Allocations 2019/20

School	Allocation Based on estimated FSM pupils 1920	Top-up	Total Allocation including Top-up 19/20	Last Year's Allocation 18/19
Bilston Primary School	£ 15,600	£ -	£ 15,600	£ 15,600
Bonnyrigg Primary School	£ 36,000	£ -	£ 36,000	£ 33,600
Burnbrae Primary School	£ 117,600	£ -	£ 117,600	£ 124,800
Cornbank St James Primary School	£ 10,800	£ -	£ 10,800	£ 9,600
Cuiken Primary School	£ 52,800	£ -	£ 52,800	£ 51,600
Danderhall Primary School	£ 55,200	£ -	£ 55,200	£ 54,000
Glencorse Primary School	£ 1,200	£ 6,360	£ 7,560	£ 8,400
Gore Glen Primary School	£ 14,400	£12,600	£ 27,000	£ 30,000
Gorebridge Primary School	£ 86,400	£ 4,320	£ 90,720	£ 100,800
Hawthornden Primary School	£ 96,000	£ -	£ 96,000	£ 100,800
King's Park Primary School	£ 67,200	£ -	£ 67,200	£ 67,200
Lasswade Primary School	£ 38,400	£ -	£ 38,400	£ 39,600
Lawfield Primary School	£ 127,200	£ -	£ 127,200	£ 139,200
Loanhead Primary School	£ 22,800	£ -	£ 22,800	£ 21,600
Mauricewood Primary School	£ 27,600	£ -	£ 27,600	£ 28,800
Mayfield Primary School	£ 109,200	£ -	£ 109,200	£ 98,400
Moorfoot Primary School	£ 12,000	£ 960	£ 12,960	£ 14,400
Newtongrange Primary School	£ 94,800	£ -	£ 94,800	£ 97,200
Paradykes Primary School	£ 64,800	£ -	£ 64,800	£ 69,600
Rosewell Primary School	£ 9,600	£ -	£ 9,600	£ 9,600
Roslin Primary School	£ 30,000	£ -	£ 30,000	£ 28,800
Sacred Heart Primary School	£ 14,400	£ -	£ 14,400	£ 15,600

	£		£	£
St Andrew's Primary School	42,000	£ -	42,000	42,000
	£		£	£
St David's Primary School	73,200	£ -	73,200	80,400
	£		£	£
St Luke's Primary School	58,800	£ 600	59,400	66,000
	£		£	£
St Margaret's Primary School	13,200	£ -	13,200	14,400
	£		£	£
St Mary's Primary School	31,200	£ -	31,200	31,200
	£		£	£
St Matthew's Primary School	16,800	£ -	16,800	14,400
	£		£	£
Stobhill Primary School	82,800	£ -	82,800	80,400
	£		£	£
Strathesk Primary School	114,000	£ -	114,000	114,000
	£		£	£
Tynewater Primary School	24,000	£ -	24,000	24,000
	£		£	£
Woodburn Primary School	163,200	£ -	163,200	144,000
Beeslack Community High School	£ 36,000	£ -	£ 36,000	£ 30,000
	£		£	£
Dalkeith High School	79,200	£ -	79,200	72,000
	£		£	£
Lasswade High School	106,800	£ -	106,800	116,400
	£		£	£
Newbattle High School	135,600	£ -	135,600	115,200
	£		£	£
Penicuik High School	38,400	£ -	38,400	42,000
	£		£	£
St David's RC High School	74,400	£ -	74,400	63,600
	£		£	£
Saltersgate	34,800	£ -	34,800	34,800

Pupil Equity Funding – National Operational Guidance - 2019[1]

What is it?

Pupil Equity Funding is additional funding allocated directly to schools and targeted at closing the poverty-related attainment gap. The Scottish Government has committed to this funding as part of the Scottish Attainment Challenge programme from 2017/18. The Pupil Equity Funding forms part of the £750m Attainment Scotland Fund which will be invested over the current Parliamentary term. Pupil Equity Funding will continue until the end of this Parliament.

This national guidance is intended to help schools plan how they will most effectively invest their Pupil Equity Funding allocation to improve the educational outcomes of children affected by poverty. Local authorities may issue complementary guidance about how the funding will operate locally.

Key Principles

- Headteachers must have access to the full amount of the allocated Pupil Equity Funding.

- Pupil Equity Funding must enable schools to deliver activities, interventions or resources which are clearly additional to those which were already planned.

- Headteachers should work in partnership with each other, and their local authority, to agree the use of the funding. Schools must take account of the statutory responsibilities of the authority to deliver educational improvement, secure Best Value, and the authority's role as employer. Local Guidance will set out more detail on how this will operate.

- The operation of the Pupil Equity Funding should articulate closely to existing planning and reporting procedures e.g. through – School Improvement Planning and Standards and Quality reports. This should provide clarity to stakeholders on how Pupil Equity Funding is being used.

- Parents and carers, children and young people and other key stakeholders should be involved in the planning process.

- Funding must provide targeted support for children and young people affected by poverty to achieve their full potential. Although the Pupil Equity Funding is allocated on the basis of free school meal eligibility, headteachers can use their professional judgement to bring additional children in to the targeted interventions and approaches.

- Headteachers must develop a clear rationale for use of the funding, based on a robust contextual analysis, including relevant data which identifies the poverty-related attainment gap in their schools and plans must be grounded in evidence of what is known to be effective at raising attainment for children affected by poverty.

- Schools must have plans in place at the outset to evaluate the impact of the funding. These plans should outline clear outcomes to be achieved and how progress towards these, and the impact on closing the poverty-related attainment gap, will be measured. If, as a result of this ongoing monitoring, the plans are not achieving the results intended, these plans should be amended.

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[1] Text additional to the 2018 National Operational Guidance is highlighted.

How much is it?

Publicly funded primary, secondary and special schools will receive £1,200 in 2019/20 for each child in Primary 1 to S3, or equivalent, who is registered for free school meals under national eligibility criteria.

How is it allocated?

Pupil Equity Funding is allocated to schools on the basis of the estimated number of children and young people in P1-S3 registered for free school meals under the national eligibility criteria.[2]

The 2019/20 funding allocation has been calculated using the most recently available Healthy Living Survey and Pupil Census data and is based on:

- The estimated number of P1-P3 pupils who would be registered for free school meals using the national eligibility criteria. This will be done by taking the proportion of pupils registered for free school meals in primary schools in 2014 and then applying those to the 2018 school rolls for P1 to P3.
- The estimated number of P4-P7 and S1-3 pupils who are registered for free school meals.
- The estimated number of special school pupils in the P1-S3 age range registered for free school meals.

The approach to estimating free school meal registrations will be kept under review as the Government seeks to improve the quality of data for identifying children living in households affected by poverty.

Funding for 2019/20 will be paid by the Government to local authorities by means of a ring-fenced grant which will clearly indicate the amounts that should be allocated directly to each school. Local authorities will confirm arrangements for draw down at school level.

How can it be used?

Although the funding is allocated to schools on the basis of free school meal eligibility, headteachers have discretion to make decisions about which children and young people would benefit most from any particular intervention or approach, with a clear focus on delivering equity. Funding should not be used in ways that stigmatises children and young people or their parents. Interventions that impact on transitions between school stages – for example between nursery and primary or between broad general education and senior phase – can also be considered.

The funding should be focused on activities and interventions that will lead to improvements in literacy, numeracy and health and wellbeing. Leadership; learning & teaching; and families and communities are useful organisers to consider when determining interventions and approaches.

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[2] https://www.gov.scot/policies/maternal-and-child-health/free-school-meals/

A framework, 'Interventions for Equity,'[3] has been developed to support the planning and implementing of interventions and approaches to meet the needs of children and young people affected by poverty in order to close the attainment gap. The examples cited act as a stimulus for wider reflection of what would suit your local context and are by no means the only interventions that should be considered. The EEF toolkit[4] is also available to support decision making.

Headteachers can work at an individual school and local community level or collegiately in wider school clusters and beyond at local authority and regional improvement collaborative level to address common interests. Interventions and approaches should be considered within the context of the school improvement planning cycle and must be targeted towards closing the poverty-related attainment gap. Where appropriate, funding should articulate with existing Scottish Attainment Challenge School and Challenge Authority improvement plans.

Headteachers will need to be familiar with local policies and procedures – such as the Local Code of Corporate Governance, Local Schemes of Delegation, the Role of the Section 95 officer, the local Devolved School Management policy and local school planning cycle – the local operational guidance which they may issue alongside this national guidance should contain more information about these local policies.

Equalities

Evidence shows that some children and young people from equalities groups can be disproportionately affected by deprivation and can therefore face significant additional barriers to learning. Education authorities have responsibilities to actively address inequality and the promotion of equity is a shared responsibility held by all staff, partners and stakeholders. In this context, headteachers should consider additional steps that might be required to close the educational attainment gap for pupils affected by poverty who may also experience disadvantage for other reasons. For example, disadvantage related to; a protected characteristic (disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex (gender) and sexual orientation); a need for which they require additional support; being looked after; or having caring responsibilities.

Care experienced children and young people have been identified as a group who could benefit from additional resources and approximately £33 million from the Attainment Scotland Fund is being made available to local authorities from 2018/19 to 2020/21. The use of this funding should be jointly agreed by the Chief Education Officer and Chief Social Work Officer and is intended to help authorities invest in approaches which improve educational outcomes for care experienced children and young people[5].

Partnerships

Parents and the local community are a valuable source of support and partnership. In many contexts, particularly in rural areas, schools may be able to achieve the best possible outcomes for children and young people by working with a range of bodies such as parent groups; parent councils; other local authority and public sector services; third sector organisations (including youth work, family learning organisations); other educational sectors; and/or centres of expertise. Understanding the needs of children and young people should help to identify appropriate areas for collaboration.

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[3] https://education.gov.scot/improvement/self-evaluation/Interventions%20for%20Equity
[4] https://education.gov.scot/improvement/Pages/EEF-Toolkit.aspx
[5] https://www.gov.scot/publications/care-experienced-children-and-young-people-fund-operational-guidance/

Participatory budgeting[6] (PB) could be an innovative and effective mechanism to engage with parents and pupils, in particular those who face barriers to participation. PB directly involves people in participating in budgeting decisions that will have a direct impact on improving their lives and it can engage people who would not normally participate with traditional forms of communication.

Staffing

Where schools identify the need to recruit additional staff for an appropriate intervention or activity, they should work closely with the Local Authority (as the employer) to ensure that the job remits and specifications are clearly tied to the aims of the intervention or approach. Headteachers need to take full account of local HR policies and procedures and that staffing costs include not just salaries but also on-costs such as pensions, sick leave, maternity cover and also potentially recruitment costs. Local guidance should provide further clear details of these costs. Any teachers recruited through Pupil Equity Funding will be excluded from the authority's contribution to any national teacher numbers and / or ratio commitment, which means it is essential to fill core staffing posts first before recruiting additional teachers.

Procurement

Purchase of resources, equipment or services must comply with existing local authority procurement procedures. This will be particularly important when buying ICT resources (see below) or, for example, services from third sector partners. Schools should liaise with their relevant local authority finance partners to ensure compliance with procurement policies and legislation.

ICT

Pupil Equity Funding can be used to procure digital technologies, including hardware and software, when its allocation and use is particularly focused on supporting children and young people affected by poverty to achieve their full potential. *The Scottish Government provides access to a range of national procurement frameworks for the purchase of digital technology products and devices, including a range of desktops, laptops and tablets. The frameworks offer a direct route to market and significant savings against RRP.

To prevent issues arising with compatibility and connectivity, schools seeking to purchase digital technology should do so in close consultation with the IT Department at their local authority.

We know that simply providing more technology does not result in improved outcomes for learners. Therefore, any deployment of technology in an educational setting should be undertaken in line with the objectives of the national Digital Learning and Teaching Strategy.[7]

Support

There is a package of national and local support available to assist schools in planning how to use their Pupil Equity Funding. This includes:

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[6] https://pbscotland.scot/

[7] www.gov.scot/Publications/2016/09/9494

- A framework[8] of evidenced and proven educational interventions and strategies to help tackle the poverty related attainment gap. The framework can be used by all partners and should help to inform the decisions schools make. The structure and content will be dynamic and will continue to evolve as an integral part of the National Improvement Hub, where a wide range of improvement, self-evaluation and research materials are available and where practice exemplars can be shared. Other research summaries and intervention examples will continue to be incorporated as these become available.

- The updated Scottish version of the Education Endowment Foundation (EEF) Learning and Teaching toolkit[9], is integrated into the National Improvement Hub. This EEF Toolkit provides an accessible summary of educational research designed to inform discussions on the most effective approaches to improving attainment, with a focus on 5-16 year olds and poverty disadvantage. It contains 35 teaching approaches and interventions, each summarised in terms of their average impact on attainment, the strength of the evidence supporting them and their cost. It is useful for education leaders and practitioners to inform decision making on the use of Pupil Equity Funding, raising attainment and improving equity. Many of the strands now include challenge questions to help support professional discussions. The toolkit is intended to be used in conjunction with the range of interventions and approaches provided through the framework above to encourage and enhance professional dialogue taking full account of the local context.

- Guidance on working with the third sector[10] is available to help support schools make the best use of funding with other partners.

- Attainment Advisors who will be able to provide advice on a local and regional basis.

- Access to collaboration and communication tools on Glow including the Scottish Attainment Challenge community, Teams, Yammer, Sharepoint, Blogs and Glow TV. These tools all ensure educators can have online discussions, ask questions, post responses, exchange ideas, access additional resource materials and share examples of practice across the Scottish Attainment Challenge, with the ability to host regular discussions and securely control visibility where required.

- Guidance on School Improvement Planning, including Standards and Quality reporting through the National Improvement Framework.[11]

Local authorities will also offer their own packages of support for schools to help them plan how to use the funding effectively.

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[8] https://education.gov.scot/improvement/self-evaluation/Interventions%20for%20Equity
[9] https://education.gov.scot/improvement/Pages/EEF-Toolkit.aspx
[10] https://education.gov.scot/improvement/self-evaluation/Scottish%20Attainment%20Challenge%20and%20partnerships%20with%20the%20Third%20Sector
[11] https://education.gov.scot/improvement/self-evaluation/National%20Improvement%20Framework:%20Improvement%20planning%20and%20reporting%20poster and https://education.gov.scot/improvement/practice-exemplars/nifschoolimprovement

Outcomes, impact and measurement

At a school level, it is essential that headteachers continue to make best use of the data they have access to locally to understand which children and young people would benefit from targeted support and to monitor and track learners' progress over time. Schools should articulate clearly defined outcomes to enable progress and impact to be measured. Where appropriate, consideration should be given to defining short, medium and long term outcomes to enable progress to be measured over time and to ensure that plans are resulting in improvements. Improving nationally the confidence and accuracy of teacher professional judgement of achievement of Curriculum for Excellence levels is a key factor in measuring progress. Further guidance on assessment can be found in the Key messages[12] for schools and the Benchmarks[13] issued in 2017. Progress towards closing the attainment gap will continue to be reported in the annual national and local National Improvement Framework evidence reports.

Accountability and reporting

The headteacher will be accountable to their local authority for the use of Pupil Equity Funding within their school. To ensure transparency, schools will be expected to incorporate details of their Pupil Equity Funding plans into existing reporting processes to their Parent Council and Forum, including in their annual School Improvement Plans and Standards and Quality Reports. These plans and reports should be made publicly available so that parents can understand what is happening in their school. The arrangements for publication will be confirmed by your local authority.

School inspection and other review processes include a focus on how well schools use their Pupil Equity Funding. *How Good Is Our School? 4*[14] includes a quality indicator to support self-evaluation of the school's success in raising attainment and achievement and ways in which they can demonstrate improvements to equity for all learners. This aspect is evaluated, using the six point scale during school inspections. In addition, the operation, use and effectiveness of the Pupil Equity Funding at closing the poverty-related attainment gap at a local authority level will feed into other existing quality assurance processes, such as Audit Scotland's Shared Risk Assessment.

Unspent funds

Where schools are unable to spend their full allocation during the financial year, any underspent funds can be carried forward to the new financial year. We would expect that, other than in exceptional circumstances, it should be spent within the current academic year. Schools should liaise closely with their authority to agree arrangements for carrying forward the funding into the new financial year (and, in exceptional circumstances, into the new academic year). Pupil Equity Funding should be considered separately from other funding within the devolved school management budget.

Scottish Government
February 2019

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[12] https://education.gov.scot/improvement/self-evaluation/Key%20messages%20for%20schools%20from%20HM%20Chief%20Inspector%20of%20Education:%20August%202017

[13] https://education.gov.scot/improvement/learning-resources/Curriculum%20for%20Excellence%20Benchmarks

[14] https://education.gov.scot/improvement/self-evaluation/HGIOS4

Annual Complaint Handling Report 2017/18 and SPSO Annual Statistics pertaining to Midlothian Council cases handled in 2017-18

Report by Dr Grace Vickers, Chief Executive

1   Purpose of Report

The main outcome of the report is to provide Cabinet, and the ensuing PRS Committee with the Annual Complaint Handling Report for 2017/18 (appendix 1). The report was recently published on Midlothian Council's website following endorsement by CMT at the meeting of 27 March 2019.

This is the third report of its kind, and it provides an annual review and assessment of complaints information which includes some useful customer feedback material and an analysis of what the results could suggest. As a result of its publication, customers and staff alike are provided with:

- Evidence of how the council values complaints - by sharing the information whilst appropriately comparing the data to other local authorities and the Scottish averages;
- Essential information relating to the complaints procedure and outcomes;
- Knowledge about the importance of managing the process;
- A modest segment that relates to customer insight information based solely on the data;
- A summary of the compliments that the council receives in addition to complaints;
- Case studies that highlight how the council has learned and improved;

The report also provides an update of statistics shared with us by the Scottish Public Services Ombudsman (SPSO) about how they have handled complaint cases by Midlothian customers, and which services were being complained about to them. Outcome decisions to cases are published on the SPSO's website.

For ease, there is a summary of this data within the Annual Complaint Handling Report (pages 26/27), and all the data in its original format is provided in appendix 2.

2   Background

2.1   The model Complaint Handling Procedure (CHP) was developed for public services in line with the recommendations of the Sinclair report (http://www.gov.scot) which tasked the Scottish Public Services Ombudsman (SPSO) to simplify and improve complaints handling by developing a standardised CHP. This was arranged within the framework of the SPSO Statement of Complaint Handling Principles, which is approved by the Scottish Parliament, and Guidance on a Model Complaints Handling Procedure.

The emphasis in the CHP is on quicker and simpler complaints handling with local, early resolution by empowered and well trained staff. The aim is to help bodies 'get it right first time' with a focus on resolving complaints at the frontline wherever possible. There is also an emphasis on valuing complaints – recording all complaints, reporting key information and using the lessons learned to improve service delivery.

The aim of standardising and streamlining CHPs has been at the core of this work, so all public service model CHPs are closely aligned. The key elements of each model CHP will be the same for all sectors, including:

- A shared definition of what is and what is not a complaint
- A two stage process where complaints are resolved as close to the frontline as possible
- Frontline resolution of complaints within five working days
- An investigation stage of 20 working days, which provides the organisation's final decision
- Recording of all complaints
- Active learning from complaints through reporting and publicising complaints information.

2.2   Annual Complaint Handling Report

In line with the local intelligence tool that the Local Government Benchmarking Framework (LGBF) applies and reports on, value is also added to the complaints report using the comparative element. There is an established benchmarking sub-group for complaints, a group composed of members from the mainstream Local Authority Complaint Handlers Network group (LACHN). The complaints statistics are therefore likened to previous years', as well as to the Scottish average and the family group average.

A focal point of the document is the information provided under the heading 'Annual Complaints Handled by the Scottish Public Services Ombudsman (SPSO)'. This section provides a summary of the information about cases that were handled directly by the SPSO. It is useful to know how many of Midlothian's customers have approached the SPSO, and how their queries have been processed.

Report Implications

3.1   Resource

The requirement to complete and publish an Annual Complaints Handling Report sits within the current Customer Service Improvement Officer role however, CMT are asked to note that developing the complaints function to ensure a 'fit for purpose' and sustainable framework will require support from managers and services as part of the ongoing performance management and improvement agenda.

The developing complaints agenda will also be subject to ongoing review in terms of the focus and responsibilities of the current Customer Service Improvement Officer role to ensure that the role and outcomes continue to meet the ongoing needs of the Council in relation to complaint handling and reporting.

3.2   Risk

Failure to meet the statutory requirements as they relate to complaint handling and SPSO reporting presents a risk. Publishing this document seeks to mitigate the risk and illustrates how feedback information provided by the council's customers is valued.

3.3   Single Midlothian Plan and Business Transformation

Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
☐ Getting it right for every Midlothian child
☐ Improving opportunities in Midlothian
☐ Sustainable growth
☒ Business transformation and Best Value
☐ None of the above

3.4   Key Priorities within the Single Midlothian Plan

This report does not relate directly to the key priorities within the Single Midlothian Plan; however the proposed action supports the ongoing improvement agenda across a number of the thematic areas.

3.5   Impact on Performance and Outcomes

The annual report and review of the complaints framework will provide a number of benefits that includes an enhanced understanding of the complaint handling process, clarity about the indicators, and statistical data that is intelligible along with some analysis and discussion about what the results could mean. It will compliment what is already reported and published, but the rationale for the new document is that the format is more accessible and clearer. The main benefit is that our obligation to report on the improvements/remedial action that we have made as a result of the feedback we receive, and how we have learned from complaints is detailed within the document.

3.6   Adopting a Preventative Approach
The Council is proactively responding to improvement opportunities noted as part of the complaints process.

3.7   Involving Communities and Other Stakeholders
The Council is using the evidence from complaints as another form of customer feedback to assist in its delivery of services and processes within the divisions.

3.8   Ensuring Equalities
Whilst not directly impacting on equalities, information is provided about the opportunity to reformat the document into a legible format or language to accommodate additional needs or those whose first language is not English. This is in line with the Equalities Act 2010.

3.9   Supporting Sustainable Development
There are no sustainability issues with regard to this report.

3.10   IT Issues
Future development work will be informed by the proposed provision of a new CRM system

4   Recommendations

Cabinet and PRS are asked to;

I)   Note the recent publication of the Annual Complaint Handling Report provided in appendix 1.
II)   Note the statistics pertaining to Midlothian Council provided to us by the SPSO.

Date   March 2019

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Background Papers:

Appendix 1

Annual Complaints Report inc SPSO Summary Data 1617 V2

Appendix 2

Statistics pertaining to complaints about Midlothian Council that the SPSO looked at during 2017/18.

Annual Complaint Handling Report

2017/18

Midlothian

Midlothian

Welcome to Midlothian Council's Annual Complaint Handling Report 2017/18

We have provided compliments in this report

We upheld

3832 (74%)

of complaints

We handled **5202** complaints in **2017/18** and closed

5175 complaints

We recorded

103,528

customer interactions through our Contact Centre

We are replacing our online system to improve the way we deal with customers and handle complaints

Foreword

Midlothian Council has a duty to respond to the people it serves, and an integral part of that duty includes responding positively to complaints.

This report presents Midlothian Council's second Annual Complaint Handling report in this format. The report provides a comprehensive analysis of complaints statistics, and evaluates the data recorded for the performance cycle between 1 April 2017 and 31 March 2018.

The material within the report is mostly centred on the 8 statutory key performance indicators that all Scottish local authorities are required to report on, and the data reflects the detail of the performance information about complaints that is measured and discussed by the council's senior management on a quarterly basis before being published.

Although it is disappointing to convey that Midlothian Council's services occasionally fall below the expected standard, it is encouraging to recognise that issues are captured, reviewed and where applicable, improvements are implemented so that services are continually being refined as a direct result of the information provided by the residents of Midlothian Council.

The report also takes account of other additional, interesting feedback data that contributes towards the council's determination to value its customers in the most efficient way, also using this information to learn, to plan and to monitor change/outcomes and thereby inspiring council services to constantly evolve.

Accordingly, Midlothian takes its commitment to the duties required by the Scottish Public Services Ombudsman (SPSO) very seriously and this year, comparative information that relates to similar Scottish local authorities, as well as the Scottish averages is provided for Benchmarking purposes.

Dr Grace Vickers, Chief Executive

Dr Grace Vickers
Chief Executive

Background

Complaints are crucial in identifying areas or processes that are not working for customers. Reporting complaints data is a national objective that is monitored by Audit Scotland in conjunction with the Scottish Public Services Ombudsman (SPSO), and it is in line with Best Value arrangements.

The Complaint Handling Procedure (CHP) specifies how Midlothian Council handles complaints. The 8 key indicators, developed by the Scottish Public Services Ombudsman (SPSO) along with other public sector experts, are reported on a quarterly cycle.

The CHP has thus far:

• Introduced a uniform two stage procedure for dealing with complaints, with timescales for each stage;

• Encouraged the use of early resolution methods wherever feasible;

• Allocated responsibility for complaint handling in organisations;

• Included requirements for recording complaints and publishing complaint data and for:

    • Reporting on complaint performance;

    • Provided a definition of 'complaint'; and

    • Encouraged learning from complaints.

Complaint information is also used in the shared risk assessments of local authorities that Audit Scotland conducts with other regulators such as Education Scotland. It helps to build up an overall picture of particular services within the local authority.

Midlothian Council defines a complaint per the SPSO's recommended description as follows:-

 'An expression of dissatisfaction by one or more members of the public about Midlothian Council's action or lack of action, or about the standard of service provided by or on Midlothian Council's behalf.'

The information provided in this report is generated from the records that staff have input into the established complaints system - the Customer Relationship Management (CRM) system. The report is presented in a way that provides insight about what the figures may suggest.

Illustrated within the report, is comparative data to Midlothian Council's indicator figures from last year, along with benchmarking information that measures Midlothian Council's complaints information to similarly likened local authorities known as a Family Group[1]. Additionally, comparisons to the Scottish average complaints statistics are delivered.

The new Social Work Model Complaints Handling Procedure was implemented on 1 April 2017 and the data in the report includes Social Work complaints. However, a separate document highlighting specific information about Social Work Complaints can be found at **https://www.midlothian.gov.uk/**

[1] Councils are arranged in 'Family Groups', as agreed by Local Authority Officers in association with the Improvement Service, so that councils that are similar in terms of the type of population that they serve (e.g. relative deprivation and affluence) and the type of area in which they serve them (e.g. urban, semi-rural, rural) can be compared. The point of comparing like with like is that this is more likely to lead to useful learning, sharing good practice, and working together to improve services. Midlothian Council's Family Group includes Angus; Clackmannanshire; East Renfrewshire; Inverclyde; Renfrewshire; South Lanarkshire and West Lothian.

Complaints Handling Procedure

Figure 1 illustrates a summary flow chart of the complaints procedure, which is used for the corporate Complaints Handling Procedure.

FIGURE 1: Complaints Handling Procedure

A customer may complain in person, by phone, by email or in writing.

The FIRST CONSIDERATION is whether the complaint should be dealt with at stage 1 (frontline resolution) or stage 2 (investigation) of the complaints handling procedure

1

STAGE 1 FRONTLINE

Always try to resolve the complaint quickly and to the customer's satisfaction.

Provide a decision within five working days unless there are exceptional circumstances.

Is the customer satisfied with the decision?

YES

Complaint closed and outcome provided.

NO

2

STAGE 2 FRONTLINE

Investigate if the customer remains dissatisfied after the decision at stage 1 OR investigate if it is clear that the complaint is particularly complex or will require detailed investigation

Send Acknowledegement within 3 working days and provide the decision as soon as possible but within 20 working days.

Communicate the decision, normally in writing. Advise the customer about the SPSO and time limits.

Complaint closed and outcome provided

Monthly and/or quarterly

ENSURE ALL complaints are recorded

REPORT performance, analyse outcomes

MAKE changes to service delivery where appropriate

PUBLICISE complaints performance externally

CHP Development Actions - What's Happened During 2017/18

The first Annual Complaint Handling Report for 2016/17 was published.

- Presentation given to all Midlothian School Headteachers about Complaint Handling Procedure (CHP) and how the data can be utilised in the most efficient way to ensure learning and improvement within schools.

- Presentation on CHP provided to all Lifelong Learning and Employability staff, followed by CRM system training on how to identify and log a complaint.

- CRM system training on complaint logging took place which also included complaints procedural information to Contact Centre staff.

- Internal audit of the CHP. Actions thereof presented useful training/review opportunities.

- Special complaints report presented to Corporate Management Team (CMT) that included unique comparisons and data analysis for each Directorate.

- Improvements to quarterly complaints reporting process.

- Development work to CRM to correct timeline inaccuracies that became apparent as a result of national benchmarking data.

- Indicator wording on performance reporting system, Pentana reviewed and changed to reflect full meaning to ensure accuracy and enhance understanding.

- Better use of benchmarking and/or Scottish complaint average information to drive service improvement and best practice.

- Continuing visibility with the Local Authority Complaint Handler's Network Group (LACHN), and ensuring related items are carried out and/or passed on to relevant Heads or Officers following attendance.

Complaints Received and Channel Used 2017/18

The number of complaints that are logged on the Customer Relationship Management (CRM) system are proportionately very little when compared to the overall number of recorded dealings.

With a total of 103,528 interactions on CRM, only 5202 were complaints. This equates to just under 5%.

Figure 2 illustrates the difference in complaints received in relation to the total amount of interactions received by the CRM system.

FIGURE 2: Total CRM interactions relative to complaints

2017/18 Complaints 5%

Total CRM Interactions 95%
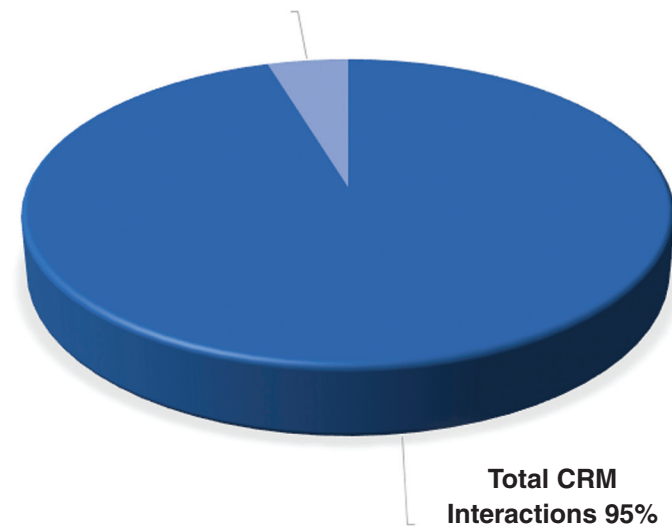
TABLE 1: Methods of contact used to report a complaint reflected as a percentage of the total complaints for the corresponding year

	2016/17	2017/18
Online	17%	21%
In Person	1%	1%
Telephone	81%	78%
Letter	0.6%	0.3%
Feedback Form	0.8%	0.3%
Total Complaints	**5936**	**5202**

↑ 4%

↓ 3%

Table 1 is a reflection of the channel used by customers to make a complaint, and the percentage of the total number of complaints per year, to the corresponding channel. It can be seen that telephone contact is the preferred method of approach, followed by online.

Interestingly, the amount of telephone calls relative to the total number of complaints for years 2016/17 and 2017/18, have reduced, and although it is not a considerable amount at 3%, it is noteworthy since the percentage of online complaint interactions has increased by 4%.

This could be a result of the continual work to improve the user-friendliness of the council website, and is evidence that channel-shift work is moving in the desired direction. It will be interesting to see if further planned work to enhance web-form accessibility will amplify the trend.

Midlothian

Statutory Performance Indicators

Midlothian Council assesses complaints handling performance to provide assurance in relation to their performance, to facilitate continuous improvement and to assist in benchmarking performance between local authorities.

Key Indicator

① **Indicator 1** - Complaints received per thousand population

② **Indicator 2** - Complaints closed at each stage as a percentage of all complaints closed

③ **Indicator 3** - The number of complaints upheld/partially upheld/not upheld at each stage as a percentage of complaints closed in full at each stage

④ **Indicator 4 -** Average time in working days for a full response to complaints at each stage

⑤ **Indicator 5** - The number and percentage of complaints at each stage which were closed in full within the set timescales of 5 and 20 working days

⑥ **Indicator 6** - The number and percentage of complaints at each stage where an extension to the 5 or 20 working day timeline has been authorised.

⑦ **Indicator 7** - Customer Satisfaction statement about the complaints service provided.

⑧ **Indicator 8** - A statement outlining changes or improvements to services or procedures as a result of the consideration of complaints.

Indicator 1

Indicator 2

Indicator 3

Indicator 4

Indicator 5

Indicator 6

Indicator 7

Indicator 8

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Midlothian

Indicator 1: Complaints received per thousand population

1

This indicator records the total number of complaints received at stage 1, or directly at stage 2. The sum is divided by the estimated population size of Midlothian Council. Population size data is a Mid-Year Population Estimate from 2016 obtained from the National Records of Scotland (NRS).

- **The population of Midlothian Council is estimated to be 88,610**
- **Midlothian Council handled 5202 complaints**
- **This equates to an average of 59 complaints received per 1000 population**
- **Expressed another way, 1 in every 17 people made a complaint about a service**

TABLE 2: Figures for Performance Indicator 1: Complaints received per thousand population

Complaints received per 1000 population				
	Internal Benchmarking		External Benchmarking	
	Midlothian 16/17	Midlothian 17/18	Family Group 17/18	Scotland 17/18
Population Total	88,610	88,610		
Total Number of Complaints	5936	5202 (⬆734)		
Complaints per 1000 population	67	59 (⬇12)	16	11

Internal Benchmarking

The number of complaints per 1000 population has decreased from 67 in 2016/17 to 58 in 2017/18. Both sets of statistics include Social Work data. This notable reduction in complaints from one year to the next could reflect tangible evidence that there has been improvements to the way the Council is managing services.

External Benchmarking

With 59 complaints received per 1000 population for Midlothian Council, and 16 and 11 complaints per 1000 population for the Family Group and the Scottish average respectively, there is a considerable difference. This indicator has been widely discussed at the Local Authority Complaint Handlers Network (LACHN) as there is a diverse

variation when individual data can be seen. Factors for consideration that might have an impact on complaint totals when comparing Local Authorities are events, tourism, weather, locale - rural/town and demographics. Discussion also often takes place around waste related complaints about missed bins.

Currently, some Local Authorities report this matter as a complaint, and some report the issue as a service request as they might have a policy whereby for example, reported missed bins within 24 hours after the scheduled pick up are categorised and processed as a service request. Midlothian records missed bins as a complaint, a practice that is supported by the SPSO, but at the moment it is an unresolved matter. However, it is a subject that should be considered during benchmarking exercises, and might explain why Midlothian's complaint statistics are higher for this indicator.

Indicator 2: Complaints closed at stage 1 and stage 2, and escalated as a percentage of all complaints closed

2

Closed complaints are those that have been allocated an outcome and a response has been given to the customer. At time of reporting, no further action was required.

The number of closed complaints differs to the number of received complaints because some of the 2017/18 closed complaints were received in 2016/17, while some of the 2017/18 received complaints will be closed in 2018/19 as their target date falls into the next reporting cycle.

Customers who have undergone the complaints procedure at stage 1, but who remain dissatisfied are invited to escalate their complaint to a stage 2 investigation.

FIGURE 3: 2017/18 data for performance indicator 2: Complaints closed at each stage as a percentage of all complaints closed, including comparative data for 2016/17

Stage 1	Stage 2	Escalated
16/17	**16/17**	**16/17**
5799 (99%)	86 (1.5%)	39 (0.7%)
17/18	**17/18**	**17/18**
5095 (99%)	40 (0.8%)	40 (0.8%)
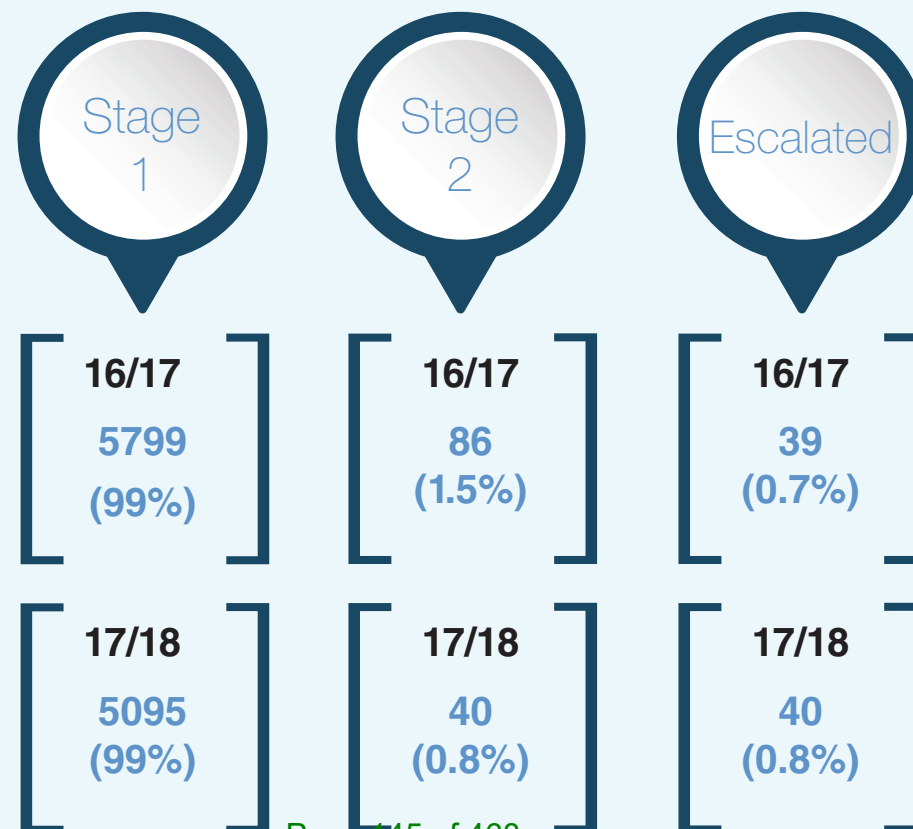
**FIGURE 4: Comparative data for performance Indicator 2 - Midlothian Council
Data for 16/17 & 17/18, and Family Group average for 17/18, and Scottish
average for 16/17 & 17/18**
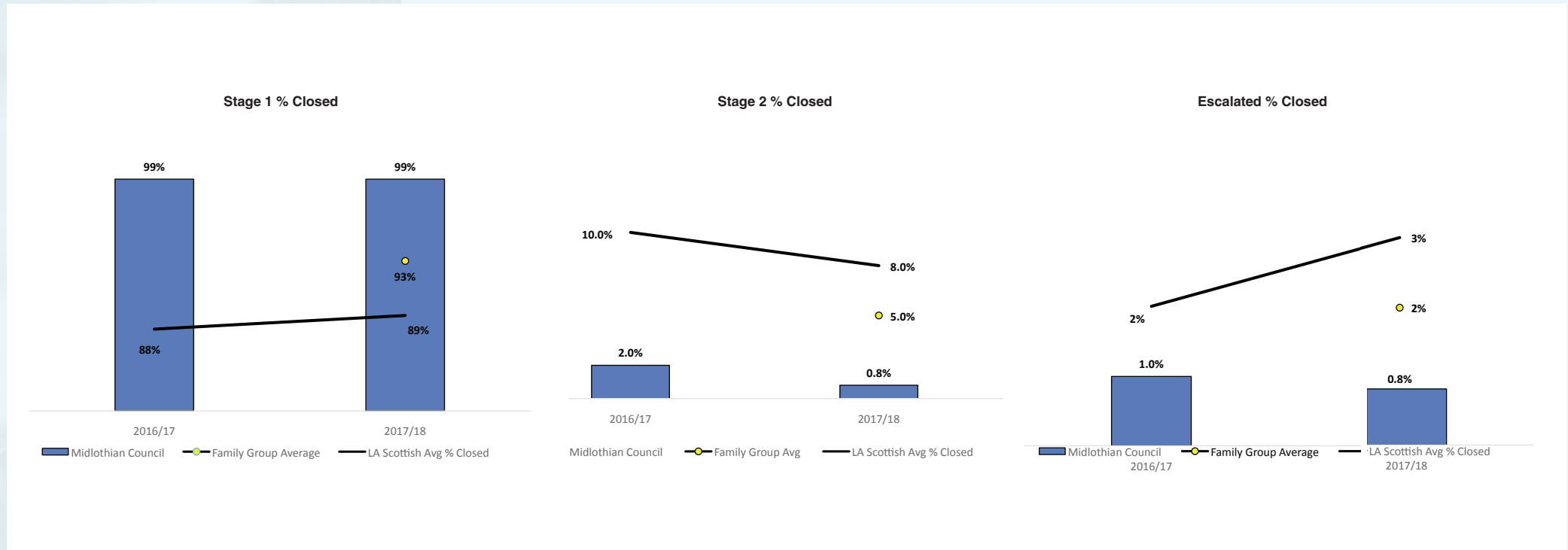
It can be seen in figure 4 above that Midlothian Council close proportionately more stage 1 complaints in both 16/17 (99%) and 17/18 (99%) than the Scottish average in both years at 88% and 89% respectively. In figure 4 above, it can be seen that the family group average for 17/18 is 93%, which is also proportionately less than Midlothian Council for the same year.

Midlothian Council's stats for this indicator supports

the SPSO's aim to close complaints at as early a stage as possible to prevent the need for lengthy and costly investigations. The data also shows that the council has a lower instance of escalated complaints than that of the Family Group average and the Scottish average. This is reflective of the fact that customers are happy with the response that they have received at stage 1.

However, for stage 2 and escalated complaints, it can be

seen that Midlothian Council has comparatively less of these complaints in both instances, and in both years, with 2% and 1% for stage 2 and escalated respectively compared with 10% (stage 2) and 2% (escalated) in 16/17, and 0.8% and 0.8% for stage 2 and escalated in 17/18. The family group average for 17/18 is also higher than Midlothian Council with 5% (stage 2) and 2% (escalated).

Midlothian

Indicator 3: Complaints upheld/partially upheld/not upheld at each stage (as a % of complaints closed in full at each stage)

3

The procedure states that there is a requirement to record an outcome for each complaint received. The outcomes are categorised as upheld, not upheld and partially upheld.

FIGURE 5: 2017/18 data for performance indicator 3: The number of complaints upheld/partially upheld/not upheld at each stage as a percentage of complaints closed in full at each stage including comparative data for 2016/17

STAGE 1 2016/17 2017/18	UPHELD 4872 (84%) 3820 (75%)	NOT UPHELD 629 (10.8%) 614 (12%)	PARTIALLY UPHELD 298 (5.1%) 320 (6%)
STAGE 2 2016/17 2017/18	UPHELD 13 (15.1%) 8 (20%)	NOT UPHELD 38 (44.2%) 19 (47.5%)	PARTIALLY UPHELD 35 (40.7%) 11 (27.5%)
ESCALATED 2016/17 2017/18	UPHELD 5 (12.8%) 4 (10%)	NOT UPHELD 24 (61.5%) 21 (52.5%)	PARTIALLY UPHELD 10 (25.6%) 12 (30%)

Figure 5 illustrates the outcome totals for each stage, as well as the relative percentage. It should be noted that there is an identified anomaly within our Customer Relationship Management (CRM) system that, if incorrect practice is applied, permits staff to close off complaints without an outcome.

This explains why the 2017/18 figures for each stage fall below 100%. Midlothian Council is in the process of procuring a new CRM platform, and due the current, in-house developed system having reached the end of its lifespan, no further development work is being carried out on it. Worsening of the statistics relating to this loophole is prevented through regular system training.

Figure 6 shows that figures between upheld stage 1 complaints in 17/18 are higher than the family group and also the Scottish average. This supports the suggestion noted for Indicator 2, that customers are happy with the response that they have been provided at this early stage i.e. to apologise and, if applicable to the case, uphold complaints early on to avoid escalation, which is also in tone with the SPSO's concept that dealing with complaints at an early stage can help to avoid situations becoming a complex issue.

Conversely, Midlothian Council's upheld rate for stage 2 and escalated complaints is lower than both the family group and Scottish average. This could indicate that capturing the complaints early on could lessen the number of upheld rates in stage 2 circumstances.

When viewing the 'not upheld' complaints in the way that table 3 illustrates it can be seen that the stage 1's for Midlothian is quite low (11.9%) compared to the family group (23.7%), and the Scottish average (33.5%), whereas the council's stage 2 'not upheld' complaints are quite high (76.9%) when compared to the Scottish average (46.2%) and family group (56.1%).

Escalated 'not upheld' complaint figures are quite high (57.1%) for the council too (though not higher than the family group (63.4%)) compared to the Scottish average at 46.5%.

This, along with the low percentage of 'upheld' escalated complaints could mean that time spent on escalated complaints is not as a consequence of them being badly handled at the earlier stage, but is likely to be down to a customer being unhappy with their initial outcome.

Figure 6: Comparative figures between Midlothian Council, Family Group and Scottish Average for 17/18 Complaint Outcomes for all Stages
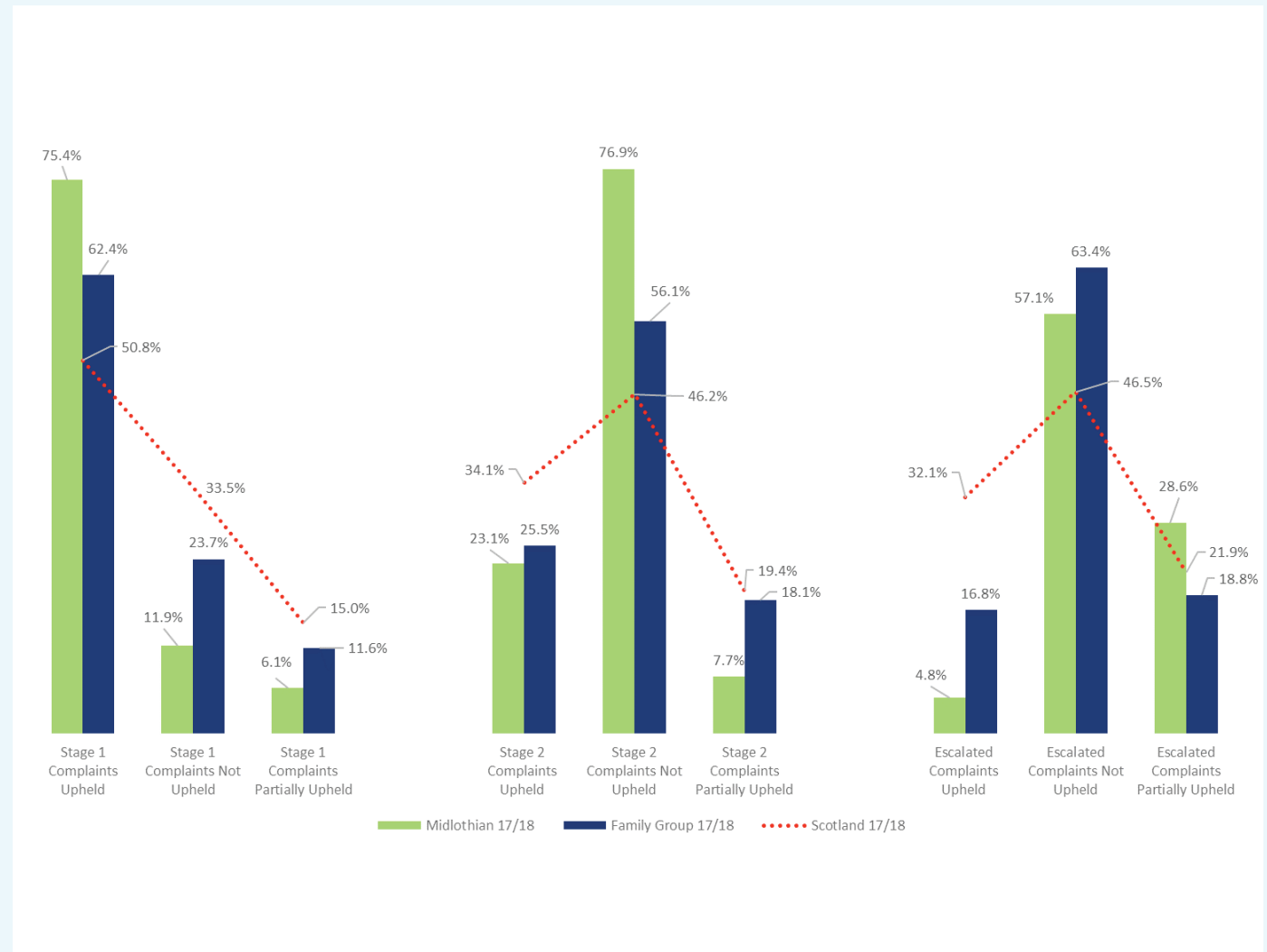
Indicator 4: Average time in working days to provide a full response to complaints at each stage

4

This indicator takes the sum of the total number of working days for all complaints to be dealt with and closed at stage 1; at stage 2; and escalated complaints.

An average time in working days for a full response to be given is then calculated by dividing the sum by the total number of closed complaints for each stage.

FIGURE 7: 2017/18 data for performance indicator 4: Average time in working days for a full response to complaints at each stage including comparative data for 2016/17

STAGE 1 Complaints	TARGET	5 Working Days
	16/17	0.3 Working Days
	17/18	3.3 Working Day

STAGE 2 Complaints	TARGET	20 Working Days
	16/17	7.3 Working Days
	17/18	19.5 Working Days

Escalated Complaints	TARGET	20 Working Days
	16/17	26.7 Working Days
	17/18	20.2 Working Days

Figure 7 indicates that in 2017/18, Midlothian Council was within the pre-determined target of 5 days for stage 1 complaints with an average of 3.3 days to complete these types of complaints. This is slightly lower than in 2016/17, where the same Figure illustrates that 0.3 days was the average. The difference in these statistics can be explained by an identified erroneous process when complaints were logged on Midlothian Council's Customer

Relationship Management (CRM) system. Instead of counting the day of receipt as day one, the system counted it as day zero. Once identified, a considerable exercise was carried out and the problem has been addressed.

Figure 7 also shows that the average time for stage 2 complaints has increased from 7.5 in 2016/17 to 19.5 in 2017/18. 2016/17's result brought into question whether the stage 2 complaints were allocated the

correct stage since the number was so low. Although there is a notable decrease in the average days, it is useful to note that that the 2017/18 report presents a more realistic figure.

With a disappointing average of 26.7 days in 2016/17 for escalated complaints, there is a positive improvement in the following year's data, which highlights a reduction to 20.2 days.

FIGURE 8: 2017/18 Comparative Figures between 17/18, Family Group and Scottish Average for indicator 4
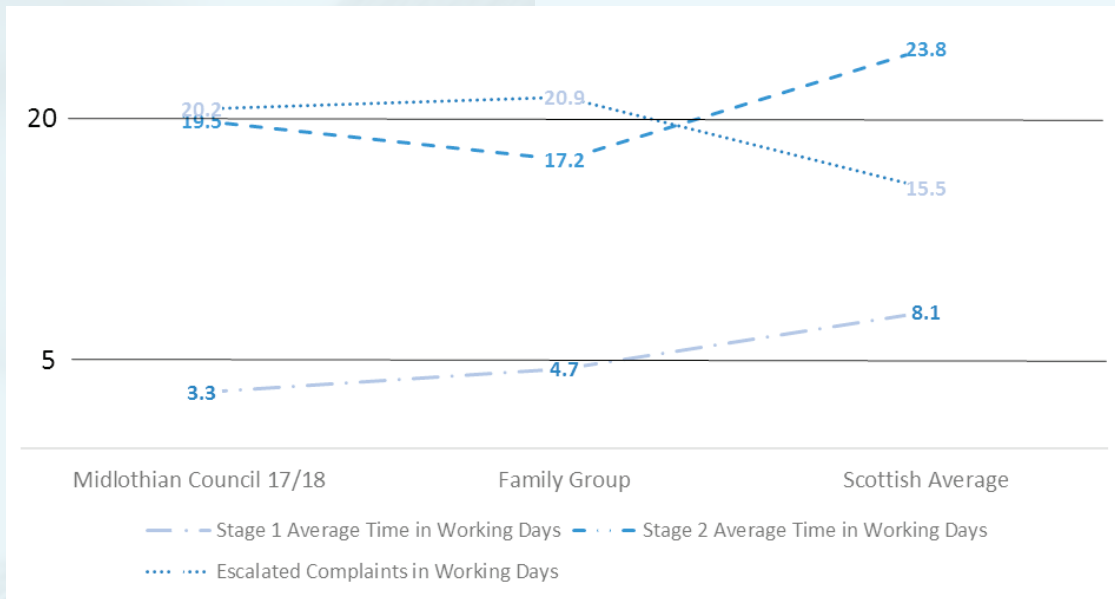
As mentioned previously, the SPSO's ethos is that complaints should be dealt with at as early a stage as possible, so the less time it takes to deal with complaints the better. When compared to the Family Group average at 4.7 days, and the Scottish average at 8.1 days, Midlothian Council shows good performance in this area at 3.3 days. This data can be viewed in figure 8.

The average time taken for stage 2 complaints for Midlothian Council during 17/18 falls within the 20 day target at 19.5 days. Although this is relatively satisfactory, especially since the Scottish average falls outside the 20 day limit at 23.8 days, it is important to Midlothian Council that focus is on achieving amicable resolutions to complaints well within the designated timescales. The family group average is 17.2 days.

With an average of 19.6 days to complete escalated complaints, there are no concerns although it is noted that, as in the case with stage 2 complaints, there is a need to continuously strive to respond as quickly as is feasible.

Midlothian

Indicator 5: The number and percentage of complaints at each stage which were closed in full within the set timescales of 5 and 20 working days.

5

This indicator represents the number and percentage of complaints at each stage which were closed in full within the predetermined timescales of 5 and 20 working days. Cases where an extension to the timescales has been authorised are included.

Table 3: 2017/18 data for performance indicator 5: The number and percentage of complaints at each stage which were closed in full within the set timescales of 5 and 20 working days, including data for 2016/17 for comparison

It can be seen in table 3 that the relative amount of Midlothian Council's complaints that were closed against timescales has decreased for stage 1 complaints. However, the proportion of stage 2 complaints, and complaints that were escalated from stage 1 to stage 2 shows an increased amount (64% and 64.1% respectively in 2016/17 to 70% and 67.5% respectively in 2017/18) of complaints that were closed within target.

	Stage 1	Stage 2	Escalated
16/17	5463 (94.2%)	55 (64.0%)	25 (64.1%)
17/18	4475 (87.8%)	28 (70%)	27 (67.5%)

FIGURE 9: 2017/18 Comparative Figures between Midlothian Council, Family Group and Scottish Average for 2017/18 indicator 5

% stage 1 complaints closed within 5 working days — % stage 2 complaints closed within 20 working days — % escalated complaints closed within 20 working days

Midlothian Council 17/18 — Family Group — Scottish Average
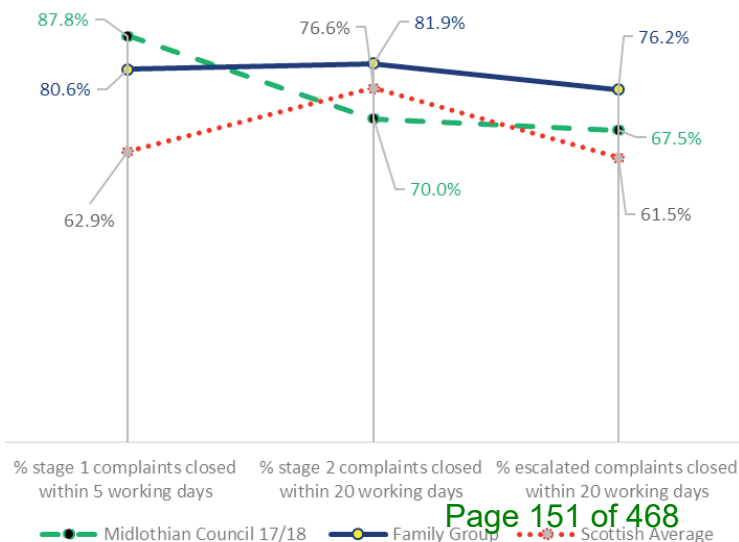
The relative amount of stage 1 complaints administered by Midlothian Council and closed within timescales is proportionately higher at 87.8% when compared to the Family Group (80.6%) and more so the Scottish average at 62.9%.

Stage 2 complaints closed within timescales, however are proportionately lower for Midlothian Council at 70.0% than the Scottish average (76.6%) or the Family Group (81.9%). The relatively small amount of stage 2 complaints (28 closed, as seen in table 3) dealt with by Midlothian Council means that there is a greater influence on the percentage. Similarly, with 67.5% of escalated complaints closed within timescales for Midlothian Council, this is an area for improvement, however it does exceed the Scottish average at 61.5%, but falls behind the Family Group average (76.2%).

Stage 2 complaints generally require a substantial investigation since they are ordinarily complex. Prior to the council being in a position to provide a full, impartial and balanced outcome, there first needs to be a detailed assessment of all the elements made in the complaint case. At times, there are instances where responses cannot be provided with the pre-determined target due to either capacity issues, or an inability to proceed with meetings at the desired times.

Indicator 6: The number and percentage of complaints at each stage where an extension was authorised

6

With authorisation from a senior manager such as a Head of Service, the pre-determined 5 day limit to respond to a stage 1 complaint may be extended a further 5 days if there are extenuating circumstances in which the complaint cannot be dealt with within the 5 day limit. Similarly, an extension may be approved by management to the 20 day limit for stage 2 and escalated complaints.

This indicator looks at the number and percentage of complaints at each stage where authorisation was agreed to extend the 5 or 20 working day timeline.

It does not include complaints that were late but authorisation was not requested and/or logged accordingly.

FIGURE 10: 2017/18 2017/18 data for performance indicator 6: number and percentage of complaints at each stage where an extension to the 5 or 20 working day timeline has been authorised, including data for 2016/17 for comparison

Stage 1

Stage 2

Escalated

	16/17	16/17	16/17
Stage 1	3 (0.1%)	6 (7%)	3 (7.7%)
	17/18	17/18	17/18
	0 (0%)	14 (35%)	4 (10%)
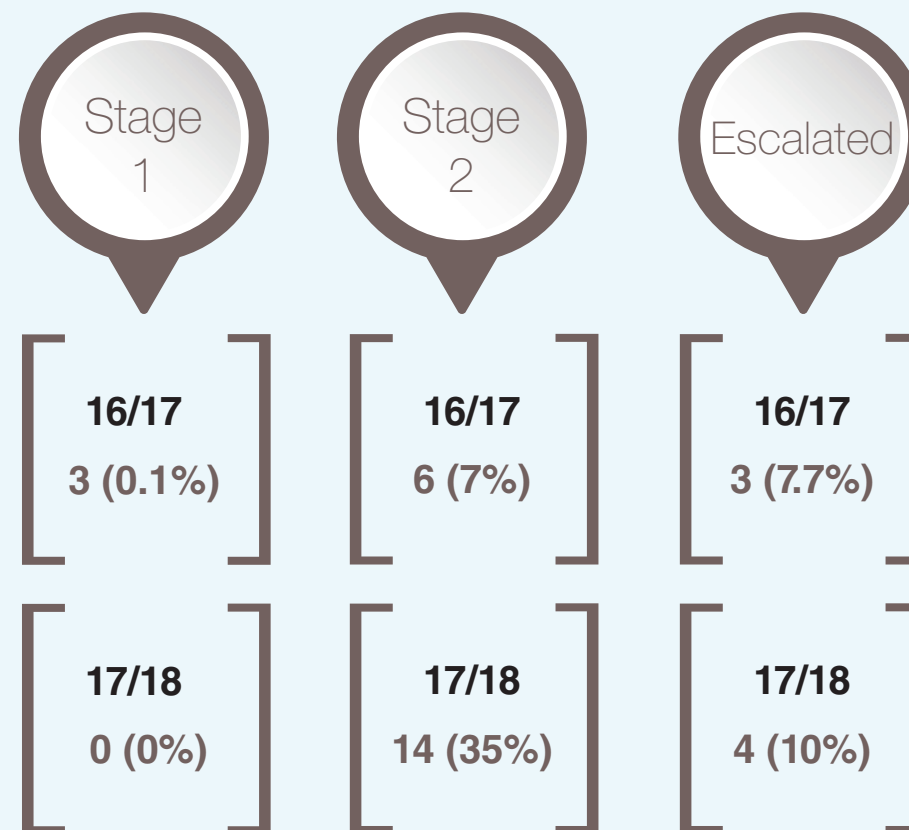
Figure 10 highlights that the relative amount of Midlothian Council's complaints that had an agreed extension to the timescale has increased for both stage 2 and escalated with 7% (2016/17) to 35% (2017/18) and 7.7% (2016/17) to 10% (2017/18) respectively.

This is an encouraging result since some work was done to raise the awareness of this element of the CHP. It could be interpreted as improved communication with customers and enhanced use and understanding of the Customer Relationship Management (CRM) system.

It can be seen that Stage 1 complaints have decreased in this statistic from one year to the next. It was relatively low in the first instance at 0.1% in 2016/17 compared with 0% in 2017/18 which highlights that there is a need to promote knowledge of this this function.

Figure 11 illustrates that the relative amount of stage 1 extended complaints for Midlothian is marginally lower than the Family Group with 0% and 0.5% respectively. The Scottish average for stage 1 complaints is slightly higher again at 4.4%.

For stage 2 and escalated complaints, Midlothian Council used the function to extend the time considerably more than both the Family Group and Scotland. With 35% for stage 2 compared to 10.5% (Scottish average) and 5.1% (Family Group), and 11.1% for escalated complaints compared with the Scottish average at 10%, and the Family Group at 4.7%.

This is a reflection of some work carried out by Midlothian Council to promote the fact that the function to extend exists and should be used correctly instead of reporting complaints as late without the correct justification.

FIGURE 11: 2017/18 Comparative Figures between Midlothian Council, Family Group and Scottish Average for 2017/18 indicator 6
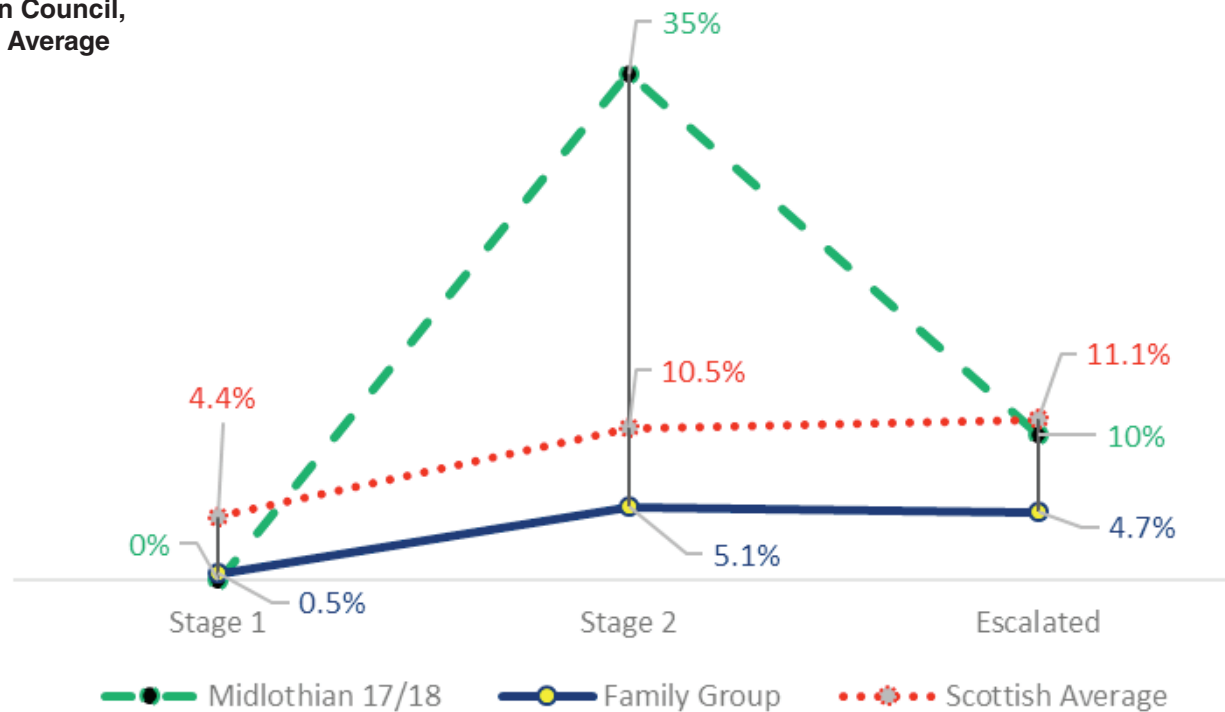
Indicator 7: Customer satisfaction about the complaint handling procedure

The Local Authority Complaint Handlers Network (LACHN) are working alongside the Scottish Public Services Ombudsman (SPSO) to finalise a generic set of survey questions to be used as a minimum set of questions. This will enable better benchmarking of complaint handling satisfaction across Scotland.

Due to a poor uptake in responses to previous questionnaire attempts, Midlothian Council decided to cease further development work in this area and await the generic survey from the LACHN network group.

It is anticipated that the new format will improve the return rate of this particular indicator so that robust, informative data can be provided about whether or not customers are pleased with the way that their complaint has been handled. This will also enable informed decisions to be made about any improvements to the procedure that might be required.

Compliments throughout 2017/18

There were 150 compliments received during the year 2017/18. They covered a range of services and each Head of Service received the information relevant to their areas to ensure that staff were informed.

Many of the compliments were broad and covered factors on a larger scale such as the good work of the general council during adverse weather conditions, whereas many were specific to staff whom our customers felt had gone above and beyond.

Table 4 highlights an excerpt of some of these, and includes the service areas in which they belong

TABLE 4: Excerpt of compliments received during 2017/18

COMPLIMENTS	
Landscape & Countryside	"I would just like to say how impressed I am with your efficient staff. I reported the damaged tree yesterday and today your staff came out and cut it down and took it away. Well done for a good job."
	"I would like to say thank you to the wonderful work done by the gardeners attending to the park. The flowers on either side of the little walkway from the play area to the high street is a treat to the tired eyes."
	"Compliments to the landscaping service for cutting back all the bushes and nettles on the path leading from the water tower. This has made a huge difference."
Waste	"Thanks to the crew who empty her bins son promptly every week and for always attending to the fly tipping when she has reported this. They do a marvellous job."
	"Thanks on the great work the team have done on the old railway, it will be so much easier and safer now that it has been cleaned up. Can you please let the team know it's appreciated."
	"I reported slippery pavements in Dalkeith - I was very pleased to see council workers with a power washer and a mini street cleaner there the following morning. The surface is much better now so I would like to pass on my gratitude to the workers and to the Council for fixing this so quickly."
Roads	"Despite what we hear in the media about potholes and the lack of repairs, I would just like to compliment the council on quickly filling the quite small potholes before they got too big and needed extensive repair."
	"Last week I have reported a banging manhole on Lauder Road. I'm just writing to say a massive thank you to the road team for dealing with it so quickly and repairing it. It is much, much appreciated by myself and my neighbours. Thanks again."
	"Would like to thank the Roads Team for the wonderful work they have carried out through this bad weather."

Compliments throughout 2017/18...*continued*

TABLE 4: Excerpt of compliments received during 2017/18

COMPLIMENTS	
Property Maintenance	"Called to compliment men who were out fitting windows this morning. They cleaned up after themselves and I am very happy with the work that has been carried out. Please pass on my thanks."
	"Thank you to the paint team, they were absolutely brilliant. Customer really appreciates their hard work and they made a fantastic job."
	"Thanks for the lovely new fence that has been erected. I am delighted with the work and would like to give praise where praise is due. The workers were lovely and I am now 'showing off' the fence to my friends."
Healthy Living	"My children have just completed a great week of skiing and I wanted to thank all your staff. I also wanted to thank the instructor for his positive and encouraging approach to such a young age group."
Library	"I wanted to give positive feedback about the change to the library charges. Since the reservation fee was abolished at the beginning of May I have ordered a greater number, and a much wider variety of books to read than I would have had I paid 55p per book. In tricky financial circumstances it is refreshing to see a council making a bold decision to promote and encourage reading like this. Well done, keep up the good work."
Registrars	"I would like to say a massive thank you for the great way the registrars dealt with me today I needed a replacement marriage certificate ASAP and I got it within 5 minutes. Thank you so much, great service."
Contact Centre	"Thanks to all your teams that kept Midlothian moving during this unprecedented weather. My compliments are targeted to the contact centre, who directed the enquiries. You are the silent heroes - the shop window into services. Well done."
Reception	"Thanks to the gentleman on the reception desk in Buccleuch House. He was very pleasant and helpful."
Revenues & Benefits	"Would like to give praise to one of your workers who was very helpful and understanding. She really was fantastic. Thanks again."
Lifelong Learning & Employability	"I am very grateful to have one of your team supporting my son. On more than one occasion she has gone above the call of duty to ensure he is going forward on the right path. She seems to care passionately about the job, and deserves recognition for her hard work and dedication to the people she supports."

Indicator 8: Learning, changes and improvements made to service areas as a result of the feedback given from complaints

*Please note that there are several Case Studies already reported in the Social Work Annual Complaint Report 2017/18, where further details can be found at https://www.midlothian.gov.uk/

CASE STUDY 1	Service: Resources & Education

Complaint Analysis

Multi-service involvement was required when a parent telephoned Midlothian Council to complain about the content of the snack 'goodie' bags provided to her child at one of the local area Gala days.

Although it is volunteers who manage these events and not Midlothian Council, the council heavily support the events by providing assistance with matters such as redirecting traffic, setting up of certain equipment and distributing information and/or vouchers for the snack bags for the events through the schools.

Midlothian therefore took ownership of the case, which was processed using the council's Complaint Handling Procedure (CHP).

The complainant had a valid point that the content of the bags was unhealthy and did not support the work of the schools and other services that promote healthy eating. The complaint was further fuelled as there was no response or acknowledgement of receipt by the council.

Once brought to the attention of senior officials, it was rightly escalated to a stage 2 where a multi-service investigation took place.

Service Improvement Actions

Work was carried out to investigate who the decision makers were in terms of who managed the content of the snack bags, and after some discussion between the council and the committee who organise the Gala events, the subject was made an item on the upcoming committee agenda, with an aim to review the content of the bagged items.

The matter was also raised with all Headteachers through the Associated Schools group (ASG) meetings. This was mainly to raise awareness of the issue and to explore and implement more control measures when assisting groups such as this one. A pro-forma with a series of questions was introduced to better screen these and similar groups so that knowledge is obtained before agreement to support is made.

The issue regarding the complaint not being dealt with at the time of reporting was to do with difficulties in identifying a responsible service area to assign the complaint to. This resulted in the case sitting 'stagnant' on the system. Work to the Customer Relationship Management system that ensures that there is a 'corporate' area to select when there is multi-service involvement, with a designated Corporate Officer who would take the lead in dealing with the complaint to prevent similar issues occurring in future. Staff were updated accordingly.

*Please note that there are several Case Studies already reported in the Social Work Annual Complaint Report 2017/18, where further details can be found at https://www.midlothian.gov.uk/

CASE STUDY 2   **Service: Education**

Complaint Analysis

Complaint about school gate and surrounding paving area being unsuitable for ingress/egress of the school grounds, and thereby causing overcrowding issues and a trip hazard due to erosion of the paving. With large numbers entering and exiting the area at one time with buggies/prams, wheelchairs, bikes, scooters etc included, the complaint was raised to the school and dealt with using the CHP. There was also involvement of the Council's Health and Safety team, who confirmed that the gate and path area were unsuitable.

Service Improvement Actions

The gate leading into the playground was increased by a recommended 1.2m, and the width of the path leading from the playground was increased in line with the increase to the width of the gate.

CASE STUDY 3   **Service: Customer Services**

Complaint Analysis

There were some complaints about misinformation being provided by the Contact Centre. Although they were low level stage 1 complaints, combined they had generated enough attention to rationalise an analysis of current practice.

Service Improvement Actions

Work was carried out that included process mapping exercises, self-evaluation and reviewing the amount of contact with services that are supported by the Contact Centre. This identified areas for consideration and changes were implemented that ensures Customer service staff work more closely with the services they support. This includes regular meetings; regular short training sessions or practice updates; and time spent for respective officers within each service area to ensure better understanding of end-to-end service provision.

CASE STUDY 4   **Lifelong Learning and Employability**

Complaint Analysis

Complaints were received regarding re-registration for an adult learning class following receipt of an auto generated email to register. Reports of being timed out before the application was completed and that the details for the named contact support person on the auto generated letter were not up to date as the staff member no longer worked for the council. Costs had also been increased without consultation or forewarning.

Service Improvement Actions

A full booking system review of the current system was undertaken to ensure that up to date procedures were in place. The time out functionality was changed, data security was evaluated, and class/contact details were revised and updated where necessary. Going forward, thorough updates are scheduled with the supplier as matter of routine practice. The class was attended by a senior officer to make contact, apologise and offer temporary alternative methods of payment due to the problem.

CASE STUDY 5   **Service: Education, Property and Facilities Management, Landscape and Countryside**

Complaint Analysis

An influx of complaints were received from the public about staff smoking in either their council owned vans, or on council property such as on school grounds etc.

Service Improvement Actions

The smoking policy was reviewed and work was undertaken on a corporate scale to promote staff health and wellbeing where 'Healthy Working Lives' events took place, and reiteration of the policy that will ensure staff are aware of Midlothian's strict rules about smoking on or near council premises/property.

Annual Complaints Handled by the Scottish Public Services Ombudsman (SPSO)

The Scottish Public Services Ombudsman (SPSO) is the organisation that handles complaints about public services in Scotland. The Ombudsman service is independent of government and has a duty to act impartially. The SPSO also shares learning from its work to improve service delivery across the public services spectrum in Scotland. The office carries out awareness-raising activities with the general public, and bodies under their jurisdiction and promotes good complaints handling by public service providers in Scotland. The SPSO has a separate website to support best practice in complaints handling.

Mentioned earlier in this report, customers who have used Midlothian Council's established Complaint Handling Procedure, and who remain dissatisfied with any aspect of the way in which their complaint has been handled, are signposted by the council to the Scottish Public Service Ombudsman (SPSO). Provided it is within their jurisdiction, the SPSO will review the complaint and consequently reach a decision. Depending on the decision, the SPSO will make recommendations to the authority accordingly. This is to encourage lasting improvements to services so that the trust and confidence of the public is re-established.

Figure 12: Comparative figures between 17/18 and 16/17 on the number of complaints and their corresponding areas that have reached the SPSO
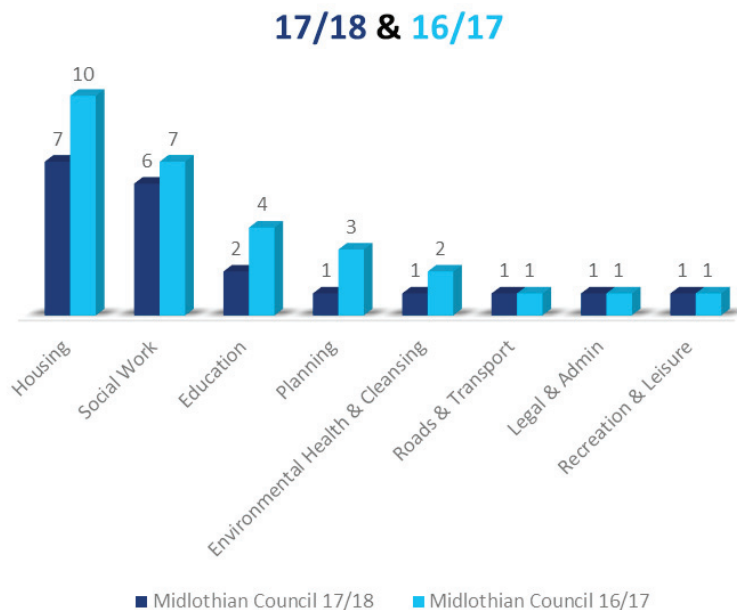
Figure 12 illustrates the total number of complaints that have been **received** by the SPSO about a Midlothian Council service between 1 April 2017 and 31 March 2018. The main service areas have been given generic terminology by the SPSO since they deal with all local authorities in Scotland, and since each authority has locally named service areas/ divisions.

It is interesting to note that although the numbers differ between the years, the trend is similarly matched in terms of the most commonly complained about services.

Figures 13, 14 and 15 show the outcomes of the complaints determined by the SPSO about Midlothian Council over the same period. Similarly to the council's statistics, the figures received (shown in figure 12) and the figures determined don't tally because the SPSO were still working on a case after the business year had ended.

The advice stage, shown in figure 13 is the initial receipt stage where the SPSO will check if they have enough information, that the complainant has first of all complained to the relevant organisation, and that the matter is one that they are allowed to look at. It can be seen that there have been 13 at this stage compared to 15 the year before. 10 were deemed premature (hadn't gone through authority's internal procedure first), and 3 were withdrawn (not taken any further).

The early resolution stage, referred to in figure 14 is where the SPSO have confirmed that the complaint is mature (ie that the complaint has completed the organisation's complaint process) and is in jurisdiction. The SPSO will then begin gathering the information needed for an investigation. Some cases are closed at his stage if they are able to be resolved with the organisation, or if they consider there would be no significant benefit, or achievable outcome from a full investigation. There were 8 complaints in total that reached this stage compared with 11 the year before.

Figure 15 illustrates the complaints that the SPSO conducted an investigation for. It can be seen that of the 21 complaints that the SPSO received, there were 2 that reached this stage. The decisions can be viewed in the table, which reflects that 1 was not upheld (Education), and 1 was upheld. Further analysis informs that these were Education and Community Safety and Justice.

FIGURE 13: Comparative figures between 17/18 and 16/17 on the number of complaints received by the SPSO that reached the ADVICE stage

FIGURE 14: Comparative figures between 17/18 and 16/17 on the number of complaints received by the SPSO that reached the EARLY RESOLUTION stage
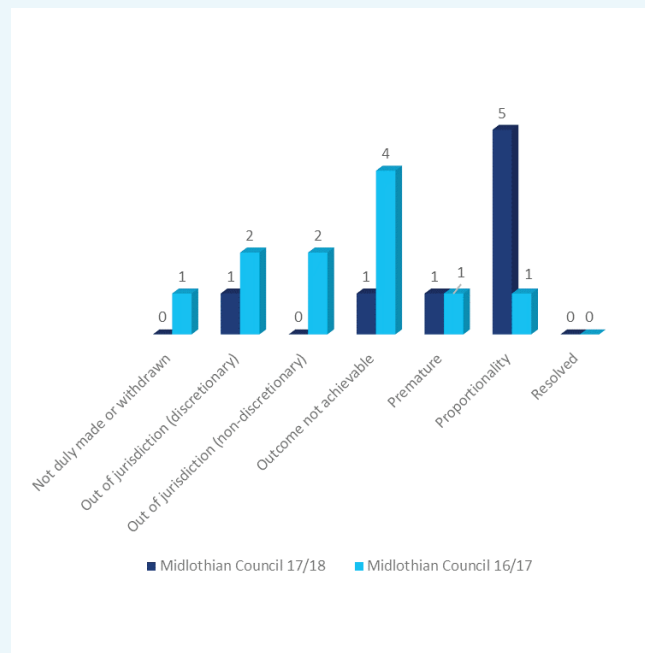
FIGURE 15: Comparative figures between 17/18 and 16/17 on the number of complaints received by the SPSO that reached the INVESTIGATION stage
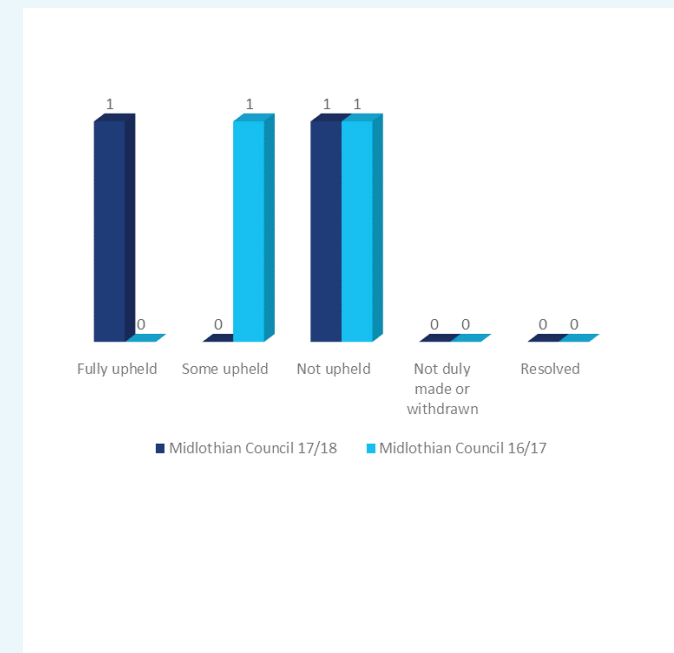
Discussion And Conclusion

The quantity of telephone calls relative to the total number of complaints for the years 16/17 and 17/18 have reduced. It is a negligible amount at 3% but it is important to recognise it since the percentage of online complaint interactions has increased by 4%. This could be a consequence of the continual work to improve the user-friendliness of the council website, and is evidence that channel-shift work is moving in the desired direction. It will be interesting to see if further planned work to enhance web-form accessibility will amplify the trend.

During 2017/18, Midlothian Council processed 734 fewer complaints compared with the year before. The year on year difference could be viewed in one of two ways. The reduction could be interpreted as tangible evidence that there has been improvement in terms of enhancing service provision. From another perspective, it could also mean that there is a wider consideration to ensure that customers know that the procedure exists and/or that staff are identifying complaints correctly and logging them accordingly per the CHP.

With a considerable difference between the complaints per 1000 population (59 for Midlothian Council) when externally benchmarked to the Scottish average (16) and family group average (11), it is important to bear in mind that factors for consideration might have an impact on complaint totals when comparing Local Authorities with this statistic. These are items such as events, tourism, weather, locale - rural/town and demographics.

The SPSO's aim to close complaints at as early a stage as possible to prevent the need for lengthy and costly investigations is reflected in Midlothian Council's ability to close off stage 1 complaints at the initial point of contact. The data also shows that the council has a lower instance of escalated complaints than that of the Family Group average and the Scottish average, which also provides evidence to the theory that customers are happy with the response that they have received at stage 1.

The average time to complete stage 2 complaints was a concern in 2016/17 and the low number brought into question whether the correct stage had been assigned. Following awareness raising activities and training, 2017/18 saw a significant improvement in this area. Even though the number has notably decreased, it is a more realistic figure that is much closer to the family group average. Similarly for escalated complaints, there is a

positive improvement in the 2017/18 data, which highlights a reduction from 26.7 days to 20.2 days.

For stage 2 and escalated complaints, Midlothian Council used the function to extend the time considerably more than both the Family Group and Scotland. With 35% for stage 2 compared to 10.5% (Scottish average) and 5.1% (Family Group), and 11.1% for escalated complaints compared with the Scottish average at 10%, and the Family Group at 4.7%. This is a reflection of some work carried out by Midlothian Council to promote the fact that the function to extend exists and should be used correctly instead of reporting complaints as late without the correct justification.

It is reassuring to report that the number of agreed extensions to complaint timescales have increased for stage 2 and escalated complaints by Midlothian Council. There is improvement between years 16/17 and 17/18, and also Midlothian's figures are higher for this outcome than both family group and Scottish average. The result is evidence that the work done to raise the awareness of this element of the CHP has been a success. It also provides assurance that communication with customers has improved and that there is better understanding of the Customer Relationship Management (CRM) system.

150 compliments were received to a range of services during 2017/18. An excerpt of these can be viewed in figure 12 above. Many of them related to the work of the council in keeping Midlothian operational during adverse weather conditions, and many were about staff whom our customers felt had gone 'above and beyond'. Compliments were shared with both officers and heads of service to ensure awareness of the good work. The practice of recording compliments as well as complaints is encouraged in all services to ensure that reports can be generated, and to enable some analysis work that will permit learning and continuous improvement.

Satisfaction is an area requiring fairly large scale effort to drive the process of administering the forms throughout the authority. Using the new generic form will enable better benchmarking and allows the opportunity to launch as a 'new look' form as one of best practice.

Next Steps

Development of dashboard using Tableau for senior staff to have regular, consistent access to complaints data.

Maintain engagement with the Local Authority Complaint Handler's Network (LACHN) to ensure benchmarking is accurate to enable learning.

As part of the installation of a new Customer Relationship Management (CRM) platform, implement a new complaints system which will provide a more robust and efficient arrangement.

Use the new CRM system to relaunch the Complaint Handling Procedure (CHP) and correlate training on procedural matters with necessary system training.

Use training to work towards reducing time taken to respond to complaints.

Review and update customer feedback leaflets.

Improve online accessibility for logging a complaint, with guidance to assist customers whilst submitting a complaint so they are better able to differentiate between a service request and a complaint.

Your feedback counts

Whether you want to know more about our performance, have something to say about this report, or want to suggest an alternative way of receiving this kind of information in the future.

Please contact the Policy and Scrutiny Team:

0131 270 8926 **or** Delivering Excellence@midlothian.gov.uk

Visit: www.midlothian.gov.uk

or follow us on social media

Twitter@midgov.uk

https://www.facebook.com/MidlothianCouncil/

COMMUNICATING CLEARLY

We are happy to translate on request and provide information and publications in other formats, including Braille, tape or large print.

如有需要我們樂意提供翻譯本，和其他版本的資訊與刊物，包括盲人點字、錄音帶或大字體。

Zapewnimy tłumaczenie na żądanie oraz dostarczymy informacje i publikacje w innych formatach, w tym Braillem, na kasecie magnetofonowej lub dużym drukiem.

ਅਸੀਂ ਮੰਗ ਕਰਨ ਤੇ ਖੁਸ਼ੀਂ ਨਾਲ ਅਨੁਵਾਦ ਅਤੇ ਜਾਣਕਾਰੀ ਤੇ ਹੋਰ ਰੂਪਾਂ ਵਿੱਚ ਪ੍ਰਕਾਸ਼ਨ ਪ੍ਰਦਾਨ ਕਰਾਂਗੇ, ਜਿਨ੍ਹਾਂ ਵਿੱਚ ਬਰੇਲ, ਟੇਪ ਜਾਂ ਵੱਡੀ ਛਪਾਈ ਸ਼ਾਮਲ ਹਨ।

Körler icin kabartma yazilar, kaset ve büyük nüshalar da dahil olmak üzere, istenilen bilgileri saglamak ve tercüme etmekten memnuniyet duyariz.

اگر آپ چاہیں تو ہم خوشی سے آپ کو ترجمہ فراہم کر سکتے ہیں اور معلومات اور دستاویزات دیگر شکلوں میں مثلاً بریل (نابینا افراد کے لیے اُبھرے ہوئے حروف کی لکھائی) میں، ٹیپ پر یا بڑے حروف کی لکھائی میں فراہم کر سکتے ہیں۔

Midlothian

Authority	Case ID	Workflow Stage	Report Case Received Date	Case Closed Date	Case Primary Subject Sector
Midlothian Council	201701680	Advice	14/06/2017	14/06/2017	Local Authority
Midlothian Council	201702740	Advice	24/07/2017	24/07/2017	Local Authority
Midlothian Council	201702822	Advice	27/07/2017	27/07/2017	Local Authority
Midlothian Council	201700321	Advice	18/04/2017	18/04/2017	Local Authority
Midlothian Council	201706601	Advice	15/12/2017	15/12/2017	Local Authority
Midlothian Council	201709146	Advice	23/03/2018	23/03/2018	Local Authority
Midlothian Council	201703293	Advice	14/08/2017	15/08/2017	Local Authority
Midlothian Council	201704538	Advice	04/10/2017	05/10/2017	Local Authority
Midlothian Council	201703052	Advice	07/08/2017	09/08/2017	Local Authority
Midlothian Council	201704116	Advice	15/09/2017	15/09/2017	Local Authority
Midlothian Council	201708206	Advice	21/02/2018	22/02/2018	Local Authority

Midlothian Council	201703302	Advice	16/08/2017	16/08/2017	Local Authority
Midlothian Council	201708271	Advice	26/02/2018	26/02/2018	Local Authority
Midlothian Council	201701935	Early Resolution	22/06/2017	26/06/2017	Local Authority
Midlothian Council	201704745	Early Resolution	16/11/2017	14/12/2017	Local Authority
Midlothian Council	201609090	Early Resolution	13/03/2017	22/05/2017	Local Authority
Midlothian Council	201606630	Early Resolution	18/04/2017	28/06/2017	Local Authority
Midlothian Council	201700082	Early Resolution	25/09/2017	04/10/2017	Local Authority
Midlothian Council	201701049	Early Resolution	22/05/2017	21/07/2017	Local Authority
Midlothian Council	201705038	Early Resolution	28/11/2017	04/01/2018	Local Authority
Midlothian Council	201706900	Early Resolution	22/01/2018	23/03/2018	Local Authority
Midlothian Council	201604078	Investigation	21/09/2016	09/06/2017	Local Authority
Midlothian Council	201701238	Investigation	30/05/2017	06/03/2018	Local Authority

Subject Group	Subject	Case Outcome Group	Case Outcome	Recommendation Count
Social Work	Other	Complaint - Not duly made or withdrawn	Further info required from complainant	0
Environmental Health & Cleansing	Other	Complaint - Not duly made or withdrawn	Further info required from complainant	0
Roads & Transport	Policy / administration	Complaint - Not duly made or withdrawn	Further info required from complainant	0
Subject Unknown or Out Of Jurisdiction	Subject unknown	Complaint - Premature	Complaints procedure not attempted - complainant not aware of complaints procedure	0
Housing	Repairs and maintenance	Complaint - Premature	Complaints procedure not attempted - complainant not aware of complaints procedure	0
Social Work	Complaints handling (incl Social Work complaints procedures)	Complaint - Premature	Complaints procedure not attempted - complainant not aware of complaints procedure	0
Housing	Improvements and renovation	Complaint - Premature	Complaints procedure not attempted - complainant wants to fast track to SPSO	0
Social Work	Child services and family support	Complaint - Premature	Complaints procedure not attempted - complainant wants to fast track to SPSO	0
Legal & Admin	Claims for damage/ injury / loss	Complaint - Premature	Complaints procedure started but not completed - complainant wants to fast track complaint to SPSO	0
Planning	Handling of application (complaints by opponents)	Complaint - Premature	Complaints procedure started but not completed - complainant wants to fast track complaint to SPSO	0
Housing	Applications / allocations / transfers / exchanges	Complaint - Premature	Complaints procedure started but not completed - complainant wants to fast track complaint to SPSO	0

Social Work	Complaints handling (inc Social Work complaints procedures)	Complaint - Premature	Complaints procedure started but not completed - delays/poor complaint handling by body		0
Housing	Repairs and maintenance	Complaint - Premature	Complaints procedure started but not completed - delays/poor complaint handling by body		0
Education	Policy / administration	Out of jurisdiction (discretionary)	No injustice or hardship		0
Social Work	Complaints handling (inc Social Work complaints procedures)	Outcome not achievable	Seeking discretionary decision to be overturned		0
Social Work	Care in the community	Premature	Complaints procedure started but not completed - referred by body too early		0
Recreation & Leisure	Hall letting / indoor facilities / libraries / museums etc	Proportionality	Action taken by authority and SPSO cannot achieve anything more		0
Housing	Improvements and renovation	Proportionality	Action taken by authority and SPSO cannot achieve anything more		0
Social Work	Policy / administration	Proportionality	Action taken by authority and SPSO cannot achieve anything more		0
Housing	Terminations of tenancy	Proportionality	Action taken by authority and SPSO cannot achieve anything more		0
Housing	Repairs and maintenance	Proportionality	Action taken by authority and SPSO cannot achieve anything more		0
Housing	Neighbour disputes and antisocial behaviour	Fully upheld	Fully upheld		3
Education	Primary School	Not upheld	No evidence of maladministration or service failure		0

Local Authority Complaints Received 2017-18

| Subject Group | Midlothian Council | | | Sector | | |
	Midlothian Council	Rank	Complaints as % of total	Sector Total	Rank	Complaints as % of total
Housing	7	1	33.33%	316	1	21.44%
Social Work	6	2	28.57%	254	2	17.23%
Education	2	3	9.52%	151	3	10.24%
Planning	1	4=	4.76%	134	4	9.09%
Environmental Health & Cleansing	1	4=	4.76%	116	5	7.87%
Roads & Transport	1	4=	4.76%	104	7	7.06%
Legal & Admin	1	4=	4.76%	71	8	4.82%
Recreation & Leisure	1	4=	4.76%	24	9	1.63%
Finance	0	-	0.00%	112	6	7.60%
Land & Property	0	-	0.00%	17	10	1.15%
Building Control	0	-	0.00%	16	11	1.09%
Personnel	0	-	0.00%	12	12	0.81%
Welfare Fund - Community Care Grants	0	-	0.00%	7	13	0.47%
Other	0	-	0.00%	6	14	0.41%
Consumer Protection	0	-	0.00%	4	15=	0.27%
National Park Authorities	0	-	0.00%	4	15=	0.27%
Fire & Police Boards	0	-	0.00%	3	17	0.20%
Economic Development	0	-	0.00%	2	18=	0.14%
Welfare Fund - Crisis Grants	0	-	0.00%	2	18=	0.14%
Subject Unknown or Out Of Jurisdiction	1	-	4.76%	119	-	8.07%
Total	**21**		**100.00%**	**1,474**		**100.00%**
Complaints as % of Sector	*1.4%*			*100.0%*		

Local Authority Complaints Received 2016-17

Subject Group	Midlothian Council	Rank	Complaints as % of total	Sector Total	Rank	Complaints as % of total
Housing	10	1	34.5%	388	1	25.4%
Social Work	7	2	24.1%	219	2	14.3%
Education	4	3	13.8%	144	4	9.4%
Finance	3	4	10.3%	120	6	7.9%
Legal & Admin	2	5	6.9%	73	8	4.8%
Planning	1	6=	3.4%	160	3	10.5%
Building Control	1	6=	3.4%	34	9	2.2%
Recreation & Leisure	1	6=	3.4%	29	10	1.9%
Environmental Health & Cleansing	0	-	0.0%	124	5	8.1%
Roads & Transport	0	-	0.0%	112	7	7.3%
Land & Property	0	-	0.0%	19	11	1.2%
Welfare Fund - Community Care Grants	0	-	0.0%	14	12	0.9%
Other	0	-	0.0%	8	13=	0.5%
Valuation Joint Boards	0	-	0.0%	7	13=	0.5%
National Park Authorities	0	-	0.0%	6	15	0.4%
Economic Development	0	-	0.0%	5	16=	0.3%
Personnel	0	-	0.0%	5	16=	0.3%
Welfare Fund - Crisis Grants	0	-	0.0%	5	16=	0.3%
Consumer Protection	0	-	0.0%	4	16=	0.3%
Fire & Police Boards	0	-	0.0%	4	16=	0.3%
Subject Unknown or Out Of Jurisdiction	0	-	0.0%	48	-	3.1%
Total	**29**		*100.0%*	**1528**		*100.0%*
Complaints as % of Sector	*1.9%*			*100.0%*		

Local Authority Complaints Determined 2017-18

Stage	Outcome Group	Midlothian Council	Sector Total
		Midlothian Council	
Advice	Not duly made or withdrawn	3	253
	Out of jurisdiction (discretionary)	0	3
	Out of jurisdiction (non-discretionary)	0	5
	Premature	10	381
	Total	13	642
Early Resolution	Not duly made or withdrawn	0	38
	Out of jurisdiction (discretionary)	1	99
	Out of jurisdiction (non-discretionary)	0	113
	Outcome not achievable	1	85
	Premature	1	53
	Proportionality	5	314
	Resolved	0	29
	Total	8	731
Investigation	Fully upheld	1	47
	Some upheld	0	49
	Not upheld	1	69
	Not duly made or withdrawn	0	1
	Resolved	0	3
	Total	2	169
Total Complaints		**23**	**1,542**

Total Premature Complaints		11	434
Premature Rate		47.8%	28.1%
Total Investigation Decisions		2	165
Total Upholds		1	96
Uphold Rate		50.0%	58.2%
Old Uphold Rate Calculation			
Total Cases 'Fit for SPSO'		2	169
Total Upholds		1	96
Uphold Rate		50.0%	56.8%

Local Authority Complaints Determined 2016-17

Stage	Outcome Group	Midlothian Council	Sector Total
		2016-17	
Advice	Not duly made or withdrawn	8	279
	Out of jurisdiction (non-discretionary)	0	3
	Outcome not achievable	0	1
	Premature	7	467
	Total	**15**	**750**
Early Resolution	Not duly made or withdrawn	1	43
	Out of jurisdiction (discretionary)	2	82
	Out of jurisdiction (non-discretionary)	2	111
	Outcome not achievable	4	115
	Premature	1	57
	Proportionality	1	132
	Resolved	0	20
	Total	**11**	**560**
Investigation	Fully upheld	0	52
	Some upheld	1	42
	Not upheld	1	60
	Not duly made or withdrawn	0	1
	Resolved	0	1
	Total	**2**	**156**
Total Complaints		**28**	**1,466**

Total Premature Complaints		8	524
Premature Rate		28.6%	35.7%
Fit for SPSO Total (Investigations)		2	156
Total Cases Upheld / Some Upheld		1	94
Uphold Rate (total upheld / total fit for SPSO)		50.0%	60.3%

SPSO Scottish Public Services Ombudsman

4 Melville Street
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EH3 7NS
Tel **0800 377 7330**
Fax **0800 377 7331**
Web **www.spso.org.uk**

23 August 2018

Dr. Grace Vickers
Chief Executive
Midlothian Council
Midlothian House
Buccleuch Street
DALKEITH
EH22 1DN

Annual Letter from SPSO

Dear Dr Vickers,

I am pleased to send you SPSO's annual letter. This year's letter includes statistics relating to cases we handled about your organisation in 2017-18. It also includes further information about our work which I hope you will find helpful.

We provide statistics to inform you about service issues the public have complained to me about. This is so that you can use it with your own data to build a picture of what drives dissatisfaction with your organisation and whether there are systemic changes that you can make.

Complaints data and reporting

SPSO statistics are just part of the detailed complaints picture that your organisation is responsible for gathering and publishing.

As you will know, in line with the model complaints handling procedure (CHP), each authority is required to report and publicise complaints information on a quarterly and annual basis. This includes the publication of your organisation's annual complaints report detailing your performance against the complaints performance indicators.

This annual performance information is more than simply a requirement of the model CHP; it is also an opportunity to understand your complaints and gain insight into your services. This, in turn, enables learning and improvement. The data is also an excellent platform for you and others in the sector to benchmark performance and to identify and work together on common challenges.

Ideally, learning from complaints should be embedded in governance structures, to promote an organisational 'valuing complaints' culture. I encourage you to share the enclosed information widely within your organisation, especially with staff who have service delivery or service improvement responsibilities.

This year we have noticed an increasing number of complaints are coming to us having first been handled by health and social care partnerships. When this happens, we log the complaint as relating to the HSCP as they have taken on the role of complaint handler. This also reflects the experience of the complainant who has dealt with the HSCP through their complaints process.

This means that if you have delegated any of your complaints handling to an HSCP, complaints that come to us through that route will not be reflected in the enclosed statistics. Details of HSCP complaints we have logged are on our website and you should confirm with the relevant HSCP whether any relate to services that they are delivering on your behalf.

The model CHP: Complaints performance indicators

Last year I asked you to reflect on how and when you collect, collate and report your complaints data to ensure that it is timely, robust, and has integrity. I am pleased to note that the most recent annual performance data from the sector was compiled by the complaints network quicker than ever before and through a revised process that reduces the potential for errors in reporting. However, we do not yet hold a full set of data as two local authorities did not submit their data within the timescale set by the network. The network's benchmarking activities can only achieve the best outcomes where we are able to compare and contrast performance across all local authorities. Therefore, I have asked my CSA staff to ensure that those authorities that have not yet submitted their data to do so as soon as possible. Going forward, the complaints network members have agreed to move to quarterly reporting of the key complaints performance indicators in 2018-19. This is a very positive move and will allow the group to compare and contrast current data as we go through the year.

I was disappointed, however, to note that across the local government sector, the average timescales for closing complaints at stage 1 of the complaints procedure is 8.1 working days (against a performance measure of 5 working days) and the average timescales for closing complaints at stage 2 of the complainants procedure is 23.8 working days (against a performance measure of 20 working days). This is a deterioration from the previous year's reported performance for the sector. I noted that only around a third of all councils close complaints within the timescales at each stage. Therefore, I would again encourage you, through your participation in the complaints network to actively support the benchmarking of your complaints handling performance to help drive up the overall levels of performance across the sector.

As part of this year's business plan, my Standards team will be working to assess the effectiveness of the model CHPs in place across the public sector in Scotland. I would encourage you to feedback to us on where the procedure works well and where it may be improved to ensure we put people at the heart of public service provision.

Uphold Rate

This year we have calculated the uphold rate using the number of complaints where we made a decision on the complaint, ie upheld, some upheld or not upheld. We feel that excluding withdrawn, resolved and otherwise incomplete investigations from this calculation

gives a more accurate representation of the performance of organisations and allows you to benchmark more effectively.

You will therefore find the figures for uphold rate this year do not directly compare with previous years.

For information, we have included both our new uphold rate calculation, and the old uphold rate calculation on the tables for your organisation.

Complaint Handling Marker

As you will be aware, in our complaints investigations we review to what extent authorities' complaints handling was in line with the requirements of the model CHP.

During 2017-18, we found that just over 22% of the cases we closed included one or more complaints handling failings. While it is pleasing to note that in many cases authorities identified shortcomings themselves prior to receiving feedback from us, I would like to draw your attention to the three key areas where authorities were likely to fail to meet the CHP requirements:

1. Identifying fully each issue being complained about and providing an accurate, proportionate and evidence-based decision for each complaint.

2. Communicating clearly with the complainant and managing their expectations in respect to the complaints process and likely outcomes.

3. In respect of timescales at stage 2 of the model CHP, keeping the complainant updated where timescales will not be met.

Even if you did not have a complaint upheld by us, or we didn't make any findings about complaint handling, you might find it useful to consider your organisaton's performance in these three areas when reviewing annual complaints data.

As always we are keen to support you in developing and maintain good complaints handling practice.

Best practice website

All of our resources, guidance, updates and training opportunities for complaints handlers and governance teams are available on our website: www.valuingcomplaints.org.uk

In 2017/18, we also published a thematic report under the title 'Making complaints work for everyone', which was launched at our SPSO conference in December 2017. The report focuses on the impact of complaints on staff who have been complained about. It highlights that organisations need to actively support their staff through complaints processes and engage staff in positive and purposeful activities to manage and learn from complaints. Although focused on staff, it also makes reference to service users and how supporting staff can support service improvement.

If you haven't done so already, I'd encourage you to read it at http://www.valuingcomplaints.org.uk/spso-thematic-reports

This website is regularly updated with further materials. If there are any other areas of information that you think it would be helpful to include, please contact Communications@spso.org.uk .

Scottish Welfare Fund

A number of authorities asked us whether Scottish Welfare Fund reviews data could be included in our annual letter, so we have included a short summary. The full set of statistics were sent to you by the Scottish Welfare Fund team with the SPSO SWF Annual Report, at the end of July. They are also available on our website at https://www.spso.org.uk/scottishwelfarefund/statistics

Customer service satisfaction

We are committed to continuous improvement of our own services. In this respect your feedback to us is crucial and I would be very grateful for any views you have on:

- challenges to implementing SPSO recommendations and how we could overcome them, and

- our service in general and ways in which we could improve.

You are welcome to write to me. Additionally we have relaunched a survey that is sent to all authorities with which we interact, on a rolling basis. I appreciate that we are all busy, but if you could complete the online questionnaire when you receive it it will help us understand your experience of our services, how we could improve (for everyone's benefit) and how we meet our service standards.

Please contact me directly if you have an questions or comments, ot would like to discuss any aspect of this letter.

Yours sincerely

Rosemary Agnew
Scottish Public Services Ombudsman

CC'd:
Ms Lorraine Brown
Councillor Derek Milligan

Explanatory note to SPSO statistics   2018

The notes below explain how we present our statistics. If you have any further queries, please contact our Information Analyst, Louise Rae, at ICT@SPSO.gsi.gov.uk or by calling 0131 240 2960.

Statistics

The tables show the complaints we handled about your organisation in 2016/17. **Table 1 (Page 1 in 'Tables' document)** shows complaints **received** by main subject area, both about your organisation and overall in your sector, for the past two years. **Table 2 (Page 2 in 'Tables' document)** shows the **outcomes** of the complaints we handled about your organisation for the same period. It also highlights the rate of premature and fully/some upheld complaints and overall rates for your sector over the past two years. Complaints received are shown ranked from the most received to the least.

Subjects of complaint and outcomes

Tables 1 and 2 provide statistics for two quite different stages of our work. **Table 1** describes the subjects about which we **received** complaints between 1 April 2017 and 30 March 2018, and shows your organisation's figures beside the figures for the sector as a whole. **Table 2** shows information about the outcomes of the complaints that we **determined** over the same period. The figures of complaints received and determined are unlikely to tally, especially where complaints numbers are relatively large. This is because at the end of each business year we are still working on some of the complaints received during that year.

Frequently asked questions

What are complaints that are 'fit for SPSO'?

These are complaints that we were able to investigate. This normally means that they have gone through the complaints process of your organisation, and are about something that the law allows us to look at.

What do the stage names mean?

- Advice - This is the initial receipt stage where we check if we have enough information, that the complainant has first complained to the relevant organisation, and that the matter is one we are allowed to look at.
- Early Resolution – This is where we confirm that the complaint is mature (ie that it has completed the relevant organisation's complaints process) and is in jurisdiction, and start gathering the information we will need for an investigation. Some cases that could be investigated are closed at this stage if we are able to resolve them with the organisation, or if we consider there would be no significant benefit, or achievable outcome, from a full investigation. Prior to 1 April 2016, this stage was called 'Early Resolution 1'.
- Investigation – This is where we conduct the investigation and reach a decision on the complaint. This stage includes everything that, prior to 1 April 2016, was referred to as Early Resolution 2, Investigation 1 and Investigation 2.

What does 'determined' mean?

Determined complaints are those that we have looked at and for which we have closed our file. We will have given the person a decision by letter or public report, or will have explained why we didn't investigate their complaint.

What are 'upheld' complaints?

Complaints where the outcome was 'upheld' or 'some upheld' are those where we investigated, and found that something went wrong. To recognise the validity of the

complainant's experience, we uphold complaints wherever we find fault, even if this has already been recognised by the organisation. People come to us for an external, independent judgement and if we find something went wrong it is important for the complainant that we acknowledge this. We also include how the organisation responded to the complaint and any action that they took to put things right. Where an organisation responded well, we may also commend them for acknowledging the mistakes and the action they took to resolve this for the complainant.

All these complaints were 'fit for SPSO', and we gave a decision on them at the investigation stage of our process. Some of these result in us sending you and the complainant a decision letter. We also published a short summary of most of these complaints and their outcomes on our website. Cases that meet our public interest criteria are published in full.

How do you define a premature complaint?
It's a complaint that's been sent to us too early - i.e. before it has completed your complaints process.

What is the reason for the apparent drop in Premature Complaints?
There are a number of reason for this, including efforts by organisations to improve their own processes, and to communicate more clearly with complainants about when they can refer to SPSO. However, in addition, in April 2016 we changed the way we record telephone contacts where it is clear the caller needed to contact the organisation to progress their complaint before we could take it any further. Previously these would have been recorded as premature complaints at the 'Advice' stage, but now they are recorded as 'enquiries' and we do not record any details about the complainant or the organisation they are complaining about. Any formal complaint submissions, or cases where we need to get more involved, or give more detailed advice are still recorded as premature complaints at the Advice stage.

Would you ever take a complaint before it completes our process?
Yes, but only where we think the circumstances are appropriate. This only happens in a very small number of cases. The most likely examples would be where we think that you have delayed unreasonably in responding, or where the person who's complained appears to be particularly vulnerable. We normally expect people to complete your complaints process to allow you to respond to the matters raised, and we will normally tell them to contact you if they haven't.

I don't seem to know about all of the complaints that you've counted as premature. Why?
There are several possible reasons. We don't write to you about all the premature cases we receive (see the next question for more information about this). In some cases where we refer someone back to the complaints process, you may then resolve the problem to the person's satisfaction without knowing that it came to us first.

Alternatively, the person may, after we've told them they need to go through your process, decide not to take it further. People often bring us issues that are premature, but that are also outwith our jurisdiction, or where they're asking for an outcome we can't achieve. When we reply, we'll tell them that we're not looking at it because it's premature, but we also explain that even if they go back through your process, it's unlikely we'd take the complaint up for another reason. For example, if they're asking us to change a planning decision or if it's a personnel-related matter we'd explain that we are unable to achieve these outcomes for them , whether or not they went through your process. It's then for the complainant to decide what to do next.

When do you tell us about premature complaints?
We determine many of these very quickly (within one or two days of receiving them). This normally happens where the complaint has clearly come to us too early and there's little or no information with it. We record these on our computer system, but don't open a file. In most cases we simply return the letter explaining that they've sent us the complaint too soon and that they need to complain to you. We don't normally tell you about these, and we usually have only minimal information about the complaint ourselves.

In cases where the person has sent us information, but the complainant doesn't appear to have completed your complaints process, we'll open a paper file. We'd normally then write to you explaining that the matter has come to us too soon, and we've told the person to take the complaint back to you. We then close our file, which we can reopen if the person completes your process and brings the complaint back to us.

Can you provide a more detailed breakdown of the premature complaints for my organisation?
We can provide numbers and general categories of complaints received prematurely. These are broken down into two areas – complaints that do not appear to have been made to you at all, and those that have started but not completed your process. (We don't record which point in your process they've reached, as usually we don't know this.) We can usually identify the department and the subject matter involved, but at this early stage categorisation may not be accurate if there is a lack of detailed information.

The categories of complaints on your letter don't match those in our records - does this mean that our statistics are wrong?
We have our own method of categorising the complaints we receive, which is not based on those of any particular organisation. If you would like an explanation of a particular category, please contact us.

Town Centre Capital Fund 2019/20

Report by Dr Mary Smith, Director, Communities, Education and Economy

1. Purpose of Report

1.1 The purpose of this report is to provide information in relation to the recently announced £50million Town Centre Capital Fund of which Midlothian has been awarded a £910k allocation.

1.2 The report seeks approval for both the governance of the fund and the mechanism for proposing and approving Midlothian based projects.

2. Background

2.1 In 2013 the Scottish Government published the Town Centre Action Plan. This was in response to their national review of town centres. The action plan focussed on national and local solutions, identifying a range of actions over key themes to encourage and stimulate activity across public, private and community sectors in order to help revitalise town centres.

2.2 The Town Centre Capital Fund is new ring fenced Scottish Government capital funding offered to each Local Authority in Scotland through the local authority capital settlement. The aim of this funding is to enable local authorities to stimulate and support place based economic investments which encourage town centres to diversify and flourish, creating footfall through local improvements and partnerships.

2.3 It is expected this fund should contribute to transformative investments which drive local economic activities and re-purpose town centres to become more diverse, accessible, sustainable and enterprising places.

2.4 Scottish Government guidelines request the fund should deliver against the themes of the Town Centre Action Plan. Those themes are:

- Town Centre Living – footfall is key to achieving thriving, successful towns centre; and, the best footfall is residential for people who will use shops, services, and will care for its safety and security in the evenings.

- Vibrant Local Economies – creating a supportive business environment including the involvement of Business Improvement Districts (BIDs) and other local partnerships.

- Enterprising Communities – social enterprise, services, arts and events; and, community empowerment and community based activities which increase the health, wealth and wellbeing of town centres.

- Accessible Public Services – creating and accessing public facilities and services, supported by economic, service and transport hubs.

- Digital Towns – exploiting digital technology and promoting Wi-Fi infrastructure to enable access to information, data analytics, marketing opportunities, branding, and communication with the wider world.

- And Proactive Planning – land reform and supporting the creation of sustainable, low-carbon and connected places which promote natural and cultural assets, designed in partnership with local communities and key stakeholders.

3   Report Implications

3.1   Details of Fund

3.1.1   The Scottish Government have produced broad guidelines detailing how they would like Town Centre Capital Funding to be spent and reported on.

3.1.2   Funding will be paid to Local Authorities quarterly; in April 2019, July 2019, November 2019 and March 2020. Any funding not spent within 2019/20 financial year will be reclaimed by the Scottish Government.

3.1.3   'Spent' has been defined as where the construction work has commenced or contracts signed. All works must be completed by six months into the next financial year 2020/21 or there is risk of funding being reclaimed.

3.1.4   Decision making on how to spend the funding resides with local authorities and there is no requirement for bids or submission of proposals to the Scottish Government for approval.

3.1.5   Local Authority investment decisions should align with the 'Town Centre First Principle' and the 'Place Principle'. As such, it is expected that investment decisions are based on approaches which are collaborative and place based with a shared purpose.

3.2   Local Action

3.2.1   Given the time constraints on this funding, a project team representing interested Council departments was assembled. Represented on this group are senior officers from: Planning, Conservation and Environment, Communities, Estates and Economic Development.

3.2.2   The third sector is also represented on this group following an approved participation request from Midlothian Voluntary Action under the guidelines of the Community Empowerment Act.

3.3 Proposed Approach

3.3.1 To enable the Council to maximise the impact of the new Town Centre Capital Fund within the strict timeline associated within financial year 2019/20 to spend, and consider projects in a fair, open and collaborative way, the group have suggested a process for proposing and developing applications:

- This would take a co-ordinated communication exercise targeting communities, third sector and business groups to raise awareness of the funding opportunities and to invite expressions of interest.
- Expressions of interest would follow a similar format to those currently in place within Tyne Esk LEADER; capturing a basic understanding/overview of the project proposal along with an estimated cost. Council led applications would require to follow this format in the same way.
- It is recognised that some Midlothian town centres have received considerable investment via Conservation Area Regeneration (CARS) /Townscape Heritage Initiative (THI) funding whilst some towns had received limited or no investment. Projects from towns which have received limited investment will be encouraged.
- And projects which offer leverage by way of match funding/ additionality will be considered favourably.
- Capital projects can require considerable time for associated planning, studies, and consultations and for completion of works. A critical part of the criteria when considering proposals should therefore be the ability for projects to be deliverable within the timescales provided. Any funds unspent within these timescales will be reclaimed by the Scottish Government.
- Selection criteria will be developed which aligns with the Scottish Government fund guidelines and which takes recognition of local policy and priorities.
- Expressions of Interest will be considered by a steering group comprised of senior officers from Planning, Estates, Economic Development, Communities, and the third sector. The elected member with the Communities and Economy portfolio will also be invited to participate in this process.
- Projects that best fit the selection criteria will be shortlisted by the steering group. Projects will then require further developing to include detailed costings and consultation as required. Support will be offered by council officers in the case of any community led submissions.
- Developed projects will be resubmitted to the steering group for further consideration and to ensure viability.
- Recommended projects will be submitted to Council in October for final approval. Appropriate timescales will be applied to each stage of this process to ensure project delivery within the timeframe set by the Scottish Government.
- There will be no appeal process for unsuccessful applicants.

4. Resource

4.1 It is proposed that the management and reporting of this process and fund is led by the Council's Economic Development Service in close liaison with Council colleagues. However applicants will be offered support from officers across the council.

4.2 The Economic Development service have strong links to Scotland's Towns Partnership which are the Scottish Government funded national organisation providing practical support and guidance to support town centres and neighbourhoods including Business Improvement Districts. Support from this organisation will be of great value throughout this process. The service also have oversight of key strategic projects which this fund has the opportunity to complement.

4.3 Improving the sustainability and viability of Town Centres is of interest to not only the communities of Midlothian in which they are located, but also to the wider range of Council departments which provide a service to, or that are located within. It is envisaged that this fund and process will be cross service in approach, thereby ensuring quality proposals and maximising the additionality potential.

4.4 No Council funds are required to match this funding although efforts will be made to lever external funding opportunities where possible to enhance the impact and benefit of funding.

5. Risk

5.1 As this funding is time limited with spend required this financial year 2019/20, one of the main risks is not agreeing an effective process and timescale for considering project proposals.

5.2 **Single Midlothian Plan and Business Transformation**
Themes addressed in this report:

☐ Community safety
☐ Adult health, care and housing
☐ Getting it right for every Midlothian child
☒ Improving opportunities in Midlothian
☒ Sustainable growth
☐ Business transformation and Best Value
☐ None of the above

5.3 **Key Priorities within the Single Midlothian Plan**

- The funding is directly aimed at supporting the regeneration of Town Centres which is a key priority under the Sustainable Growth theme of the Single Midlothian Plan.

- The monies will directly fund projects which support place based economic investments which encourage town centres to diversify and flourish.

- Projects have the potential to improve opportunities for the people of Midlothian. Public engagement will attempt to involve citizens in the design and delivery of their local services. Project proposals will be encouraged from all communities giving individuals and groups the opportunity to directly influence project spend and the third sector will have a key role in the decision making process.

- Community asset transfer proposals will also be duly considered as part of the process where requested.

5.4   Impact on Performance and Outcomes

- This new funding has the potential to have significant impact on a range of economic outcomes.

- Depending on the nature of the projects supported, the fund has the potential to increase the attractiveness of Midlothian's town centres as a place to work, live or invest in.

- It offers opportunity to support the national inclusive growth agenda through: helping to support, attract or secure employment opportunities and/or public services, and encourage business start-ups and growth.

5.5   Adopting a Preventative Approach

Successful town centres are a key component of a thriving local economy and part of the Scottish Governments Inclusive Growth agenda. Having a vibrant and successful local town centre can help deliver key services, provide employment opportunities, attract tourism and encourage investment, all which has a positive impact on the local economy and its people.

5.6   Involving Communities and Other Stakeholders

The opportunity to submit project proposals for this fund will be a fair, open and transparent process. Proposals will be considered from communities, third sector, businesses and public sector groups. Successful projects will be those which are best fit to the fund guidelines. The wider community and third sectors will be represented by a dedicated representative on the steering group and assessment panel.

The opportunity to allocate this funding following a Participatory Budgeting approach was considered by the group. However it was felt that this would be unachievable within the specified time restrictions. If additional town centre capital funding is released in the future then it is suggested to reconsider this approach.

5.7   Ensuring Equalities

Projects will be considered in line with fund guidelines which will be developed with consideration to local policy and priorities. This process will be inclusive.

5.8   Supporting Sustainable Development

The nature of this fund is to support sustainable development and investment within Midlothian town centres. This will be a key criteria when considering proposals to ensure project viability.

5.9   IT Issues

No IT Issues apparent at this stage.

6. Summary

6.1 This report provides background on the new Town Centre Capital Fund of which Midlothian has been awarded a £910k allocation to be spent this financial year.

6.2 It summarises that decisions should be made in a collaborative manner, as underpinned by the key themes identified in the Town Centre Action Plan and in line with local policy and priorities.

6.3 The report suggests a process for proposing and approving capital projects which must be delivered in the current financial year or risk of funding being reclaimed by Scottish Government.

7. Recommendations

Cabinet is recommended to:

1. Note the guidelines and timescales of the funding.

2. Agree the suggested process for project proposals and consideration.

3. Agree projects will be presented to October Council meeting for final approval.

08 May 2019

Report Contact:
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Background Paper: Town Centre Capital Fund 2019/20 – Guidance Note

TOWN CENTRE CAPITAL FUND 2019/20 - GUIDANCE NOTE

Purpose

1. The purpose of this note is to provide local authorities with guidance on the aims and allocation of the ring-fenced £50m Town Centre Fund distributed through the local authority capital settlement.

Aims

2. The aim of the Town Centre Fund 2019-20 is to enable local authorities to stimulate and support place based economic investments which encourage town centres to diversify and flourish, creating footfall through local improvements and partnerships. Specifically, this fund will contribute to transformative investments which drive local economic activities and re-purpose town centres to become more diverse, successful and sustainable.

3. In particular, the grant will fund a wide range of investments which deliver against the themes of the Town Centre Action Plan including town centre living and supporting town centres to be vibrant, accessible and enterprising places. This could include re-purposing buildings for housing, retail, business, social and community enterprise, services, leisure, and culture, tourism and heritage; and, improving access and infrastructure.

Wider expectations and support

4. It is expected that local authorities make investment decisions in the context of national and local commitments to town centres including the Town Centre First Principle and the Town Centre Action Plan; and more recently, the Place Principle. As such, it is expected that investment decisions are based on approaches which are collaborative and place based with a shared purpose; and, make use of tools and support developed by the Scottish Government, Scotland's Towns Partnership and other key partners.

National and local commitments

5. The Scottish Government is committed to supporting town centres face the challenge of changing and evolving retail patterns; and, is investing in town and neighbourhood centres so that they can be sustainable and thriving places for communities to live, work and enjoy.

6. This investment is in addition to the 26% of capital funding share which is the current agreed baseline between the Scottish Government and Local Government. It is part of a wider boost to the economy by providing over £5 billion of capital investment to grow and modernise Scotland's infrastructure; and, a wider package to support businesses, including maintaining a competitive business rates package.

Town Centre Action Plan and Town Centre First Principle

7. The Town Centre Action Plan published in 2013 was the Scottish Government's response to the National Town Centre Review. It focused on national and local solutions, encouraging action across public, private and community sectors. The Scottish Government and local government subsequently agreed the Town Centre First Principle which requested that government, local authorities, the wider public sector, businesses and communities put the health of town centres at the heart of proportionate and best value decision making, seeking to deliver the best local outcomes regarding investment and de-investment decisions, alignment of policies, targeting of available resources to priority town centre sites, and encouraging vibrancy, equality and diversity. It committed to a collaborative approach which understands and underpins the long term plan for each town centre.

8. The aim of the fund is to deliver against the themes of the Town Centre Action Plan. Those themes include:
    *   **Town Centre Living** – footfall is key to achieving thriving, successful towns centre; and, the best footfall is residential for people who will use shops, services, and will care for its safety and security in the evenings
    *   **Vibrant Local Economies** – creating a supportive business environment including the involvement of Business Improvement Districts (BIDs) and other local partnerships
    *   **Enterprising Communities** – social enterprise, services, arts and events; and, community empowerment and community based activities which increase the health, wealth and wellbeing of town centres
    *   **Accessible Public Services** – creating and accessing public facilities and services, supported by economic, service and transport hubs
    *   **Digital Towns** – exploiting digital technology and promoting Wifi infrastructure to enable access to information, data analytics, marketing opportunities, branding, and communication with the wider world
    *   **Proactive Planning** – land reform and supporting the creation of sustainable, low-carbon and connected places which promote natural and cultural assets, designed in partnership with local communities and key stakeholders.

Scotland's Towns Partnership

9. The Scottish Government funds Scotland's Towns Partnership to provide information, support and services which contribute to the vibrancy, vitality and viability of our town centres and neighbourhoods; and, to support the development of partnerships including Business Improvement Districts.

10. There are a range of tools and resources to support how partners can understand, audit, plan, and improve their town centres. It is expected that local authorities will use a range of tools and approaches to ensure investment decisions are based on an understanding of town centre performance and ownership; shared visions and plans with local communities, partnership and stakeholders fully engaged; and, identification of physical infrastructure changes that will contribute to maximisation of investments and achievement of those visions.

Tools and resources

- [Understanding Scottish Places](#) (USP): a unique and dynamic online tool which shows how every town in Scotland with a population of 1,000 or more is interacting with its surrounding settlements and performing against a range of indicators and inter/dependency relationships.
- [USP Your Town Audit](#): add to USP a six-day study which provides the standard benchmark for measuring the health of a Scottish town.
- [Place Standard](#): a framework designed to support communities, public, private and third sectors to work efficiently together to assess the quality of a place.
- [Town Centre Toolkit](#): guidance on designing and planning town centres to be attractive, accessible and active, focusing on urban design, quality, sustainability and use of town assets.

Support

11. The Town Centre Fund provides an opportunity to build on work by local authorities to develop and implement town centre action plans; and, to realise transformative ambitions arising from those plans. Scotland's Town's Partnership will continue to support local authorities and other key partners in this. However, additional support is offered by Scotland's Towns Partnership in partnership with other key organisations such as: Scottish Futures Trust; Scottish Enterprise, Highlands and Islands Enterprise, or South of Scotland Economic Partnership; and, Architecture and Design Scotland to support the development of investment decisions or work with local authorities individually or across neighbouring or regional authorities, to build momentum, share learning, and, to maximise funding.

12. Local authorities will have their own good practice in terms of monitoring and evaluating the benefits, impacts and outcomes of investment as part of relevant strategies and programmes; and, to ensure that they meet their duty to achieve Best Value. Additional support could also be offered to discuss how best to identify and collect data; assess impact; and, share formats that could contribute to consistent and wider learning.

Adult Social Care
Performance Report Quarter Four 2018/19

Progress in delivery of strategic outcomes

"People in Midlothian will lead longer and healthier lives by getting the right advice, care, and support, in the right place, at the right time."

The Adult Health and Social Care service continues to undergo redesign as required by the Integration agenda. The 2016-19 Strategy and Delivery Plan outlined a major programme of service changes designed to promote prevention and recovery. Service priorities for the year included reducing avoidable admissions and unnecessary delays in acute hospitals; supporting people with long term conditions and dementia; reshaping substance misuse services; and promoting wellbeing and recovery. The enablers to achieve this included improved partnership working, public engagement and working with communities. The three major programmes of redesign are Learning Disability Day Services, Care at Home, and Learning Disability care packages.

The most challenging of these strategic redesign programmes for the IJB is Care at home. Care at home is a vital service for maintaining people's health and wellbeing. It is also a critical component of the whole health and social care system. Lack of capacity directly affects the efficiency of the hospital system; the ability of people who are vulnerable in some way to remain safely in their own homes; and the ability of family carers to manage their caring responsibilities upon which the whole system depends. Nationally and locally the delivery of Care at home services is recognised as being unsustainable in its current form. Demand for care at home is growing and care capacity cannot match that growth without whole system change. The IJB acknowledge the challenges and going forward two multiagency events will take place as part of ongoing discussion.

1. Integration
The Health and Social Care Strategic Plan 2019-22 has been developed and approved. The Plan includes a major programme of public and staff consultation and a compilation of a population health and wellbeing needs assessment. New services such as a Midlothian Discharge Hub are being introduced, while others are being expanded such as the COPD Respiratory Team and the Wellbeing Service now operating in all GP Practices. Musculoskeletal advanced practitioner physiotherapists and pharmacists are also in most GP practices now. The IJB has continued its efforts to strengthen its partnership working with the Voluntary Sector holding a third summit in November.

2. Inequalities
Action continues to be focused on addressing the unfair and avoidable differences in people's health across social groups and between different population groups. The Wellbeing Service was re-tendered and is now available in all 12 Midlothian GP Practices. Midlothian representatives involved in work that is progressing on the prevention of type 2 diabetes at a national, regional and local level. Work to develop models of homelessness support to people with complex lives is underway. A plan for COPD prevention and early identification is being prepared. The Income Maximisation post (to work with local families) has now been filled.

3. Criminal Justice
The Criminal Justice Team has moved to a temporary home while their building becomes a recovery hub that will bring mental health, substance misuse and criminal justice services together. The recovery hub will be called Number Eleven and will allow new ways of working across services to improve outcomes and accelerate access to services for some of the most needy and complex individuals in society. The new Unpaid Work service continues to develop with staff undertaking a 36 hour training for trainers' e-learning course with the face to face training planned for May. This will enable Unpaid Work supervisors to offer certificated training courses to service users subject to Community Payback Orders. Spring has gone from strength to strength in the past year and the Spring Team Leader and social worker posts have been made permanent. Interest in attending has significantly increased and there is now a waiting list for the service. Safe and Together represents a culture change in how domestic abuse is viewed within a child protection context. The Criminal Justice team are able and willing to work with fathers on a voluntary basis. Further training has recently taken place and the Public Protection Learning and Development Co-ordinator has completed Training for Trainers and can now deliver Safe and Together training. It is anticipated that referrals to

the perpetrator service will increase, albeit slowly, as the approach becomes more embedded in child protection work.

4. Substance Misuse

MELDAP held a consultation event with service users and carers that helped inform the new Strategic Plan and identified key priorities for the partnership. MELDAP continues to lead work in developing responses to changing drug trends. A number of short, mid and long term actions are being taken forward by partners with Midlothian, East Lothian and the Lothian Health Board area. This includes developing a leaflet regarding powdered Ecstasy ["Mandy"] specifically being developed for young people and planning a Lothian Wide Workshop in relation to emerging drug trends. The "drop in" clinic to offer patients who find keeping appointments challenging continues to be a success. This is a partnership with Nurses, Peers and Social Work. The aim is to keep more chaotic population engaged and reduce unused appointments. This has ensured that currently no-one is waiting for access to the SMS Service.

5. Technology

Technology offers a range of tools to support pathway and service redesign in terms of both iterative improvements and transformative initiatives. We continue to proactively engage with the emerging digital agenda in Scotland to maximise the value that technology, in all its forms, can add. Last quarter we acknowledged our need to assess our exciting digital maturity to match our capability with our aspiration and roadmap appropriately. Scottish Government has just released a national maturity assessment schedule for NHS and Council. Our business intelligence and analytics project to deliver an integrated operational resilience dashboard is progressing well. We have established an initial data set and now have a working prototype in a test environment to drive data driven discovery and improvement. This will be tested with senior management and end users along with seeking to make the processes of obtaining and updating data in the visualisation more robust through efforts to automate. The HSCP have also submitted an application for Scottish Government TEC funding, to develop an electronic frailty record that would support multi agency use in the management of our frail population.

6. Learning Disabilities

Cherry Road Resource Centre which provides day services for people with learning disabilities and complex needs received top marks for quality of care and quality of management and leadership following an inspection of the Care Inspectorate this year. Key areas of work continue to be focused on day service provision within Midlothian and the ongoing programme of reviews of existing care packages. Work is progressing to develop positive behavioural support services within Midlothian.

7. Self Directed Support

Current focus of activities continues to be supporting the implementation of Self Directed Support and enhancing support planning processes (including option 2), back office processes and develop practice to embed principles of choice and control in the provision of support. Work is being initiated to review the budget allocation tools.

8. Older People

As previously referenced our biggest challenge around older people's services in Midlothian continues to be capacity for both Care at home and Care homes. The services have undertaken a number of initiatives with Care at home to increase capacity by commissioning additional contracts to our external providers, reorganising the in house service client runs, and working closely with the voluntary sector to see how they can provide alternatives to Care at home. The first graduates from our new Carer Academy have now graduated and are being interviewed for care positions. A recruitment campaign is also underway, in collaboration with our external partners. Care homes are presenting a different challenge. There is bed capacity across Midlothian, however, families/individuals often make choices based on those with lengthy waits, blocking a hospital bed for others that require medical intervention. The team are working on a suite of information leaflets for all Midlothian patients >65 years old, so consistent conversations can take place from admission. A new Care Home Strategy is in development and focusses on the management of stress and distress, unnecessary hospital admissions and falls within our Care homes. A comprehensive Quality assessment framework has been developed and will be routinely used across all care homes on a monthly basis, to detect any issues and support management teams to continually improve quality of care. The HSCP have agreed funding for additional clinical/care posts to augment the current care home team, which is testament to the focus the partnership has on improving care for older people. We have been working closely with the Care Inspectorate to develop quality of care across Care Homes, as well as Highbank Intermediate care facility and Care at Home.

9. Carers

The Carers (Scotland) Act 2016 was implemented on 1st April 2018. Work during 2018/19 has focussed on ensuring duties and responsibilities under the legislation were in place for implementation and delivery of new services/responsibilities. Agreement has been given and NCA signed for funding to support VOCAL to undertake Adult Carer Support Plans as part of sharing legislative duties; this work began in Q3 2018/19. This responsibility also involves the requirement to provide Carer Census reporting to the Scottish Government which VOCAL have submitted; the Adult Performance and Improvement Team submitted in December 2018 the first report for the carer's

census per Scottish Government requirement; the second submission of this year being due in April 2019. The Carers Strategic Planning group have reformed to take stock of progress, and consider progress against the Action Plan; an updated strategy is the next task for the group. Feedback from a Carers event/consultation in November 2018 has been used to inform the Carers Strategy and Midlothian Strategic Plan. A Short Breaks Service Statement was prepared and published online by end of December 2018, as per legislative requirements.

10. Mental Health

Penumbra the new service provider for the remodelled mental health community based rehabilitation service commenced on 1st April 2019. The Wayfinder model will be implemented and evaluated. Utilising Action 15 funding 3 FTE Primary Care Mental Health nurses are in post and have dual roles to support the expansion of the Access Point and test the role of primary care mental health nurses initially in 4 GP practices, with a view to expanding this role across Primary Care in Midlothian.

11. Adults with Long Term Conditions, Disability and Impairment

The Joint Physical Disability Planning Group continues to pursue any outstanding issues in their current Action Plan with the effective sharing of information still a priority. The first Disabled Peoples' Assembly is due to take place on the 27th March in Dalkeith. The hearing aid maintenance clinics running once a month in Dalkeith Library continue to prove extremely popular. More volunteers have been recruited and received training from Audiology. This will enable the commencement of a clinic in the Town Hall in Penicuik shortly. The LAC service continues to support the peer support side of this. The Health and Social Care Partnership are currently exploring possible funding for Audiology equipment for the Community Hospital to facilitate a local assessment provision, with a funding bid being made to the Capital Steering Group in April 2019. The Midlothian Council British Sign Language final plan is being completed on the back of the consultation information gathered. This will be submitted to Council for approval.

Challenges and Risks

Funding pressures
There is a continuing requirement to deliver a balanced budget by achieving major efficiencies despite the growing demand, particularly those with complex needs.

Capacity and Quality of Services
Increasing demand on Care at Home services continues to be a major challenge to deliver the care and support needed. This is heavily impacting on assisting hospital discharges and supporting people at home in the community who require increased care and support. However, a service review is planned for 2019 and development work is underway to attempt to manage the challenges.

Absence Management Increasing levels of absence in service creates challenges for delivering effective and efficient service delivery. Work is targeted at teams with greater absence levels to maximise attendance and promote health and wellbeing in staff teams. Absence management monitoring is underway at local team and Head of service level, working with colleague from HR. Managers are actively supporting individuals though the Absence management process where required. A locum bank is being proposed to support carer absence in Newbyres Care Home and Highbank intermediate care facility, similar to the one already operational within Care at Home. This will aim to minimise agency use/spend where safe and possible.

Adult, Social Care PI summary 2018/19

Making the Best Use of our Resources

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
01. Manage budget effectively	Performance against revenue budget	£38.805m	£40.919m	£39.757m	£39.777m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£39.757m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	10.53	4.17	8.04	12.90	16.46	🔴	**18/19**: Off Target Absence in some areas increased over quarter. Care Homes and Care at Home continues to be the current focus. Performance review and monitoring is in place to ensure improvement and practice sustained. A locum bank is being proposed to support carer absence in Newbyres Care Home and Highbank intermediate care facility, similar to the one already operational within Care at Home. This will aim to minimise agency use/spend where safe and possible.	⬇	10.53	Number of days lost (cumulative)	8,053.26
											Average number of FTE in service (year to date)	489.23

Corporate Health

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
03. Complete all service priorities	% of service priorities on target / completed, of the total number	89.47%	100%	97%	93.94%	87.88%	🔴	**18/19**: Off Target 29 out of 33 actions on target. Details contained within body of the report.	⬇	90%	Number of service & corporate priority actions	33
											Number of service & corporate priority actions on tgt/completed	29
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	95%	94%	94%	93%	93%	🔴	**18/19**: Off Target Continues to remain off target. Service continues to work to address delayed invoice	⬇	97%	Number received (cumulative)	26,333
											Number paid within 30 days (cumulative)	24,385

4

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
								payment, however, recognise that processing delays often result from invoices being queried with externally providers.				
05. Improve PI performance	% of PIs that are on target/ have reached their target.	86.49%	50%	50%	50%	75%	🛑	**18/19**: Off Target 3 out of 4 priority indicators on target. The performance report also includes a further 11 data only indicators.	⬇	90%	Number on tgt/complete	3
											Total number of PI's	4
06. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%	✅	**18/19**: On Target	➖	100%	Number of high risks reviewed in the last quarter	2
											Number of high risks	2

Improving for the Future

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
07. Implement improvement plans	% of internal/external audit actions progressing on target.	52.17%	17.65%	81.25%	53.85%	77.78%	🛑	**18/19**: Off Target Activity progressing to conclude the three outstanding audit actions.	⬆	90%	Number of internal/external audit actions on target or complete	7
											Number of internal/external audit actions in progress	10

Adult Social Care Complaints Indicator Summary

					2018/19			Annual Target 2018/19
Commitment to valuing complaints								
Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19				
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	54	10	32	47	67		**18/19**: Data Only	
Number of complaints closed in the year		8	24	46	65		**18/19**: Data Only	
Number of complaints upheld (cumulative)		3	11	17	21		**18/19**: Data Only	
Number of complaints partially upheld (cumulative)		1	5	12	16		**18/19**: Data Only	
Number of complaints not upheld (cumulative)		3	7	14	24		**18/19**: Data Only	
Average time in working days to respond to complaints at stage 1	17.88	9.25	14.87	14.61	15.1	🔴	**18/19**: Off Target Service continues to address the challenges of responding to complaints at stage 1 within timescale.	5
Average time in working days to respond to complaints at stage 2	18.63	21	13.8	13.8	24.14	🔴	**18/19**: Off Target Service reviewing reasons for delay.	20
Average time in working days for a full response for escalated complaints		2	10.25	19.38	24.83	🔴	**18/19**: Off Target Service reviewing performance	20
Percentage of complaints at stage 1 complete within 5 working days	20.59%	25%	20%	17.86%	25%	🔴	**18/19**: Off Target The timescale for responding to Stage 1 complaints within 5 days continues to be a challenge.	95%
Percentage of complaints at stage 2 complete within 20 working days	57.89%	33.33%	60%	60%	57.14%	🔴	**18/19**: Off Target Service reviewing performance	95%
Percentage of complaints escalated and complete within 20 working days		100%	75%	46.15%	55.56%	🔴		95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		1	1	0	1		**18/19**: Data Only	

Adult, Social Care Action report 2018/19

Midlothian

01. Health Inequalities

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.1.1	Secure funding to maintain the Wellbeing Service and the Community Health Inequalities Team and expand service to 12 GP Practices.	31-Mar-2019	✅	100%	**Q1 18/19**: Complete Funding has been secured for 3 years. The service specification is currently advertised on the procurement portal. The service will expand to all 12 Midlothian Medical Practices on 1st November 2018.
ASC.P.1.2	Health and Homelessness action plan to be developed and approved.	31-Mar-2019	❌	90%	**18/19**: Off Target Plan updated and multiagency planning workshop on a local Housing First model planned for May 2019.
ASC.P.1.3	Develop plan to support people engaged with the Criminal Justice System in their access to health information/services.	31-Mar-2019	✅	100%	**18/19**: Complete Work continues and new pathway for people doing unpaid work to access a health check via CHIT has been established.

02. Assessment and Care Management

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.2.1	Reduce the waiting times for occupational therapy and social work services	31-Mar-2019	✅	100%	**Q4 18/19**: Complete The newly appointed 12 month fixed OT post has increased staff capacity in OT. An improvement in the reduction of people waiting on services in occupational therapy and social work is now evident following a review of working practices and improved report monitoring. Work will continue to further reduce the number of people waiting and improve the average wait time.
ASC.P.2.2	Strengthen joint working with Health colleagues	31-Mar-2019	✅	100%	**18/19**: Complete The Health and Social Care Partnership has continued to strengthen partnership working with the voluntary sector holding a third summit in November. The Penicuik Housebound Project has strengthened joint working with both health and voluntary sector organisations and is a successful multidisciplinary approach to be replicated.
ASC.P.2.3	Contribute to the development of Anticipatory Care Plans, including through the involvement of of unpaid carers.	31-Mar-2019	✅	100%	**18/19**: Complete Established system in place enabling completed Carer Emergency Plans to be shared with and stored by social work; sending an alert to primary care colleagues that a plan is accessible for consultation during both office and out-of-hour times.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					Review meeting was held during Q4 attended by SW, vol org and primary care staff. Reports of plans being well received by carers. Were able to fine tune communication between services to streamline sharing methods. Continue to promote; further review in 6 months. Qualitative research indicates a benefit to carers in having a plan in place, despite possible low numbers of occasions when they might be enacted.

Supporting Service Users Through the Use of Technology

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.3.1	Agree the viability of switching the current telecare provision from an analogue based system to a digital service.	31-Mar-2019	❌	20%	**18/19**: Off Target Continuing to await progress on three fronts. 1. National developments within the Local Government Digital Office to roadmap the requirements as a result of the national infrastructure change and scope the consequences. 2. Telecare Platform developments in East Lothian required to 'go digital'. Discussions started, and work under way to technically enable digital platform however, we are dependent on their timetable – perhaps by summer 2019 3) Procurement framework update (Scotland Excel). We have started to see some call failures from clients. We are working to establish the cause of these it could be a software issue with the Alarm Receiving Centre software platform or a consequence of a progressively digital telephony network or a combination. We have a work around and are continuing to monitor and work with the national telecare programme.
ASC.P.3.2	Explore the use of assistive technology, such as telecare monitoring, for supporting people with learning disabilities in need of overnight support.	31-Mar-2019	✅	100%	**18/19**: Complete Explored the use of assistive technology, for supporting people with learning disabilities in need of overnight support. Offer of technology declined by client's family – not able to take further, case work continues. Equipment procured and ready for deployment according to LD team requirements.
ASC.P.3.3	Extend the care home video conferencing programme to pilot Out of Hours GP telehealth assessment at Drummond Grange for 6 months to evaluate the benefits to patients and services.	31-Mar-2019	✅	100%	**Q2 18/19**: Complete Unfortunately issues identified with NHS Out of Hours services has halted progress. New Unscheduled Care Hub programme is now picking up this development area and will explore other ways of applying video conferencing to get around the impasse.

04. Carers

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.4.1	Demonstrate a strengthened approach to early identification and awareness raising of carers, including self-identification.	31-Mar-2019	✅	100%	**18/19**: Complete VOCAL and other organisations supporting carers have featured at recent Full CC Team meetings, and there have been attempts to establish newer connections with departments within the council such as with the Libraries Service (exploring

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					access and support to carers who might struggle to leave the house). Bibliotherapist plans to attend carer awareness training offered by VOCAL. Continued work with Council Healthy Working Lives Group to progress application for Carer Positive Award and Carer Policies for Staff.
ASC.P.4.2	Monitor response to demand for completion of adult carer support plans to inform future service delivery.	31-Mar-2019	✅	100%	**18/19**: Complete VOCAL now share responsibility for completion of Adult Carer Support Plans, early learning from which has been used to develop shared referral and screening protocols for use by VOCAL and Adult & Children's Services staff. Application for a Non-Competitive action to support funding for this work for a period of 18 months was signed off, and we are in the process of arranging letters of agreement/contracts to agree this work and for payment.
ASC.P.4.3	Progress implementation of the Carer's Emergency Planning toolkit.	31-Mar-2019	✅	100%	**18/19**: Complete Established system in place enabling completed Carer Emergency Plans to be shared with and stored by social work; sending an alert to primary care colleagues that a plan is accessible for consultation during both office and out-of-hour times. Review meeting was held during Q4 attended by SW, vol org and primary care staff. Reports of plans being well received by carers.

05. Older People

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.5.1	Establish an integrated approach to discharge access pathways for intermediate care.	31-Mar-2019	✅	100%	**18/19**: Complete Flow hub improving patient/client pathways and reducing number of delayed discharges.
ASC.P.5.2	Development of a project plan to progress the reprovision of Highbank Care Home into a purpose built intermediate care home.	31-Mar-2019	✅	100%	**18/19**: Complete
ASC.P.5.3	Encourage and support staff to consider suitable pathways as an alternative to care at home to prevent hospital admissions.	31-Mar-2019	✅	100%	**18/19**: Complete Improved pathways from the voluntary sector. Workshop with front line staff and voluntary sector.
ASC.P.5.4	Develop detailed plans for the expansion of extra care housing in areas such as Dalkeith and Bonnyrigg.	31-Mar-2019	✅	100%	**18/19**: Complete
ASC.P.5.5	Install a continuous improvement approach with the Care at Home in-house services and partnership approach with external providers.	31-Mar-2019	✅	100%	**18/19**: Complete

06. Mental Health

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.6.1	Recruit volunteer and peer support in the future development of the Mental Health Access Point.	31-Mar-2019	❌	80%	**18/19**: Off Target Volunteers have been identified through the community development element of MAP. Processes and Standard Operating procedures are being developed to ensure safe and effective practice. Data sharing agreement required.
ASC.P.6.2	Develop new specialist employment project for people with mental health issues.	31-Mar-2019	✅	100%	**18/19**: Complete An Individual Placement and Support model has been agreed. Post agreed and interview date is 14 May 2019.
ASC.P.6.3	Develop a collaborative model of service delivery for the Recovery Hub which will bring together Mental Health, Substance Misuse and Criminal Justice Services, including third sector partners, together.	31-Mar-2019	✅	100%	**18/19**: Complete Operational Managers/Team Leaders meet on a regular basis to discuss, agree and implement actions that are needed to deliver the integration of services within the Recovery Hub. This collegiate approach is aimed at preparing teams to work in close partnership at the point the Recovery Hub opens. The building contractor started work started work in January 2019. The renovation is going well and is still on target for completion in May/June 2019.

07. Learning Disability

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.7.1	Establish plans for local provision of positive behavioural support service in Midlothian.	31-Mar-2019	✅	100%	**18/19**: Complete Plans in place. Work commencing on implementation of proposals.
ASC.P.7.2	Baseline the number of care packages without assessment or review in agreed timescale and put in place an implementation plan to reduce the number outside timescale.	31-Mar-2019	✅	100%	**18/19**: Complete Baseline figures agreed. Work ongoing to develop plan to address reviews outside timescale. Options for reviews where service is being delivered in house are being investigated.
ASC.P.7.3	Commissioning of new and existing day services to increase range of day service options available within Midlothian.	31-Mar-2019	✅	100%	**18/19**: Complete Plans in place for a 5 days a week service. Will commence in line with individual support plans.
ASC.P.7.4	Continue the programme of reviews of all high packages of care.	31-Mar-2019	✅	100%	**18/19**: Complete Work on reviews ongoing.

08. Adults Offenders

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.8.1	Review the functions of Community Justice and Community Safety to develop an integrated service approach.	31-Mar-2019	✅	100%	**18/19**: Complete The new joint Community Safety and Justice team will not be progressed following the Council's decision to remove the Community Safety Team as a budget saving.
ASC.P.8.2	Develop interventions to non-Court mandated domestic abuse perpetrators referred through the Safe and Together approach.	31-Mar-2019	✅	100%	**18/19**: Complete There have been no further referrals received this quarter. Actively working with one individual progressing with the pre-group wok of the programme. Three members of staff within the team met with colleagues in Edinburgh in March to discuss how they manage the cases they work with. It was agreed that Edinburgh would send copies of the assessment, letters and review templates so that we can adapt them for use with Midlothian Families First. The CJ team continue to support the implementation of Safe and Together across Midlothian and part of this is speaking to colleagues in C&FSW about Midlothian First.
ASC.P.8.3	Continue to implement and expand the Spring Service provision in line with funding.	31-Mar-2019	✅	100%	**18/19**: Complete The Spring service has developed considerably with the two Spring-specific posts now being permanent, numbers at an all-time high and a waiting list now in operation. The Spring OT is developing a separate group for women moving on from the service.
ASC.P.8.4	Continue to develop multi-agency arrangements to include violent offenders.	31-Mar-2019	✅	100%	**18/19**: Complete There was one MAPPA extension case being managed in the community, who has now been recalled. Two have been managed over the past year, both back in custody.

09. Adults with Long Term Conditions, Disability and Sensory Impairment

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.9.1	Develop the Midlothian Obesity and Type 2 Diabetes Strategy.	31-Mar-2019	✅	100%	**18/19**: Complete Strategy developed. Action Plan drafted. To be shared with the Community Planning Partnership in May 2019.
ASC.P.9.2	Continued provision of sensory impairment awareness raising sessions.	31-Mar-2019	✅	100%	**18/19**: Complete Training sessions continuing and Sensory Champion training now complete giving a further 10 Champions in Midlothian.
ASC.P.9.3	Contribute to the development of a plan for the new British Sign Language legislation.	31-Mar-2019	❌	75%	**18/19**: Off Target Midlothian BSL Implementation Plan still to be completed on the back of the consultation information gathered. This will then go to Council for approval, timing to be confirmed.
ASC.P.9.4	Evaluate the success of the revised Adaptation Policy for people with physical disabilities and collaborative working between Occupational Therapy and Housing.	31-Mar-2019	✅	100%	**18/19**: Complete Ongoing meetings and monitoring taking place.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.10.1	Reshape local services to reflect changes in funding and emerging National priorities.	31-Mar-2019	✅	100%	**18/19**: Complete Additional funding for 2018/19 and for 2 years beyond that, confirmed. Plans for the Investment agreed and being used to introduce advocacy, a Scottish Government priority for the investment, and implement an assertive in reach and outreach approach.

Adult, Social Care PI Report 2018/19

Midlothian

01. Health Inequalities

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.S.01.02a	Increase the number of staff trained in inequalities & poverty (cumulative)	88	27	0	76	131		⬆	**18/19**: Data Only		

02. Assessment and Care Management

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.2.1a	Average waiting time for occupational therapy services	15 weeks	14 weeks	15 weeks	12 weeks	6 weeks	✅	⬆	**18/19**: On Target	6 weeks	
ASC.P.2.1b	Average waiting time for social work services	11 weeks	8 weeks	9 weeks	12 weeks	8 weeks	🛑	⬆	**18/19**: Off Target Data reflects continued demand for services. Following a review of working practices improvement in waiting times evident.	6 weeks	
ASC.P.2.4a	Improved reported outcomes by service users	94%	94%	93%	93%	91%	✅	⬇	**18/19**: On Target	75%	
ASC.P.2.4b	Increase the % of people who feel they are participating more in activities of their choice	94%	91%	95%	94%	85.7%	✅	⬇	**18/19**: On Target 84 out of 98 people stated during review that their ability to participate in activities of their choice had not deteriorated.	75%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.2.4c	The proportion of people choosing SDS option 1	5.8%	6.38%	7.39%	7.7%	6.9%		⬆			
ASC.P.2.4d	The proportion of people choosing SDS option 2	3.1%	2.98%	2.64%	2.6%	2.7%		⬇	**18/19**: Data Only There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. Includes those under the age of 18.		
ASC.P.2.4e	The proportion of people choosing SDS option 3	85%	84%	83.3%	82.8%	84.6%		⬆			
ASC.P.2.4f	The proportion of people choosing SDS option 4	6.1%	6.9%	6.68%	6.9%	5.7%		⬇			

04. Carers

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.4.2a	Monitor the number of carers receiving an adult carer support plan of their care needs	N/A	37	24	26	122		➖	**18/19**: Data Only This does not include Adult Carer Support Plans undertaken by VOCAL.		

05. Older People

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.5.5a	Number of Individuals receiving care at home at Qtr End	N/A	1,144	1,438	1,513	1,604		➖	**18/19**: Data Only		
ASC.P.5.5b	Number of Individuals waiting for a 'Care at Home' package of care	N/A	104	37	24	106		➖	**18/19**: Data Only		

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.5.5c	Reduce the number of patients delayed in hospital for more than 72 hours at census date	21	32	38	22	35	📈	⬇	**18/19**: Data Only		

08. Adults Offenders

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.8.3a	Numbers accessing SPRING service (cumulative)	77	17	39	56	71	📈	⬇	**18/19**: Data Only		
ASC.P.8.4a	Monitor the number of violent offenders with MAPPA involvement	0	0	1	1	1	📈	⬇	**18/19**: Data Only		

Adult & Social Care Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Capacity of voluntary and private sector to meet Council's requirements in relation to quality and cost of services	**Risk Cause:** Providers have a lack of capacity to deliver contracted service **Risk Event:** Shortfall in service volume and or quality **Risk Effect:** Delivering poor quality care that places service users at risk of harm. Unable to meet the increasing demands for provision particularly in relation to care at home. Ceasing trading due to financial difficulties creating risks around service provision for large groups of very vulnerable people.	01 - Service level agreements and contracts 02 - Quality assurance officers monitoring of care homes and home care provision 03 - Large scale investigation protocol involving multi-agency investigation of risk of harm within services and risk management planning. 04 - Monitoring of Care Inspectorate Reports and reporting performance across the sector including exception reports. 05 - Quarterly care home, care at home and day care providers forum to ensure good communication and partnership working with commissioned services 06 - Service Managers role with responsibility for monitoring of commissioned services 07 - Ensuring regular review of cases in accordance with level of risk and designated team leader responsibilities. 08 - Commissioning processes to ensure robust decision-making.	🔺	A review of the continuing difficulties in the provision of services by one of the Care at Home providers is being undertaken to determine whether a new Provider should be commissioned	
				Workforce Plan is being developed to address long term sustainability of services. This work includes the involvement of MVA, Council and NHS Lothian.	
Meeting growing demands with constrained /reduced budgets, especially from external funders	**Risk Cause:** Increasing ageing population of over 75's Increasing numbers of adults with disabilities and complex needs Rising customer expectations Insufficient budget	01 - Eligibility criteria; fair access to care policy etc, 02 - Performance reporting 03 - Service transformation programme 04 - Capacity planning and commissioning LD and complex needs 05 - Monitoring and reporting waiting times 06 - Developing performance indicators for reviewing policy	🔺	In preparation for the 72 hour Delayed Discharge target the expansion of key services including Merrit intermediate care and re- ablement will be undertaken through the new Social Care Monies	

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🔴 Alert   🔺 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Event: Change programme does not meet future years projected budget gaps **Risk Effect:** Inability to deliver against strategic priorities	07 - Monitoring performance to meet contractual requirements 08 - Budget monitoring			
Capacity of communities to meet changing requirements of them to support social inclusion within local communities	In the current financial climate service users and family carers will become increasing dependent on support from local communities to ensure that their needs for meaningful activities and social interaction are met. Significant investment of resources and skills will be required to ensure that communities are able to respond to these needs. **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Role of MVA in supporting the voluntary sector 02 - Voluntary Sector Compact agreement 03 - Day Opportunities Review for Older people 04 - Day Service Modernisation Programme LD 05 - Change fund programme 06 - FSF Programme 07 - Developing capacity of Community Councils 08 - Neighbourhood planning 09 - Community planning processes	⚠️		
Property risks in terms of maximising the property asset to the benefit of service delivery and accessibility including DDA compliance	**Risk Cause:** Insufficient Capital Resources. **Risk Event:** Failure to maintain and modernise existing building stock **Risk Effect:** People are supported in environments of poor quality	01 - Regular dialogue with Asset Management re needs of service. 02 - Divisional Business Continuity Plan advises on crises management situations. 03 - Development of community assets through regeneration 04- Strategic Capital Programme Board 05- Development of IJB Property Strategy	⚠️		
Harm by offenders to members of the public	This is the risk of despite having comprehensive procedures and systems in place but one offender may commit a serious crime, causing harm to a member of the public and the council reputation damage. Risk Score likely to remain medium (low likelihood but high impact = medium). **Risk Cause:** Offender committing a serious crime	01 - Risk management authority for serious violent and sex offenders is now established and is able to provide guidance. 02 - Various risk assessment tools and associated training mandatory for relevant Criminal Justice staff. 03 - Partnership working with other agencies around the management of risk in individual cases well established. 04 - Standards forms and procedures for staff to follow with relevant training.	⚠️		

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🔴 Alert 🔺 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Event: Offence incident occurs. **Risk Effect:** Harm to member of the public Reputational damage to the Council	05 - Multi-agency Risk Panels (MARP) meet monthly 06 - MAPPA which is a process for managing Registered Sex Offenders . 07 - Integration of group work programme with probation supervision 08 - Monitoring of staff compliance with National Outcomes and Standards through client review system. 09 - Access to Visor database of sex offenders linked to MAPPA. 10 - Offender Management Group established			
Adult Protection	**Risk Cause: F**ailure to identify the risk to the individual. Failure of adult protection procedures when invoked to adequately assess and manage the risk. **Risk Event:** Adult at risk of harm. **Risk Effect:** Reputational Damage to the Council. Harm to vulnerable service user.	01 - Public Protection Committee 02 - Adult Protection Procedures 03 - Large scale investigation protocol 04 - IRD Review Group established (and links with the Police) 05 - Adult protection training programme 06 - Case file governance arrangements 07 - Adult Protection Lead Officer 08 - Training Programme 09 - Development of Adult Protection Team within Fieldwork	⚠️		
Capacity to manage scale of transformational change	A major programme of service review and transformation is currently underway. Failure to manage this programme will lead to risks in not achieving coherent arrangements for the continuing delivery of sustainable public services in the new financial climate. **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Project management approach adhered to 02 - Business Transformation Board and reporting arrangements. 03 - New posts to support implementation of IRF, Dementia Demonstrator site and Change Fund 04 - Support for service review from Business Transformation Section. 05 - Project Plans agreed. 06 - 2 new Project Officers	⚠️	Business Transformation is supporting the transformation of Learning Disability services . Additional capacity is also being put in place to support the redesign of Highbank and the relocation of services from Liberton Hospital.	

🔴 Alert 🔺 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Capacity of Workforce	**Risk Cause:** Employees not suitably trained/development for the roles required of them. Challenges around maximising attendance Limited availability of staff in certain sectors Ageing workforce **Risk Event:** Inadequate staffing levels/skills. **Risk Effect:** Low morale. Inability to deliver services.	01- Workforce Plan 02- Learning and Development Team	⚠️	In recognition of the changing role of Newbyres and in response to the recent internal review a new staffing structure has been developed.	
Information Management and Data Protection	All Heads of Service are mandated to monitor compliance with the Data Protection Act. **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Action Plan to improve information management and data protection. This is being controlled through covalent.	⚠️	Data sharing The frameworki system has been upgraded to Mosaic and arrangements are being finalised to enable local staff to use the Information Exchange portal.	
Legislative requirement for health and community care to integrate	This is viewed as a major change that will require huge investment in time and buy-in from stakeholders **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Business Transformation Board and an NHS Lothian Project Group regularly review progress with arrangements in Midlothian 02 - NHS Lothian and Midlothian Council have both conducted Internal Audit reviews 03- The Joint Management Team chaired by the Joint Director maintains an overview of the implementation of the new arrangements	⚠️		
Community Safety & Justice - Negative media impact	Risk that negative media coverage impacts on community safety & justice communication and engagement activity **Risk Cause:** Communication with the public could be poor or an event or incident has negative outcome.	- Other communications plans in place e.g. MAPPA - Communication monitored	⚠️		

🔴 Alert 🔶 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Event: Failure to have in place a robust Communications Strategy and scenario planning **Risk Effect:** Potential for tremendous effort but without knowing whether the effort has been successful against negative effects.				

Alert   High Risk   Warning   OK   Unknown

Published Local Government Benchmarking Framework
Adult Social Care

Midlothian

Adult, Social Care

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
SW1	Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£18.16	£18.76	£13.49	£25.32	£29.63	£26.98	£24.65	£36.88	17/18 Rank 29 (Bottom Quartile). 16/17 Rank 21 (Third Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 30 (Bottom Quartile).
SW2	Corporate Indicator - SDS spend on adults 18+ as a % of total social work spend on adults 18+(LGBF)	2.76%	2.18%	2.4%	2.78%	2.69%	3.95%	6.11%	4.75%	17/18 Rank 13 (Second Quartile). 16/17 Rank 9 (Second Quartile) 15/16 Rank 13 (Second Quartile). 14/15 Rank 17 (Third Quartile).
SW3	Percentage of people aged 65 and over with long-term care needs receiving personal care at home	61.14%	63.91%	65.76%	65.37%	60.11%	66.67%	66.98%	68.04%	17/18 Rank 5 (Top Quartile). 16/17 Rank 10 (Second Quartile) 15/16 Rank 10 (Second Quartile). 14/15 Rank 20 (Third Quartile).
SW4a	Percentage of adults receiving any care or support who rate it as excellent or good. (LGBF)	New for 2014/15				85.78%	73%	N/A	71.35%	17/18 Rank 32 (Bottom Quartile). 15/16 Rank 32 (Bottom Quartile) 14/15 Rank 12 (Second Quartile)
SW4b	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life. (LGBF)	New for 2014/15				81.73%	85.7%	N/A	73.05%	17/18 Rank 31 (Bottom Quartile). 15/16 Rank 15 (Second Quartile). 14/15 Rank 28 (Bottom Quartile)
SW5	Corporate Indicator - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£393.17	£422.24	£423.23	£417.41	£396.72	£408.30	£363.41	£411.59	17/18 Rank 18 (Third Quartile). 16/17 Rank 12 (Second Quartile). 15/16 Rank 19 (Third Quartile). 14/15 Rank 14 (Second Quartile).

Children's Services
Performance Report Quarter Four 2018/19

Midlothian

Progress in delivery of strategic outcomes

'Our vision is to improve families' lives by giving them the support they need, when they need it'

Children's Services have shown improvement throughout 2018/19 and it is our intention to improve on this. Inspection reports and performance data evidence improvement in the majority of areas which in turn is improving the outcomes for most of our children and young people within Midlothian.

Permanence and Care Excellence Programme (PACE): We commenced the 12-month long programme on 1 November 2017 with a stretch aim that 75% all under 12s accommodated within the year would have a permanence decision within 7-12 months. Over the course of the year, 42 children have entered the programme and 80% of them have had a permanence decision within 7-12 months. Scottish Government and the Centre of Excellence for Looked After Children view the level of change and improvement for Midlothian's most vulnerable children as a phenomenal achievement. We have agreed to continue to be part of the PACE programme; and continue to share our learning with other Councils. We have already identified 4 further aims and will provide further information in due course.

Mental Health: Following the successful bid to the Early Action Lottery project, which secured funding over the next 5 years to improve services in mental health for young people by helping local organisations collaborate to make the shift to early action and system changes so that people have better lives. As this work begins we have recruited a project manager and participation worker who have completed the delivery plan.
We are almost three quarters of the way through our 100 day challenge which is a method used by Nesta to help people come together and try new ideas for 100 days to start to change things in place where they work. We have had some innovative ideas that we can hopefully take forward to help us support children and young people who have mental health issues at an earlier stage.

Participation: The Champions board continue to meet every fortnight and share their discussions and the need to bring about change with their corporate parents. We have also rolled out the Mind of My own app whereby young people can liaise with their worker via the app or share their views in relation to reviews or any other meeting they wish to contribute to. To date this has been a big success with some good quality feedback from young people.

We continue to provide all children and young people with quality services: During the first part of Q4 we had 1 young person in secure care, however they have now moved on. The working group continues to meet to discuss teenage interventions and alternatives to secure care.

Child Protection: During Q4 reporting we had 51 children (24 families) on our child protection register which equates to 3.0 per 1000 of the population compared with the national rate of 2.9. This figure is the same as the last quarter and only slightly above the national average. Nationally there has been a 3% increase in the number of child protection registrations from 2017, however within Midlothian here has been 30% decrease since 2017.

Work on the implementation of Safe and Together is ongoing with further development in relation to the Families First (non-court mandated domestic abuse perpetrator programme). The Public Protection Office now has a trained trainer in Safe and Together core principles and will be rolling out this training with a primary focus on children services throughout the coming year.

Looked after away from Home: There are 139 children and young people looked after away from home both in and out-with Midlothian. This number is significantly lower than the previous quarter (165 children & young people). The current rate per 1,000 of young people looked after in Midlothian is 7.2 which remains well below the national of 14.5. Nationally there has been a 1% decrease from 2017 to 2018 in the number of children and young people looked after away from home, within Midlothian there has been a 10% decrease.

Looked after at home: There are 81 children and young people looked after at home. They have all been reviewed by the new Independent reviewing officer. The current rate per 1,000 of young people looked after at home in Midlothian is 4.2 which is higher than the national rate of 3.7. This area of work is out of kilter with the national picture where there has been a significant reduction of children looked after at home (26% reduction from 2008 - 2018)

1

However within Midlothian this number has increased by 37% over the same period of time (2008-18). As already reported we are analysing this data to try and better understand what these statistics mean. It is not necessarily a negative thing that our figures for this area of work are high, given that we are not accommodating children and young people unless it is the only available option, the alternative to this would be offering one final attempt to support children at home via a compulsory supervision order prior to them coming into care. This could be one of the reasons for the higher than average rate of children looked after at home.

Scottish Child Abuse Inquiry: There continues to be a lot of work being generated from this Inquiry. The team are working hard to ensure that we continue to meet deadlines with our submissions. To date we have had 21 Section 21 requests.

Challenges and Risks

Children's Services budget continues to remain a significant and ongoing challenge. Whilst we are currently working on a business case to consider alternative solutions to secure care, we continue to receive often unexpected and unplanned referrals for young people who have complex and severe needs and who can no longer remain at home. These young people require a high level of specialised care and it is proving more difficult to identify suitable resources to offer this level of care. Given that they are under the age of 16 there are very few companies who are registered and able to offer this level of care to children. This results in placements made in an emergency, which are invariably much more expensive, and usually out-with Midlothian.

Residential - We have our two residential houses in Woodburn and Lady Brae at Gorebridge. The move from Pentland Way to Lady Brae was necessitated as we have 3 young people with severe and complex needs who require intensive support in a purpose build house. Pentland Way provided an ideal solution as it is a bungalow with en-suite bedrooms.

Within residential we have reduced the beds from 10 to 9 as a result of the move. A further challenge for the service is the duties brought in from the 2014 Act around continuing care. Trying to ensure that our 16-21 year olds have somewhere safe and secure to live is a real challenge at times. Very often this age group cannot continue living in the residential houses because of the demands of younger children requiring to be accommodated and also because they often leave off their own accord (in crisis) as they don't like the rules and boundaries in place. If they end up in homeless accommodation there is a high likelihood this will also break down and they then appear in the children and family centre looking for accommodation. This cyclical process is difficult to break, however we are working with other parts of the local authority and in discussions with other authorities to try and find a solution that will reduce the amount of moves these young people have to make.

Children's Services PI summary 2018/19

Making the Best Use of our Resources

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
01. Manage budget effectively	Performance against revenue budget	£16.098 m	£16.101 m	£15.846 m	£15.623 m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	➖	£15.327 m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	10.79	2.80	6.05	7.62	9.32	🛑	**18/19**: Off Target Staff absence continues to be a major focus for the service.	⬆	9.00	Number of days lost (cumulative)	1,243.52
											Average number of FTE in service (year to date)	133.38

Corporate Health

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
03. Complete all service priorities	% of service priorities on target / completed, of the total number	100%	100%	100%	100%	100%	✅	**18/19**: On Target	➖		Number of service & corporate priority actions	6
											Number of service & corporate priority actions on tgt/completed	6
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	98%	99%	99%	99%	98%	✅	**18/19**: On Target	⬆	95%	Number received (cumulative)	11,162
											Number paid within 30 days (cumulative)	10,991
05. Improve PI performance	% of PIs that are on target/ have reached their target.	100%	80%	80%	80%	80%	🛑	**18/19**: Off Target 4/5 Performance indicators currently on target.	⬇	90%	Number on tgt/complete	4
											Total number of PI's	5
06. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	0%	0%	100%	✅	**18/19**: All risks currently within Childrens service have been reviewed.	➖	100%	Number of high risks reviewed in the last quarter	0
											Number of high risks	0

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19			Short Trend	Annual Target 2018/19	Feeder Data	Value
						Value	Status	Note				
07. Implement improvement plans	% of internal/external audit actions progressing on target.	0%	100%	100%	100%	100%	✅	**18/19**: Currently no outstanding Audit actions within service.	⬆	90%	Number of internal/external audit actions on target or complete	0
											Number of internal/external audit actions in progress	0

Children Services Complaints Indicator Summary

					Commitment to valuing complaints			

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	33	9	16	29	41		**18/19**: Data Only	
Number of complaints closed in the year		8	15	28	40		**18/19**: Data Only	
Number of complaints upheld (cumulative)		3	3	5	5		**18/19**: Data Only	
Number of complaints partially upheld (cumulative)		0	4	11	18		**18/19**: Data Only	
Number of complaints not upheld (cumulative)		3	8	12	17		**18/19**: Data Only	
Average time in working days to respond to complaints at stage 1	3	0	0	3.5	4			5
Average time in working days to respond to complaints at stage 2	18.33	15.67	15.13	15.13	14.86		**18/19**: On Target	20
Average time in working days for a full response for escalated complaints		18.8	18.43	18.55	18.47			20
Percentage of complaints at stage 1 complete within 5 working days	50%	100%	100%	100%	75%		**18/19**: Off Target	95%
Percentage of complaints at stage 2 complete within 20 working days	70.37%	87.5%	75%	100%	80.95%		**18/19**: Off Target	95%
Percentage of complaints escalated and complete within 20 working days		60%	71.43%	81.82%	60%		**18/19**: Off Target	95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		0	0	3	4		**18/19**: Data Only	

Children's Services Action report 2018/19

Midlothian

	01. All care experienced children and young people are being provided with quality services				
Code	**Action**	**Due Date**	**Icon**	**Progress**	**Comment & Planned Improvement Action**
CS.P.1.1	Continue to promote active participation from our CEYP to promote the work of the champions board through mentoring/work experience & leadership work	31-Mar-2019	✅	100%	**18/19**: Complete MOMO (Mind Of My Own) app is being well used so that we are receiving quality feedback from young people about the service they receive. Since its inception in April 2018: **MOMO One** • 264 One statements have been received from young people • 93 One statements have been received through worker accounts • 312 One statements received in total **MOMO Express** • 221 Express statements have been created in total • 501 One and Express statements received in total • 26% of these have been preparing for a Worker visit • 23% have been Sharing good news • 19% have been Sorting a problem **Accounts** • 113 young people have their own account • 119 workers have a worker account
CS.P.1.2	Implement alternative care arrangements for those young people who are at risk of secure care	31-Mar-2019	✅	100%	**18/19:** Complete We continue to meet as a working group to consider alternatives to secure care and also visiting other local authorities to learn from them. Residential service have upskilled and increased their number of staff.

	02. Inequalities in learning outcomes have reduced				
Code	**Action**	**Due Date**	**Icon**	**Progress**	**Comment & Planned Improvement Action**
CS.P.2.1	Improve educational outcomes of our looked after at home children (LAC/LAAC & Kinship)	31-Mar-2019	✅	100%	**18/19**: Complete Information on Secondary attainment shows an increase in Tariff score for CEYP leaving School in 17/18, work is ongoing with the new "Virtual" Headteacher role. Scottish Government funding is in place and being allocated to aid CEYP attainment.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CS.P.2.2	Develop a strategy that supports care experience young people into further education and independent living.	31-Mar-2019	✅	100%	**18/19:** Complete Information on Secondary attainment shows an increase in Tariff score for CEYP leaving School in 17/18, information on positive destinations shows 72.73% of CEYP leaving education went on to a sustained positive destination. Link to the Virtual Headteacher has been established alongside the continuing care proposals for 2019/20.

03. Children and young people are supported to be healthy, happy and reach their potential					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CS.P.3.1	Engage children, young people, parents/carers and families in genuine participation, together co-designing a better mental health support system.	31-Mar-2019	✅	100%	**18/19:** Complete Mental Health sub group is well established with participation from young people. This will now become part of a bigger group where funding has been secured through the National lottery to develop an improved mental health support system over the next 5 years.
CS.P.3.2	Increase opportunities to work in collaboration with partners, identify opportunities to work with voluntary agencies and local community groups, including resource- sharing and co-location	31-Mar-2019	✅	100%	**18/19:** Complete Sure-Start now fully established at Hawthorn and Penicuik. Other areas to be further explored in 2019/20..

Children's Services PI Report 2018/19

Midlothian

	01. All care experienced children and young people are being provided with quality services									

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CS.P.1.2a	Number of Young People issued with a Movement Restriction Order Target	0	0	1	1	1	✅	⬇	**18/19**: On Target	2	
CS.P.1.2b	Number of young people in secure care over the year	2	1	1	1	1	📈	⬆	**18/19:** Data Only		
CS.P.1.1a	Number of people attending young champions group meetings	N/A	25%	50%	75%	100%	📈	▬	**18/19**: Data Only 23 young people have attended the Champions Group, mini champions groups are being established.		
CS.P.1.1b	Ensure ongoing scrutiny of Life Changes Trust Plan and anything off target is reported to GIRFEMC	100%	25%	50%	75%	100%	✅	▬	**18/19:** On Target The Life Changes Trust Plan is scrutinized both by Midlothian Senior Managers and the Life Changes Trust Board to ensure progress.	100%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CS.P.2.2a	Number of care experienced young people going into homeless accommodation.	N/A	N/A	N/A	N/A	N/A	?	—	**18/19**: Data Only Information not available from Housing. Data group being setup to look at improving information flow between services.		
CS.P.2.2b	Increase in number of care experienced young people going to college/university/employment.	N/A	76.92	76.92	76.92	72.78	🛑	—	**18/19**: Off Target Baseline data shows 72.28% of Care Experienced Young School leavers were in a positive destination in 17/18. Virtual comparator of 82.72 added as Target for year.	86.92	
CS.P.2.1a	Number of qualifications each 16 year Care Experienced Young Person (CEYP) gains	169.4	N/A	169.4	169.4	169.4	📈	—	**18/19:** Data Only Information from Insight shows the Complimentary tariff score has increased from 167 to 169.4.		
CS.P.2.1b	Number of CEYP continuing into 5th & 6th year	10	N/A	13	13	13	📈	⬆	**18/19:** Data Only The 18/19 School roll shows 13 CEYP in S5+6		
CS.P.2.1c	Number of CEYP are on part time timetables	11	N/A	13	13	13	📈	⬆	**18/19:** Data only The 18/19 School roll shows 13 CEYP on a part time timetable.		
CS.P.2.1d	Percentage of exclusion relate to CEYP over the school year – how many days?	6.8%	7.3%	7.3%	6.25%	7.3%	📈	⬇	**18/19:** Data only Information from SEEMIS shows 7.3% of exclusion incidents in the 18/19 School year were CEYP.		

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CS.P.3.1a	Increased participation of children, young people, parents/carers and families.	N/A	25%	50%	75%	100%	✅	▬	**18/19:** On Target Mental Health sub group is well established with participation from young people, Champions group meetings are consistently attended and MOMO rollout is increasing through service.	100%	
CS.P.3.2b	Sure Start and Hawthorn Family Learning Centre - develop another pilot in another area.	N/A	25%	50%	75%	100%	✅	▬	**18/19:** On Target Sure-Start now fully established at Hawthorn and Penicuik. Other areas to be further explored in 2019/20.	100%	

Children's Services Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
GIRFEC Children & Young People's (Scotland) Act 2014	The new duties being placed upon the Local Authority such as the Named Person whereby every 0-5 year old shall have their Health Visitor as the Named Person and 5-18 the Head or Depute Head teacher shall be the named Person – to be implemented Aug'16	01 - Pilots being set up where by Family Support Team Leaders are supporting health visitors and education staff to undertake this task . 02 - Issues around different computer systems, confidentiality and how to record so that during school holidays social work staff have access to data	⚠️	Looking at alternative forms of accommodation for 16-21 year olds who often don't engage well with services.	**Q4 18/19**: This is an ongoing piece of work that requires support across the council and beyond to ensure we are all meeting our responsibility in relation to corporate parenting
RESOURCES - High costs of external accommodation	The risk relates to the high costs incurred as a result of using external residential accommodation or external fostering agencies. Demand outstrips local resources provision requiring purchase of expensive residential and fostering placements, something which currently cannot be avoided. Current risk relates to 16-18 year olds particularly. In the past year, great strides have been made in improving this and at the same time saving money. It has been an 'attitude' things, with external placements being seen as the best.	01 - Head of Service is the Chair of MARG -tighter control over referrals and robust scrutiny of all placements. 02 - Ongoing recruitment campaign to recruit new foster carers, respite carers, adopters etc to try and meet the new demands being made upon the service 03 - Beginning of discussions with Housing to look at alternative accommodation to meet the needs of the older young persons. 04 - Review of residential Services which will consider how best the 3 houses are utilised in the future	⚠️	Progress alternatives to External residential accommodation	**Q4 18/19**: Liaising with education and adult services around how we better meet the needs of those young people who have severe and complex needs aged 16-21.
Mental Health	An inherent threat of clients self harming by implements, drugs or alcohol leading to serious consequences for the client and/or liability and reputation damage for the Council	01 - Individual risk assessment & weekly multi agency risk management meeting when a young person is deemed at high risk of harm. 02 - Support by trained staff from health, drug agencies, to support individual young people. 03 - Education programmes 04 - Specific training for staff	⚠️	Big Lottery Funding bid secured. Working with health, education, children's services, voluntary sector & young people to see what works and build on this	**Q4 18/19**: 100 day challenge underway which allows people to test out new ideas.

🔴 Alert   🔺 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Published Local Government Benchmarking Framework - Children's Services

Children's Services

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
CHN8a	Corporate Indicator - The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week (LGBF)	£2,050.88	£2,656.15	£2,987.57	£2,621.66	£2,007.68	£3,074.23	£2,773.51	£3,735.35	17/18 Rank 22 (Third Quartile) 16/17 Rank 8 (Top Quartile) 15/16 Rank 10 (Second Quartile) 14/15 Rank 1 (TOP Quartile)
CHN8b	Corporate Indicator - The Gross Cost of "Children Looked After" in a Community Setting per Child per Week (LGBF)	£286.59	£358.28	£292.72	£266.94	£329.68	£333.16	£333.29	£339.71	17/18 Rank 21 (Third Quartile) 16/17 Rank 19 (Third Quartile) 15/16 Rank 21 (Third Quartile) 14/15 Rank 23 (Third Quartile)
CHN9	Balance of Care for looked after children: % of children being looked after in the Community (LGBF)	88.41%	87.32%	91.25%	91.91%	87.45%	90%	89.19%	90.99%	17/18 Rank 10 (Second Quartile) 16/17 Rank 15 (Second Quartile) 15/16 Rank 15 (Second Quartile) 14/15 Rank 20 (Third Quartile)
CHN22	Percentage of child protection re-registrations within 18 months	New for 2012/13		18%	14%	11%	14%	8%	7%	17/18 Rank 20 (Third Quartile) 16/17 Rank 23 (Third Quartile) 15/16 Rank 29 (Bottom Quartile). 14/15 Rank 28 (Bottom Quartile).
CHN23	Percentage LAC with more than 1 placement in the last year (Aug-July)	New for 2011/12	21.74%	20.2%	18.45%	24.71%	14.8%	26.25%	26.18%	17/18 Rank 22 (Third Quartile). 16/17 Rank 25 (Bottom Quartile). 15/16 Rank 4 (Top Quartile). 14/15 Rank 20 (Third Quartile).

Progress in delivery of strategic outcomes

The pace and scale of change is accelerating with new legislation driving better integrated local services and collaboration to determine priorities at the most local level. Working together as a whole Council approach in a collective vision for our area and communities in Midlothian is built on shared understanding of local needs, circumstances and opportunities. Customer and Housing Services are driven by a consistent focus on performance and outcomes for our residents to apply effective support, challenge and scrutiny in monitoring our progress towards the objectives of the Single Midlothian Plan.

1. Financial Strategy

Customer and Housing Services has delivered part of the 2018/19 service savings and efficiencie**s** identified across the revenues and housing teams. The Community Safety service changes and savings have been delivered. Customer Services savings have been delivered through the introduction of new models of service delivery for libraries including a volunteer led model for home delivery. Work is ongoing in relation to new opening hours for libraries, which will be launched in April 2019 to meet required savings for future years. Remaining savings in Customer Services are incorporated into the new Digital Customer theme. Further actions are planned to meet the target balances across housing and revenues services.

2. Digital Transformation

A strategic focus on digital transformation is core to service development across Customer and Housing Services. The priority of moving into an Omni-channel environment for all customer transactions is being supported by work on channel shift. This includes the introduction of online only transactions with the first being for garden waste with further work planned to move a number of key transactions online. This work requires the purchase of a new online customer service solution. The Online Payments and Services (OPAS) project solution was approved with the procurement process now governed by the Project Board and implementation by a Project Team with members spanning across relevant services. Further exploratory work is being undertaken with regard to efficiencies, which could be made by accelerating the pace of automation in relation to Revenue Services and consultation on the potential to implement an online Choice-based letting system for Housing Services.

3. Homelessness

The Rapid Rehousing Transition Plan in Midlothian has been approved by Council and submitted to Scottish Government for feedback during Q4, leading to implementation from April 2019. Rapid rehousing is about taking a housing led approach for rehousing people that have experienced homelessness, making sure they reach a settled housing option as quickly as possible rather than staying in temporary accommodation for too long. Transition to a rapid rehousing approach means that some local authorities and partners will have to redress the balance of housing and support options that are available, and how quickly they are accessed.

The Rapid Rehousing Transition Plan in Midlothian includes an Action Plan for the next five years to support this vision. With key actions including increasing the supply of new build affordable housing in Midlothian, reviewing Midlothian Council's Allocation Policy (during Q4) to ensure homeless households are housed more quickly, actions relating to the acquisition of models of temporary accommodation to reduce the need for bed and breakfast accommodation, supporting homeless households to access a tenancy in the private rented sector and development of a 'Housing First' model. This Action Plan will be implemented in partnership with tenants, stakeholders, RSLs, other agencies and the Midlothian Health and Social Care Partnership. If additional funding is provided by Scottish Government, then the pace of implementation will be increased.

In response to increasing levels of homelessness in the 16-25 year old age group, the Youth Homelessness Team have developed and delivered a SQA Pre-Tenancy Award for life skills and tenancy sustainment outcomes. The first group of students graduated in December 2018.

4. Affordable Housing

Midlothian Council's Strategic Housing Investment Plan was approved during Q3. This sets out strategic investment priorities for affordable housing over a 5-year period. It is a key document for identifying strategic housing projects that contribute towards meeting the local and Government's affordable housing target. A Local Lettings Initiative (LLI) has been developed to support the allocation of housing at the Miller Homes Development at Newton Church Road, Danderhall, later in 2019. In the ESES City Deal Housing Workstream, the Housing Terms of Reference and governance arrangements are being finalised for future opportunities for collaboration.

Challenges and Risks

Funding Pressures

There is a continuing requirement to deliver a balanced budget by achieving major efficiencies despite the growing demand, particularly in relation to homelessness, the increased number of applicants on the housing waiting list who have a recognised housing need and the need to increase the supply of affordable housing.

The additional pressures presented by Welfare Reform are monitored in relation to income disruption to housing rent payments and Council Tax Reduction scheme, evident in increased arrears. The impact in Year 2 of Universal Credit Full Service in Midlothian, has demonstrated that although there continues to be an impact on rent arrears, the impact has been reduced which is likely to have been as a result of temporary accommodation reverting back to Housing Benefit and a reduction in the pace of new claimants applying to Universal Credit.

Capacity and Quality of Services

Demand on Homelessness Services continues to present a significant challenge with regard to the strategic objective of moving away fully from the use of bed and breakfast accommodation. In part, this is related to the significant shortage in the supply of affordable housing in Midlothian and the result is a significant length of time for many households spent in temporary accommodation. The action plan developed as part of the Midlothian Council Rapid Rehousing Transition Plan will support improvements in this area when implemented in April 2019 and focuses on reducing the time taken to provide permanent accommodation. The evidenced reduction in re-let times for temporary accommodation to 29 days supports an earlier improvement in this area and contributes to addressing this recognised demand. Additional preventative actions have been identified including arrangements to deliver school homelessness presentations to classes within all schools during Q4. Improvement actions will be implemented to effect the re-let times for permanent properties to further support this work – although it is recognised that an increase in these times can be in relation to a small number of properties which require significant remedial works.

Whilst there is migration of housing costs entitlement to Universal Credit, the accurate and secure administration of Housing Benefit remains with Midlothian Council Revenues Services as required service provision for citizens across Midlothian. To support this Audit Scotland have scheduled a Benefit Performance Audit to take an informed view on the effective management and delivery of the service in Midlothian. A service review is also planned for Revenue Services to begin in April 2019, addressing the noted challenges and changes in relation to Welfare Reform and requirements for increased levels of automation to realise efficiencies and agreed savings.

Customer and Housing Services PI Summary 2018/19

Making the Best Use of our Resources											

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
01. Manage budget effectively	Performance against revenue budget	£13.442m	£11.942m	£11.982m	£11.897m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£11.386m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	5.76	1.40	2.81	5.09	8.20	🔴	**18/19**: Off Target Performance review and monitoring is in place to ensure improvement and practice sustained.	⬇	5.76	Number of days lost (cumulative)	1,338.68
											Average number of FTE in service (year to date)	163.2

Corporate Health											

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
03. Complete all service priorities	% of service priorities on target / completed, of the total number	91.67%	71.43%	42.86%	42.86%	57%	🔴	**18/19**: Off Target Corrective actions contained in main report.	⬇	90%	Number of service & corporate priority actions	7
											Number of service & corporate priority actions on tgt/completed	4
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	98%	98%	98%	98%	97%	✅	**18/19**: On Target	⬇	95%	Number received (cumulative)	5,822
											Number paid within 30 days (cumulative)	5,645
05. Improve PI performance	% of PIs that are on target/ have reached their target.	50%	50%	17%	33.33%	28.5%	🔴	**18/19**: Off Target Challenges and corrective action detailed within report.	⬇	90%	Number on tgt/complete	2
											Total number of PI's	7
06. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%	✅	**18/19**: On Target	▬	100%	Number of high risks reviewed in the last quarter	0
											Number of high risks	0

Priorities	Indicator	2017 /18 Value	Q1 2018 /19 Value	Q2 2018 /19 Value	Q3 2018 /19 Value	2018/19				Annual Target 2018 /19	Feeder Data	Value
						Value	Status	Note	Short Trend			
07. Implement improvement plans	% of internal/external audit actions progressing on target	33.33%	100%	0%	0%	100%	✅	**18/19**: On Target	⬆	90%	Number of internal/external audit actions on target or complete	2
											Number of internal/external audit actions in progress	1

Customer and Housing Complaints Indicator Summary

Commitment to valuing complaints							

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	167	47	85	123	160	📈	**18/19**: Data Only	
Number of complaints closed in the year		27	48	120	153	📈		
Number of complaints upheld (cumulative)		3	11	16	18	📈		
Number of complaints partially upheld (cumulative)		0	11	17	16	📈		
Number of complaints not upheld (cumulative)		3	22	82	106	📈		
Average time in working days to respond to complaints at stage 1	4.7	3.5	6.5	8	6.5	🛑	**18/19**: Off Target There is an inaccuracy where 3 complaints that were responded to within timescale were updated on the system in arrears. The dates reported are not a true reflection, triggering an 'off target' outcome. The service has learned from this, and development work to the CRM system has been carried out to prevent the issue recurring. Further training about the processes relating to the Complaint Handling Procedure has also been undertaken.	5
Average time in working days to respond to complaints at stage 2	14.6	12.5	12.5	31	13.5	✅	**18/19**: On Target	20
Average time in working days for a full response for escalated complaints		9	9	42.75	9.75	✅	**18/19**: On Target	20
Percentage of complaints at stage 1 complete within 5 working days	64.9%	70.83%	63.64%	55.36%	63.45%	🛑	**18/19**: Off Target Service monitoring performance	95%
Percentage of complaints at stage 2 complete within 20 working days	93.33%	100%	100%	75%	100%	✅	**18/19**: On Target	95%
Percentage of complaints escalated and complete within 20 working days		100%	100%	50%	75%	🛑	**18/19**: Off Target Service monitoring performance	95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		0	0	1	0	📈	**18/19**: Data Only	

Customer and Housing Services Action report 2018/19

Midlothian

	01. Support people out of poverty and welfare dependency					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CHS.P.1.1	Support financially vulnerable households in mitigating Welfare Reform impact.	31-Mar-2019	✅	100%	**18/19**: Complete Awarded £1,123,630 in Discretionary Housing Payments to 1630 claimants to continue to mitigate the effects of Welfare Reform, including benefit cap and under occupancy charge.
CHS.P.1.2	Award Scottish Welfare Fund monies in line with criteria set for crisis grants and community care grants to meet the needs of vulnerable claimants.	31-Mar-2019	✅	100%	**18/19**: Complete Awarded £449,004 to 31 March 2019. £241,457 community care grants and £207,547 crisis grants within budget allocation for year.

	02. Deliver further affordable housing					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CHS.P.2.1	Designate housing for particular needs within existing and new build stock	31-Mar-2019	✅	100%	**18/19**: Complete Sites have been identified for the development of 239 specialist housing consisting of extra care housing, bariatric provision, amenity housing, and wheelchair housing in locations across Midlothian.

	03. Homelessness has reduced, and people threatened with homelessness can access advice and support services					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CHS.P.3.1	Prevent homelessness through the delivery of an education programme	31-Mar-2019	❌	44%	**18/19**: Off Target Numbers reported this quarter includes larger 'assembly type' sessions delivered to all S6 and half of S4 year groups in all schools. Significantly reduced staff capacity available to deliver this service during 2018/19. Going Forward In addition to this valued prevention activity, the homeless staff team successfully delivered a pilot SQA accredited pre-tenancy course. This will be rolled out to care

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					experienced young people and homeless households resident in supported services during Q2 and Q3 2019/20.
CHS.P.3.2	Access to homelessness advice & assistance.	31-Mar-2019	✅	100%	**18/19:** Complete All homeless households receive appropriate advice and assistance in accordance with good practice.
CHS.P.3.3	Minimise re-let timescales for mainstream housing.	31-Mar-2019	❌	94%	**18/19**: Off Target A slight increase in the average days with Building Services from 38 in 2017/18 to 39 2018/19. Actions are currently in place to address this. Average days with Housing Services 9 days for 2018/19 compared to 12 days for 2017/18.
CHS.P.3.4	Minimise re-let timescales for temporary accommodation.	31-Mar-2019	❌	77%	**18/19**: Off Target Average days with Building Services 20 days for 2018/19. Average days with temporary accommodation service 25 for 2018/19. Small pool of properties were delayed due to issues with utilities, structural repairs and capital works in Q1, Q3 and Q4. In addition, delays letting a small number of self-contained properties for Q4 due to the furnishing contractor.

Customer and Housing Services PI Report 2018/19

Midlothian

					01. Support people out of poverty and welfare dependency							

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.CHS.P.1.1a	Number of calls received regarding Scottish Welfare Fund	9,181	2,287	2,344	2,282	9,607	📈	⬆️	**18/19**: Data Only		
BS.CHS.P.1.1b	Number of calls leading to application to Scottish Welfare Fund	4,754	1,144	1,262	1,211	5,116	📈	⬆️	**18/19**: Data Only		
BS.CHS.P.1.1c	% of applications to Scottish Welfare Fund dealt with within 48 hours	92.3%	94.14%	94.92%	95.12%	95.03%	📈	⬆️	**18/19**: Data Only		
CHS.P.1.1d	Average processing time for new claims (internally calculated)	27 days	28 days	33 days	25 days	28 days	🛑	⬇️	**18/19**: Off Target Full year average 28 days outwith target of 25 days due to increase in new claims following return of Temporary Accommodation claimants housing costs from Universal Credit to Housing Benefit from 11 April 2018.		2015/16 Scottish Average - 23 days
CHS.P.1.1e	Average processing time for change of circumstances claim (internally calculated)	7 days	8 days	12 days	12 days	7 days	✅	➖	**18/19**: On Target Achieved target with average processing time of 7 days for year.	8 days	2015/16 Scottish Average - 7 days

02. Deliver further affordable housing

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CHS.P.2.1b	Number of housing units provided for particular needs with existing and new build stock.	14	0	2	2	2	🛑	⬇	**18/19**: Off Target Extra care housing in Gorebridge has been delayed and will not complete during 2018/19. However, it is expected that construction will have begun on 43 specialist provision units during 2018/19.	10	
CR.RSS.OP.02	Total value of HB overpayments identified during the quarter	£1,407,609	£296,844	£236,819	£245,260	£1,019,338	📈	⬆	**18/19**: Data Only		
CR.RSS.OP.03	Total value of HB overpayments recovered during the quarter	£1,147,148	£202,428	£211,805	£284,085	£926,977	📈	⬇	**18/19**: Data Only		
CR.RSS.OP.04	Total value of HB overpayments written off during the quarter	£140,485	£14,029	£23,531	£6,920	£72,951	📈	⬆	**18/19**: Data Only		
P.SG.CHS.2.1a	Number of social housing completions	88	69	76	98	116	✅	⬆	**18/19**: On Target 3 completions (Danderhall, Dalkeith and Bilston) during 2019/20.	100	

03. Homelessness has reduced, and people threatened with homelessness can access advice and support services

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.CHS.P.3.3a	Re-let time permanent properties (days)	50 days	45 days	55 days	46 days	49 days	🛑	⬆	**18/19**: Off Target A slight increase in the average days with Building Services from 38 in 2017/18 to 39 2018/19. Actions are currently in place to address this. Average days with	45 days	14/15 SHBVN peer group average 42 days

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									Housing Services 9 days. This represents a 3 day improvement on 2017/18.		
CHS.P.3.1a	Number of school homeless prevention presentations undertaken	30	0	0	0	30	🛑	▬	**18/19**: Off Target Numbers reported this quarter includes larger 'assembly type' sessions delivered to all S6 and half of S4 year groups in all schools. Significantly reduced staff capacity available to deliver this service during 2018/19. Going forward In addition to this valued prevention activity, the homeless staff team successfully delivered a pilot SQA accredited pre-tenancy course. This will be rolled out to care experienced young people and homeless households resident in supported services during Q2 and Q3 2019/20.	80	
CHS.P.3.2a	Number of customers accessing Advice and Assistance Service	834	211	202	186	826	📈	⬇	**18/19**: Data Only		
CHS.P.3.4a	Re-let time temporary accommodation properties	47	41	46	29	40	🛑	⬆	**18/19**: Off Target Average days with Building Services 20 days for 2018/19. Average days with temporary accommodation service 25 for 2018/19. A small pool of properties were delayed due to issues with utilities, structural repairs and capital works in Q1, Q3 and Q4. In addition, delays letting a small number of self-contained properties for Q4 due to the furnishing contractor + one sensitive housing allocation.	35	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CORP7	Corporate Indicator - Percentage of income due from council tax received by the end of the year %	95.1%	27.7%	53.1%	N/A	95.1%	✅	⬆	**18/19**: On Target		17/18 Rank 26 (Bottom Quartile). 16/17 Rank 29 (Bottom Quartile). 15/16 Rank 29 (Bottom Quartile). 14/15 Rank 31 (Bottom Quartile).

Customer & Housing Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Generic - Health and Safety	Customer & Housing Services staff are in contact with members of the public and individual staff have a duty of care to safety in addition to the Corporate duties. **Risk Cause:** Unacceptable behaviour by customers. **Risk Event:** Potential escalation scenarios for employees to manage threats, abuse or potential violence. **Risk Effect:** Threats, abuse, injury or potential violence.	01 - Observance of Council's health and safety policies 02 - Employer's and Public Liability insurance cover 03 - Development corporately of PVP risk register 04 - Risk Assessment into risk exposures	⚠️	Development of an Unacceptable behaviour policy	
Generic - Fraud, Waste & Error	The Risk Management Group has this risk included in each Services risk register. **Risk Cause:** Fraudulent activity. **Risk Event:** During a period of significant business transformation internal control systems could be weakened and fraud could be experienced **Risk Effect:** Loss of resources or income experienced, or prospective gain resulting from fraudulent activity.	01 - Observance and dissemination of Council's Fraud and Corruption Policy 02 - Code of Conduct for Employees 03 - Upkeep of authorised signatories system 04 - Managerial supervision of processes 05 - Managers been briefed in Financial Directives 06 - software provider confirm currently no facility to segregate applicants for available houses.	⚠️		
Generic - Business Continuity	Potential risk of events impacting on standard business systems, practice or work locations.	1. Fire Plans for workplaces 2. Bomb Threat plans for workplaces 3. Business continuity plans for workplaces	⚠️		

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🔴 Alert   🟠 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Cause: Disruption to workplace or service delivery. **Risk Event:** Unplanned events **Risk Effect:** Potential impact on employees and/or customers and/or viability of service delivery.				
Generic - Information Management and Data Protection	Control of information and data. Customer & Housing Services have constant use of personal and sensitive data. **Risk Cause:** Data protection breach **Risk Event:** Disclosure of third party information **Risk Effect:** Loss or damage caused to customer or third party by inadvertent or deliberate action.	01 - Part of Corporate IMG 02 - Divisional IMG 03 - Staff awareness and training 04 - Computer systems; Permission levels e.g. community safety access to the Police database 05 - Control built into competency appraisals	⚠️		
Revenues - Council Tax & Benefits IT system to meet changing requirements in Welfare Reform and Local Taxation	Further work is required to available systems. **Risk Cause:** Non integrated systems funtionality between DWP or Scottish Government or Midlothian Council **Risk Event:** Data transfer delays or mismatch to requirements. **Risk Effect:** Loss of data or loss of income.	The main internal controls are:- 01 - New system implemented following PRINCE2 principles, ensuring stable supplier, system, reference sites etc. 02 - Documented procedures for all system control activities and staff now familiar with management of the new system. 03 - Full suite of reconciliations with other applications and third parties 04 - Well embedded process for testing and implementation of new releases. 05 - Procedures in place to process ATLAS changes on daily basis. 06 - Sheriff Officer Interface with Walker Love implemented.	⚠️		

🔴 Alert   🔺 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Published Local Government Benchmarking Framework
Customer and Housing Services

Midlothian

Corporate Services

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
CORP4	Corporate Indicator - Cost of collecting council tax per dwelling (LGBF)	£15.76	£15.08	£15.41	£14.72	£11.18	£11.40	£9.80	£9.25	17/18 Rank 25 (Bottom Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 21 (Third Quartile). 14/15 Rank 17 (Third Quartile).
CORP7	Corporate Indicator - Percentage of income due from council tax received by the end of the year %	93.0%	93.6%	93.2%	91.8%	93.8%	94.4%	94.5%	95.1%	17/18 Rank 26 (Bottom Quartile). 16/17 Rank 29 (Bottom Quartile). 15/16 Rank 29 (Bottom Quartile). 14/15 Rank 31 (Bottom Quartile).

Culture and Leisure

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
C&L2	Corporate Indicator - NET Cost per library visit (LGBF)	£3.32	£3.32	£2.74	£2.82	£2.58	£1.73	£1.02	£1.25	17/18 Rank 6 (TOP Quartile). 16/17 Rank 3 (TOP Quartile). 15/16 Rank 5 (TOP Quartile). 14/15 Rank 11 (Second Quartile).
C&L5a	Corporate Indicator - Percentage of adults satisfied with libraries (LGBF)	82.8%	N/A	78%	80.6%	77%	68.33%	66.67%	66%	17/18 Rank 30 (Bottom Quartile). 16/17 Rank 31 (Bottom Quartile). 15/16 Rank 31 (Bottom Quartile). 14/15 Rank 25 (Bottom Quartile).

Housing Services

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
HSN1b	Gross rent arrears (all tenants) as at 31 March each year as a percentage of rent due for the reporting year	New for 2013/14			4.3%	6.57%	6.85%	6.39%	6.92%	17/18 Rank 12 (Second Quartile). 16/17 Rank 13 (Second Quartile). 15/16 Rank 16 (Second Quartile). 14/15 Rank 18 (Third Quartile).
HSN2	Percentage of rent due in the year that was lost due to voids	1.4%	1.3%	1.6%	1.6%	0.6%	0.8%	0.5%	0.7%	17/18 Rank 6 (TOP Quartile). 16/17 Rank 4 (TOP Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 4 (TOP Quartile).

Communities and Economy

Performance Report Quarter Four 2018/19

Progress in delivery of strategic outcomes

The overarching aim of the Communities and Economy Service is to support, protect and develop communities in Midlothian through demonstrable improvements in their economic, physical and social environments and the report below highlights successes and achievements for the year 2018/19.

Building Standards

Building Standards is a regulatory function which provides services in relation to enforcement of building standards regulation including responsibilities concerning dangerous buildings/structures and the licencing of premises or events. Successes for 2018/19 include;

Building Standards undertook their annual audit for 'Customer Service Excellence' accreditation. The service secured a further 4 compliance plus awards (behaviours or practices which exceed the requirements of the standard and are viewed as exceptional or as exemplar to others, either within the applicant's organisation or the wider customer service arena) taking their total from 22 to 26. **This is the highest number of compliance plus awards for any Scottish building standards service which has CSE accreditation.**

- Building Standards also undertook their 'Investors in People' audit and successfully retained their accreditation for **Investors In People for a further 3 years.**
- The Building Standards service continue to receive a high level of positive feedback from their local and national customers. **Exceeding their 90% target for Timeliness, Level of Information, Staff attitude and Satisfaction with the Service.**
- The Scottish Government's, National Customer Survey results have been circulated and Midlothian Building Standards have exceeded the national average in 85% of the set criteria. **The service continues to meet the challenges of a strong performer as set out in the nationally adopted Performance Framework and retain the sole verification role wholly within the authority of Midlothian Council.**

Planning Service

The Planning Service is responsible for the delivery of services in accordance with Town and Country Planning Regulations and the delivery of strategic and local development plans. The service also has the responsibility for the handling and determination of planning applications, planning appeals, the enforcement of planning controls and the conservation/enhancement of Midlothian's natural and heritage resources. The successes in 2018/19 include

- In 2018/19 the Planning Service determined 82% of planning applications within target, exceeding the nationally set target of 80%.
- Planning permission has been granted for over 1,000 new dwellings, new business developments and new infrastructure projects and as a consequence over £16m in developer contributions has been secured towards infrastructure and facilities across Midlothian.
- The Planning Service has worked in partnership with external agencies and interested bodies to develop a Local Biodiversity Action Plan (LBAP) which promotes biodiversity in Midlothian. The LBAP was adopted by the Council at its meeting of the Planning Committee in February 2019.
- £3.13m has been secured towards the Penicuik Heritage Project which includes environmental improvements and works to priority buildings in the town centre. The 5 year project has commenced with public realm improvements.

Communities Service

This service is responsible for the Council's statutory role in the Community Planning Partnership and the preparation of the single Midlothian Plan. The team has a lead role in supporting communities through the neighbourhood planning process, the Council Grants programme as well as Community Asset Transfer and participation requests.

Successes in 2018/19 include:

Working with 3rd Sector:
- New three year grants programme and allocation approved unanimously by elected members. Improved programme with less paperwork, more of a focus on reducing inequalities, more support for applicants and more equitable allocation across the sector with a particularly focus on supporting small grass-roots organisations.
- Communities Team have supported 273 third sector and community groups to increase their capacity, attract funding and improve their governance. Community Support Agreements are in place for groups that require extensive support.

Working with Communities:
- Secured £884,000 from the Scottish Government Capital Regeneration Fund to transform a derelict site in the centre of Rosewell into a vibrant community hub.
- More than 25,000 residents participated in a place standard consultation in Bonnyrigg, funded by the Scottish Government's Place Standard Conversation Fund. This will form the basis of a new community-led neighbourhood plan.

Welfare Rights Service:
This service offers advice and guidance in applying for benefits, benefit appeals and tribunal representation, debt and housing advice, maximising income and Specialist Macmillan benefits support. The team also supports other areas of the Council with training and assistance in working with people on benefits and welfare advocacy.
- Income Maximisation - Over £4.4m raised in additional benefits for Midlothian clients throughout the year.
- Support and training - Over 100 Council and 3rd sector employees have attended training and support services from the team in 2018/19.
- Pipeline project - Through ESF funding (European Social Fund) service has engaged with 91 clients to remove the barriers they face to employment and vocational training.

Working with Council:
- New asset transfer framework and governance structure in place to ensure compliance with the Community Empowerment Act and also to help achieve the savings in the Council's financial strategy.
- Elected members have agreed a way forward to for their environmental funds to be allocated by PB. The £90,000 pilot will be in the Dalkeith Ward and then spread across the authority. This will have the Council achieve the 1% COSLA target.
- With funding from the Scottish Government 2639 people have participated in Cost of the School Day decision making and briefings with head teachers is starting to have traction in schools beyond the Participatory Budgeting process. This has been held up as sector leading practice by COSLA and the Scottish Government.

Awards/Nominations:
- Communities Team has been nominated by the Scottish Sports Futures for the Partnership of the Year Award for the work the undertaken to establish the Twilight Basketball programme.
- Communities Team has been selected as an authority to receive bespoke support from Professor Stephen Sinclair from the Scottish Poverty and Inequality Research Unit to develop the Local Child Poverty Action Plan as part of the support for the Child Poverty Act.
- Communities Service Awarded the Armed Forces Covenant Employer Recognition Silver Award thanks to the work of Communities Officers.

Economic Development Service

The economic Development service is responsible for promoting economic development across Midlothian though the implementation of Council's Economic Development Plan. The Economic Development Service is currently made up of 3 discrete services; **the Leader Programme/Business Gateway** (both of whom are funded by Scottish Government and or European Funding) and a small **Economic Development staff** team. Due to a gap in the management of this service, staff have worked hard to ensure that we are delivering on the aim of improving outcomes for our communities. A new manager was appointed in February this year with the remit of ensuring a proactive service which capitalises on the opportunities afforded by Borders Rail/City Region Deal and the Science zone.

Successes in 2018/19 include;
- Formal sign off in City Region Deal
- Formal collaboration and 5 year investment plan agreed by council and key stakeholders operating within Midlothian Science Zone. (MSZ)

- £300k secured for tourism related activities – a digital marketing project and business support to create new products /experiences and drive international visits. Funding from LEADER Programme and Borders Railway Blueprint.
- Tourism Ideas Fund launched. 26 applications received and 12 projects awarded up to £5k to develop new tourism products/ideas or events to be delivered during 2019.
- Working with colleagues in Planning Policy contributing to the finalisation of the Employment Land Audit 2018
- A very successful Farmers Meeting was held on 5 February 2019 at the Stair Arms Hotel, Pathhead. There was over 50 people in attendance at this meeting – the highest attendance yet
- As of January 2019 Midlothian has achieved the highest level of take up of Superfast Broadband 59.02% (5,019 premises of 8,504 premises in the intervention area) as compared to Scotland overall at 51.12%

Business Gateway
Business Gateway undertook a range of activities to support the development of small businesses in Midlothian these included;

- Business Week Activities
- Business Breakfast with the Midlothian Innovation Centre
- Scottish Microfinance Fund surgery at Fairfield House
- Women into Business Workshop - Building a Successful Business
- Federation of Small Businesses (FSB) / Business Gateway Business Breakfasts - well attended c.30 – 40 businesses in attendance
- Running monthly surgeries with: Scottish Enterprise Wider Innovation and Scottish Microfinance Fund

Successes for Tyne Esk LEADER Fund include;
- Cornerstone Project at Newbattle Parish Church completed and launched –Community Venue developed and 3 jobs created
- Meadowmill Sports Centre in East Lothian project to be launched on 23rd March
- Track 2 Train Project in Newtongrange shortlisted as one of 10 projects in Scotland to be put forward for an ENRD sponsored Rural Inspiration Award awaiting final sign off re snagging.
- Newhall exclusive Wedding Venue at Carlops nearing completion

Trading Standards
The Trading Standards Service provides enforcement of customer protection legislation which includes animal health and welfare/weights and measures/internet selling/safety of consumer products/age restriction sales/counterfeit goods and consumer credit. Examples of work in this area 2018/19 included

- Working in partnership with ELC Trading Standards, Midlothian managed the East Lothian team up until the partnership ceased in March 2019. Assisted ELC in the recruitment of a suitable candidate to fill their vacant Principal TSO post.
- Scheduled risk assessed inspections of traders in Midlothian have been maintained. This covered legislation including Weights & Measures, Fair Trading, Pricing, Tobacco, Fireworks (conduct these jointly with the Fire Service or Police Licensing), Petroleum Safety and Animal Health.
- Free Call-blockers were installed in a number of homes where the householders had been subjected to troubling cold calls and were deemed to be vulnerable due to their age or infirmity. Full consultation with Social Work colleagues, where necessary.
- A local retailer was reported to the Procurator Fiscal for offences of selling fake postage stamps. Officers were assisted by Royal Mail investigators in what we believe was the first investigation and report of its type in Scotland.
- A further two reports were submitted to the Procurator Fiscal in the past year, both for offences under the Consumer Protection from Unfair Trading Regulations 2008.
- Illegally imported puppy from Hungary without genuine identification papers, was seized by officers under Animal Health and Rabies legislation. It had to be placed in quarantine for six weeks Investigations by ourselves and Edinburgh colleagues ensued and led to the discovery of a further two puppies from the same litter in the city. These puppies were also placed in quarantine. The seller is now subject to an investigation by Edinburgh Trading Standards.

Environmental Health

This service delivers public protection, regulation and enforcement through two teams. The Public health Team covers housing standards, general public health environment crime, contaminated land and licencing. The food and safety team delivers food safety team delivers food safety, occupational health and safety, infectious disease control and licencing matters.

The successes 2018/19 include;
- Despite a 33% reduction in staff in the food and safety inspectorate EH managed to complete 100% of planned high risk food safety inspections for the year. Although about 82% of food businesses achieved broad compliance with the law, one food business operator was reported to the Procurator Fiscal for hygiene offences.
- EH issued 30 export certificates to assist food businesses sending food to non EU countries
- Eighteen months of preparations for the new residential caravan site licence regime were completed with Members agreeing site fee and procedural reports. The application process is now underway. The new regime provides far greater protection for site residents through better regulation of site licence holders.
- Skin piercing and beauty industry "services" are becoming increasingly elaborate in Midlothian, with microblading, dermal planing and dermal rolling on offer as well as tattooing. All present risks of infection to the public if not properly performed. Environmental Health have intervened with a number of businesses during the year, bringing them under licensed control.
- EH staff have attended Safety Advisory Group meetings to assess the competency of event safety management plans.
- One seizure of THC contaminated hemp based food supplement was made (THC is the psychoactive component of cannabis). The manufacture of hemp based products is a developing industry with many health claims made for the ingredient CHD. EH staff are now involved with scrutinising the safety and legality of the products of a major manufacturer that has set up in Midlothian.
- EH staff have been involved in a number of national working groups over the year to deal with emerging food safety issues including preparations for dealing with food exports following a "non-deal" exit from the EU, charging for food enforcement and changes to the way we assess the risk businesses present.-
- MLC Environmental Health selected to facilitate visits to private water supplies for delegates from the Drinking Water Quality Regulator for Scotland and the Regulators for the rest of the UK to assist in developing a new national risk assessment tool.
- EH staff monitored the bacterial and chemical quality of 33 of the 65 private water supplies in Midlothian. Processed grant applications for 6 properties and took enforcement action in relation to one private water supply to improve water quality and protect public health.
- Three Green dog walkers campaigns events took place in 2018 / 19 at Newbattle High School (x 2) and Flotterston to raise awareness and encourage dog ownership.
- Co-ordinated the response to contaminated land sites investigation reports for 55 new building sites, to protect 1360 new houses, 8 new schools and 8 new commercial developments.
- Investigated 140 reports of dog attacks / out of control dogs, which resulted in 20 Dog Control Notices being served, requiring dogs to be brought back under control to protect members of the public and other animals
- Processed 48 disabled grant applications for home improvements, including level access showers and stairlifts
- Arranged radon gas monitoring in 24 houses in Gorebridge (development affected by gas ingress) to protect public health of residents.

Challenges and Risks

Economic Development
- Developing and implementing a refreshed Economic Development strategy
- Assisting businesses and the potential economic impact of Brexit
- Maximising the opportunities arising from the Edinburgh and South East Scotland City Region Deal (ESESCRD).
- Working effectively with colleagues to ensure effective engagement on Economic Development initiatives e.g. Borders Rail, Supplier Development Programme, City Deal
- Working effectively with colleagues to reduce gaps in the Regional Skills Assessment e.g. gap between Midlothian wages and Scottish wages, gap between male and female earnings in Midlothian, under-representation of Midlothian residents in (higher wage) managerial roles project
- Maximising funding through the Wi-Fi4Eu project to deliver wireless connectivity in Midlothian

Environmental Health

Following the agreement of fees and procedures for residential caravan site licences work there will be an intense period of activity required in quarter 1 of 2019/20 to process the applications and determine licences. Depending on the outcome of applications this increased level of work may extend beyond Q1.

Food Standards Scotland have completely altered the way in which food businesses are risk assessed. The new scheme comes into operation in the first quarter of 2019/20. The way in which inspections are "rated" and next inspections programmed is changed. There will be time required to implement IT software changes. Two assessment schemes will have to run in parallel until all food businesses have been rated under the new system.

Planning for the potential impact on the EH profession following a "no deal" departure from the EU indicates this will be very significant for LAs with fish and fish product exporters because of the demand for Export Health certificates. Midlothian has no businesses of this nature at present. However, similar concerns will need to be addressed in relation to the import of food from the EU. Port health checks may be deferred to inland LAs.

New private water supply regulations require an increased number of water supplies to be sampled to assess water quality and to communicate with relevant persons (landowners and supply users) to inform results and assist in securing improvements, where necessary to protect public health. The actual number of samples taken in 2018 fell short of that required, with only 71% of the required samples actually taken. Local Authority performance is monitored by the DWQR and published in their annual water quality report. The follow- up of failed water supplies due to bacterial or chemical contamination supplies is resource intensive.

Local Authorities have new duties implemented under 2017 Water Regulations, requiring all larger private water supplies and commercial private water supplies to be risk assessed by 2022. 94% of supplies still require to be risk assessed in this time frame.

Fly Tipping
An increased number of fly tipping cases are being reported, thought to be due to increasing landfill tax costs, with an investigation ongoing currently to target businesses fly tipping garage waste, including tyres and oil at several locations.

Noise
The decision to delete the Community Safety Service is expected to have an impact on the Public Health Team, particularly with regards to service requests regards noise from private sector residential properties. Discussions are ongoing with colleagues in the Health & Social Care Directorate regards arrangements going forward.

Building Standards
Meet the challenges outlined in the verification Performance Framework 2018

Planning
- Responding to changes to the Planning System which will result from the Scottish Government Planning Review.
- Maintaining a frontline Planning Service with vacant posts, uncertainty over future budgets and increasing demands and expectations of the service. . Meeting the increasing customer demand for services arising from the upturn in the housing market and the progression of the Midlothian Local Development Plan and the allocation of new development sites

Communities and Economy PI summary 2018/19

Making the Best Use of our Resources											

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
01. Manage budget effectively	Performance against revenue budget	£3.515m	£3.464m	£2.967m	£2.885m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£3.534m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	6.98	1.97	2.73	3.59	4.92	🔴	**18/19**: Off Target Although off target Q4 result is the strongest absence figure in the last 7 years.	⬆	4.50	Number of days lost (cumulative)	391.8
											Average number of FTE in service (year to date)	79.71

Corporate Health											

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
03. Complete all service priorities	% of service priorities on target / completed, of the total number	75.75%	91.67%	91.84%	89.8%	77.55%	🔴	**18/19**: Off Target 38 of 49 actions on target or complete in Q4 18/19.	⬆	90%	Number of service & corporate priority actions	49
											Number of service & corporate priority actions on tgt/completed	38
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	95%	95%	95%	95%	93%	🔴	**18/19**: Off Target We have identified the Services where late invoices have been paid and put in place plans to ensure future compliance.	⬇	95%	Number received (cumulative)	489
											Number paid within 30 days (cumulative)	453
05. Improve PI performance	% of PIs that are on target/ have reached their target.	52.17%	79.55%	79.49%	82.05%	73.68%	🔴	**18/19**: Off Target 28 of 38 targets met in 2018/19.	⬆	90%	Number on tgt/complete	28
											Total number of PI's	38
06. Control risk	% of high risks that have been reviewed in the last quarter	0%	0%	0%	0%	0%	🔴	**18/19**: No high risks to review this quarter, all medium risks have been reviewed.	▬		Number of high risks reviewed in the last quarter	0
											Number of high risks	0

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
07. Implement improvement plans	% of internal/external audit actions progressing on target	100%	0%	0%	33.33%	66.67%	🛑	**18/19:** Off Target Audit actions around Climate Change have not been progressed due to other work priorities. However report to Cabinet & Scottish Government submitted in November 2018.	⬇	90%	Number of internal/external audit actions on target or complete	8
											Number of internal/external audit actions in progress	12

Communities and Economy Complaints Indicator Summary

Commitment to valuing complaints								

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	23	9	20	27	32	📈	**18/19**: Data Only	
Number of complaints closed in the year		7	18	25	28	📈	**18/19**: Data Only	
Number of complaints upheld (cumulative)		3	5	5	6	📈	**18/19**: Data Only	
Number of complaints partially upheld (cumulative)		0	1	2	3	📈	**18/19**: Data Only	
Number of complaints not upheld (cumulative)		3	10	16	20	📈	**18/19**: Data Only	
Average time in working days to respond to complaints at stage 1	6.2	4.71	8.06	6.95	7.96	🔴		5
Average time in working days to respond to complaints at stage 2	9.33	0	0	31	26.5	🔴		20
Average time in working days for a full response for escalated complaints		0	29.5	24.33	24.33	🔴	**18/19**: Off Target Work is ongoing within the service to bring complaints in line with targets	20
Percentage of complaints at stage 1 complete within 5 working days	55%	57.14%	56.25%	66.67%	59.26%	🔴		95%
Percentage of complaints at stage 2 complete within 20 working days	100%	0%	0%	0%	0%	🔴		95%
Percentage of complaints escalated and complete within 20 working days		0%	0%	33.33%	33.33%	🔴		95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		0	0	2	2	📈	**18/19**: Data Only	

Communities and Economy Action report 2018/19

Midlothian

01. Delivering Excellence - Economic					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.1.1	Implement Delivering Excellence across the service	31-Mar-2019	✅	100%	**18/19**: Complete Service reviews are in progress, resource prioritisation and financial discipline all embedded into Service Manager meeting schedules.
CE.P.1.2	Complete a service review of Economic Development	30-Jun-2019	❌	95%	**18/19**: Off Target Draft review agreed by CMT in Q2, implementation to complete for end of April 2019.
CE.P.1.3	Complete a review of the Environmental Health Service	30-Jun-2019	❌	66%	**18/19:** Off Target Review due to complete in Q2 19/20. 2018/19 Savings met through VSER and staff departures. Review at self-evaluation stage.
CE.P.1.4	Complete a review of the Planning Service	31-Mar-2019	✅	100%	**18/19**: Complete Self-evaluation / initial consultations completed and structure options prepared. Savings for 2018/19 achieved through VSER, Staff departures and income. Review due to complete in Q2 19/20.
CE.P.1.5	Work with partner authorities to implement a City Deal for the Edinburgh and South East Scotland Region	31-Mar-2019	✅	100%	**18/19**: Complete City Deal signed by all parties. Governance arrangements now being established including joint committee and advisory boards.

02. Maximise economic development and business investment from the opening of the Borders Rail Line					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.2.1	Engage with adjacent Local Authorities and other partners e.g. Scottish Enterprise to implement the range of actions contained in the Borders Rail Line Blueprint document	31-Mar-2019	✅	100%	**18/19**: Complete Ongoing projects include tourism destination development, food and drink showcase completed, hotel study completed, website development ongoing. Masterplanning projects at Newtongrange well advanced. Additional funding from Blueprint Leaders' Group awarded in Sept 18 to projects at Vogrie, National Mining Museum and Mayfield Centre.

03. Implement the Tyne Esk LEADER Programme 2014/20 in East Lothian and Midlothian eligible areas

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.3.1	Implement the Tyne Esk LEADER Programme 2014/20 in East Lothian and Midlothian eligible areas	31-Mar-2019	✅	100%	**18/19**: Complete All allocated funding due to be committed in accordance with Scottish Government deadlines. Successful National event hosted by Tyne Esk Leader.

04. New jobs and businesses are located in Midlothian

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.4.1	Continue to promote and implement the business support provisions highlighted in Ambitious Midlothian (Midlothian Economic Recovery Plan)	31-Mar-2019	✅	100%	**18/19**: Complete Implementation continuing including through Business Gateway, Supplier Development Programme, Regional Selective Assistance, BIDS and tourism initiatives.
CE.P.4.2	Prepare and publish full review of Midlothian Economic Development Strategy	31-Mar-2019	✅	100%	**18/19**: Complete This will be a product of the ongoing review of the Economic Development Service, expected in Q1 2019/20.

05. Maintain progress on the implementation of the Easter Bush Master Plan

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.5.1	Continue to liaise with the Scottish Government on transport infrastructure solutions to serve the planned development of Easter Bush. Provide the programme and secretariat function for the running of the Easter Bush Development Board	31-Mar-2019	✅	100%	**18/19**: On Target City deal programme projects completion of scheme in 2022. Funding package comprises City Deal, Council funding and developer contributions.

06. Fewer people are victims of crime, abuse or harm

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.6.1	Deliver the Council's regulatory functions with respect to health and safety priority areas	31-Mar-2019	❌	85%	**18/19**: Off Target 100% of workplace incidents (requiring intervention) and service requests were attended to – 87% within time. Discretionary and Planned campaign inspection work has not been carried out in Q4, current priorities mean this will not be recovered in 18/19 nor carried forward into 19/20.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.6.2	Deliver the Council's regulatory functions with respect to food hygiene and standards regulations	31-Mar-2019	❌	85%	**18/19**: Off Target Some inspections cannot be reported yet but are within the allowed 28 day window. At time of reporting • all high risk food hygiene inspections for the year were complete. • Medium and Low risk 38% are off target. • High and medium risk food standards are 27% off target. • 99% service requests attended to but the response times have slipped to 83% being within time. Food sampling work up to date.
CE.P.6.3	Implement the new Residential Caravan Site Licensing Regime	31-Mar-2019	✅	100%	**18/19**: Complete All caravan sites are currently licensed. Work is ongoing to bring all 4 sites into line with the requirements of the new licensing regime which comes into force in May 2019. All sites have been engaged with and inspections carried out. Two reports to members dealing with fees and procedural matter have been agreed. Applications forms have been issued to all sites.
CE.P.6.4	Identify mechanisms to further promote good dog control. Seek to introduce a Commercial Dog Walkers Registration Scheme	31-Mar-2019	❌	75%	**18/19**: Off Target Liaison with Police Scotland continues to ensure that all cases reported regards dog behaviour are investigated by the correct agency. Assistance given to Scottish Government in Q3 to run a "Community Conversation" regards dog control. A report proposing the introduction of a voluntary registration scheme for professional dog walkers was to be brought before Cabinet in Q4 but this deadline could not be met due to conflicting demands. It is proposed to take this before Cabinet in Q1 2019/20.

07. There is a reduction in inequality in health outcomes

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.7.1	Protect public health through the development of a mechanism to assist private sector owners to progress common repairs	31-Mar-2019	❌	75%	**18/19**: Off Target The review of the Midlothian Council Statement of Assistance is continuing. The 'missing share' procedural element has been developed. The process will provide a mechanism for repayment through a charging order being applied to the title deeds of any defaulting owner. The Missing Share procedure has been completed and will be submitted to Committee for approval as part of the Council's Statement of Assistance. Review of the Statement of Assistance could not be completed in Q4 due to conflicting demands. It is proposed to take this before Cabinet in Q1 2019/20.
CE.P.7.2	Ensure the Council works towards meeting the Clean Air for Scotland (CAFS) objectives	31-Mar-2019	✅	100%	**18/19**: Complete Data collection for Midlothian Council's 2018 Annual Progress report is complete and the report is being prepared for scrutiny by Scottish Government and SEPA. A joint working group with relevant local authority services including Planning, Transportation, and Environmental Health has been convened and, following air quality training for Planners and Transportation, the first meeting has taken place

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					with a view to ensuring that the Council meets the Scottish Government Cleaner Air for Scotland objectives.
CE.P.7.3	Deliver statutory duty to identify and secure remediation of contaminated land	31-Mar-2019	❌	75%	**18/19**: Off Target Consultation continues with Procurement, with input from Legal Services and the Councils Insurer to update the peer review process, which uses consultants secured through Scotland Excel Framework to undertake contaminated land work. This is taking longer than anticipated due to queries with the Scotland Excel contract and ensuring the process fully meets Environmental Health requirements. An information document to assist the peer review process for phase 1 and phase 2 reports in relation to new development is being produced.
CE.P.7.5	Support and meet the challenge to drive forward sustainable economic development. Set challenging performance targets for building warrant applications which benefit economic development.	31-Mar-2019	✅	100%	**18/19**: Complete Building Standards continue to meet the challenge of providing a fast track building warrant application service for those application which are seen to provide economic benefit to the Midlothian area. Building Standards continue to engage through 'one to one' meetings with relevant housing developers and agents to understand the needs and challenges and assist where ever possible to make the building warrant process efficient and consistent.
CE.P.7.6	Continue to deliver a high quality customer focused Building Standards service.	31-Mar-2019	✅	100%	**18/19**: Complete Midlothian Building Standards continues to provide a high quality standard of service to its customers, underpinned by clear and transparent communications. The service also understands its customer and stakeholder types and their differing needs. These insights and actions are taken and utilised to bring about a continuous improvement to the customer experience, which is regularly measured and assessed in the form of Customer Service Excellence audit. The service also has in place a continuous improvement plan, which form part of the nationally adopted Performance Framework which is updated quarterly and submitted to the Scottish Government on an annual basis

08. Trading Standards

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.8.01	Further establish the Trading Standards Partnership with East Lothian.	31-Mar-2019	✅	100%	**18/19**: Complete A new PTSO (Principal Trading Standards Officer) was appointed by East Lothian Council and took up post in February. The Trading Standards Partnership between East and Midlothian officially ceased on 4 March. A plan for mutual co-operation is to be developed.
CE.P.8.02	Development of new performance measures and benchmarking within the Partnership, in conjunction with national Trading Standards' performance measures currently being considered.	31-Mar-2019	✅	100%	**18/19**: Complete Due to the Trading standards partnership between East and Midlothian ceasing it is unlikely now that both authorities performance measures will be brought into line.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.8.03	Work relating to incidences of rogue trading (e.g. complaints about driveways, roofing etc.), intervening, disrupting, investigating and working with the police to combat.	31-Mar-2019	✅	100%	**18/19**: Complete Officers continue to react to notifications of rogue traders in the area and when able take any appropriate action. Collaboration with the police and other agencies is routine. One investigation has resulted in a company from Paisley/Glasgow being reported to the PF for unfair trading practices, including aggressive behaviour.
CE.P.8.04	Intelligence gathering. To maintain a good level of intelligence logging onto the Memex database.	31-Mar-2019	✅	100%	**18/19**: Complete Although the number of logs are lower than last year input remains good and generally above that of most other LAs. Intelligence logging remains strong and one of the highest in Scotland, but figures are dependent on justifiable intelligence.
CE.P.8.05	Routine risk assessed primary inspections to traders.	31-Mar-2019	✅	100%	**18/19**: Complete
CE.P.8.06	Pro-active Trading Standards investigations i.e. initiated by officers and not initially resulting from a consumer complaint.	31-Mar-2019	✅	100%	**18/19**: Complete As a consequence of joint patrols with the Police and also spotting traders whilst out on routine inspections, suspect or unknown traders continue to be challenged or advised on their trading practices.
CE.P.8.07	Resolution of consumer complaints.	31-Mar-2019	✅	100%	**18/19**: Complete The completion rate continues to be maintained.
CE.P.8.08	Enhanced tobacco enforcement.	31-Mar-2019	✅	100%	**18/19**: Complete Variable progress. Unable to organise test purchasing, but routine advice visits continue. 36% (58 out of 163) of Midlothian's registered tobacco/NVP retailers have been visited in the year to provide advice on the legislation. In addition, four registered retailers were visited with the tobacco detection dog, provided free of charge (payment covered by SCOTSS) – no illicit tobacco detected.
CE.P.8.09	Collaborative work with the Community Safety Partnership, on consumer safety issues.	31-Mar-2019	✅	100%	**18/19**: On Target There have been no further requests for call blockers, however they are promoted when the Trading Standards service participates in roadshows etc. The Midlothian Community Safety Partnership no longer exists as it once did and it is still to be seen how consumer safety issues, of relevance to Trading Standards, might be of interest to the newly formed Safer Midlothian Group. Participated in two Financial Harm events organised by the East Lothian and Midlothian Public Protection Office and involved in preliminary promotion.
CE.P.8.10	Develop the pest control service by expansion to non-residential property	31-Mar-2019	❌	75%	**18/19**: Off Target Consideration of expansion of the pest control scheme indicates that there is no capacity to undertake additional work unless the FTE can be increased. The income targets are not being achieved. Discussion required in terms of the way forward.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.9.1	To determine 80% of planning applications within target (2 months for a local application and 4 months for a major application).	31-Mar-2019	✅	100%	**18/19**: Complete 82% of planning applications have been determined within target.
CE.P.9.2	Complete adoption of Local Biodiversity action plan (LBAP) which through its implementation seeks to raise the profile of biodiversity issues in Midlothian	31-Mar-2019	✅	100%	**18/19**: Complete The Local Biodiversity Action Plan (LBAP) has been drafted in consultation with our biodiversity partners and was subject to a wider consultation with community and interested parties/groups. The finalised LBAP was adopted by the Planning Committee at its meeting in February 2019.
CE.P.9.3	Draft a corporate climate change action plan.	31-Mar-2019	❌	25%	**18/19**: Off Target Work on the Council's Climate Change Plan has commenced but has not been completed because of other work priorities. However report to Cabinet indicated that this work will be resumed in 2019/20.
CE.P.9.4	Investment and actions in town centre	31-Mar-2019	✅	100%	**18/19**: Complete £3.13m has been secured towards the Penicuik Heritage Project. This comprises an award of £1.69m from the Heritage Lottery Fund, £0.98m from Historic Environment Scotland and a contribution from the Council of £0.46m. Environmental improvements and 5 high priority buildings, 14 medium priority buildings and 20 reserve buildings have been identified for improvement. The 5 year project has commenced with £0.4m being spend on public realm improvements. The adoption of the MLDP 2017 advances planning policies to protect and enhance Midlothian's town centres.
CE.P.9.5	Manage the CO2 gas ingress to properties in Gorebridge	31-Mar-2019	✅	100%	**18/19**: Complete Regular updates continue to be provided to residents and to local members. Melville Housing have engaged a Specialist Company to trial a remediation solution for their affected properties. If the trial is successful the information will be shared with the private sector owners.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.10.2	Welfare Rights Team will train advice staff and volunteers on welfare rights issues, in particular, the new requirements of the Welfare Reform Act	31-Mar-2019	✅	100%	**18/19**: Complete The Welfare Rights Team offer internal departments and external advice staff and volunteers on welfare rights issues, in particular, the new requirements of the Welfare Reform Act. Formal training has reduced due the changing priorities within the team due to the increased demands of UC/PIP(Universal Credit/Personal Independence Payment) services to the public. The team provide phone advice to external organisations, referral pathways to support in complex cases and chair the bi monthly Welfare Rights Forum which brings together

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					statutory agencies EG: DWP, Scottish Social Security, SWF with Midlothian advice services to resolve local issues .Individual training is available on request.
CE.P.10.3	Welfare Rights Team will meet targets for ESF funded activities	31-Mar-2019	✓	100%	**18/19**: Complete ESF caselink clients funding will cease in May 2019, over the year 91 clients have been registered and received support.

11. Delivering Excellence - IOM

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.11.11	Deliver a Community Action Plan in each of the priority areas in partnership with the community planning partners	31-Mar-2019	✓	100%	**18/19:** Complete Work has begun to update the plans for the 3 priority areas, Mayfield and Easthouses was launched in Q4.
CE.P.11.12	Provide bespoke and online training via a new Learn Pro Module on the Community Empowerment Act	31-Mar-2019	✓	100%	**18/19**: Complete Training offered to 3500 staff via bulletin but uptake has been slow with only 40 completing the course to date. Will continue to promote to increase uptake.
CE.P.11.13	Work with Mayfield In It Together group to undertake assessment of options for redevelopment of Mayfield Town Centre	31-Mar-2019	✓	100%	**18/19**: Complete Preparatory work has started. Written confirmation that Borders Rail Blueprint and Council funding agreed, meeting with procurement manager and IIT group to ensure compliance with Following the Public Pound Guidance.
CE.P.11.2	Research in-school child poverty measures and interventions	31-Mar-2019	✓	100%	**18/19**: Complete Two research post-graduates have been recruited from Edinburgh University via NUS Dissertations for Good. The research will be to identify ways of increasing uptake of free school meals and maximising Pupil Equity Funding. The second project is focused on looked after children and will be complete by Q1 2019/20.
CE.P.11.3	Deliver the actions in the child poverty plan, and prepare new plan to meet the requirements of the Child Poverty Act	31-Mar-2019	✓	100%	**18/19**: Complete Work has begun. Midlothian has been selected to receive targeted support from Professor Stephen Sinclair.
CE.P.11.5	Provide support to the third sector and community groups to increase their capacity	31-Mar-2019	✓	100%	**18/19**: Complete 914 support interventions completed in 18/19 to 273 different community groups. Community Support Agreements have been developed for groups that require extensive support.
CE.P.11.6	Test new approaches to funding that enable more community involvement in budgeting decisions	31-Mar-2019	✓	100%	**18/19**: Complete Work is ongoing with Primary Schools to develop new model. 2639 people have participated in Cost of the School Day Work with 62 projects receiving funding. Seminar with Elected members in January provided clear way forward to progress PB in relation to their environmental funds.
CE.P.11.8	Manage a clear process for community asset transfers	31-Mar-2019	✓	100%	**18/19:** Complete Asset Transfer Framework approved by Council. The council's first asset transfer approved in January 19. 25 Expressions of interest and three formal/completed requests pending a decision by the newly convened Asset Transfer Committee.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CE.P.11.9	Manage at least three capital programmes	31-Mar-2019	✓	100%	**18/19**: On Target However, funding secured for two capital projects through the Scottish Governments Capital Regeneration Fund. Newtongrange "Track to Train" project underway, Rosewell community hub project commenced. A third Community was supported to apply for Capital Regeneration fund however they chose not to make final application.
P.IOM.CE.1.2	Reduce barriers to learning by poverty proofing the school day with the Child Poverty Action Group in 11 primary schools in the priority areas. Extend this offer to all primary schools.	31-Mar-2019	✓	100%	**18/19**: Complete Work is ongoing with Primary Schools to develop new model. 2639 people have participated in Cost of the School Day Work with 62 projects receiving funding.
P.IOM.CE.1.3	Research in-school child poverty measures and interventions.	31-Mar-2019	✓	100%	**18/19**: Complete Research completed on update of free school meals at St David's Primary School and included in poverty plan. Other research placement on going about Care Experienced young people.
P.IOM.CE.4.1	Complete Neighbourhood Plans in all of the 16 Community Council areas. Agree a schedule of Neighbourhood Plan reviews	31-Mar-2019	✓	100%	**18/19**: Complete 15 Neighbourhood Plans Completed covering all 16 Community Council areas. Reviews ongoing, there is challenge to ensure the plans meet the requirements of Locality Planning in the priority communities. There is also a need to continually improve the process and move beyond meetings. Communities' team have a role to coordinate local activity.
P.IOM.CE.4.5	Manage clear processes for community groups to improve access to the Community Planning Partnership decision making as part of the Community Empowerment Act, including Participation Requests	31-Mar-2019	✓	100%	**18/19**: Complete Exceeding target for Participation More work needed to ensure community groups can directly inform CPP decision making.

Communities and Economy PI Report 2018/19

						2018/19					
PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Value	Status	Short Trend	Note	Annual Target 2018/19	Benchmark
		Value	Value	Value	Value						
CE.P.1.3a	Completion of review of Environmental Health Service	N/A	25%	30%	50%	80%	🛑	▬	**18/19**: Off Target Review due to complete in Q2 19/20 although savings already substantially made.	100%	
CE.P.1.4a	Processing of building warrant applications handled electronically at all stages	N/A	68.3%	70%	75%	71%	✅	▬	**18/19**: On Target Service is currently working between Electronic and paper based E-Building standards.	70%	
CE.P.1.1a	Conducting service reviews, prioritising resources to essential actions and ensuring financial discipline - number of reviews	2	0	3	3	3	✅	⬆	**18/19**: On Target Service reviews for Economic Development and Planning on target, Review of Environmental Health will be completed Q2 19/20. Budget proposals in all areas sent to CMT in Q4. Reviews due to complete in Q2 19/20 although savings already substantially made.	3	
CE.P.1.1b	Extent of savings achieved	£270,000.00	£133,000.00	£272,000.00	£272,000.00	£272,000.00	📈	⬆	**18/19:** Data Only Figure represents full year savings projection.		
CE.P.1.2a	Completion of review of Economic Development Service	85%	50%	75%	75%	90%	🛑	⬆	**18/19**: Off Target Target completion for Q2 19/20.	100%	

02. Maximise economic development and business investment from the opening of the Borders Rail Line

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.CE.P.2.1a	Number of new business start ups assisted in Midlothian area of Borders Rail Line corridor	202	25	81	117	172	📈	⬇			
CE.P.2.1b	Number of tourism businesses assisted in Midlothian area of Borders Rail Line corridor (cumulative)	9	14	37	73	76	📈	⬆	**18/19**: Data Only Borders Rail Corridor = A7 + A68 corridor = Danderhall, Dalkeith, Eskbank, Bonnyrigg, Rosewell, Lasswade, Newtongrange, Gorebridge.		
CE.P.2.1c	Number of new businesses locating in Borders Rail Corridor (cumulative)	80	22	34	73	100	📈	⬆			
CE.P.2.1d	Number of inward investment / indigenous investment enquiries received for sites/premises in Midlothian area of Borders Rail Line corridor (cumulative)	34	23	74	115	139	📈	⬆			

03. Implement the Tyne Esk LEADER Programme 2014/20 in East Lothian and Midlothian eligible areas

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.CE.P.3.1a	Number of LEADER projects funded (cumulative)	16	3	9	10	17	📈	⬆	**18/19**: Data Only		

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
CE.P.3.1b	Number of businesses participating in LEADER application process by submitting an Expression of Interest (cumulative)	20	4	7	7	7	🛑	⬇️	**18/19**: Off Target Programme is now beginning it's wind down so is promoting itself less to enquirers and not progressing new enquiries.	10	
CE.P.3.1c	Number of new jobs created through LEADER (cumulative)	3	0	1	1	3	✅	▬	**18/19**: On Target	3	
CE.P.3.1d	Number of training opportunities created through LEADER (cumulative)	0	0	0	0	0	📈	▬	**18/19**: Data Only		
CE.P.3.1e	Amount of leader funding allocated	£1,330,339	£399,431	£592,154	£652,154	£852,364	🛑	⬇️	**18/19**: Off Target Programme is now beginning its wind down so is promoting itself less to enquirers and not progressing new enquiries.	£1,026,967	Total LEADER programme is c. £3.4m over period 2015-2020

04. New jobs and businesses are located in Midlothian											

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
CE.P.4.1a	Number of new Business Start Ups assisted (cumulative)	158	25	81	117	376	📈	⬆️	**18/19**: Data Only		
CE.P.4.1b	Number of account managed businesses accepted by Scottish Enterprise (cumulative)	2	0	1	1	5	✅	⬆️	**18/19**: On Target	2	
CE.P.4.1c	Number of business related training workshops held	N/A	13	23	33	46	✅	▬	**18/19**: On Target	30	

05. Maintain progress on the implementation of the Easter Bush Master Plan

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CE.P.5.1a	Number of Easter Bush Development Board meetings held per annum	2	0	1	1	3	✅	⬆	**18/19**: On Target Most recent meeting of EBDB held on 06/03/2019. Regular meetings held with MSZ (sub group of EBDB).	2	

06. Fewer people are victims of crime, abuse or harm

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CE.P.6.1a	Carry out Health and Safety intervention campaigns within the year in accordance with the latest HSE guidance on local priorities; likely to be continuation of the control of risk around warehouses, and in the beauty industry	3	0	1	1	1	🔴	⬇	**18/19**: Off Target 100% of workplace incidents (requiring intervention) and service requests were attended to – 87% within time. Discretionary and Planned campaign inspection work has not been carried out in Q4, current priorities mean this will not be recovered in 18/19 nor carried forward into 19/20.	3	
CE.P.6.2a	% of food businesses deemed 'broadly compliant' with the food hygiene legislation	81%	82%	82.3%	81%	82%	🔴	⬆	**18/19**: Off Target Environmental Health managed to complete 100% of planned high street food safety inspections for the year. Although about 82% of food businesses comply with the law one food business operator was reported to the Procurator Fiscal for hygiene offences. Despite a reduction in staff in the food and safety team from 6 to 4.	84%	

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
CE.P.6.4a	Dog owners observed during dog fouling patrols as picking up dog waste	0%	99%	99%	99%	99%		⬆	**18/19**: Data Only		
CE.P.6.3a	% of residential caravan sites licensed	100%	100%	100%	100%	100%	✅	▬	**18/19**: On Target All caravan sites are currently licensed.	100%	

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07. There is a reduction in inequality in health outcomes

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PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
CE.P.7.3a	Review and update contaminated land procurement framework for the provision of peer review assessment of Environmental Reports – particular emphasis on quality and reporting times	N/A	50%	50%	75%	100%	✅	▬	**18/19**: On Target The Scotland Excel Framework continues to be used for securing contaminated land consultancy services for reactive work. Process has been updated and reviewed in conjunction with Procurement. The peer review process for remediation in terms of development requires to be finalised	100%	
CE.P.7.5a	Local target for building warrant assessment at 15 days rather than nationally adopted target of 20 days (Average time below 10 days)	100%	100%	66%	74%	86%	✅	⬇	**18/19**: On Target	80%	
CE.P.7.5b	Undertake annual focus group meetings with local architects	100%	Annual Measure			100%	✅	▬	**18/19**: On Target		
CE.P.7.5c	Undertake annual one to one meetings with major developers	100%	25%	50%	75%	100%	✅	▬	**18/19**: On Target	100%	

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Short Trend	Note	Annual Target 2018/19	Benchmark
	currently constructing within Midlothian										
CE.P.7.6a	Measure satisfaction relating to key areas including those on delivery, timeliness, information, access and the quality of customer service	92.5	95.6	93.3	93.6	97.7	✅	⬆	**18/19**: On Target	90	
CE.P.7.1a	Investigate a scheme to secure common repairs on private sector or mixed tenure residential property and make it available to private sector owners	66%	90%	90%	90%	100%	✅	⬆	**18/19**: On Target The Missing Share procedure has been completed and will be submitted to Committee for approval as part of the Council's Statement of Assistance.	100%	
CE.P.7.2a	Convene a joint working group with relevant Council services including Development Management, Building Standards, Transportation, Environmental Health with a view to maintaining air quality thereby protecting human health	66%	25%	50%	75%	100%	✅	⬆	**18/19**: On Target Preparatory work for the operation of this group has taken place. Meeting scheduled following the SEPA run air quality training for local authority Planning, Transportation and Environmental Health staff which took place in December 2018.	100%	

| | | | | | | **08. Trading Standards** | | | | | |

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Short Trend	Note	Annual Target 2018/19	Benchmark
CE.P.8.02a	The evaluation of both authorities' current performance measures	75%	25%	50%	50%	100%	✅	⬆	**18/19**: On Target Due to the Trading standards partnership between East and	100%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
	and an agreement by both to move to one set of identical indicators								Midlothian ceasing it is unlikely now that both authorities performance measures will be brought into line.		
CE.P.8.03a	Number of active interventions.	140	29	58	87	123	✅	⬇	**18/19**: On Target Officers continue to react to notifications of rogue traders in the area and when able take any appropriate action. Collaboration with the police and other agencies is routine. One investigation has resulted in a firm of roofers from Paisley/Glasgow being reported to the PF for unfair trading practices, including aggressive behaviour.	115	
CE.P.8.04a	Number of logs made	365	73	132	203	274	🛑	⬇	**18/19**: Off Target Although the number of logs are lower than last year input remains good and generally above that of most other LAs. Intelligence logging remains strong and one of the highest in Scotland, but figures are dependent on justifiable intelligence.	360	
CE.P.8.05a	Number of primary inspections conducted.	153	46	69	105	193	✅	⬆	**18/19**: On Target	125	
CE.P.8.06a	Number of criminal investigations instigated.	16	6	8	12	15	🛑	⬇	**18/19**: Off Target Trading Standards will always instigate Criminal Investigations where required.	16	
CE.P.8.07a	Percentage of consumer complaints completed within 14 days.	88%	88.7%	98%	98%	90.1%	✅	⬆	**18/19**: On Target 73/81 consumer complaints dealt with within 14 days.	85%	
CE.P.8.08a	Percentage of tobacco retailers visited annually.	19.7%	14%	6%	15%	36%	✅	⬆	**18/19**: On Target	20%	
CE.P.8.09a	Participation in safety initiatives	4	0	0	0	0	🛑	⬇	**18/19**: Off Target Due to other priorities.	6	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CE.P.9.2a	Adoption of the LBAP	N/A	25%	50%	75%	100%	✅	▬	**18/19**: On Target The Local Biodiversity Action Plan (LBAP) has been drafted in consultation with our biodiversity partners and was subject to a wider consultation with community and interested parties/groups. The finalised LBAP was adopted by the Planning Committee at its meeting in February 2019.	100%	
CE.P.9.4c	Draft Supplementary and Planning Guidance as required by the Midlothian Local Development Plan.	N/A	25%	50%	75%	100%	✅	▬	**18/19**: On Target i) The Green Networks supplementary guidance, Special Landscape Areas supplementary guidance, Food and Drink and Other Non-Retail Uses in Town Centre supplementary guidance and Resource Extraction supplementary guidance have been drafted and adopted ii) the Housing Development in the Countryside and Green Belt supplementary guidance is subject to consultation.	100%	
CE.P.9.1a	The time to determine planning applications over the stated period is the key measure in defining customer service as set by the Scottish Government	86%	74%	83%	84%	82%	✅	⬇	**18/19**: On Target	80%	78% of planning applications were determined within target in 2015/16.
CE.P.9.3a	Adoption of the Climate Change plan	75%	20%	20%	20%	25%	🛑	⬇	**18/19**: Off Target Work on the Council's Climate Change Plan has commenced but has not been completed because of other work priorities.	100%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CE.P.9.5a	Full attention at all times to monitoring of gas levels, with any necessary action being taken timeously	Yes	Yes	Yes	Yes	Yes	✅	▬	**18/19**: On Target Regular updates continue to be provided to residents and to local members. Melville Housing have engaged a Specialist Company to trial a remediation solution for their affected properties. If the trial is successful the information will be shared with the private sector owners.	Yes	

10. Poverty levels in Midlothian overall are below the Scottish average

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CE.P.10.1a	Implement the actions in the review	85%	25%	50%	75%	100%	✅	⬇	**18/19**: On Target Work is underway to implement the internal one stop arrangements with partners from across council directorates. Formal tendering for the external welfare and money advice service has closed and the local CAB have been named as the principle provider pending conformation of additional information. The service is to commence in April 2019.ESF funding will stop from May 2019 for this service.	100%	
CE.P.10.2a	Number of staff participating in staff development linked to provisions of the Welfare Reform Act.	N/A	25%	50%	75%	100%	✅	▬	**18/19**: On Target The welfare rights team offers support to internal departments on benefit advice and supports the wider Midlothian local advice services on benefit issues. They provide phone advice to external organisations, referral pathways to support Midlothian residents in	100%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									complex cases and chair the bi monthly Welfare Rights Forum which brings together statutory agencies EG: DWP, Scottish Social Security, SWF with Midlothian advice services to resolve local issues. Individual training is available on request.		

11. Delivering Excellence - IOM

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CE.P.11.10a	Have a simplified, transparent grants programme that supports the outcomes in the Single Midlothian Plan	N/A	25%	50%	100%	100%	✅	▬	**18/19**: On Target	100%	
CE.P.11.11a	Robust plans that comply with the Locality Outcome Improvement statutory guidance	N/A	3	3	3	3	✅	▬	**18/19**: On Target These plans are targetted at Midlothian's three priority communities to tackle areas of higher deprivation.	3	
CE.P.11.5a	Provide bespoke 1-1 support to community and voluntary groups on funding, capital projects, governance, income generation, influencing and organisational development	N/A	81	81	220	273	✅	▬	**18/19**: On Target Target has been far exceeded.	80	
CE.P.11.8a	15 organisations are supported through an expressions of interest and all organisations	N/A	15	15	17	25	✅	▬	**18/19:** On Target Target has been far exceeded.	15	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
	that apply for a formal transfer are responded to within the statutory timescales. An Asset Transfer Framework is approved by Council										
CE.P.11.9a	Additional funding secured, capital projects delivered	N/A	2	2	2	2	🔴	▬	**18/19:** Off Target £1.244, 000 secured for two projects.	3	

Communities and Economies Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
GENERIC - Failing to staff services with skilled and experienced staff	Threat of lowered performance and complaints/errors should the service not have the required skills and experience	01 - Structured approach to training 02 - Identification of sufficient opportunities and Resources.	⚠	Action plans from Staff survey to inform recruitment and training	**18/19**: On Target Each Service within ECE has a staff survey action plan in place.
GENERIC - Health and safety of staff/members of the public	Officers across the service are regularly out of the office, working alone and can meet aggrieved / aggressive / threatening customers in commercial and residential settings. Council has a duty of care for staff.	teams use a variety of approaches - flagging of 'known' individuals / addresses on data management systems - 'buddy' roles if appropriate - whiteboards for staff movements and expected times - mobile phones & Phone contact systems - a corporate policy for dealing with 'Unacceptable Behaviour' is being developed	⚠	Staff Consultation	**18/19**: On Target Staff survey action plans in place for all Services.
GENERIC - Effectively linking with the Community Planning process and weak governance in the Strategic Planning Group	Threat that the connections are weak	01 - Sound and regular contact with the community planning manager. 02 - P&D service management team to review regularly. 03 - Partnership Agreement 04 - Reporting line to Community Planning Working Group 05 - Subordinate groups report to the group 06 - Business calendar and timetable 07 - Agendas and minutes 08- Agreed outcomes and monitoring	⚠	Community planning board and Sub groups	**18/19**: Regular meetings with Community planning board and updates from each subgroup are reported.
GENERIC - Identifying, Managing and Realising Developer Contributions	Where developers develop land they must contribute to the direct consequences they are creating. For example, impacts on local schools. Threat that these aren't identified and controlled and, as a consequence result in developers not making essential	01 - Role of the developer contributions steering group. 02 - Lead Officer Planning Obligations 03 - Local Development Plan 04 - Legal Agreements with developers 05 - Supplementary Guide to Developer Contributions	⚠	Review of Supplimentary guide to developer contributions	**Q3 18/19**: Draft guide prepared in advance of consultation/approval.
				CE.RR.01-12a	**18/19**: All actions have been reviewed in Q4 2018/19.

🔴 Alert 🟠 High Risk ⚠ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	contributions, with the shortfall having to be provided by the Council.	06 - Software system in place to track payments against developer contribution agreements. 07 - Compliance Officer post to update system with details of developer completions and ensure that associated payment is allocated correctly against the correct infrastructure.			S75 officer continues to report to Management on developments.
ECONOMIC DEVELOPMENT - Challenging Midlothian job creation targets for 2020	The Midlothian Economic Development Framework (MEDF) highlighted the target of creating 10,000 new jobs in Midlothian by 2020. This equates to 800 new jobs per annum. This figure was temporarily revised downwards to 500 new jobs per annum by the Community Planning Partnership's MBO sub group to take account of the ongoing economic downturn. The figure is measured through Annual Business Inquiry (ABI) statistics produced in late December each year.7 economic sector action plans are in place each containing a series of priority actions for the Council and other partners. In addition, the MBO sub group is currently leading on the development of a Midlothian Economic Recovery Plan. This should be available in Spring 2013 and will link closely to the Single Midlothian Plan which is also under development.	01 - MBO Thematic Group members keep watching brief on new job creation targets. 02 - Thematic Group meetings generally held on a quarterly basis. 03 - Review/restructure of Economic Development 04 - New Economic Development Manager recruited and taking up post in February 2019.	⚠️	Brexit planning	**18/19**: Community planning are working with Community partners and 3rd sector to constantly monitor and plan for Brexit. Regular updates are being sent to Cabinet and Council.
PLANNING POLICY AND ENVIRONMENT - Failure to progress the sustainability agenda and Climate Change adaptation	Climate Change Act places public duties with respect to climate change adaptation and mitigation and sustainable development. Midlothian Council has signed Scotland's Climate Change Declaration.	01 - Climate Change Declaration signed by 32 Scottish Councils 02 - Senior Planning Officer leads 03 - Sustainable Development Framework in place with Action Plan to be replaced by a joint climate change and sustainability action plan agreed by CMT 04 - Divisional 'green' initiatives 06 - Biodiversity Plan and implementation of phase 1 of the Action Plan	⚠️	Climate Change and sustaibabilty adaptation	**18/19**: A joint report was sent to Cabinet in November detailling progress towards and timeline for meeting Climate Change Declaration.

🔴 Alert   🔴 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		08 - Climate Change and Sustainability Working Group			
Failure to engage with people from equalities groups	Equality groups have been given high priority in the consultation process and professional expertise has been sought from equality professionals. however a risk exists that the voices of minority groups could be missed in a neighbourhood plan consultation process.	01. Joint working with Equality Engagement Officer to target key groupings within Neighbourhood Planning communities 02. EQIA Approach	⚠️		

🔴 Alert 🟠 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Published Local Government Benchmarking Framework - Communities and Economy

Midlothian

Economic Development and Planning

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
ECON1	Percentage of Unemployed People Assisted into work from Council (LGBF)	New for 2012/13		8%	6.83%	12.33%	8.57%	15.47%	6.71%	17/18 Rank 23 (Third Quartile). 16/17 Rank 9 (Second Quartile). 15/16 Rank 19 (Third Quartile). 14/15 Rank 15 (Second Quartile).
ECON2	Cost of Planning per Application	£4,034.00	£3,983.05	£4,488.74	£4,969.34	£4,981.09	£4,040.98	£5,076.92	£4,969.50	17/18 Rank 19 (Third Quartile). 16/17 Rank 23 (Third Quartile). 15/16 Rank 9 (Second Quartile). 14/15 Rank 19 (Third Quartile).
ECON3	Average time for Commercial planning application (LGBF)	New for 2012/13		26.3 weeks	54.9 weeks	9.9 weeks	7.9 weeks	8.4 weeks	7.3 weeks	17/18 Rank 8 (TOP Quartile). 16/17 Rank 11 (Second Quartile). 15/16 Rank 9 (Second Quartile). 14/15 Rank 16 (Second Quartile).
ECON5	No of business gateway start-ups per 10,000 population (LGBF)	New for 2013/14			23.14	22.74	19.91	18.62	22.42	17/18 Rank 6 (TOP Quartile). 16/17 Rank 14 (Second Quartile). 15/16 Rank 11 (Second Quartile). 14/15 Rank 8 (Top Quartile)
ECON6	Cost of Economic Development & Tourism per 1,000 population (LGBF)	£66,132.61	£82,080.85	£60,173.31	£41,180.64	£53,253.68	£44,455.89	£125,753.30	£42,723.94	17/18 Rank 6 (TOP Quartile). 16/17 Rank 26 (Bottom Quartile). 15/16 Rank 11 (Second Quartile). 14/15 Rank 15 (Second Quartile).
ECON7	Percentage earning less than the Living Wage (LGBF)	New for 2012/13		17.5%	17.8%	19.9%	23.3%	17.2%	13.8%	17/18 Rank 1 (TOP Quartile). 16/17 Rank 3 (TOP Quartile). 15/16 Rank 17 (Third Quartile). 14/15 Rank 9 (Second Quartile).
ECON8	Proportion of properties receiving superfast broadband (LGBF)	New for 2013/14			57%	66%	76%	85%	91.18%	17/18 Rank 19 (Third Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 19 (Third Quartile). 14/15 Rank 19 (Third Quartile).

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
ECON10	Immediately available employment land	New for 2014/15				57.14%	57.14%	57.14%	55.49%	17/18 Rank 9 (Second Quartile). 16/17 Rank 9 (Second Quartile). 15/16 Rank 9 (Second Quartile). 14/15 Rank 9 (Second Quartile).

Environmental Services

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
ENV5a	Corporate Indicator - Cost of Trading Standards, Money Advice & Citizen Advice per 1000 population (LGBF)	New for 2012/13		£4,629.63	£4,639.91	£8,595.29	£6,625.47	£5,744.27	£4,917.30	17/18 Rank 13 (Second Quartile). 16/17 Rank 16 (Second Quartile). 15/16 Rank 17 (Third Quartile). 14/15 Rank 28 (Bottom Quartile).
ENV5b	Corporate Indicator - Cost of environmental health per 1,000 population. (LGBF)	New for 2012/13		£9,591.64	£14,120.43	£9,036.07	£10,115.57	£10,382.58	£11,311.00	17/18 Rank 8 (TOP Quartile). 16/17 Rank 5 (TOP Quartile). 15/16 Rank 3 (TOP Quartile). 14/15 Rank 3 (TOP Quartile).

Education
Performance Report Quarter Four 2018/19

Progress in delivery of strategic outcomes

In session 2018/19 we have set 3 main strategic priorities under the following broad heading: Raising Attainment and Achievement; Learning Provision and Leadership.

Strategic priority 1:-

Raising the attainment and Achievement: (NIF: Performance Information and School Improvement)

- 2% increase CfE (Curriculum for Excellence) in Literacy and Numeracy by the end of P1, P4, P7 and S3 in order to ensure CfE levels are above the national average
- PEF (Pupil Equity Fund): Interrupting the cycle of poverty: Further 5% increase in number of children from SIMD 1 and 2 achieving the expected CfE level in Literacy and Numeracy by the end of P1, P4, P7 and S3
- Increase % National Qualifications as per individual school targets
- Secure a three year pattern of 96% Sustained Positive Destinations

Strategic priority 2:- Learning Provision

Quality Inspection 2.2 and 2.7 Curriculum as a hook – the power of partnership (NIF: Assessment of Children's Progress)

BGE (Broad General Education): Taking a closer look at QI 2.7 - how can enhanced partnerships help us to deliver a tailor made curriculum that acts as a hook to improve engagement and participation resulting in improved outcomes for all learners.

Senior Phase: Taking a closer look at QI 2.7: how can enhanced partnerships help us to deliver a tailor made curriculum that acts as a hook to improve engagement and participation resulting in improved attendance, attainment, wider achievements and sustained positive destinations?

2.3 Learning, Teaching and Assessment

- To share best practice in moderation, tracking and assessment of progress through the BGE
- To continue to implement Visible Learning including Impact Cycle Training
- To share best practice in learning and teaching

Quality Inspection 3.1 Ensuring wellbeing, equity and inclusion

- Monitor the ongoing implementation of the Inclusion Review
- Taking a closer look at Mental Health and Wellbeing
- Child Health and Wellbeing PEF Project (3 target communities)
- Further improve attendance and reduce exclusions

Strategic Priority 3:- Quality Inspection 1.3 Leadership of change and 1.1 Self-evaluation for self-improvement

(NIF: School Leadership and Teacher Professionalism)

- Creating a Collaborative Leadership Culture at all Levels by continuing to grow our ASG (Associated School Groups) into Learning Communities and building the professional networks
- As collaboration is a key focus within impact focus of Visible Learning programme we will run a two year programme and look to build in sustainability.

1.1 Self Evaluation for self-improvement

Continuing to build independence in self-evaluation for self-improvement through:

- Reviews – based on Key QI used in Inspection process with Head Teachers on reviews
- Inspections- Learning communities i.e. ASGs
- HMIe inspections
- School visit QA (Quality Assurance) programme with school evaluations
- Challenging conversations and support at Leadership levels
- Shared practice forums – self-evaluation – cluster or trio

Raising the attainment and Achievement: (NIF: Performance Information and School Improvement)

There continues to be a focus on Curriculum for Excellence (CfE) levels through tracking periods for all pupils but specifically for those 'unlikely' to achieve their expected level.

We have achieved our target of 2% in almost all areas. In some areas the improvement is as much as 18% in P7 English. The area where this has seen least progress is S3 in Listening and Talking and Numeracy.

This has been achieved by implementation of 3 curriculum for excellence tracking periods last session, robust monitoring and tracking and teacher training on achievement of a level and robust conversations with Managers and Headteachers. A full report on PEF has been submitted to Cabinet on 16 October 2018.

The CfE final levels have now been published and some are included in this document with a full report for Council in November.

Initial look at CfE figures from 17/18 against the National data.

Test type	Test year	Stage			
		P1	P4	P7	S3
Listening and Talking	Midlothian	92.68%	85.12%	83.63%	84.97%
	National	87.00%	85.00%	84.00%	91.00%
Numeracy	Midlothian	86.68%	78.81%	74.75%	87.90%
	National	85.00%	76.00%	75.00%	89.00%
Reading	Midlothian	87.21%	79.47%	79.19%	84.90%
	National	81.00%	77.00%	79.00%	90.00%
Writing	Midlothian	83.69%	76.37%	75.94%	81.80%
	National	78.00%	72.00%	73.00%	89.00%

The final levels have now been published nationally.

Above the National in P1 + P4, broadly in line with National for P7 and below in all areas at S3.

For PEF-
- We have achieved the 5% increase in mostly all areas in relation to CfE levels.
- We have closed the gap in SIMD 1-2 in all measures except P7 Listening and Talking were there has been a decrease.
- SIMD 3-8 showing improvements in all areas
- Decline in SIMD 9-10 in P4 and S3 reading and writing.

A full Attainment and achievement report was presented to Council in 13 November 2018 followed by a Secondary Head teacher seminar on December 4 2018. This gave a full account of the results for all schools for SQA.

As reported to Council on 2 October 2018. Sustained positive destinations were published in June 2018 with 94.4% of pupils now achieving a sustained positive destination which is up 10 percentage points since 2010/11 and up 1.4 percentage points on the previous year. Midlothian is now above the National average. Positive Destinations have shown an ongoing improvement trend for the last 5 years. The new participation measure published actually includes 16 – 19 year olds and this is 94.3%. This is the highest recorded figures for Midlothian. We are now 1.5% higher in school leaver destinations and 2.5% higher than the National average. Gives us 8th place overall.

Most recent SSR2 report from Scottish Government details the following results

All 17/18 School Leavers S4/5/6
Leaver initial destinations
- Record number of leavers going onto Higher Education 34.11%, up 3% on last year and 5% on 5 years ago, closing the gap on Virtual 37.92% and National 41.16% comparator figures.
- 1 in 3 (33%) of our leavers now going straight into Employment, above the Virtual (24%) and National (23%)
- Positive destinations itself (94.35) above the Virtual and on par with National figures

Literacy and Numeracy
- Numeracy above the virtual comparator at L3,4+5 (all leavers)
- Literacy above the virtual at L3+4 just below at Level 5 (-0.5%)

Awards
- Midlothian 5@5 (61.24%) above the Virtual comp (59.27%)
- Midlothian 3@6 (46.62%) above the Virtual comp (46.12%)

S6 Leavers
Literacy and Numeracy
- Numeracy above the virtual comparator at L3,4+5
- Literacy above the virtual comparator at L3,4+5

Leaver initial destinations
- Record number of S6 leavers going onto Higher Education 56.89%, up 6% on last year, closing the gap on Virtual 62.32% and National 60.77% figures.
- Positive destinations itself (97.7) above the Virtual (97.4) and National (97.1) comparators.

Learning Provision (QI 3.2 The Curriculum, QI 2.3 Learning. Teaching and Assessment) and QI 3.1 Ensuring wellbeing, equity and inclusion.

QI 3.2 The Curriculum: Schools offer a wide curriculum to pupils which show progression in pathways. There is an established Secondary DHT network that meet to discuss developments with a Senior manager.

Developing enhanced partnership working has been the focus of our work to open the new Digital Centre of Excellence at the new Newbattle which opened in June 2018 in partnership with the University of Edinburgh. We are already seeing increased attendance from 85.3% to 86.6% and reduced exclusion from 56 to 9 at the Digital Centre for Excellence and on various visits to the school increased pupil engagement in learning. The developments in the curriculum via effective partnership working means that they have developed learning journeys that will equip our students with the skills and expertise to thrive in a future work place and act as safe and responsible citizens within their communities.

Newbattle High School are working to deliver an NPA (National Progression Award) for digital science in August 2019, the first of its kind.

QI 2.3 Learning, teaching and assessment: We have continued to implement Visible learning and the Impact Cycle training throughout 2018/19 with results of the impact research feeding into our new Innovation Centre. Many schools are now working in partnership with Edinburgh University to support them in this process. The new centre will also assist Midlothian in sharing best practice within and out with the local authority

Visits in the last term will focus on learning and teaching and will ensure we have a true reflection of this in our schools.

QI 3.1 Ensuring wellbeing, equity and inclusion: A full session for HTs with Education Scotland has improved HT understanding of this, including statutory duties. A safeguarding officer follows up schools to ensure that this is being followed.

In Q4 Exclusions fell by 10% across Primary and Secondary compared to the same time last year. Secondary School exclusions have dropped 33% in the last year this is largely due to greater awareness of adverse childhood experiences (ACEs) and adopting different models of inclusion. Attendance levels for Q4 in Primary and Secondary are broadly the same as last year, this is a focus at Headteacher meetings.

An attendance strategy and scrutiny group has been established and lead by the Principal Educational Psychologist. A well-established Secondary DHT Pupil support network also work with senior staff to address attendance and exclusion issues. A focus on 0% attendance following every holiday to ensure there are no Children missing from Education.

School Type	% Attendance 18/19 so far	Exclusions per 1,000 18/19	Attendance as at last year 17/18	Exclusions per 1,000 17/18	Attendance as at 2 yrs ago 16/17	Exclusions per 1,000 16/17
Primary	94.46	6.4	94.32	6.57	94.74	9.72
Secondary	89.92	25.4	89.84	37.75	90.10	38.01

In December 2018 we were able to appoint a Virtual Headteacher for Care Experienced children and young people from Scottish Government funding. This will enable improved tracking of the performance and wellbeing of those children and young people in conjunction with Children's Services. A new plan has been developed across both services to ensure improvements in outcomes for care experienced young people.

Leadership: There is now a clear focus in Headteacher meetings / Depute Headteacher and Principal Teacher meetings on the Key Quality Indicators for improvement.

A rigorous set of school reviews are in place for schools with 5 Secondary schools completed and 4 complex needs provisions also having been reviewed. Our own Headteachers and Depute Headteachers are involved in these reviews as are Headteachers from the South East Improvement Collaborative.

The review process is enabling schools to set clear action plans and allowing us to prioritise support from Senior Officers. We have also had several very successful thematic reviews carried out by Education Scotland including of readiness for 'empowerment', curriculum practice using Beeslack Community High school, Numeracy and maths at St Matthew's. And 2 day visit for pupil and parent participation at Dalkeith Community High school and one at Cornbank Primary school. Dalkeith have been asked to provide a case study on pupil participation as good practice and to be shared on the Education Scotland website.

Early Years: Planning for the early learning and childcare (ELC) expansion to 1140 hours per year is embedded within the Learning Estate Strategy to ensure a joined-up approach and enable maximum efficiency, as well as aligning short term plans with long term strategy. To support ELC providers in the private and voluntary sectors to expand their capacities in readiness for the 2020 entitlement, £1.5 million has been made available through our funded providers capital grant scheme. Preparations are ongoing for the first two council outdoor ELC settings with the first to be opened in Vogrie Country Park.

The council is now in the fourth phase of piloting expanded hours places and by the end of the quarter, 561 children will be taking up an 1140 place (19% of the total number of places taken up in Midlothian). The Council is on track to achieve 40% of 1140 hour places being delivered in August 2019 which is in line with Scottish Government expectations. To meet the increase in the number of staff required to deliver the entitlement in 2020, 52 Modern Apprentices have begun their training this year and 32 practitioners are studying towards their HNC in childhood practice. Considerable progress has been made towards implementing the increase in hours, although much work remains to be done.

Challenges and Risks

The ongoing implementation of the South East Improvement Collaborative and the time of central staff to do this whilst new staff are not yet in place.

Change to the Higher qualifications: There is a risk that Higher results will be affected next year as a result of new SQA Examination arrangements for Highers at S5 and S6. This will need to be mitigated through close monitoring of pupil progress in schools and work with Curriculum PT and SQA coordinators to gain intelligence of any issues around changes to coursework and the effect of increased exam content.

Ensuring good financial management and real-time information to ensure spending is accurately forecast and monitored within the year at both school and central points.

Further reduction in Devolved School Management (DSM) for schools which was implemented from April 2019 which will further reduce teacher numbers. This will impact on the choices for curricular options in Senior phase at Secondary schools and on absence cover.

Reduction in central staff to ensure that schools are improving outcomes for learners and possible Inspection being graded poorer.

Ensuring the reduction in LLE and Communities still meets the statutory requirements of delivering an adequate and efficient service.

Full implementation of the new Education (Scotland) act 2015 including preparing primary schools for the full implementation of 25hrs and Gaelic provision; and the requirements of the NIF as new reporting measures come into force.

Implementation of the PEF (Pupil Equity Fund), funds have been directed to Schools directly and we need to continually ensure that they are being used to close the equity gap and all are in line with procurement. This is currently subject to an internal audit review and report will be published to ensure we follow recommendations.

Rate of demographic growth particularly in the early years and primary school rolls. Keep on track with the learning estate strategy across the council which is challenging due to less staff.

Lower uptake of Music instruction which could mean further financial issues going forward for the education budget if as predicted we continue to have a shortfall in income.

Ongoing work to prepare for the implementation of 1140 hours by 2020: One of the major challenges of the expansion will be the recruitment and training of sufficient staff, by the Council and also across our partner providers, particularly as all other local authorities will be doing the same at the same time.

The potential impact from Brexit could effect employability funding which supports elements of Education especially the third sector.

Education PI summary 2018/19

<table>
<tr><td colspan="14" align="center">Making the Best Use of our Resources</td></tr>
<tr>
<td rowspan="2">Priorities</td>
<td rowspan="2">Indicator</td>
<td>2017 /18</td>
<td>Q1 2018 /19</td>
<td>Q2 2018 /19</td>
<td>Q3 2018 /19</td>
<td colspan="4">2018/19</td>
<td>Annual Target 2018 /19</td>
<td rowspan="2">Feeder Data</td>
<td rowspan="2">Value</td>
</tr>
<tr>
<td>Value</td>
<td>Value</td>
<td>Value</td>
<td>Value</td>
<td>Value</td>
<td>Status</td>
<td>Note</td>
<td>Short Trend</td>
<td></td>
</tr>
<tr>
<td>01. Manage budget effectively</td>
<td>Performance against revenue budget</td>
<td>£84.462 m</td>
<td>£92.829 m</td>
<td>£92.930 m</td>
<td>£92.508 m</td>
<td>N/A</td>
<td></td>
<td>18/19: Data will be available when it has been verified and has been presented to the Council.</td>
<td>—</td>
<td>£93.288 m</td>
<td></td>
<td></td>
</tr>
<tr>
<td rowspan="2">02. Manage stress and absence</td>
<td rowspan="2">Average number of working days lost due to sickness absence (cumulative)</td>
<td rowspan="2">5.9</td>
<td rowspan="2">1.53</td>
<td rowspan="2">1.89</td>
<td rowspan="2">3.97</td>
<td rowspan="2">5.82</td>
<td rowspan="2">🛑</td>
<td rowspan="2">18/19: Off Target Staff absence continues to be a priority for the Service and work is ongoing within the Management team to address. Aspirational target, 18/19 figures show an improving 3 year trend. Education services continue to show strong results compared to other National comparators.</td>
<td rowspan="2">⬆</td>
<td rowspan="2">5</td>
<td>Number of days lost (cumulative)</td>
<td>11,427.6</td>
</tr>
<tr>
<td>Average number of FTE in service (year to date)</td>
<td>1,961.92</td>
</tr>
</table>

<table>
<tr><td colspan="14" align="center">Corporate Health</td></tr>
<tr>
<td rowspan="2">Priorities</td>
<td rowspan="2">Indicator</td>
<td>2017 /18</td>
<td>Q1 2018 /19</td>
<td>Q2 2018 /19</td>
<td>Q3 2018 /19</td>
<td colspan="4">2018/19</td>
<td>Annual Target 2018 /19</td>
<td rowspan="2">Feeder Data</td>
<td rowspan="2">Value</td>
</tr>
<tr>
<td>Value</td>
<td>Value</td>
<td>Value</td>
<td>Value</td>
<td>Value</td>
<td>Status</td>
<td>Note</td>
<td>Short Trend</td>
<td></td>
</tr>
<tr>
<td rowspan="2">03. Complete all service priorities</td>
<td rowspan="2">% of service priorities on target / completed, of the total number</td>
<td rowspan="2">80%</td>
<td rowspan="2">100 %</td>
<td rowspan="2">80%</td>
<td rowspan="2">80%</td>
<td rowspan="2">100 %</td>
<td rowspan="2">✅</td>
<td rowspan="2">18/19: On Target</td>
<td rowspan="2">⬆</td>
<td rowspan="2">90%</td>
<td>Number of divisional & corporate priority actions</td>
<td>5</td>
</tr>
<tr>
<td>Number of divisional & corporate priority actions on tgt/completed</td>
<td>5</td>
</tr>
<tr>
<td rowspan="2">04. Process invoices efficiently</td>
<td rowspan="2">% of invoices paid within 30 days of invoice receipt (cumulative)</td>
<td rowspan="2">96%</td>
<td rowspan="2">98%</td>
<td rowspan="2">97%</td>
<td rowspan="2">97%</td>
<td rowspan="2">96%</td>
<td rowspan="2">✅</td>
<td rowspan="2">18/19: On Target</td>
<td rowspan="2">⬇</td>
<td rowspan="2">93%</td>
<td>Number received (cumulative)</td>
<td>16,413</td>
</tr>
<tr>
<td>Number paid within 30 days (cumulative)</td>
<td>15,686</td>
</tr>
<tr>
<td rowspan="2">05. Improve PI performance</td>
<td rowspan="2">% of PIs that are on target/ have reached their target.</td>
<td rowspan="2">63.33%</td>
<td rowspan="2">50%</td>
<td rowspan="2">50%</td>
<td rowspan="2">66.67%</td>
<td rowspan="2">50%</td>
<td rowspan="2">🛑</td>
<td rowspan="2">18/19: Off Target Improvement plans are in place to address off target indicators.</td>
<td rowspan="2">⬇</td>
<td rowspan="2">90%</td>
<td>Number on tgt/complete</td>
<td>7</td>
</tr>
<tr>
<td>Total number of PI's</td>
<td>14</td>
</tr>
<tr>
<td rowspan="2">06. Control risk</td>
<td rowspan="2">% of high risks that have been reviewed in the last quarter</td>
<td rowspan="2">100 %</td>
<td rowspan="2">100 %</td>
<td rowspan="2">100 %</td>
<td rowspan="2">100 %</td>
<td rowspan="2">100 %</td>
<td rowspan="2">✅</td>
<td rowspan="2">18/19: On Target New Risk register has been reviewed by Head of Service and Education Resource Manager.</td>
<td rowspan="2">—</td>
<td rowspan="2">100 %</td>
<td>Number of high risks reviewed in the last quarter</td>
<td>1</td>
</tr>
<tr>
<td>Number of high risks</td>
<td>1</td>
</tr>
</table>

Priorities	Indicator	2017 /18	Q1 2018 /19	Q2 2018 /19	Q3 2018 /19	2018/19				Annual Target 2018 /19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
07. Implement improvement plans	% of internal/external audit actions progressing on target.	18.18%	0%	100%	87.5%	0%	🛑	**18/19**: Off Target Work progressing to bring the outstanding action into place.	⬇	90%	Number of internal/external audit actions on target or complete	2
											Number of internal/external audit actions in progress	3

Education Complaints Indicator Summary

Commitment to valuing complaints								

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	52	13	27	40	62		**18/19**: Data Only	
Number of complaints closed in the year		11	23	37	58		**18/19**: Data Only	
Number of complaints upheld (cumulative)		3	5	8	8		**18/19**: Data Only	
Number of complaints partially upheld (cumulative)		0	8	12	16		**18/19**: Data Only	
Number of complaints not upheld (cumulative)		3	9	15	29		**18/19**: Data Only	
Average time in working days to respond to complaints at stage 1	9.42	4.29	10.94	8.88	8.09		18/19: Off Target Stage 1 complaints responded to within timescale has slipped in Q4 although an improvement on Q2+3. Work is ongoing to analyse data and improve. Delays in responses due to Holiday period.	5
Average time in working days to respond to complaints at stage 2	34.5	11	26.5	28.67	23.86		**18/19**: Off Target Work is ongoing to bring complaints procedures up to targets	20
Average time in working days for a full response for escalated complaints		11.33	45.33	32	27.86			20
Percentage of complaints at stage 1 complete within 5 working days	52.78%	57.14%	66.67%	65.38%	65.91%			95%
Percentage of complaints at stage 2 complete within 20 working days	41.67%	100%	100%	33.33%	57.14%			95%
Percentage of complaints escalated and complete within 20 working days		100%	66.67%	80%	71.43%			95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		0	0	1	2		**18/19**: All extensions are due to Holiday periods.	

Education Action report 2018/19

Midlothian

01. Inequalities in learning outcomes have reduced

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
E.P.1.1	To build excellence by raising attainment overall	31-Mar-2019	✅	100%	**18/19**: Complete 2017/18 results show an average 8.1% increase in CfE (Curriculum for Excellence) since 2016/17. Attainment visits with all Schools have been undertaken in Q2/3 and this involved robust conversations in relation to tracking and monitoring to improve outcomes for al learners. There is also an emphasis on improving moderation activities to ensure validity and reliability of CfE data and ensuring planned learning and assessment is leading to improved challenge and progression.
E.P.1.2	To close the gap between the least and the most disadvantaged	31-Mar-2019	✅	100%	**18/19**: Complete Information from Secondary analysis and CfE (Curriculum for Excellence) show the gap between the least and the most disadvantaged from 16/17 to 17/18 has reduced. SIMD information is available to support analysis of school data and is informing the ongoing attainment visits across Primary and Secondary schools. The Authorities School planning guidance is based on our three year strategic plan that focuses on the National Improvement framework priorities including closing the gap between the least and most disadvantaged and therefore there is alignment between national and local targets to close this gap. Schools report on these outcomes through their Standard and Quality reports and the Scottish Government collects this information to inform their annual National Improvement Framework (NIF) report Whilst the achievement of CfE level data for schools is still being dealt with as experimental by the Scottish Government, we have improved our performance across most of the literacy and numeracy measures from 2016/2017 to 2017/18 at stages P1, P4, P7 and S3. • At P1 stage (Early Years level CfE) all measures have improved from 2016/17 to 2017/18 across all SIMD bands. The greatest improvement was in Writing where the number of children achieving Early Level increased by 14%, followed by Numeracy which increased by 9% and Reading which increased by 7%. These increases are all statistically significant. • At P4 stage at SIMD 9-10 the % of children achieving listening and talking at First Level of CfE was at parity with the year before. All other measures; Reading, Writing and Numeracy fell by 4%, 2% and 2% respectively for pupils achieving first level. It should be noted that due to

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					the experimental nature of this data and the cohorts size that and a drop between 1-2% is not significant and the results are fairly much at parity with the year before. We have kept them highlighted as red in the table in the full report as they still represent a static pattern that we will analyse in terms of overall performance at P4. • At P7 for SIMD 1-2 band there was a 16% fall in pupils achieving listening and talking at Early Level. All other measures were higher at each SIMD band except P7 reading SIMD 9-10 where there was no change. • At S3 results were higher for all measures at SIMD bands 1-2 and 3-8 but at SIMD band 9-10 results were static with no statistically significant increase over the two year period.

02. Engaged and supported workforce

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
E.P.2.1	Learning Teaching and Assessment	31-Mar-2019	✅	100%	**18/19**: Complete A comprehensive Leadership Programme continues to be delivered this session, focusing on the key inspection QIs; 1.1 (Self-Evaluation for Self-Improvement), 1.3 (Leadership of Change), 2.3 (Learning Teaching and Assessment) and 3.2 (Raising Attainment and Achievement), plus the NIF drivers Teacher Professionalism and School Leadership. This programme will be delivered to Head Teachers, Depute Head Teachers and Principal Teachers. This will support and develop their leadership capacity. All schools will continue to participate in moderation activities in literacy and numeracy, and teaching staff in all primary schools have been trained in the use of Holistic Assessment. They will now be required to plan these into blocks of teaching, and moderate their use at school, ASG and authority level. Schools' tracking systems will continue to be discussed and developed through an increased number of QI Reviews, and set tracking periods will continue to support Head Teachers to have regular, challenging discussions with practitioners about raising attainment and making robust judgements about achievement of a level. The Visible Learning Collaborative Impact programme which has run since 2016-17 continues to focus on developing collaborative practitioner enquiry and in our second phase and we are continuing to explore ways to sustain this work into 2019-20 based on the trained cohort and using internal resourcing in the face of budget cuts. The new VL Strategic Management Board which has been set up will look to developing this teaching nd learning strand to improve QI 2.3 within schools and ensure positive impacts on learner attainment. The Centre for Research and Innovation in Learning will be discussing further opportunities to work with Edinburgh University and other possible partners in early 2019 to support research and support the work of all practitioners to the benefit of all learners.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					All six Secondary schools are being reviewed across 2018-19 and as part of these QI 2.3 Learning, teaching and assessment will be assessed through observations and focus group evidence. At this three of the Secondary schools have been reviewed and 100% of these were rated good for QI 2.3.

03. Children in their early years and their families are being supported to be healthy, to learn and to be resilient

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
E.P.3.1	To increase the availability of Early Learning and Child Care (ELCC) for 2 year olds to meet the requirements of the Children and Young People (Scotland) Act from August 2015.	31-Mar-2019	✅	100%	**18/19**: Complete Capacity has increased to 521 extended hour places being offered in local authority and partnership settings by 31st March 2019. The restructured ELC team focuses on ensuring quality provision and we have created a database to identify priorities and target support appropriately and measure impact. Number of 1140 places being offered next session will increase and this will be included as a performance indicator for 2019/20.

04. Children and young people are supported to be healthy, happy and reach their potential

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
E.P.4.1	Raise the educational attainment and achievement of children and young people, including improving the numbers going on to positive destinations after leaving school	31-Mar-2019	✅	100%	**18/19**: Complete The February 2019 release of insight data showed Midlothian initial positive destinations at 94.35%. This included a record percentage of leavers going onto Higher Education - 34.11%, up 3% on last year and 5% on 5 years ago, closing the gap on our Virtual comparator - 37.92% and National - 41.16% comparator figures. 1 in 3 (33%) of our leavers now going straight into Employment, above the Virtual (24%) and National (23%) Positive destinations itself (94.35) above the Virtual and on par with National figures.

Education PI Report 2018/19

Midlothian

| | 01. Inequalities in learning outcomes have reduced | | | | | | | | | | |

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.E.P.1.1g	Reduce exclusions in Primary schools	74	24	13	49	94	🛑	⬇	**18/19**: Off Target There have been 94 exclusion incidents in Primary Schools in Q1-4.	72	
BS.E.P.1.1h	Reduce exclusions in Secondary schools	299	64	23	127	210	🛑	⬆	**18/19**: Off Target There have been 210 Secondary exclusions in Q1-4, a reduction of 89 on last year.	190	
BS.E.P.1.1e	Improve Primary School attendance	94.5%	94%	95.5%	94.46%	94.86%	🛑	⬆	**18/19**: Off Target Primary attendance for the first two terms of 2018/19 School year was up to 94.86%.	96.5%	
BS.E.P.1.1f	Improve Secondary School Attendance	89.4%	88.52%	91.1%	89.92%	89.34%	🛑	⬇	**18/19**: Off Target Term 1+2 data shows secondary attendance at 89.34%	92%	

| | 02. Engaged and supported workforce | | | | | | | | | | |

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
E.P.2.1a	Taking a closer look at how enhanced partnerships help us to deliver a tailor made Curriculum.	100%	25%	50%	75%	100%	✅	▬	**18/19**: On Target Schools are exploring and developing stronger partnerships models to aid delivery of curriculum these include	100%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									Businesses, Colleges and collaborative working with Universities. An example of this is Edinburgh College delivering Design and Manufacture in School. This provides a greater range of choice for young people particularly in the Senior phase.		
E.P.2.1b	To continue to implement Visible Learning including inclusing Impact Cycle Training. To share best practice in moderation, tracking and assessment through the BGE, To share best practice in learning and teaching.	100%	25%	50%	75%	100%	✅	▬	**18/19**: On Target All schools have participated in moderation activities in literacy and numeracy, and teaching staff in all primary schools are being trained in the use of Holistic Assessment. Schools' tracking systems been discussed and developed through an increased number of QI Reviews, and set tracking periods are supporting Head Teachers to have regular, challenging discussions with practitioners about raising attainment and making robust judgements about achievement of a level. Lasswade HS has been successful in applying to be part of the PLACE (*Professional Learning as Critical Enquiry - for Whole-School Improvement*) programme. The University of Edinburgh, in partnership with local authorities and supported by funding from Scottish Government, has developed a new career-long professional learning (CLPL) initiative aimed at leading whole school improvement and transformative professional learning by examining practice through critical enquiry. The initiative focuses on the school as a learning organisation with staff	100%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									learning together and developing collective expertise to ensure they are best able to meet the needs of all young people, promoting excellence and equity for all. Participating schools will receive strategic support and a multi-faceted approach to CLPL through targeted and tailored CLPL opportunities for staff. The approach focuses on developing pedagogical expertise to progress learning and improving skills in data literacy to support teacher professional judgment.

Lasswade High School linked with the VL Collaborative Impact programme have begun a teacher led practitioner enquiry approach that is also linked with the Centres aspiration. This approach will help us build a sustainable and innovative model across the rest of our schools as we look at ways to deliver with other partners and use other funding streams.

The Centre and Newbattle High School are also exploring a school based project to look at computational thinking and Executive function in partnership with Professor Judy Robertson of Edinburgh University.
A three year professional learning programme through Osiris Education is planned across 2017-2020. | | |

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
E.P.2.1c	To continue to implement the School Leadership Programme to support the delivery of the new Education (Scotland) Act; NIF; GIRFEC; Named Person; HGIOS 4, year 2 "We Collaborate"	100%	25%	50%	75%	100%	✅	▬	**18/19**: On Target A comprehensive Leadership Programme continues to be delivered this session, focusing on 'Uplifting Leadership, Andy Hargreaves, as well as a key focus on the NIF drivers Teacher Professionalism and School Leadership and HGIOS4 Quality Indicators 2.3 (Learning Teaching and Assessment) and 3.2 Raising Attainment and Achievement. This has supported and developed capacity in Head Teachers, Depute Head Teachers and Principal Teachers in Nursery, Primary and Secondary Schools. A taster session was also delivered to the Leadership Forum. Early Leadership continues to be developed through a practitioner enquiry approach.	100%	
E.P.2.1d	To Grow our ASGs into Learning Communities in order to continue to build the self-improving system updating resources in line with HGIOS 4, National Improvement Framework (NIF) and the Pupil Equity Fund (PEF) "We collaborate"..	100%	25%	50%	75%	100%	✅	▬	**18/19**: On Target During the 17/18 session Schools Group Managers carried out a system wide quality assurance programme across QI looking at raising attainment and achievement and learning, teaching and assessment. All of this information will be collated and used to drive targeted support to schools to improve the quality of provision both individually and as part of ASG learning communities, and to inform collaborative working through improvement partnerships.	100%	

03. Children in their early years and their families are being supported to be healthy, to learn and to be resilient

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
E.P.3.1a	Number of eligible 2 year olds in receipt of Early Learning and Child Care	161	171	179	192	184	🛑	⬆	**18/19:** Off Target Up 21 on the same quarter last year.	200	

04. Children and young people are supported to be healthy, happy and reach their potential

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
E.P.4.1a	Increase the % of leavers (S4/S5/S6) who achieve Literacy and Numeracy at level 4+ (Insight National benchmarking measure)	91.6%	N/A	N/A	N/A	92.03%	✅	⬆	**18/19**: On Target Midlothian - 92.03%, Virtual Comparator- 89.16%	89.16%	3 Yearly average 77.10% Midlothian; 77.6% Virtual comparator; 78.6% National average (Insight national benchmarking data)
E.P.4.1b	Increase the % of leavers (S4/S5/S6) who achieve Literacy and Numeracy at level 5+ (Insight National benchmarking measure)	66.01%	N/A	N/A	N/A	69.77%	✅	⬆	**18/19**: On Target Midlothian - 69.77%, Virtual Comparator - 64.55%		3 Yearly average: 48.6% Midlothian; 51.1% Virtual comparator; 53.5% National average (Insight national benchmarking data)
E.P.4.1L	Increase the % of leavers (S4,5,6) in a positive destination in order to continue to exceed both the virtual	95%	N/A	N/A	N/A	94.35%	🛑	⬇	**18/19**: Off Target 94.35% of School leavers in 17/18 secured an initial positive destination.	95%	3 Yearly average: 92.28% Midlothian 91.86% Virtual 92.42% National

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
	and the national average										average (Insight national benchmarking data)
E.P.4.1m	Percentage of Midlothian LAC & LAAC school leavers progressing to positive destinations	76.92%	N/A	N/A	N/A	69.23%	🔴	⬇	**18/19**: Off Target 9 of 13 Care experienced young people progressed to positive destination upon leaving School in 2017/18. Aspirational target is to match the overall School leaver cohort figure.	94.35%	Scot Gov stats for 12/13 (different criteria) 27 looked after leavers, 74% initial, 63% follow-up
E.P.4.1q	% of SIMD deciles in which Leavers (S4,5 6) pupils' average tariff score is at or above the virtual comparator.	50%	50%	50%	N/A	50%	🔴	▬	**18/19**: Off Target Information from insight shows Midlothian School Leavers are above the virtual comparator in 5 of 10 SIMD Deciles.	100%	80% 2009/10 20% 2010/11 40% 2011/12 20% 2012/13 50% 2013/14 (Insight national benchmarking data)

Education Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
School Capacities/Catchment Areas/Demand for Pupil Places	**Risk cause:** Increased population through local development, Midlothian fastest growing Council area in Scotland. **Risk Event:** Increase in pupil numbers in specific localities. **Risk Effect:** School capacities are insufficient to accommodate pupils in their catchment area without incurring additional investment in additional space.	The main internal controls centre on service planning within the Education Service Plans e.g. (1) Midlothian Local Development Plan, (2) Review of school catchment areas and (3) Annual review of maximum pupil intake for primary and secondary schools. (4) School Estate Management Plan. In addition: Extensive planning, further consultation. An options appraisal is developed for each school and ways f/wd agreed. Ongoing review of nursery provision undertaken with proposals to address any shortfall in provision. Additional Partner providers brought on to supplement provision made by Midlothian Council.	🔴	Progress school catchment review programme	**Q1 17/18:** Completed. The backlog of school catchment reviews has been addressed and the programme is now focused on addressing the requirements for increased school capacity resulting from population growth.
Data Protection and Information Management	Heads of Service invited to review their controls in relation to IM and DP	Compliance with demands of the Corporate and Divisional Information Management Groups. Comprehensive staff training and awareness.	🔺	Information Management Governance	**18/19:** On Target GDPR training and Information management training has been rolled out across the Service, Information Asset register in place for all Schools and central teams. Data breaches are reported through Information Management Group (IMG)
ASP - CSP Challenge & Exclusion	This risk relates to the exclusion of young people from school	01 - Publication of Exclusion guidelines 02 - National Policy to follow 03 - GIRFEC intervention	🔺	Inclusion	**18/19:** New inclusion policy will be in place from August 19

🔴 Alert   🔴 High Risk   🔺 Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		04 - Midlothian Exclusion Policy 05 - Exclusion guidelines reviewed			
State of School Buildings	Risk arising from having some school accommodation that is modern and other accommodation which is not. Avoidance of 'two-tiered' education.	The main internal controls centre on condition surveys, property service maintenance budgets and inspections, limited DSM budgets, Schools Plus Programme, PPP1 and 2 help desks, maintenance and life-cycle costing, SFT project for the replacement of Lasswade HS, SEMP and Schools Plus Programme.	⚠	Learning Estate Strategy	**18/19**: On Target Learning Estate strategy will identify buildings that require refurbishment but the affordability gap will be the main issue.
Teacher recruitment/retention	The risk includes shortages of teachers in certain subject areas and management posts at PT, DHT, and HT levels	The main internal controls centre on monitoring of available supply cover teaching staff, monitoring of level of application for vacant posts at both class teacher and management levels, support programmes to ensure that student teachers and Newly Qualified Teachers have positive experiences in Midlothian schools and targetted recruitment campaigns for areas where there is a shortage of qualified and available staff	⚠		
Positive Destinations	Failure to achieve better than our previous best in positive destinations.		⚠	Service review	**18/19:** Lifelong learning and Communities staff reduction may impact in this area. We will need to prioritise workload to ensure we meet the Community Learning Development and Community empowerment regulations.
Teacher Numbers	Failure to meet commitment made to Scottish Government to maintain teacher numbers and pupil:teacher ratios in our schools.		⚠	Pupil Teacher Ratio	**18/19:** Due to budget cuts and the impact on teaching staff we are at high risk of not meeting the Pupil Teacher Ratio in the future.

🔴 Alert　🔺 High Risk　⚠ Warning　✅ OK　❓ Unknown

Published Local Government Benchmarking Framework - Education

Midlothian

Children's Services

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
CHN1	Corporate Indicator - Primary Education - Cost per pupil (LGBF)	£5,237.21	£5,294.45	£5,161.11	£5,036.56	£4,938.13	£4,822.58	£4,963.55	£5,120.37	17/18 Rank 19 (Third Quartile). 16/17 Rank 15 (Second Quartile). 15/16 Rank 14 (Second Quartile). 14/15 Rank 19 (Third Quartile).
CHN2	Corporate Indicator - Secondary Education - Cost per pupil (LGBF)	£6,898.49	£6,840.11	£6,775.77	£6,722.65	£6,686.45	£6,525.17	£6,818.93	£6,941.53	17/18 Rank 18 (Third Quartile). 16/17 Rank 14 (Second Quartile). 15/16 Rank 4 (TOP Quartile). 14/15 Rank 9 (Second Quartile).
CHN3	Corporate Indicator - Pre- Primary Education - Cost per pupil (LGBF)	£3,763.58	£3,267.90	£3,325.82	£3,191.97	£3,037.55	£3,705.18	£4,464.51	£4,295.59	17/18 Rank 15 (Second Quartile). 16/17 Rank 18 (Third Quartile). 15/16 Rank 10 (Second Quartile). 14/15 Rank 9 (Second Quartile).
CHN4	% achieving 5 or more awards at SCQF Level 5 (LGBF)	New for 2011/12	48%	50%	50%	54%	58%	54%	58%	17/18 Rank 25 (Bottom Quartile). 16/17 Rank 29 (Bottom Quartile). 15/16 Rank 19 (Third Quartile). 14/15 Rank 22 (Third Quartile)
CHN5	% achieving 5 or more awards at SCQF level 6 (LGBF)	New for 2011/12	20%	21%	26%	24%	29%	26%	30%	17/18 Rank 23 (Third Quartile). 16/17 Rank 29 (Bottom Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 30 (Bottom Quartile)
CHN6	% SIMD Quintile 1 achieving 5 or more awards at SCQF level 5 (LGBF)	New for 2011/12	26%	35%	34%	39%	37%	43%	47%	17/18 Rank 6 (Top Quartile). 16/17 Rank 10 (Second Quartile). 15/16 Rank 17 (Third Quartile). 14/15 Rank 11 (Second Quartile)
CHN7	% SIMD Quintile 1 achieving 5 or more awards at SCQF level 6 (LGBF)	New for 2011/12	5%	9%	14%	10%	12%	9%	17%	17/18 Rank 12 (Second Quartile). 16/17 Rank 27 (Bottom Quartile). 15/16 Rank 21 (Third Quartile). 14/15 Rank 21 (Third Quartile)

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
CHN10	Corporate Indicator - Percentage of Adults satisfied with local schools (LGBF)	85.8%	N/A	82%	81.93%	79.33%	78%	78.33%	78.67%	17/18 Rank 10 (Second Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 23 (Third Quartile). 14/15 Rank 23 (Third Quartile).
CHN11	Proportion of Pupils Entering Positive Destinations (LGBF)	85.2%	85.8%	89.2%	94.2%	93.4%	95.1%	94.7%	94.4%	17/18 Rank 16 (Second Quartile) 16/17 Rank 9 (Second Quartile) 15/16 Rank 4 (TOP Quartile) 14/15 Rank 15 (Second Quartile)
CHN12a	Overall Average Total Tariff (LGBF)	New for 2011/12	715.87	752.09	753.86	787.49	888.82	801	832	17/18 Rank 25 (Bottom Quartile). 16/17 Rank 29 (Bottom Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 27 (Bottom Quartile)
CHN12b	Average Total Tariff SIMD Quintile 1 (LGBF)	New for 2011/12	422	544	501	493	581	576	653	17/18 Rank 11 (Second Quartile). 16/17 Rank 20 (Third Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 23 (Third Quartile)
CHN12c	Average Total Tariff SIMD Quintile 2 (LGBF)	New for 2011/12	541	541	537	572	697	719	699	17/18 Rank 22 (Third Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 23 (Third Quartile). 14/15 Rank 28 (Bottom Quartile)
CHN12d	Average Total Tariff SIMD Quintile 3 (LGBF)	New for 2011/12	727	669	783	842	850	789	847	17/18 Rank 23 (Third Quartile). 16/17 Rank 28 (Bottom Quartile). 15/16 Rank 22 (Third Quartile). 14/15 Rank 19 (Third Quartile)
CHN12e	Average Total Tariff SIMD Quintile 4 (LGBF)	New for 2011/12	848	922	895	854	1,042	921	965	17/18 Rank 23 (Third Quartile). 16/17 Rank 25 (Bottom Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 29 (Bottom Quartile)
CHN12f	Average Total Tariff SIMD Quintile 5 (LGBF)	New for 2011/12	1,038	1,067	1,029	1,098	1,227	1,038	1,149	17/18 Rank 20 (Third Quartile). 16/17 Rank 28 (Bottom Quartile). 15/16 Rank 8 (Top Quartile). 14/15 Rank 23 (Third Quartile)
CHN17	Percentage of children meeting developmental milestones	New for 2013/14			81.18%	85.76%	85.82%	79.62%	83.43%	17/18 Rank 2 (Top Quartile) 16/17 Rank 4 (Top Quartile). 15/16 Rank 2 (Top Quartile). 14/15 Rank 2 (Top Quartile).
CHN18	Percentage of funded early years provision which is graded good/better	New for 2011/12	97.3%	92.1%	90.9%	90%	90%	90.7%	91.38%	17/18 Rank 19 (Third Quartile). 16/17 Rank 21 (Third Quartile).

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
										15/16 Rank 24 (Third Quartile). 14/15 Rank 25 (Bottom Quartile).
CHN19a	School attendance rates (per 100 pupils)	93	N/A	93.2	N/A	93	N/A	92.6	N/A	16/17 Rank 26 (Bottom Quartile). 14/15 Rank 27 (Bottom Quartile).
CHN19b	School attendance rates (per 100 'looked after children')	New for 2012/13		86.55	N/A	88.35	N/A	89.12	N/A	16/17 Rank 27 (Bottom Quartile). 14/15 Rank 29 (Bottom Quartile).
CHN20a	School exclusion rates (per 1,000 pupils)	52.06	N/A	37	N/A	40.2	N/A	44.35	N/A	16/17 Rank 31 (Bottom Quartile) 14/15 Rank 27 (Bottom Quartile).
CHN20b	School exclusion rates (per 1,000 'looked after children')	New for 2012/13		212.12	N/A	188.24	N/A	135.14	N/A	16/17 Rank 26 (Bottom Quartile). 14/15 Rank 28 (Bottom Quartile).
CHN21	Participation rate for 16-19 year olds (per 100)	New for 2015/16					88.7	93.6	94.3	17/18 Rank 8 (Top Quartile). 16/17 Rank 7 (Top Quartile). 15/16 Rank 27 (Bottom Quartile).

Commercial Operations Performance Report Quarter Four 2018/19

Midlothian

Progress in delivery of strategic outcomes

Commercial Operations continues to consider how it can transform in order to improve outcomes for our communities by contributing to the Council's short to long term priorities whilst taking into account the significant financial challenges ahead.

Midlothian Council is facing substantial budget pressures over the next four years with a gap between income and costs around £18.8 million by 2022/23. To enable us to deal with future service demands of an increasing population the council needs to cut costs and redesign services. Progress in delivering outcomes across the key service areas that follow has been and will continue to be informed by applying the 'Delivering Excellence' continuous improvement approach (within the context of bottom up service reviews) of looking at how we do things with a focus on priorities and considering what could be changed or done differently.

In support of the Council's strategic approach Commercial Operations are progressing the following transformational activities aimed at maximising the use of assets and creating flexibility across the workforce:

- Development of the Street Scene/neighbourhood model for service delivery to involve local communities and/or the criminal justice teams.
- Maximising the utilisation of the Council's fleet and passenger transportation arrangement (including third sector providers) by reducing costs and contributing to the environmental agenda and reducing carbon footprint.
- Changing the way that Council Staff travel on behalf of the Council.
- Seeking commercialisation opportunities and trading with a wide range of organisations including the Private Sector and public sector partners.
- Reducing the volume of waste managed and maximise recycling from all sectors with a clear focus on Municipal Premises as detailed within a developed waste strategy.
- Developing community participation opportunities with local organisations and groups, particularly in our parks and open spaces.

All services continue to contribute to environmental responsibilities, providing opportunities for young people through positive destinations work placements, supporting the economic growth of Midlothian, working in partnership with Communities and Voluntary Organisations.

The structure of Commercial Operations is being geared towards co-location on one site at Hopefield in late 2019, early 2020. This will see a leaner management team (five senior managers reducing to three) and a workforce where job profiles will be more generic in nature allowing greater flexibility and cross skilling at all levels. Initially with effect from early May 2019 the post of the Waste Services and the Risk, Health & Safety and Civil Contingencies Manager will be merged. However, it is recognised that there are significant challenges in terms of recruiting into skilled and professional positions particularly within the road service and the vehicle maintenance and land service areas.

The service has continued to explore options for future service delivery through partnerships (e.g. waste facilities with City of Edinburgh and work through the Edinburgh, Lothian, Borders, and Fife (ELBF) for Road Services, shared services (e.g. Health and Safety with East Lothian) and co-production with community partners (e.g. grounds maintenance, and winter service).

Landscape and Countryside Services

Much of the focus within Landscape and Countryside services continues around securing funding and generating income to deliver on a range of measures and contribute to the Council's financial position.

The team have secured additional external and internal income through the Soft and Hard Landscape squads and attracted larger events to Vogrie Country Park such as the Woodland Dance project and the Fire & Light event and various staff groups supported a number of large strategic events e.g. Midfest/Midstock.

In support of Midlothian's Play Strategy, funding was sourced for improvement works at Mayfield Nursery (£46,000). Phase one works at Old Gala Park, Gorebridge (£60,000) were completed, a new play area at Loanhead Paradykes (£180,000) and Arniston Park (£50,000) were completed. The Auld Gala Park area improvements has provided better facilities for young people in this area of Scottish Index of Multiple Deprivation (SIMD).

In addition, Rosewell Park wheeled sport facility ground investigations have been completed prior to the tender process.

Over the course of the year Landscape and Countryside services have completed numerous projects for third parties including schools, with particular focus on health benefits e.g. trim trails and play areas.

Following independent assessment the Council have retained green flags for Vogrie Country Park and Memorial Park, Loanhead.

Consultations have been prepared on the full review of the Core Path Plan for Midlothian with the first stage being undertaken in Quarter 4 of this year.

Two woodland and path projects at Cuiken and Mauricewood totalling £330,000 with much of the funds being sourced externally and the remainder coming from developer contributions are now complete and will result in improved health opportunities for people and the environment.

Over 10,000 hours of volunteer time was supported to improve Midlothian's environment through a variety of projects.

The Town Centre improvements at Gorebridge were largely designed in- house by the Land and Countryside Landscape architect resulting in a very successful project delivered in partnership with other Council services and the private sector.

Outcomes from the bottom up review were taken through to the budget setting process.

Waste Services

The construction of the joint Edinburgh/Midlothian Energy from Waste (EfW) plant at Millerhill was completed in 2018. The plant which will allow the Council to meet its landfill obligations is now processing residual waste.

During 18/19 the service developed a Waste Management Strategy, after approval, the strategy will inform the future direction of waste services. The key drivers of the Waste Strategy are:

- *Scotland's Zero Waste Plan which sets out the following key targets - Recycle 60% of household waste by 2020, a ban on biodegradable waste to landfill by 31 December 2020, recycle 70% of all waste by 2025, reduce the waste disposed of to landfill to a maximum of 5% by 2025 and restrictions on the material input to all Energy from Waste (EfW) facilities with mandatory extraction of dense plastics and metals prior to treatment.*
- *Charter for Household recycling and Code of Practice, the charter identifies a number of collection strategies which are considered to best meet the overall objectives of improving recycling performance and developing a consistent national system, whilst enabling scope for Councils to design the specific services around local context and requirements.*
- *End Markets - The biggest challenge facing Midlothian Council's recycling collection services is the availability of end markets for the materials collected. Along with increasing the recycling tonnages collected, improving the quality of materials collected is critical to ensuring the Council has a market to send them to.*
- *Deposit and Return Scheme (DRS)*

A chargeable service allowing local businesses to dispose of trade waste and recycling was introduced at Stobhill recycling centre and in a bid to generate additional income upfront charges were introduced for housing developers for waste and recycling containers.

Working collectively with Business Services, Digital Services, Customer Services and the Communications team work was completed to efficiently introduce the chargeable Garden waste service in early 2019. Work was also completed to re-route the new garden waste collections. An income of over £550,000 has been realised with nearly 15,000 households paying the new charge for the kerbside collection of garden waste. 13,250 joined before the initial subscription deadline.

2

New contracts have commenced with Re-Gen for recycling and Dryden Aqua for glass in January 2019.

The Waste Aware Team continued to work with schools and the wider community, attending events such as tenant community days and carrying out presentations to increase public awareness of recycling. In addition, the team collected almost two tonnes of toys and games from across Midlothian Schools as part of a "Green Santa toy collection" scheme. Items collected were then given to charity to be reused. In addition, work has taken place with the Salvation Army to identify sites for community textile recycling banks.

Further work in relation to the waste services bottom up review is being carried out to model different waste collection frequencies, allied to establishing if direct delivery or bulk transfer offers the most economically advantageous benefit. Work was completed to re-route residual waste collections.

Travel and Fleet Services

In support of the Council's outcome to reduce carbon emissions, the Travel Team engaged a student on placement from Bright Green Business to assist with gathering information and options on the use of pool cars. Increasing the use of pool cars and raising staff awareness to alternative ways of travelling including public transport will reduce the overall travel costs council wide.

Following a presentation to CMT approval is being sought to roll out a trial of pooled areas in a specific high use area of the Council. This would be used to inform a wider roll out of pool vehicles.

The Travel Team continue to in-source school and social work transport contracts where there are savings. Contracts for mainstream school transport with a potential value of £10 million were successfully tendered providing transport for the next five years with the potential of extending contracts for a further two years.

A £6,000 Grant was secured from the Energy Savings Trust to improve our charging infrastructure for the growing fleet of electric vehicles and as a result new workplace chargers were installed at Midlothian House and Stobhill Depot.

Funding was also secured for two bus shelters at Mauricewood Road, Penicuik and an extension of the bus bays on A701 opposite Beeslack High School. This safety improvement will allow pupils to be issued with passes to use local public transport which will see an overall reduction in travel costs to the Council.

In terms of 'Delivering Excellence' a specialist consultant from the Freight Transport Authority carried out a 'root and branch' review of the internal vehicle management and service provided within the Council. The requirement for a professional Fleet Management system to replace the spreadsheets and database which is currently used to track costs and fleet assets was highlighted as a key requirement for the effective management and costing information which is required for the fleet which will be progressed this year.

Road Services

An application for Decriminalised Parking Enforcement was approved by the Scottish Government in March 2018, the introduction of which went live in April 2018.

A formal restart to the ELBF shared services project begun in 2018 following the setting up of a new shadow joint committee comprising elected members from each authority (new members having been appointed to the committee). Further work streams will continue to be identified and allocated to each authority.

The Roads Services team were successful in bidding for match funding from Scotrail, SEStran and Paths For All, to deliver active travel initiatives throughout Midlothian until March 2019. Initiatives include a new cycleway, walking and cycling events, I-Bike schools project and marketing.

In terms of promoting sustainable travel, as well as encouraging healthy lives, continued progress was made in regards to the extension of walking and cycling routes with a new strategic active travel link from Gilmerton to Shawfair in collaboration with Sustrans and Edinburgh City Council.

The roads team utilised considerable resources to meet the challenges following the impact to road surfaces following the 2018 severe winter, and in particular, the repair of potholes. In addition a consultation was carried out with communities and other organisations to gather feedback on performance, identify where improvements can be made and seeking confirmation where they may contribute to the winter weather challenges. Following the consultations, Council approval was obtained in 2018 for the Winter Service Policy and Operational Plan. The plan includes arrangements with private sector partners whereby they will supply additional resources had the Council experienced a period of significant severe weather.

The team made good progress on the capital carriageway and footway schemes, 4.4km of footway and 11.3km of carriageway was resurfaced this year. 911 lighting columns were replaced this year, 896 by capital funding and 15 by maintenance exceeding the annual target of 700.

Initial work has begun in relation to a bottom up review of road services.

Health, Safety and Civil Contingencies

The Health and Safety team delivered a partnership programme with East Lothian Council for Health & Safety Management based training.

The check element of the Council's Health and Safety management system has begun to be rolled out with all Service Managers having an initial Health and Safety Audit carried out in their areas of responsibility and a "RAG" report highlighting areas they need to give attention to.

In addition to the significant service improvements and efficiencies made by Health and Safety, the team have stabilised the income generated from commercial activities raising in excess of £50,000 in 2018/19 from a service which has traditionally generated no income. This income masks the true financial saving to the Council from the income work, as the first aid training creates a cash saving of almost £50,000 alone when compared to buying in this service which was the previous practice in the Council.

Significant time and resource from the Health and Safety team went into Brexit planning. The team are instrumental in co-ordinating the Council's response in terms of contingency planning as a consequence of the Brexit changes.

Challenges and Risks

Midlothian is one of the fastest growing Council areas within Scotland. Coupled with this the Council is facing a period of significant financial challenge. In this regard roads, waste and land & countryside services are progressing through a bottom up review process which will endeavour to ensure that the services are best placed to meet these challenges. These reviews consider all aspects of the internal and external environment and ensure due consideration is given to the optimum vehicle for service delivery.

As part of the decisions taken to achieve a balanced budget for 2018/19 a number of posts within Commercial Operations were deleted. This is exacerbated as there are a number of posts where the staff members are approaching expected retiral. It is crucial therefore that robust plans are in place to ensure that cross skilling continues to be promoted where appropriate and that all opportunities to increase the availability of new talent is explored which will include bringing in young people and making best use of sharing of expertise with other partners, albeit adjoining authorities are reporting the same issues.

The significant budget challenge stretches over the next three years currently and perhaps longer. The Council are to embark on a programme designed to identify how it could meet this budget challenge with proposals to Council before the summer 2019 recess.

Key service challenges include:

Landscape & Countryside

Managing the closure of Vogrie Golf Course and seeking businesses to take over the running and marketing of the Golf Course and increasing Vogrie Country Park income by £70,000.

The service is continuing to work closely with local communities in an effort to mitigate some of the changes which will impact on the visual amenity of Midlothian. This includes floral displays, grass cutting, allied to the positive work carried out by various groups in the parks around Midlothian. In Quarter 4 staff attended the Federation of Community Councils meeting to discuss opportunities for community involvement.

The team have had challenges in recruiting suitably skilled staff this year which has impacted the work in the hard landscape squad and in turn has led to some work having to be turned down.

The bottom up review will result in a number of changes within the service which will require the support of staff and communities alike.

Waste Services

The new charge for kerbside garden waste collections is expected to divert some garden waste to the residual waste stream. This, along with the impact on diversion to the Recycling Centres, is being monitored.

4

The increase in charges for kerbside trade waste collections may have an impact on customer retention and therefore projected income.

Contamination and non-target materials in the blue bins continues to be a challenge, especially with material now bulked for processing in Ireland, which makes identification of problem areas difficult.
The new Code of Practice on Litter & Refuse (CoPLAR) 2018 requires the Council to undertake cleansing activities seven days a week and to keep roads free of detritus/leaf litter. Unfilled posts and a moratorium on new recruitment means Midlothian Council is unlikely to meet its statutory duties under this code.

During 2019/20 there will be a migration from the LEAMS methodology to the CoPLAR 2018 methodology, which the LMS system will support and Keep Scotland Beautiful will wish to engage with Councils. Midlothian Council is required to have litter zoned all council's land according to the revised methodology, before this June.

The administrative and management burden on implementing the chargeable garden waste service means office-based members of the Waste Services team are not able to devote time to other tasks.

Travel Services

With modern fleet vehicle maintenance costs increasing there is an ongoing challenge to maintain the fleet within budget without a reduction in service.

Road Services

As Midlothian continues to grow in population, pressure on the road maintenance budget will prove a significant challenge to maintain the road network at current condition levels. Currently 32% of the road network in Midlothian should be considered for maintenance treatment.

Recently a Recovery Plan was presented to council in September 2018 to seek approval for further budget reductions to bring the current spend back in line with budget. This involved reducing the current road maintenance by £250,000.

Ongoing attempts to reach resolution of Loanburn localised flooding associated with partially blocked privately owned culvert, during periods of heavy/persistent rainfall. As liabilities have still not been agreed between the 3rd parties involved, this latest attempt at repairs may be further delayed. Meanwhile, the Council has a statutory duty to mitigate flood risk to surrounding properties and will continue to monitor weather forecasts and water levels in the Loanburn, and will provide pumps and personnel when required to protect properties at risk of flooding.

The Edinburgh Lothians Borders and Fife (ELBF) group of councils continue to meet to consider areas of road services that could be shared across council boundaries. However on a national picture, Transport Scotland are continuing to review the way road services should be Scotland-wide. With this in mind they have asked that a national review be undertaken within the scope of the National Transport Strategy (NTS). The NTS will not be published for another 2-3 years. This has led to the current arrangements with the ELBF Shadow Joint Committee's role being unsure. It is likely that the recommendation from the NTS is a national "regionalisation" of road services and therefore some councils within the ELBF are unsure whether to continue with the current arrangements. This position may well prove detrimental to Midlothian in terms of sharing of resources in the near future.

In comparison with 2016 there was has been an increase in the numbers of motorcyclists, pedestrians, and pedal cyclists seriously injured on Midlothian roads due to road traffic collisions. This is being closely monitored to determine what additional road safety measures may be required.

Following a report to Council, a series of "bottom up" service reviews are to be undertaken in 2018/19. Road Services are scheduled to undertake their review in the 2nd tranche starting in early-mid 2019. Preparation for the review is ongoing.

Health, Safety and Civil Contingencies

The requirement to generate in excess of £100,000 income this financial year through a combination of team activities and sales force activity is proving a challenge to deliver against. The team has traditionally carried an overspend against the performance factor and supplies and services elements of the budget.

Commercial Operations PI summary 2018/19

| | | | | | Making the Best Use of our Resources | | | | | | | |

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
01. Manage budget effectively	Performance against revenue budget	£15.880m	£14.618m	£14.213m	£14.084m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£14.222m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	9.82	2.67	6.15	10.53	13.26	🛑	**18/19**: Off Target The HR team continue to work with managers to offer support and guidance to address levels of sickness absence. More frequent meetings (from 6 weekly to 4 weekly as of Quarter 4 this year) are being held with key service managers and HR where sickness levels are high. HR and Waste Services Manager to attend a workshop on Waste HR Data, as part of a pilot Data Driven Innovation (DDI) local authority project looking at causes and drivers of absenteeism.	⬇	9.82	Number of days lost (cumulative)	5,027.5
											Average number of FTE in service (year to date)	379.05

| | | | | | Corporate Health | | | | | | | |

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
03. Complete all service priorities	% of service actions on target / completed, of the total number	82.61%	100%	94.74%	89.47%	84.21%	🛑	**18/19**: Off Target Two actions slightly off target for the year. Actions in place to bring these back on target for next year. One action off target outwith the control of Commercial Operations.	⬆	90%	Number of service & corporate priority actions	19
											Number of service & corporate priority actions on tgt/completed	16

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	88%	86%	86%	84%	81%	🛑	**18/19**: Off Target	⬇	90%	Number received (cumulative)	5,503
											Number paid within 30 days (cumulative)	4,470
05. Improve PI performance	% of PIs that are on target/ have reached their target.	76.92%	100%	80%	73.33%	60%	🛑	**18/19**: Off Target Actions in place to bring performance indicators on target where possible. See performance indicator report for more detail.	⬇	90%	Number on tgt/complete	12
											Total number of PI's	20
06. Control risk	% of high risks that have been reviewed in the last quarter	0%	0%	0%	0%	0%	🛑	**18/19**: All risks reviewed within service areas and no high risks identified.	▬	100%	Number of high risks reviewed in the last quarter	0
											Number of high risks	0

Improving for the Future

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
07. Implement improvement plans	% of internal/external audit actions progressing on target.	100%	86.67%	73.33%	70%	80%	🛑	**18/19**: Off Target 1 audit action off target in relation to Trade waste. Action in place to bring audit to completion.	⬇	90%	Number of internal/external audit actions on target or complete	4
											Number of internal/external audit actions in progress	5

Commercial Operations Complaints Indicator Summary

					Commitment to valuing complaints			

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	4,097	1,130	2,199	3,101	4,124		**18/19**: Data Only	
Number of complaints closed in the year		1,102	2,150	3,066	4,077		**18/19**: Data Only 4,077 out of 4,124 complete for the year. Complaints remaining open were received at the end of March 2019. Service managers to meet with performance officer in the next quarter to review training needs for extending stage 1 complaints which will reflect time taken to complete more complex and cross divisional complaints.	
Number of complaints upheld (cumulative)		3	1,752	2,508	3,312		**18/19**: Data Only	
Number of complaints partially upheld (cumulative)		0	29	47	88		**18/19**: Data Only	
Number of complaints not upheld (cumulative)		3	166	237	278		**18/19**: Data Only	
Average time in working days to respond to complaints at stage 1	2.82	2.89	2.36	2.82	2.96		**18/19**: On Target Commercial Operations continues to respond to most complaints at stage 1, within 5 working days.	5
Average time in working days to respond to complaints at stage 2	6.75	18	18	18	18		**18/19**: On Target	20
Average time in working days for a full response for escalated complaints		14.67	23.8	22.27	19.43		**18/19**: On Target	20
Percentage of complaints at stage 1 complete within 5 working days	90.55%	89.79%	91.16%	90.96%	90.32%		**18/19:** Off Target 3,669 out of 4,062 complaints complete within 5 working days. Meetings held with Service Managers and Performance Officer surrounding the use of the complaints handling system to update completed complaints in a more timely manner. Performance Officer will work with services to review training requirements to extend stage 1 complaints where complex in nature.	95%
Percentage of complaints at stage 2 complete within 20 working days	100%	100%	100%	100%	100%		**18/19**: On Target	95%
Percentage of complaints escalated and complete within 20 working days		66.67%	70%	72.73%	71.43%		**18/19**: Off Target 10 out of 14 complaints escalated were dealt with within 20 working days.	95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		1	1	1	1		**18/19**: Data Only	

Commercial Operations Action report 2018/19

Midlothian

	01. Violent Crime (young people exposed to violence)					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.1.1	Identify accident cluster sites and implement engineering measures to reduce risk of future accidents	31-Mar-2019	✅	100%	**18/19**: Complete Prioritised list completed for road safety projects including those identified by injury accidents.
CO.P.1.2	Undertake a programme of works to improve lighting levels in communities	31-Mar-2019	❌	80%	**18/19**: Off Target Capital programme work ongoing. Work scheduled for this year will be completed end of June 2019.

	02. Increase sustainable travel (includes borders railway and active travel - walking, cycling and green networks)					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.2.1	Continue development of asset management plan (including data collection and system update) through SCOTS	31-Mar-2019	❌	75%	**18/19**: Off Target This is an ongoing project over several years. We continue to attend SCOTS workshops and receive regular updates to documents used to make up the RAMP.
CO.P.2.2	Compliance with Disabled parking legislation	31-Mar-2019	✅	100%	**18/19**: On Target 19 of 19 applications processed within 6 months.
CO.P.2.3	Support Sustainable Transport following the opening of Borders Rail line to promote sustainable travel	31-Mar-2019	✅	100%	**18/19**: Complete Detailed report with the Borders Rail Blueprint Working Group. No further action can be taken.
CO.P.2.4	Undertake a programme of work to improve road standards.	31-Mar-2019	✅	100%	**18/19**: Complete 41 programmed carriageway and footway schemes completed.

	03. Reduce the volume of waste managed and maximise recycling from all sectors with a clear focus on Municipal Premises					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.3.1	Complete construction of residual waste facility at Millerhill as part of Zero Waste Park	31-Mar-2019	✅	100%	**18/19**: Complete Plant received commissioning waste from Midlothian in November 2018.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.3.2	Increase Public awareness of recycling, continue to work within schools and the wider community, attend events and promote achievements and publicise changes in service delivery	31-Mar-2019	✅	100%	**18/19**: Complete 'How to recycle correctly' booklet sent to all households in January. This year educational bin stickers were placed on blue bins where routes were identified as producing high levels of contamination. Attended Tynewater Primary School this Quarter and held presentations at numerous schools throughout the year.

04. Environmental sustainability - ensure Midlothian is a place with a high quality environmental and thriving low carbon economy

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.4.1	Monitor the number of incidents of fly tipping on council land and remove within 5 working days	31-Mar-2019	✅	100%	**18/19**: Complete For 18/19, 426 incidents of fly-tipping removed within 5 working days.

05. Develop and implement a programme of continuous improvement and efficiency to develop additional capacity

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.5.1	Develop additional workstreams to achieve income for the council	31-Mar-2019	✅	100%	**18/19**: Complete The hard and soft landscape squads have secured external income to the value of approx 632k this financial year. However delays in start dates due to planning matters has reduced the potential income for this financial year to approx 350K ie. Salters gate 300k project still delayed. The section is still suffering from recruitment issues to the Hard Landscape Squad which limits the amount of work we can take on.
CO.P.5.2	Deliver 18/19 health and safety audit programme as agreed by CMT	31-Mar-2019	✅	100%	**18/19**: Complete All Services have been subject to an initial overview audit across all Service areas. This will be repeated during 2019/20. The health and safety team have trialed team based auditing using the Sphera system. Lessons learnt from the deployment of the first aid audit are being used to inform the roll out of future team based auditing.
CO.P.5.3	Deliver year one of the Councils Health and Wellbeing Strategy	31-Mar-2019	✅	100%	**18/19**: Complete Health, Safety and Wellbeing Strategy is now to be reported to CMT for approval, this will complement the annual health and safety report.
CO.P.5.4	Fully implement quality plans for Midlothian Parks	31-Mar-2019	✅	100%	**18/19**: Complete Plans up to date with Vogrie rewritten along with a new plan for the Penicuik/Dalkeith Walkway.
CO.P.5.5	Develop and implement in conjunction with Digital Services, an online payment and booking system for Land and Countryside Services	31-Dec-2019	❌	25%	**18/19**: Off Target Awaiting information from Digital Services regarding the possibility of introducing the Legend system used by Sport and Leisure or an alternative on line payment system.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.5.6	Develop a Waste Management Strategy to influence the future direction of Waste Services	31-Mar-2019	✅	100%	**18/19**: On Target Development of the Waste Strategy is currently being progressed through the service review following consultation with Trade Unions and staff.
CO.P.5.7	Explore shared opportunities, services and knowledge with the partners in the Edinburgh, Lothian, Borders and Fife group	31-Mar-2019	✅	100%	**18/19**: Complete The Edinburgh Lothians Borders and Fife (ELBF) group of councils continue to meet to consider areas of road services that could be shared across council boundaries.

06. Maximise the utilisation of the Councils fleet and passenger transportation arrangements by reducing costs and contributing to the environmental agenda to reduce carbon footprint

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
CO.P.6.1	Ensure Council fleet orders for plant and vehicles is placed in line with Council Policy and Divisional timetables	31-Mar-2019	✅	100%	**18/19**: Complete All orders placed 2 items to be delivered.
CO.P.6.2	Work towards reducing travel costs council wide	31-Mar-2019	✅	100%	**18/19**: On Target Report for introduction of pool cars is ongoing and due to staff changes report will be produced mid 2019 by Graduate employed to take project forward.
CO.P.6.3	Review all Council transport uses to reduce cost base	31-Mar-2019	✅	100%	**18/19**: On Target Ongoing project all transport regularly review.

Commercial Operations PI Report 2018/19

Midlothian

| | | | | | | 01. Violent Crime (young people exposed to violence) | | | | | | |

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.CO.P.1.2b	Percentage of all street light repairs completed within 7 days (cumulative)	90.6%	100%	100%	100%	100%	✓	⬆	**18/19**: On Target 1348 out of 1348 faults recorded were repaired within 7 days.	90%	Scottish Average 3.07 days
CO.P.1.1a	Reduce the number of people killed or seriously injured	44	Annual Measure			30	⬛	⬆	**18/19**: Annual measure, Calendar year data. December statistics awaiting verification therefore subject to change.	24	
CO.P.1.1b	Reduce the number of children under 16 killed or seriously injured	4	Annual Measure			1	✓	⬆	**18/19**: Annual measure, Calendar year data. December statistics awaiting verification therefore subject to change.	3	
CO.P.1.2a	Number of lighting columns replaced (cumulative)	511	97	200	427	911	✓	⬆	**18/19**: On Target 896 columns replaced by capital funding and 15 replaced by maintenance.	700	
CO.P.1.2c	% of the footpath network resurfaced (cumulative)	1.1%	0.2%	0.2%	0.4%	0.7%	⬛	⬇	**18/19**: Off Target 4.4km of footway resurfaced.	1%	Internal programme of works - benchmark against target

02. Increase sustainable travel (includes borders railway and active travel - walking, cycling and green networks)

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CO.P.2.2a	Process all applications for a new disabled parking bays within 6 months of receipt of application (Quarterly)	90%	97.5%	100%	100%	100%	✅	⬆	**18/19**: On Target 19 of 19 applications processed within 6 months.	100%	
CO.P.2.3a	% increase in journeys undertaken by bike to 2020	N/A	Annual Measure			N/A		▬	**18/19**: Data not available	0.25%	Measure has target of 1.25% increase on 2015/16 baseline by 2020
BS.CO.P.2.4a	Average Percentage of roads that should be considered for maintenance treatment	30.96%	Annual Measure			34.02%	📈	⬆	**18/19**: Annual measure, indicative figure will verified by improvement service in Feb 2020.		
BS.CO.P.2.4b	% of total road network resurfaced (cumulative)	1.3%	0.2%	0.83%	1.48%	1.67%	✅	⬆	**18/19**: On Target 18/19 programme complete with 11.3km of carriageway resurfaced.	1%	

03. Reduce the volume of waste managed and maximise recycling from all sectors with a clear focus on Municipal Premises

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CO.P.3.2a	Total tonnes of biodegradable municipal waste (BMW) sent to landfill (quarterly)	8,966	1,587	1,765	634	3,986	✅	⬆	**18/19**: Data not available for Q4 Returns into waste data flow will be available Q1 19/20. Current 18/19 figure is based on Q1-Q3.	9,000	
BS.CO.P.3.2b	% of waste going to landfill per calendar year (quarterly)	40.9%	28.3%	34.8%	19.1%	N/A		▬	**18/19**: Data not available for Q4 Awaiting information from our contractors, returns into waste data flow will be available at Q1 19/20. In Q3 19.1% of Mixed Municipal Waste was landfilled.	35.0%	

03. Reduce the volume of waste managed and maximise recycling from all sectors with a clear focus on Municipal Premises

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ENV3c	Street Cleanliness Score (LGBF)	95.98%	Annual Measure			91.3%	🛑	⬇	**18/19**: Off Target Decrease in this years street cleanliness score due to the deployment of staff to other priority areas. This is an indicative figure which will be verified by the improvement service in February 2020.	97.5%	17/18 Rank 5 (TOP Quartile). 16/17 Rank 2 (TOP Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 8 (TOP Quartile).

04. Environmental sustainability - ensure Midlothian is a place with a high quality environmental and thriving low carbon economy

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CO.P.4.1a	Proportion of fly tipping incidents removed within 5 working days (quarterly)	100%	100%	100%	100%	100%	✅	▬	**18/19**: On Target 426 incidents of fly-tipping incidents removed this year.	100%	

05. Develop and implement a programme of continuous improvement and efficiency to develop additional capacity

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CO.P.5.1a	Income secured by sourcing third party opportunities through joint roads/ Land and Countryside working on hard and soft landscape	£348,000	£100,000	£632,000	£350,000	£350,000	🛑	⬆	**18/19**: Off Target The hard and soft landscape squads have secured external income to the value of approx 632k this financial year. However delays in start dates due to planning matters has reduced the potential income for this	£500,000	

14

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									financial year to approx 350K ie. Salters gate 300k project still delayed. The section is still suffering from recruitment issues to the Hard Landscape Squad which limits the amount of work we can take on.		
CO.P.5.1c	Income achieved by Commercialisation	N/A	£0	£0	£2,000	£2,000	🔴	▬	**18/19**: Off Target Main item of income through the financial year has taken longer to progress than had been expected, roadside advertising. This has been as a result of not being able to draw down on a framework contract and then reductions in Procurement support to procure a supplier of service. PIN notice exercise complete. The next phase had been delayed until Procurement Team in a position to support the next phase of the process.	£25,000	
CO.P.5.1b	Income achieved by providing additional training courses to external organisations (cumulative)	£50,700	£10,462	£20,866	£27,000	£53,273	🔴	⬆	**18/19**: Off Target Income position of the Health and Safety team has improved through the year with new driver CPC training introduced. The gains made have been off-set by a reduction in income from ELC partnership working as the partnership was scaled back during 2018/19 ahead of its end on 31 March 2019. Additional income stream of NEBOSH training planned for 2019/20 and on going annual programme of Driver CPC training.	£79,000	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CO.P.5.4a	Number of parks for which quality plans have been implemented (cumulative)	6	6	6	6	6	✅	▬	**18/19**: On Target All plans for the year complete.	6	

06. Maximise the utilisation of the Councils fleet and passenger transportation arrangements by reducing costs and contributing to the environmental agenda to reduce carbon footprint

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CO.P.6.2a	Reduce by £150,000 expenditure on staff Travel costs	£535,750	£135,250	£262,000	£394,000	£520,003	🔴	⬆	**18/19**: Off Target Total miles expenses claimed £520,003. Claim per directorate: Education Communities & Economy: £136,652 Health & Social Care: £292,051 Resources: £91,300 Overall 2.93% decrease on Q4 17/18. Introduction of more pool cars in 19/20 should see a reduction the mileage claimed.	£375,000	
CO.P.6.3a	Achieve 5% reduction in transport costs (cumulative)	£2,242,000	N/A	£1,070,200	£1,795,000	N/A		▬	**18/19**: Data not available yet As of Q3 (to period 9) total spend was £1,795,000 on transport related functions including vehicle hires, school and SW transport, concessions and supported services.	£2,123,000	
BS.CO.P.6.1a	The percentage of Council fleet which is 'Green' (cumulative)	5.41%	5.41%	5%	4.58%	5.34%	🔴	⬇	**18/19**: Off Target Currently 14 electric vehicles in fleet. (based on 262 vehicles in fleet). 6 further vehicles on order.	6%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ENV6	Percentage of total household waste that is recycled (LGBF)	51.6%	63.2%	61.0%	53.3%	N/A		▬	**18/19**: Data not available for Q4 Awaiting information from our contractors, returns into waste data flow will be available at Q1 19/20. Q3 18/19 recycling rate was 53.3%.	54.0%	17/18 Rank 15 (Second Quartile). 16/17 Rank 9 (Second Quartile). 15/16 Rank 16 (Second Quartile). 14/15 Rank 13 (Second Quartile).

Commercial Operations Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Ironmills Landslip	**Risk Cause:** Loose ground material ontop of hard rock surface on steep incline and potential water ingress. **Risk Event: T**he hillside opposite Dalkeith cemetery containing the footpath to Ironmills park has slipped repeatedly **Risk Effect:** Resulting in the footpath having to be closed for public safety.	Established controls:- 01 - Midlothian Council's Landscape Service have closed the area at risk to members of the public by using herras fencing.	⚠️	Remedial work at Ironmills	**18/19**: The site continues to be monitored on a fortnightly basis. There continues to be movement of the slope and subsidence adjacent to the Larch retaining wall. We have met with the local community who are exploring other route options. We met with the Community Council again in quarter 1 to provide and update and to discuss options and possible alternative routes.
Fraud - Landscape & Countryside Services	**Risk Cause:** Fuel is a valuable commodity and loose fuel such as petrol in cans can readily be stolen. Considerable quantities are used over the summer months and exact usage is difficult to estimate. **Risk Event:** Theft of loose fuel or diesel within vehicle. **Risk Effect:** Theft of fuel between 1k-20k	Established controls:- 01 - Fuel Management System and Monitoring of Usage, linked to Vehicle Tracking system 02 - Financial Directives made available to all officers involved with finance/assets 03 - Stores Controls in terms of orders, issues and returns of stocks 04 - Management supervision of assets use 05 - Budgetary Control may spot fraud, waste and error, as may 'Financial Discipline' 06 - Control of contracts - within budget, on time, meeting objectives (performance monitoring) 07 - Code of Conduct issued to all staff 08 - Within Land and Countryside the bills are monitored monthly with loose fuel usage being closely monitored.	⚠️	Consideration for future audit	

🔴 Alert 🔶 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Fraud - Waste Services	**Risk Cause:** Fuel is a valuable commodity and loose fuel such as petrol in cans can readily be stolen. Considerable quantities are used over the summer months and exact usage is difficult to estimate. **Risk Event:** Theft of loose fuel or diesel within vehicle. **Risk Effect:** Theft of fuel between 1k-20k	Established controls:- 01 - Fuel Management System and Monitoring of Usage, linked to Vehicle Tracking system 02 - Financial Directives made available to all officers involved with finance/assets 03 - Stores Controls in terms of orders, issues and returns of stocks 04 - Management supervision of assets use 05 - Budgetary Control may spot fraud, waste and error, as may 'Financial Discipline' 06 - Control of contracts - within budget, on time, meeting objectives (performance monitoring) 07 - Code of Conduct issued to all staff 08 - Fuel monitoring linked to tracking system. Controls recently developed:- 01 - Vehicle tracking systems (which is an action under risk COO1-05) 02 - Planned Internal Audit of fuel management systems in 2011-12 (see action). This was completed in October 2012 and reported to the CMT on 22.10.12 and Audit Committee on 30.10.12. 22 recommendations in improving control to be managed into place over the coming months.	⚠️		
Fraud - Roads Fuel	**Risk Cause:** Fuel is a valuable commodity and loose fuel such as petrol in cans can readily be stolen. Considerable quantities are used over the summer months and exact usage is difficult to estimate. **Risk Event:** Theft of loose fuel or diesel within vehicle. **Risk Effect:** Theft of fuel between 1k-20k	Established controls:- 01 - Fuel Management System and Monitoring of Usage, linked to Vehicle Tracking system 02 - Financial Directives made available to all officers involved with finance/assets 03 - Stores Controls in terms of orders, issues and returns of stocks 04 - Management supervision of assets use	⚠️		

🔴 Alert 🔶 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		05 - Budgetary Control may spot fraud, waste and error, as may 'Financial Discipline' 06 - Control of contracts - within budget, on time, meeting objectives (performance monitoring) 07 - Code of Conduct issued to all staff Controls recently developed:- 01 - Vehicle tracking systems (which is an action under risk COO1-05) 02 - Planned Internal Audit of fuel management systems in 2011-12 (see action). This was completed in October 2012 and reported to the CMT on 22.10.12 and Audit Committee on 30.10.12. 22 recommendations in improving control to be managed into place over the coming months.			
Health & Safety - Landscaping	**Risk Cause:** Use of machinery, vehicles, chemicals and arboriculture work particularly at height. **Risk Event:** Staff not following instruction , training or guidance provided **Risk Effect:** Accidents could cause injury or fatality	Established controls:- 01 - Activities and operations risk assessed and recorded on SPHERA 02 - Safe systems of work recorded on SPHERA 03 - HAVs exposure monitored along with staffs physical symptoms 04 - Health surveillance scheme in place. 05 - Majority of staff are Banks man trained to guide reversing vehicle etc 06 - Training and certification of staff on a range of machinery is undertaken annually 07 - Staffs handling chemicals are suitably trained. 08 - Staff undertaking arboriculture work are suitably trained. 09 - Accidents are investigated and discussed at works committee to ensure lessons are learned. 10 - Sphera system provides automatic notification to Managers of incidents. 11 - Insurance experience monitored and acted upon.	⚠		

🔴 Alert 🔶 High Risk ⚠ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		12 - Vehicle tracking systems applied to vehicle and help defend against claims.			
Health & Safety - Travel and Fleet Services	**Risk Cause:** **Risk Event:** **Risk Effect:** The risk relates to the health and safety of staff and members of the public but also driving standards. Depots tend to be potentially risky workplaces.	Established controls (other than those relating to driving at work):- 01 - Observance of health and safety policies 02 - Risk assessment 03 - Workplace safety management 04 - Insurance claims experience monitored 05 - Divisional joint consultative group 06 - Head of Service representation on corporate risk management group 07 - Lorries are not allowed to exceed payload parameters 08 - Stobhill Depot improvements: one-way traffic system, lorries are parked further apart, tidying up 09 - Reasonable controls in place for headstones in cemeteries 10 - Reasonable precautions taken over Bings risk (we have two, so see risk CO01-41) Controls under development:- 01 - EWiM project intention to extend/rationalise Stobhill depot 02 - Penicuik depot 02 - HSE inspection on Waste Services 03 - Head of PFM has assumed the chair of the Stobhill Depot Working Group 04 - Vehicle tracking systems to be applied to all vehicles and plant helping with defences against insurance claims and driving standards (e.g. speed control, harsh braking etc)	⚠	Ensure use of Health and Safety procedures	**18/19**: Continue to use Health and Safety Management System to monitor and implement safe systems as required.
Health & Safety - Roads	**Risk Cause:** Workplace hazards not clearly understood, staff not trained/equipment to manage workplace hazard. **Risk Event:** Employee undertaking a task beyond their competence	Established controls (other than those relating to driving at work):- 01 - Observance of health and safety policies 02 - Risk assessment 03 - Workplace safety systems of work	⚠	Ensure use of Health and Safety procedures	**18/19**: Managers and Supervisors across Commercial Operations trained in the use of the new Health & Safety Management Information System. This will improve the management of actions arising

🔴 Alert　🟠 High Risk　🔺 Warning　✅ OK　❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Effect: Injury to employee or other as a result of action or inaction.	04 - Insurance claims experience monitored 05 - Divisional joint consultative group 06 - Head of Service representation on corporate risk management group 07 - Lorries are not allowed to exceed payload parameters 08 - Depot one-way traffic system, lorries are parked in marked bays, good housekeeping 09 - Staff training.			from incidents and risk assessments. It will also enable greater sharing of good practice and hazard identification between teams.
Health & Safety - Waste Services	The risk relates to the health and safety of staff and members of the public but also driving standards. Depots tend to be potentially risky workplaces.	Established controls (other than those relating to driving at work):- 01 - Observance of health and safety policies 02 - Risk assessment 03 - Workplace safety management 04 - Insurance claims experience monitored 05 - Divisional joint consultative group 06 - Head of Service representation on corporate risk management group 07 - Lorries are not allowed to exceed payload parameters 08 - Stobhill Depot improvements: one-way traffic system, lorries are parked further apart, tidying up 09 - Reasonable controls in place for headstones in cemeteries 10 - Reasonable precautions taken over Bings risk (we have two, so see risk CO01-41) Controls under development:- 01 - EWiM project intention to extend/rationalise Stobhill depot 02 - Penicuik depot 02 - HSE inspection on Waste Services 03 - Head of PFM has assumed the chair of the Stobhill Depot Working Group 04 - Vehicle tracking systems to be applied to all vehicles and plant helping with defences against insurance claims	⚠	Ensure use of Health and Safety procedures	**18/19**: Managers and Supervisors across Commercial Operations trained in the use of the new Health & Safety Management Information System. This will improve the management of actions arising from incidents and risk assessments. It will also enable greater sharing of good practice and hazard identification between teams.

🔴 Alert   🔶 High Risk   ⚠ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		and driving standards (e.g. speed control, harsh braking etc)			
Driving Standards & Insurance Claims	**Risk Cause:** Not maintaining driving standards **Risk Event:** road accident **Risk Effect:** injury to employees, third parties and damage to vehicles and property	Established controls:- 01 - Driving whilst at work health and safety policy 02 - Driver handbook and dictates within it e.g. vehicle inspections 03 - CPC HGV driver training 04 - Under 21 driver focus and training 05 - CTX computer system 06 - Claims experience reported and evaluated 07 - Driver declarations of suitability to drive 08 - Motor Fleet and Leased Car insurance 09 - Minibus permit system 10 - Licence checks carried out annually in house. Ongoing controls:- 01 - Health and Safety section to arrange a feature on the intranet 'advertising' the driver handbook; also carrying out compliance audits 02 - Ensure driver handbook deposited in all vehicles	⚠️	Driving Standards	**18/19**: Risk manager and Travel Services Manager are currently reviewing all policies in reaction to driver risk and the driver handbook will be updated to reflect new polices and management arrangements.
Fleet Replacement	**Risk Cause:** Inadequate budget provision to meet the fleet needs of the organisation. **Risk Event**: Budget setting **Risk Effect:** Direct impact on Service delivery and service output.	Established controls:- 01 - Knowledge of the age of the fleet 02 - Stabilisation funding in capital plan, but limited 03 - Waste Services Review 04 - Fleet Management Asset Management Plan developed and with Finance 5 Year plan based on current vehicle replacement program. More recent controls:- 01 - Two additional mechanics employed to assist in roadworthiness of the fleet.	⚠️	Fleet replacement	**18/19**: Reduction in fleet replacement budget may lead to maintenance issues with vehicles having being kept longer.

🔴 Alert   🟠 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Roads Asset Management Plan and Infrastructure	**Risk Cause:** **Risk Event:** **Risk Effect:** Failure to install a risk based inspection regime that follows the Asset Management Plan and reduces road safety risk and claims.	Established controls:- 01 - Risk based inspection programme and procedure in accordance with latest codes of practice 02 - Public Liability Insurance 03 - Public reporting facility of lighting and roads faults (Clarence) 04 - Internal reporting facility 05 - Inspection records; all defects are noted and recorded on a database and all inspection records retained. 06 - Work progressing through SCOTS on Asset Management 07 - Maintenance budgets follow fault reporting 08 - Inspection database updated by engineers and inspectors; history of every street-road with defects 09 - Inspection repairs are recorded through Total 10 - Capital Project evaluation group and procedures ensures right projects become part of the Capital Plan 11 - Application of the UK Code of Practice 12 - Review of insurance claims history 13 - Traffic Management and Safety 14 - Progress Safer Routes to Schools Programme 15 - Limited Capital budgets to stabilise roads and footpaths Controls under development:- 01 - Presentation on progress with Network AMP 02 - Options likely to be developed 03 - Improved inventory 04 - Engagement of trainee to develop AMP More recent:- 01 - Looking to capitalise £1m revenue funding, so as not to lose the money during budget restraints.	⚠	Progress and update asset management plan	**18/19:** Roads Asset Management Plan for Scotland, version 4, (Produced by SCOTS Group) available to use from October 2018.

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Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Cemetrey safety (Mouments and wall stability)	**Risk Cause:** Potentially unstable monuments and deteriorating wall condition. **Risk Event:** Deteriorating condition of monuments arising form poor installation in previous years and deteriorating sandstone walls in older cemeteries. **Risk Effect**: Unstable monuments and walls cause a risk of fatality from falling/ being pushed/pulled onto people attending cemeteries.	<u>Established controls</u> 01 – Inspection of headstones undertaken on a 5 yearly cycle. 02 - Test the headstones 03 - Write to next of kin 04 - If dangerous, sheugh-in or stake 05 – historically significant headstones reinstated. 06 - Property Maintenance notified of walls where there is any concern regarding stabilities.	⚠️	Response to potentially dangerous walls	**Q3 18/19**: Ten locations notified to Property Services in September 2018 of walls in a potentially dangerous condition requiring formal assessment and action as appropriate.
				Monument Safety Project	**18/19**: (There are approx 13500 memorials within Midlothian Cemeteries) This quarter we have inspected Fala cems =268 Chrichton =332 Cranston =408 St Nicholas =180 Dalkeith =2496 Cockpen =1419 Temple =141 Newton ch/y =501 Hawthornden=444 Rosewell =168 Carrington =98 Whitehill aisle =53 Newbattle = 1928 Penicuik =1568 St mungo's =375 (Penicuik) A total of 10,379 inspected and 12 sheughed-in (made safe) The 5 yearly inspection process is up to date.
Danger to human beings as a result of risks at Bings	**Risk Cause**: Burning bings within the ownership of Midlothian Council, Gorebridge Bings. **Risk Event:** below surface burning can result in hollows being created **Risk Effect:** Extreme temperatures reached in burning bings resulting in risk to life if people walk into these areas and fall into burning ground.	No current issues with burning bings at this time. Environmental Health manage the monitoring of Bings with specific allocated budget for this.	⚠️		

🔴 Alert   🟠 High Risk   🟡 Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Street Lighting	**Risk Cause:** **Risk Event:** **Risk Effect:** This is the challenge and risk of having to modernise the street lighting infrastructure in a 3 year capital programme. Solar power is being trialled. There are 30,000 columns to be addressed.	1. 5 year programme of replacement in place.	⚠️	Renew infrustructure and LED lamps	**18/19**: Continue in 2018/19 with infrastructure renewal and LED lamps work in progress.
Health and Safety and duty of care in the workplace	**Risk Cause:** Workplace accident or ill health caused by an uncontrolled hazard. **Risk Event:** Accident event or exposure to hazard resulting in ill health. **Risk Effect:** In the event the Council could not demonstrate it had taken reasonable measures to safeguard employees, service users or others, the Council or individuals could be subject to Criminal and or Civil litigation. Criminal action can result in fines and imprisonment of officials for failure to adequately protect people to whom the Council owed a duty of care. Criminal fines cannot be insured against. Civil claims from employees and members of the public are made each year. The cost of these over the past 4 years are as follows:	The main internal controls are:- 01- Corporate team of Health and Safety specialists 02 - H&S Policy and suite of Management Arrangements 03- H&S Management information system 04- H&S team represented on Corporate Risk Management Group 05 - H&S Risk Assessments 06 - Workplace Safety Working Systems 07 - 'Statutory Competent' person in health and safety team 08- Suite of training delivered to employees through annual training programme by Council Health and Safety Team 09 - Learn-pro e-learning programmes 10 - Particular focus on relationship between employers and public liability insurance claims and divisional health and safety practice	⚠️		
Increased cost to recycle dry material	**Risk Cause:** Waste recyclers receiving this waste are suggesting the waste product does not meet the required standard agreed for recycling purposes. In addition market for the recycled product have deteriorated. **Risk Event:** Potential waste is unable to be processed by recyclers, resulting	01 - New contract in place with effect from 01-01-2019 02 - Material bulked in Stobhill recycling shed, giving the opportunity to remove contamination.	⚠️	Resolution to potential increasing costs	**18/19**: Work in partnership with our new contractor.

🔴 Alert 🔺 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	in refusal to accept waste material for recycling. **Risk Effect:** The price being charged to the Council to send dry material for recycling has increased from £20 per tonne to £110 per tonne. This may require additional budget provision.				

🔴 Alert　🔶 High Risk　🔺 Warning　✅ OK　❓ Unknown

Published Local Government Benchmarking Framework
Commercial Operations

Midlothian

Culture and Leisure

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
C&L4	Corporate Indicator - Net cost of parks and open spaces per 1000 population (LGBF)	£18,042.13	£20,264.75	£11,312.30	£5,837.96	£6,698.13	£5,744.77	£7,152.78	£7,359.30	17/18 Rank 4 (Top Quartile). 16/17 Rank 4 (Top Quartile). 15/16 Rank 2 (Top Quartile). 14/15 Rank 3 (Top Quartile).
C&L5b	Corporate Indicator - Percentage of adults satisfied with parks and open spaces (LGBF)	78.3%	N/A	81%	83.43%	84%	79%	78.33%	78.67%	17/18 Rank 28 (Bottom Quartile). 16/17 Rank 31 (Bottom Quartile). 15/16 Rank 29 (Bottom Quartile). 14/15 Rank 22 (Third Quartile).

Environmental Services

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
ENV1b	Corporate Indicator - Net cost of waste collection per premise (annual) (LGBF)	New for 2012/13		£82.82	£64.41	£31.34	£73.24	£74.94	£74.34	17/18 Rank 28 (Bottom Quartile). 16/17 Rank 24 (Third Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 1 (TOP Quartile).
ENV2a	Corporate Indicator - Net cost of waste disposal per premise (annual) (LGBF)	New for 2012/13		£78.53	£60.20	£78.10	£87.84	£85.51	£85.01	17/18 Rank 9 (Second Quartile). 16/17 Rank 10 (Second Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 8 (TOP Quartile).
ENV3a	Corporate Indicator - Net cost of street cleaning per 1,000 population (LGBF)	£10,549.67	£10,792.76	£10,648.15	£10,814.64	£12,202.76	£12,095.21	£12,662.23	£11,810.41	17/18 Rank 16 (Second Quartile). 16/17 Rank 14 (Second Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 9 (Second Quartile).

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
ENV3c	Street Cleanliness Score (LGBF)	94%	93.6%	94.9%	94.9%	96.14%	98.7%	98.7%	95.98%	17/18 Rank 5 (TOP Quartile). 16/17 Rank 2 (TOP Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 8 (TOP Quartile).
ENV4a	Corporate Indicator - Cost of maintenance per kilometre of roads (LGBF)	£15,398.18	£10,965.31	£7,524.02	£13,156.45	£8,649.97	£5,949.63	£7,798.77	£8,214.91	17/18 Rank 11 (Second Quartile). 16/17 Rank 9 (Second Quartile). 15/16 Rank 6 (TOP Quartile). 14/15 Rank 12 (Second Quartile).
ENV4b	Percentage of A class roads that should be considered for maintenance treatment (LGBF)	21.1%	22.7%	24.1%	22.1%	21.6%	20.4%	20.9%	25%	17/18 Rank 13 (Second Quartile). 16/17 Rank 7 (TOP Quartile). 15/16 Rank 7 (TOP Quartile). 14/15 Rank 9 (Second Quartile).
ENV4c	Percentage of B class roads that should be considered for maintenance treatment (LGBF)	25.2%	27%	30.4%	28.2%	24.4%	28%	29.2%	30.46%	17/18 Rank 14 (Second Quartile). 16/17 Rank 15 (Second Quartile). 15/16 Rank 13 (Second Quartile). 14/15 Rank 8 (TOP Quartile).
ENV4d	Percentage of C class roads that should be considered for maintenance treatment (LGBF)	32.1%	30.4%	28.7%	29.8%	32%	30.5%	28.9%	33.15%	17/18 Rank 15 (Second Quartile). 16/17 Rank 13 (Second Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 11 (Second Quartile).
ENV4e	Percentage of unclassified roads that should be considered for maintenance treatment (LGBF)	38%	32.8%	36.1%	34.5%	34.4%	35.3%	35.3%	35.23%	17/18 Rank 16 (Second Quartile). 16/17 Rank 14 (Second Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 10 (Second Quartile).
ENV6	Percentage of total household waste that is recycled (LGBF)	44.1%	47.2%	45.3%	42.3%	46.9%	47.9%	53.5%	51.6%	17/18 Rank 15 (Second Quartile). 16/17 Rank 9 (Second Quartile). 15/16 Rank 16 (Second Quartile). 14/15 Rank 13 (Second Quartile).
ENV7a	Corporate Indicator - Percentage of Adults satisfied with refuse collection (LGBF)	79%	N/A	83%	79.33%	79.67%	83%	86.67%	89.67%	17/18 Rank 4 (TOP Quartile). 16/17 Rank 10 (Second Quartile). 15/16 Rank 21 (Third Quartile). 14/15 Rank 26 (Bottom Quartile).
ENV7b	Corporate Indicator - Percentage of adults satisfied with street cleaning (LGBF)	69.7%	N/A	78%	72.9%	73.33%	72.33%	73%	71.33%	17/18 Rank 16 (Second Quartile). 16/17 Rank 18 (Third Quartile). 15/16 Rank 22 (Third Quartile). 14/15 Rank 22 (Third Quartile).

Progress in delivery of strategic outcomes

Finance and Integrated Service Support continues to have a strategic focus on securing the financial sustainability of the council, strengthening financial management together with nurturing a highly motivated and effective workforce. All of which are central to the achievement of the Council's priority outcomes and delivery of services to a growing county.

The key activities which support this are:
a) The development and delivery of the Council's Medium Term Financial Strategy (MTFS), Capital Strategy and Capital Investment plans, Reserves Strategy and Treasury Management Strategy together with the development and implementation of a comprehensive Change Programme;
b) The Workforce Strategy, the associated Investing in our Workforce Programme and the Corporate Workforce Plan;
c) Delivering Excellence;
d) The ongoing work of the Integrated Service Support review, reducing the overall cost of providing the Finance and Integrated Support Services.

These are supported by:

- The Digital Strategy and Digital Learning Strategy
- The Procurement Strategy and Contract Delivery Plan

There is also a requirement to address the recommendations set out in the External Auditor's Annual report which was presented to Council on 2 October 2018. The actions, in so far as they impact on Finance and Integrated Service Support, are being progressed and evidenced through the means of a specific action plan and will be reported back to audit committee as appropriate monitoring.

1: Financial Strategy - Achievements
a) Successful completion of the 2017/18 accounts and audit;
b) Completion of the 2019/20 Budget, with approval by Council in February 2019;
c) Completion of Financial Monitoring reports for Council as part of the robust scrutiny of financial performance and subsequent submission of a recovery plan to address the projected in year overspend;
d) Financial Strategy 2019/20 to 2022/23 presented to Council and other political or senior officer forums which outlined future years budget projections, the impact of change programmes and the financial implications of investment decisions and priorities;
e) Approval and adoption of the first comprehensive Capital Investment Strategy by Council November 2018 and Reserves Strategy in February 2019;

2: Workforce Strategy - Achievements
a) Successful increase in attendance level with an average days lost in 2017/18 of 7.5, which ranked the Council as second best in Scotland.
b) Selected to participate in the Equally Safe at Work accreditation programme run by Close the Gap. This will enable the council to progress its work on gender inequality;
c) Work undertaken on promoting the EU Settlement Scheme in order to ensure that we comply with our legal requirements and to ensure that we have a workforce in place to deliver vital services to our communities;
d) Completion of the employee survey 2018 which provides an invaluable insight into engagement levels within the Council and being used to conduct action planning meetings with staff;
e) Development of two key people policies – Secondary Employment & Outside Interests, and Gifts and Hospitality.
f) Successful financial planning workshops run by Affinity Connect ensuring our workforce are fully informed mid and end career;
g) Wellness awareness workshops continue to be run across the council ensuring our staff have access to information to help them to positively impact their health and wellbeing;
h) Established working relationships with PACE to ensure our employees who are deemed to be 'at risk' of redundancy are fully supported in their journey;
i) Piloted Corporate Induction Programme during Q4 and revised new Corporate Induction Programme to be launched early in Q1, 2019/20 allowing new staff to be aware of support available to them with clear messages regarding expected standards of behaviours in line with code of conduct;
j) Continued roll out of E-Slips, an electronic payslip, with take up now at over 85% by staff;

k) Approval at CMT March 2019 of the Introduction of a Salary Sacrifice Scheme which includes Salary Sacrifice Cars, Financial Wellbeing services and anytime access to the Cycle to Work initiative.

3: Digital Strategy and Digital Learning Strategy - Achievements
a) Property Programmes - Commissioning and/or decommissioning of a number of sites to support the wider Property and School programme including Health and Social Care / Integrated Joint Board sites;
b) Digital Enabled projects: - Leisure Management now implemented across all key sites, procurement of new cashless catering system. Business Information and Analytics – introduction to new platform as a service in partnership with NSS, deployment of Tableau Dashboards (Investing in our Workforce, Complaints, Education and Health & Social Care);
c) Digital Strategy Group has prioritised and aligned Council programmes / projects to the wider Digital Strategy, Digital Learning Strategy and National Transformation Programme (Local Government Digital Office);
d) Continued Asset Management and Investment in Digital Foundations infrastructure and associated services –. Replacement of digital assets continues across the Corporate and School estate;
e) CyberSecurity resilience -maintained and currently reviewing the latest Scottish Government CyberSecurity action plan that all Councils need to respond to. Compliance; Preparation and Planning of for PSN accreditation.

4: Procurement - Achievements
a) Procurement Strategy 2018-2023 and Annual Procurement report approved at August Council;
b) All contracts delivered on schedule against the 2018-2020 Contract Delivery Plan;
c) Continued roll out of Purchase to Pay project specifically the introduction of Purchasing Cards;
d) Achieved a 67% score in the December 2018 Procurement Capability & Improvement Programme (PCIP) assessment, this placed Midlothian in the second highest banding bracket F2 (Banding F1 –F12).

5: Service Improvements / Delivering Excellence
a) Sales to Cash - E-invoicing and e-statements to customers introduced. Quick import for the generation of invoices implemented;
b) SEEMIS Groupcall - 12 Primary Schools and 2 High Schools now Live.;
c) Business Intelligence/Analytics - completion and roll out of Investing in our Workforce Dashboard;
d) System set up and development to support implementation of Garden Waste on line payments;
e) Soft launch of online services for Leisure Management;
f) Purchase to Pay - creation and onboarding of purchase card holders of Amazon Business Account;
g) Access for Education (mgfl) users now Live for contractual changes and will support the planned implementation of Invoice Approval to schools;
h) Lunar and Monthly payrolls to merge for the start of 2019 financial year;
i) Automation of Teachers pay calculations are now implemented that should see the standardisation of teachers pay calculations across Scotland;
j) External engagement across Midlothian communities; our spending choices campaign closed in January 2019 with a summary report including details of the public consultation provided to the Full Council in February 2019 with details of the Council budget for 2019/20, savings proposals for 2019/20 to 2022/23 and Council Tax levels for 2019/20.

Challenges and Risks

Growing Council
Population growth in Midlothian over the next 10-15 years will see Midlothian become the fastest growing Council in Scotland. 0-15 population increase, projected at 20% and 75+ population increase projected to increase by 100% between 2014 and 2039.

This brings the opportunity to support the Council vision of being 'A Great Place to Grow'. As a growing Council this brings the opportunity to redevelop parts of Midlothian, improve infrastructure with a focus on area targeting, improving economic opportunities, improving education and health outcomes.

This growth creates the opportunity to meet the housing need with 25% of new homes being built in the affordable housing bracket, in addition to the expansion in Council House building. This construction will directly support employment in construction and will see a steady increase in the volume of Council Tax received over time.

The approved, Capital Strategy sets out infrastructure required to meet those demographic pressures and includes the financial contributions Midlothian will make to the Edinburgh and South East Scotland City Region Deal.

Continued Service Transformation
Continue the significant transformation of service delivery to allow services to be provided within the reduced budget available. In the next 12 months this will require services to be reshaped, business processes to be reviewed and adapted technology solutions progressed, including the continued adoption of automation. These changes are set

out in the service savings delivery plan and are designed to deliver savings of £1.145 million. Savings since inception of F&ISS are predicted be rise to £4.2million (which equates to 42% of the 2019/20 budget) and as such represents a considerable reduction in both financial and human resources.

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Financial Sustainability

Given the continuing challenging grant settlements, representing a real terms reduction in core funding together with the impact of a rapidly growing population and greater demand for services, the Council needs to shift from an annual budget cycle and urgently put in place a Medium Term Financial Strategy. Whilst the Council has for some time had medium term financial projections which set out the budget gaps for future years it has not delivered a change programme which sets out how these will be addressed. The aim is therefore to set out before the summer of 2019 updated projections together with a comprehensive set of measures to secure balanced and deliverable budgets which support the delivery of the single Midlothian plan and cover the four years 2020/21 to 2023/24. This will complement the existing forward plans for HRA, Capital and Reserves.

UK Decision to leave the EU

All Council services have been kept abreast of the risks associated with the UK leaving the EU and in particular the risks for a no deal scenario. Services have been directed towards UK Government guidance on how to prepare for a no deal and have been tasked with assessing the potential impact and identifying appropriate risk responses.

A Council Cross Service - Brexit Working Group has been set up in preparation for a potential No Deal exit from the European Union.

1: Financial Strategy

a) The need to continue to strengthen financial sustainability and financial management by:
- Continue work on developing cost projections and implementation of the approved saving measures to update the Medium Term Financial Strategy containing planned and balanced budgets covering the 3 years – 2020/21 to 2022/23;
- Prepare the final outturn monitoring reports for 2018/19 and continue to work with budget holders to maintain effective control over expenditure;
- Continued financial support for the Change Programmes and delivery of savings measures. Help shape and lead all strands of the programme, continue to revise savings profiles. Oversight of investment to support transformational change and the assessment of bids against the criteria used for the Capital Receipts Scheme;
- Review of the Capital Strategy and the affordability of investment plans principally to reflect the ongoing review of the Learning Estate Strategy.
- Continue to strengthen financial stewardship in a climate of reducing budgets and increasing service pressure;
- Review and update financial directives and associated documentation.

2: Workforce Strategy

Alongside the Medium Term Financial Strategy 2020/21 to 2022/3 we will continue to implement the Workforce Strategy 2017-2022. This includes a focus on the identified themes over the next five years. The Service Workforce Plans will need to be update to align to the MTFS and detail the projected workforce actions over the same period.

a) Identifying alternative service delivery approaches and the impact on service delivery with pressure on available resource;
b) Securing the improvement in flexibility and productivity throughout the workforce;
c) Continued development of the Workforce Strategy action plan;
d) Ensuring workforce plans are updated to reflect the current and projected financial situation ensuring services transform and deliver on the Change Programme – refreshed data now received and will be disseminated imminently;
e) Implementing engagement plans following employee survey results January 2019;
f) Continue to support our leadership community so that they are able to perform to a high standard and deliver on the Change Programme;
g) Encouraging less reliance on agency and fixed term workforce;
h) Brexit – the EU Settlement Scheme may impact on existing workforce. Much of the detail is still unknown. Information still unknown for those EEA nationals leading to workforce uncertainty;
i) Implementation of the Revised Business Travel and Subsistence Policy, which is a shift to the use of pool electric cars, following Closure of the Car Leasing Scheme;
j) Complete the roll out of electronic pay slips, E-slip.

k) Maintain attendance levels, supporting service areas with high absence levels to deliver interventions to support their service workforce strategies.

3: Digital Strategy and Digital Learning Strategy
a) Increased threat of cyber/security attacks, e.g. denial of service, ransomware/hackers continues to be an ongoing challenge to mitigate risk and minimise service disruption;
b) Securing, maintaining Digital skills and experience across the Digital Service teams in order to be able to respond, deliver and protect the organisation;
c) Maintaining the integrity and compliance of Public Services Network (PSN) ensuring that the Digital Estate and associated technologies inclusive of Business Applications are all up to date and pass rigorous penetration testing which is currently taking place;
d) Ensuring sustainable investment in digital assets at a time of financial constraints and reduction in resources including the Asset Management Programme:- Microsoft Exchange/Office 365 / Windows 10 upgrade is currently in the preparation and planning stage. Additional Communications and plan to be shared with Directors, Head of Service and Service managers;
e) Regulatory changes proposed will impact on Council activities if not planned for – for example New Data Protection laws (GDPR) and other compliance requirements such as Payment Card Industry Data Security Standard (PCI-DSS);
f) Pursuing the transformation of and innovation in service delivery by pursuing digital opportunities, including Automation, Artificial intelligence etc.
g) Brexit – the uncertainty of Brexit within the technology sector has the potential to impact on product/hardware and software delivery. Along with increase in cost for products and services that are built, delivered in and out with Europe could impact the supply chain.

4: Procurement
a) To deliver and demonstrate savings through procurement by continuing to review and monitor performance;
b) Completing the Purchase to Pay project;
c) As the next stage of the Council's procurement journey, and similar to most other Councils the aim is to deliver a robust contract and supplier management tool by rolling out guidance and training to contract owners;
d) Deliver actions from Procurement Strategy;
e) Full compliance with IR35 off payroll working;
f) Prepare and submit an annual procurement report for 2018-19 to the Scottish Minister.

5: Service Improvements / Delivering Excellence
a) Across all Services there will be a focus on ensuring that the Council is prepared for and can demonstrate its effectiveness for the Best Value Audit;
b) Delivery of Change Programme and in particular the Integrated Service Support Savings target for 2019/20 of £1.145 million;
c) The delivery of the Business Services Improvement Plan;
d) The programming of application upgrades within resource constraints;
e) Impact of introduction of GDPR on both Business Applications and Records Management;
f) Business Applications compliance and compatibility with Office 365;
g) Roll Out of Invoice Approval;
h) Secure support to move to a SaaS solution for Mosaic and Idox applications;
i) P2P – Invoice Approval – improving 100% first time data capture difficult due to variety and quality of invoice layouts/images;
j) Payroll Rationalisation – move of all 4 weekly staff to monthly, prep work Q4, transfer in mid-April;
k) Sourcing and implementing new provider for Blue Badge Independent Mobility assessments.

Emerging Challenges:

Alongside the Medium Term Financial Strategy 2020/21 to 2022/23 we will implement the Workforce Strategy 2017-2022. This includes a focus on the identified themes over the next five years. The Service Workforce Plans will detail the projected workforce actions over the same period.

Given the challenging grant settlement, the Council needs to urgently put in place a Medium Term Financial Strategy by summer 2019 which sets out how the identified budget shortfall will be addressed.

Finance and Integrated Service Support PI summary 2018/19

Making the Best Use of our Resources											

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
01. Manage budget effectively	Performance against revenue budget	£12.198m	£11.550m	£10.876m	£10.913m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£10.362m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	6.60	1.45	2.33	4.56	6.24	✅	**18/19**: On Target Sickness absence interventions are being recommended to the Corporate Management Team to further address levels of sickness absence and it is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future. HR continuing to support managers in managing frequent short term absences.	⬆	6.60	Number of days lost (cumulative)	1,588.72
											Average number of FTE in service (year to date)	254.67

Corporate Health											

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
03. Complete all service priorities	% of service priority actions on target / completed, of the total number	81%	92%	96%	96%	83%	🛑	**18/19**: Off Target Work continues within the service to address actions which are off target. See individual actions for more detail.	⬆	90%	Number of divisional & corporate priority actions	24
											Number of divisional & corporate priority actions on tgt/completed	23
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	93%	94%	93%	93%	91%	🛑	**18/19**: Off Target	⬇	95%	Number received (cumulative)	4,094
											Number paid within 30 days (cumulative)	3,707
05. Improve PI performance	% of PIs that are on target/ have reached their target.	80%	0%	0%	0%	0%	✅	**18/19**: No service specific performance indicators.	▬	90%	Number on tgt/complete	0
											Total number of PI's	0

5

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
06. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%	✅	**18/19**: On Target All risks reviewed and controls in place.	▬	100%	Number of high risks reviewed in the last quarter	5
											Number of high risks	5

Improving for the Future

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
07. Implement improvement plans	% of internal/external audit actions progressing on target.	63.64%	61.11%	82.69%	37.5%	60.71%	🛑	**18/19**: Off Target Outstanding actions are dependant on other measures being implemented/programmed or one of a lower priority. Continued review will be carried out with the aim of completing outstanding actions as far as possible.	⬇	90%	Number of internal/external audit actions on target or complete	26
											Number of internal/external audit actions in progress	28

Finance and Integrated Service Support Complaints Indicator Summary

Commitment to valuing complaints							

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	21	5	10	12	18	📈	**18/19**: Data only	
Number of complaints closed in the year		5	10	12	16	📈	**18/19**: Data only	
Number of complaints upheld (cumulative)		3	7	8	8	📈	**18/19**: Data only	
Number of complaints partially upheld (cumulative)		0	0	1	3	📈	**18/19**: Data only	
Number of complaints not upheld (cumulative)		3	3	3	4	📈	**18/19**: Data only	
Average time in working days to respond to complaints at stage 1	6.29	2.6	3.11	4.45	5.6	🛑	**18/19**: Off Target 3 complaints this year for Employment and Reward have been complex in nature which has resulted in further investigations in order to respond to the customer.	5
Average time in working days to respond to complaints at stage 2	0	0	11	11	11	✅	**18/19**: On Target	20
Average time in working days for a full response for escalated complaints		0	0	0	0	✅	**18/19**: On Target No complaints escalated this year.	20
Percentage of complaints at stage 1 complete within 5 working days	42.86%	100%	88.89%	72.73%	73.33%	🛑	**18/19**: Off Target 3 complaints this year for Employment and Reward have been complex in nature which has resulted in further investigations in order to respond to the customer.	100%
Percentage of complaints at stage 2 complete within 20 working days	0%	0%	100%	100%	100%	✅	**18/19**: On Target	100%
Percentage of complaints escalated and complete within 20 working days		0%	0%	0%	0%	✅	**18/19**: On Target No complaints escalated this year.	100%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		0	0	0	0	📈	**18/19**: Data only	

Finance and Integrated Service Support Action report 2018/19

Midlothian

	01. Support people who are at risk of being isolated to access social opportunities					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.1.1	Embed the financial and resource arrangements required to support the Midlothian IJB in particular the financial assurance issues and risks and supporting the Chief Financial Officer to develop and present financial monitoring reports to the IJB	31-Mar-2019	✅	100%	**18/19**: Complete Financial monitoring reports regularly presented to the IJB with ongoing discussion on their content and how they link across to the Council's financial position.

	02. Work with key start-ups or groups of new businesses that are able to grow without causing displacement and that will increase economic activity in Midlothian					

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.2.1	Deliver in-house support to Economic Development through planning agreements and property transactions	31-Mar-2019	✅	100%	**18/19**: Complete The in-house team is in place and has been able to deliver completed planning agreements with developers. This has in addition generated third party income to reflect the costs to the council.
FISS.P.2.2	Continue to work with Local service providers to help them secure public sector contracts.	31-Mar-2019	✅	100%	**18/19**: Complete Work with local businesses continues on a daily basis, pre-market engagement events held for all appropriate regulated procurements. Drop in surgeries available for local suppliers. Continue to work with the Economic Development team, the suppler development programme and the Federation of Small Businesses to enhance local businesses capabilities to bid for and win public contracts.
FISS.P.2.3	Develop and implement new procurement strategy	31-Mar-2019	✅	100%	**18/19**: Complete Procurement Strategy approved at August 2018 Council.

03. Improve employability skills and sustained, positive school leaver destinations for all young people

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.3.1	Support Investing in our Workforce principle by reviewing and refreshing recruitment policy to allow service specific recruitment initiatives	30-Sep-2019	▶	60%	**18/19**: On Target - revised date Report presented to Education DMT for discussion others scheduled. Sessions delayed due to budget plans, last one scheduled for early May. Deadline revised for report to CMT end of May 19.
FISS.P.3.2	Work with Services to ensure the delivery of service specific workforce plans which increase apprenticeship opportunities and prioritise any external recruitment to those leaving learning.	31-Mar-2019	✅	100%	**18/19**: Complete Work will continue into 19/20 to support Heads of Service with the delivery of their specific workforce plans.

04. Increase access to Digital Services

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.4.1	Implementation of Digital Services Asset Management and Investment plans - Corporate/Schools	31-Mar-2019	❌	60%	**18/19**: Off Target Asset Management programme continues across the Council ensuring technologies and assets being deployed are fit for purpose (Pc, windows 10 and Server replacement). Due to current resourcing challenges within Digital Services the programme has slipped and may mean that we do not achieve PSN compliance next year (April 2020), the main risks have been highlighted below and escalated with Director via CMT.
FISS.P.4.2	Implementation of the Digital Strategy	31-Mar-2019	✅	100%	**18/19**: On Target Work continues in delivering the Digital Strategy and agreed programmes of work approved by the Digital strategy group. An initial meeting has taken place with the Digital office – co-ordinator and an outline plan and timescales have been agreed for the Digital Maturity assessment survey. Digital Services continues to participate in LG Digital office work streams and provides updates through the Digital strategy group. On target for this year.

05. Ensure equality of opportunity as an employer

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.5.1	Deliver and embed the workforce strategy action plan to ensure that our workforce is positive, motivated, high achieving, well led and well managed	31-Mar-2019	✅	100%	**18/19**: Complete Work will continue into 19/20 as a result of a recent audit. Seven new/revised people policies were implemented on 1 June 2018 and are being embedded by Service Managers. The Wellness@Midlothian agenda was endorsed by CMT. Three new people policies were presented to CJWG in November 2018. Work underway leading up to the year end to ensure managers are equipped to manage areas of under-performance within their teams.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.6.01	Develop and achieve actions set out in the Employment and Reward Transformation plan to deliver target savings	31-Mar-2019	✅	100%	**18/19**: Complete Actions set out for this year completed on target. Final push for e-slip sign up underway, now considered the default option. Payroll Merge scheduled for April 19 part of Finance and Integrated Service Support transactions project managed by Business Applications Manager.
FISS.P.6.02	Deliver all payrolls on schedule	31-Mar-2019	✅	100%	**18/19**: Complete Local Government Worker pay rise applied in March.
FISS.P.6.03	Awareness, preparation, and implementation of the General Data Protection Regulation (GDPR)	31-Mar-2019	✅	100%	**18/19**: Complete GDPR programme is now a Council business as usual activity. New Data Protection Officer take up post in the next couple of weeks within Legal Services.
FISS.P.6.04	Awareness, preparation, and implementation of Scottish Government Public Sector Cyber Resilience Action Plan	31-Mar-2019	✅	100%	18/19: On Target Current activities to improve Council cyber security position and resiliency can be summarised below :- 1. Undertaking annual PSN security testing of externally facing websites and the Councils internal network – on target for this Year April 2019. 2. In support of all the additional business requirements looking to advertise for a Cyber engineer position that has been agreed in principle but waiting for final approval to be advertised. This position will help to focus on the SG Cyber essentials action plan and the items listed below. 3. Preparing for Cyber Essentials security testing of the corporate and schools network. 4. Implementation of the Scottish Governments Cyber Resiliency Action Plan – ongoing. 5. At the request of SOLACE engaging with the Digital Office to deliver the 6 projects below:- - Create a cyber-capability maturity model. - Develop a common staff cyber security training resource. - Conduct business continuity and cyber security incident response exercises. - Deploy a supply chain cyber risk assessment tool during procurement. - Produce cyber security audit tools to assist Internal Audit and Audit Scotland. - Commence discovery phase to integrate with public sector Security Operations Centre (SOC).
FISS.P.6.06	Achieve the actions set out in the Purchase to Pay project plan, with the majority of sites, including schools and the roll out of Invoice Approval	31-Mar-2020	▶	85%	**18/19**: On Target - revised date Invoice Approval live for Digital Services and implementation for Schools planned for Q1 19/20. Implementation of lodged cards for Catering continues with pilot planned to start in May. Implementation of E-Invoicing via Scottish Govt solution underway with planned go live in July.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
FISS.P.6.07	Achieve the actions set out in the Total Document Management project plan	31-Mar-2019	✅	100%	**18/19**: Complete **Education (mgfl):** Complete - Contractual Changes Live from March 2019 **Manager File Plan**: Business Services live. Further roll out will be driven by the introduction of Maximising Attendance workflow **Construction:** No further progress **Business Services File Plan:** No further progress **Maximising Attendance at Work:** Return to Work workflow development complete. Pilot has commenced in Business Services. Absence stage management workflow complete. Initial testing to be carried out within Business Services prior to pilot for reporting managers. **Secondary Employment and Gifts & Hospitality:** Workflows being developed in conjunction with HR. **System Upgrade:** Work commenced on upgrade during March. Hardware set up and configuration has been completed. Upgrade to Test Environment progressing. Project Team to start testing during April with planned Go Live in June.
FISS.P.6.08	Supporting the applications requirements for the Inter Agency Information Exchange with Health (Phase 1 - Adults)	30-Sep-2019	❌	15%	**18/19**: On Target - revised date Reliant on the upgrade and transfer of Mosaic to hosted platform which is now approved and progressing.
FISS.P.6.09	Develop and achieve actions set out in the Business Services Improvement plan	31-Mar-2019	✅	100%	**18/19**: Complete Workstreams progressing in line with plan
FISS.P.6.10	Manage claims received by Legal Services in respect the Limitation (Childhood Abuse) (Scotland) Act 2017 through the agreed process in order to minimise the Council's exposure to damages	31-Mar-2019	✅	100%	**18/19**: Complete Claims received have been processed in terms of the process and passed to claims handlers.
FISS.P.6.11	Achieve contract delivery targets set out in the Contract Delivery Plan	31-Mar-2019	✅	100%	**18/19**: Complete Contracts being delivered on target against timescales. Updated pipeline plan included in procurement annual report and approved at August Council.
FISS.P.6.12	Focus on embedding People Policies and supporting managers to work within new policy framework	31-Mar-2019	✅	100%	**18/19**: Complete Managers have been provided with tools to assist in the communication of these policies to their teams. Ongoing HR support available where needed.
FISS.P.6.13	Update the financial strategy for 2018/19 to 2021/22 to support Council setting the 2019/20 Council tax and a balanced budget	31-Mar-2019	✅	100%	**18/19**: Complete Financial Strategy 2019/20 to 2022/23 report presented to February Council, 19/20 Council tax set, budget set and agreement to MTFS report before summer recess.
FISS.P.6.14	Completion of the unaudited Statutory Accounts for 2017/18 to ensure that we maintain strong financial management and stewardship	31-Mar-2019	✅	100%	**18/19**: Complete
FISS.P.6.15	Completion of the statutory financial audit and achieve an unqualified audit opinion for the Accounts for 2017/18	31-Mar-2019	✅	100%	**18/19**: Complete
FISS.P.6.16	Deliver quarterly financial reports and commentary to Council	31-Mar-2019	✅	100%	**18/19**: Complete The Final Outturn reports will be presented to Council in June 2019.

Finance and Integrated Service Support PI Report 2018/19

Midlothian

					2018/19					
		07. Local Government Benchmarking Framework								

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CORP6	Corporate Indicator - Sickness Absence Days per Employee (All employees)	7.5	2.1	3.56	6.34	8.55	🛑	⬇	**18/19**: Off Target Sickness absence interventions are being recommended to the Corporate Management Team to further address levels of sickness absence and it is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future. Teachers stats: The Council has started negotiations with the teaching trade unions in relation to introducing a revised Maximising Attendance at Work Policy.	7.5	
CORP3b	Corporate Indicator - The Percentage of council employees in top 5% of earners that are women (LGBF)	49.0%	46.7%	48.7%	49.7%	49.2%	🛑	⬆	**18/19**: Off Target This year we continued our positive trend of 49% of women in the top 5%. This figure does not include teaching staff. The Council's workforce is approximately 75% female and 25% male. We are committed to monitoring gender information and determining any appropriate positive action.	50.0%	17/18 Rank 25 (Bottom Quartile). 16/17 Rank 26 (Bottom Quartile). 15/16 Rank 29 (Bottom Quartile). 14/15 Rank 25 (Bottom Quartile).

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
CORP3c	Corporate Indicator - The gender pay gap between average hourly rate of pay for male and female - all council employees	2.32%	3.03%	3.16%	3.54%	3.94%			**18/19**: Data only The gender pay gap indicator is a measurement of average female pay versus average male pay within the organisation and the figures show that the Council has more male staff at higher rates of pay by 3.94%.		17/18 Rank 14 (Second Quartile). 16/17 Rank 14 (Second Quartile). 15/16 Rank 18 (Third Quartile)
CORP6a	Corporate Indicator - Teachers Sickness Absence Days (Cumulative) (LGBF)	4.59 days	1.23 days	1.48 days	3.46 days	5.15 days			**18/19:** Data only The Council has started negotiations with the teaching trade unions in relation to introducing a revised Maximising Attendance at Work Policy it is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future.		17/18 Rank 4 (TOP Quartile). 16/17 Rank 3 (Top Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 6 (Top Quartile).
CORP6b	Corporate Indicator - Local Government Employees (except teachers) sickness absence days (CUMULATIVE) (LGBF)	8.59 days	2.41 days	4.35 days	7.45 days	9.86 days			**18/19**: Data only It is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future.		17/18 Rank 2 (TOP Quartile). 16/17 Rank 7 (Top Quartile). 15/16 Rank 10 (Second Quartile). 14/15 Rank 11 (Second Quartile).

Finance and Integrated Service Support Service Risks

Midlothian

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
DS - School Security risks	Main risks are (1) data integrity failure in MIS applications (2) internet filter failure (3) network security within the schools' network (4) network security from outwith the schools network (5) viruses or similar attack (6) inadequate application security and (7) lack of segregated security levels for system administrators. **Risk Cause:** **Risk Event:** **Risk Effect:**	***Data integrity MIS applications*** 01 - data integrity policy 02 - data audit procedures ***Internet Filter Failure*** 01 - external solution on best solution 02 - daily filter testing, 24x7 monitoring 03 - default setting on failure to no traffic 04 - support contract in place ***Network Security within*** 01 - security audit 02 - staff training 03 - advice from consultants ***Network security outwith*** 01 - security audit 02 - staff training 03 - advice from consultants ***Viruses*** 01 - counter measures in place 02 - support contract in place with supplier 03 - system monitoring 04 - security audit ***Application Security*** 01 - security procedures implemented at school level 02 - investigate whether application can be monitored remotely then apply any appropriate S***ecurity procedures*** 03 - risk to be assessed further during SEEMIS implementation ***Segregated Security Levels*** 01 -	⚠		

🔴 Alert   🟠 High Risk   🟡 Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
GENERIC - Information Management and GDPR compliance	Roll out of GDPR ineffective **Risk Cause:** Ineffective procedures or failure to follow procedures. **Risk Event:** Data breach. **Risk Effect:** Potential fine.	01 - GDPR given corporate focus and priority 02 - Divisional Information Management Group 03 - GDPR Policy 04 - Information Security Strategy 05 - GDPR mandatory training and awareness	⚠️		
DS - Staffing levels and impact on service	**Risk Cause:** Difficulty recruiting competent staff in a timely manner, and retaining existing staff. **Risk Event:** Market conditions and other external factors can favour Contract based staff. **Risk Effect:** Challenges making permanent appointments within the service and retaining staff.	***Recruitment*** 01 - Acting up possibilities 02 - Work programmes detailed and shared 03 - Procedures for reallocating staff 04 - Prioritise workload in times of staff shortages ***Retention*** 01 - Exit interview data review ***Absence*** 01 - Annual leave and flexileave authorised by line manager 02 - Absence management policy and procedure notified to all staff 03 - Procedure for authorising overtime re back fill ***Training*** 01 - PDP/CPD 02 - Training budget 03 - Development of internal training programme	🔴		
DS - Professional practice risks	The main risks are (1) failing to carry out day to day tasks and (2) failing to meet data extraction and exchange timetables as a result of potential staffing, technical and other factors. **Risk Cause:** **Risk Event:** **Risk Effect:**	***Day to day tasks*** 01 - Provide breakdown of daily duties 02 - Monitor feedback - Schools 03 - Monitoring procedures in place 04 - Staff training ***Data extraction and exchange*** 01 - Programme agreed with SEED 02 - Staffing in place to meet timetable 03 - Alternative staffing in place	⚠️		
DS - Recovery of Service after Major Incident	**Risk Cause:** outbreak of fire in comms room, 3 party failure from supplier. power failure in major/minor sites,	***Data back up/recovery*** 01 - procedure 02 - information shared with staff	⚠️		

🔴 Alert 🟠 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	infrastructure failure (WAN), incompatibility between corporate and schools ICT systems **Risk Event:** **Risk Effect:** application failure affecting school and central operations The main risks are (1) data back up and recovery (2) application failure affecting school and central operations (3) outbreak of fire in comms room (4) cabling difficulties in schools (5) loss of major hub sites (6) failure to support online services (7) smartcard application failure affecting school operations (8) infrastructure failure (INTERCONNECT) (9) loss of minor hub sites (10) power failure in major/minor sites (11) infrastructure failure (WAN) (12) email failure (13) infrastructure failure (LAN) (14) major component failure (15) other major service failure (16) failed environmental controls (17) incompatibility between corporate and schools ICT systems and (18) hostile environment in comms room.	back up security 03 - Generic IT Business Continuity Plan ***Application failure*** 01 - local support in place 02 - external support contract in place 03 - liaison with other education authorities ***Fire in Comms Room*** 01 - fire safety policy//guidance from H&S 02 - fire risk assessment 03 - fire detection equipment 04 - envoironmental monitoring equipment in place ***Cabling difficulties in schools*** 01 - TSO route planning with contractor 02 - Asbestos register alert on all appropriate orders 03 - partner working with Commercial ***Loss of Major Hub Sites*** 01 - Greenhall, Dalkeith Campus BC plans 02 - WAN disaster recovery plan 03 - Resilience reviews ***Online Services*** 01 - Quality of on-line services monitored by EO ***Smartcard*** 01 - System monitored by Education and Commercial Services 02 - Support contract in place ***InterConnect*** 01 - National SSDN contract in place 02 - 24x7 monitoring 03 - resilience ***Minor Hub sites*** 01 - WAN disaster recovery 02 - resilience ***Power failure - major/minor sites*** 01 - power supply recovery plan 02 - UPS on critical services ***WAN*** 01 - contracts with suppliers 02 - 24 x 7 monitoring			

Alert   High Risk   Warning   OK   Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		03 - resilience ***E-mail*** 01 - daily system testing, 24x7 monitoring 02 - external support contract 03 - external consultancy on best solution ***LAN*** 01 - 10x5 monitoring 02 - swap out procedure 03 - resilience ***Major Components*** 01 - support contracts 02 - staff training 03 - resilience ***Other Major Service Failure*** 01 - daily system test, 24x7 monitoring 02 - external support contract 03 - external consultancy on best solution ***Environmental Controls*** 01 - Financial directive 02 - IT intranet guidance 03 - knowledge of procedures, staff and training ***Corporate and Education ICT*** 01 - regular contact 02 - standards compliance 03 - Head of It/EO monitoring ***Hostile environment in Comms Room*** 01 - environ monitoring equipment 02 - Duty Officer			
Revenues - Improving Sundry Debts collection performance	This risk is to consider the procedures in place to ensure we maximise the revenue collected through fees, charges and other sundry debts. **Risk Cause:** **Risk Event:** **Risk Effect:**	The main internal controls are:- 01 - New software procured/installed/rolled out successfully 02 - Internal Control Principles agreed by the Project Board and disseminated to Divisions to decide how they are going to comply 03 - Significantly improved management information disseminated on a regular basis to divisional	⚠		

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Alert 🔺 High Risk ⚠ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
		managers - debt age analysis, credit notes, holds etc 04 - Regular user group meetings 05 - CMT, Corporate DMT and Revenues MT have bought in and been involved in the improvement plan. 06 - Review of debt management performance conducted 07 - Write off of old debt carried out, to cleanse the system 08 - Integra training carried out for Revenues Control Team and Users 09 - Part time Arrears officer recruited to enable split of function from systems administration carried out by Systems Control team. 10 - Procedures for regular transfer of debt to Sheriff Officer for recovery. 11 - Changes to recovery strategy in line with organisation restructure 12 - Extending payment methods through sundry debt collection 13 - Split of duties between Systems Control and Arrears changing responsibilities and targetted approach at recovery of debt. In addition, whilst not an Internal Control as such, the Internal Audit team reviewed divisional matters like finding new pay as you opportunities (no invoices), segregation of duties, use of AR requisition forms, credit notes, holds etc which will enhance the internal controls above.			
Secretariat Risks	The Secretariat function is required to adhere strictly to legisation and timetables and is also responsible for collecting fees associated with civic government licensing. There are therefore risks in ensuring this is administered accurately and timeously.	The main internal controls to mitigate the identified risks are:- 01 - well trained and well established staff, low turnover of Clerks in recent past 02 - clear and well established procedures for staff to follow	⚠		

🔴 Alert 🟠 High Risk 🟡 Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Cause: **Risk Event:** **Risk Effect:**	03 - assistance can be provided from business admin section to provide support cover 04 - well established Elections procedures in accordance with statute			
Licensing risks (liquor and civic government)	**Risk Cause:** Human error, staffing shortage. **Risk Event:** Not getting applications to consultees and decision making body **Risk Effect:** Failure to process licence applications and controls	The main headline controls are: 01 - well established and well trained staff 02 - Idox management system operating features	⚠️		
DS - Limited staffing resources to meet the IT demands of the Council/inadequate forum for deciding which computer projects are a priority	**Risk Cause:** demands for projects are often not properly prioritised, there is no effective forum to decide which computer projects are to be prioritised. IT may not be involved in computer projects **Risk Event:** **Risk Effect:** There are two issues (a) constrained in expanding/sustaining staffing resource and (b) demands for projects are often not properly prioritised and there is no effective forum to decide which computer projects are to be prioritised. Additionally IT may not be involved in computer projects. There are day to day demands on the IT service as demand for computing increases.	The main headline controls are that:- 01 - Generally Projects only commence when IT resource is available which may mean important computer projects are delayed 02- Occasionally an external project resource is commissioned eg Social Work MIS 03 - Balancing resources against competing demands 04 - Use of Agency staff where required, but this is currently subject to an embargo 05 - New Projects approved \ initiated via Digital Strategy Group \ CMT	🔴		
DS - Information Security and closing any immediate gaps; isolated incident that becomes high profile.	This is the risk of not protecting sensitive information due to inter agency working, data sharing, remote and mobile accesses. The risk is reducing as various initiatives are underway, or have been completed, but the impact of any non compliance is likely to be high.	Internal controls include:- 01 - Access Controls 02 - Policies and procedures 03 - Software management 04 - Compliance with industry standards (ISO) 05 - Security and risk management reporting (inc separate risk register) 06 - Information management group & IMG Action Plan	⚠️		

🔴 Alert　🟠 High Risk　⚠️ Warning　✅ OK　❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Cause: **Risk Event:** **Risk Effect:**	07 - Risk Management group 08 - New Projects approved \ initiated via Digital Strategy Group \ CMT			
DS - Compliance - Regulatory, Contractual and Legal	This is the risk of censure and includes DPA, FOI, RIPSA, Computer Misuse, Health and Safety,GSX, NHS, Police q **Risk Cause:** **Risk Event:** **Risk Effect:**	The main internal controls are:- 01 - Identify areas of poor practice 02 - Educate users with their Information Security responsibilities 03 - Undertake risk assessment of compliance responsibilities for GSX, ViSOR, PLDN and SCRO 04 - Policies and Guidelines exist to maintain compliance 05 - New Projects approved \ initiated via Digital Strategy Group \ CMT	🔺		
DS - Computer Business Continuity Management	Computers play a major role in continuity of business and any major disruption would be crucial and jeopardise the Council's approach to the Civil Contingencies Act **Risk Cause:** **Risk Event:** **Risk Effect:**	The main internal controls are:- 01 - List of critical business systems contained with a generic IT BC Plan 02 - Routine of reporting IT BC into CMT and BCG 03 - Ongoing programme of resilience 04 - Corporate BC plan 05 - Back ups of data and systems on an incremental and full basis. 06 - Specific risk assessment adopted by the Audit Committee	🔺		
Communications and Marketing - Divisions not acting corporately in communications matters	It is important that the Council's communications are handled corporately and the communications procedures set out this approach. **Risk Cause:** **Risk Event:** **Risk Effect:**	The main internal controls to mitigate the identified risks are:- 1 - named Communications & Marketing contact(s) for each Division 2 - revised Communications Standards launched early 2011 3 - informal monitoring and highlighting issues to Divisions 4 - planned launch of Communications & Marketing Strategy	⚠️		
Communications and Marketing - Maintaining good relations with media	It is important for the council to maintain its good relationship with all strands of the media to minimise possible reputation damage and possible financial consequences.	The main internal controls to mitigate the identified risks are:- 1 - continue to maintain good liaison with third party/media contacts, understanding each other's requirements	⚠️		

🔴 Alert   🔺 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	Risk Cause: **Risk Event:** **Risk Effect:**	2 - endeavour to adhere to deadlines requested, where reasonable/possible, with co-operation from Divisions where necessary			
INFOSEC - Access Control - Accessing sensitive IT systems from mobile devices	Council Smartphones and Laptops connecting remotely to IT systems may lead to the unauthorised access or loss of sensitive data	01 - Smartphone technology secured to CESG standards 02 - Mobile access security policies and user acceptance forms signed. 03 - Laptops utilise Direct Access.	⚠️		
INFOSEC - Communications and Operations Management - Malicious software, Phishing and Spam	Viruses and malicious software can infect the Councils network from a number of sources such as email, portable media, internet, third party networks, and unauthorised hosts, potentially reeking havoc on Council IT systems.	01 - All users using IE11 02 - ISA Server blocks certain malicious code 03 -Websense mail filter blocks certain malicious code 04 - Microsoft PC patches are applied to via SCCM each month 05 - Microsoft server patches should be manually applied each month 06 - Desktop Microsoft Office 2007 is patched each month via System Centre 07 - Acrobat routinely updated and pushed to PC's via System Centre 08 -Websense, Mailmarshal and Trend Micro on exchange filters emails externally routing email 09 - Sophos anti virus is installed on all servers and PC's 10 - Users warned of the dangers of phishing emails and social engineering attacks via intranet and email warnings	⚠️		
INFOSEC - Physical and Environmental Security - Unauthorised building access	Concerns with ease of unauthorised site access e.g. tailgaiting .Visitor management poor.	01 - Council building security policy. 02 - New door entry system 03 - New visitor management system 04 - Security posters 05 - Information Security Lead meets every 6 months with Head of property and facilities to discuss property concerns 06 - Private I Security Campaign	⚠️		
INFOSEC - Compliance - Electronic Data Loss	Council expectations of accessing information anytime, anyplace, anywhere significantly increases the	Third Parties	⚠️		

🔴 Alert 🔶 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	chances of its loss. As does the sharing of information with third parties, third party network connections and the failure to follow secure procedures or seek advice.	01 - NDA - Non disclosure agreement outlines 3rd party responsibilities when handling Council data. 02 - Data sharing agreements 03 - Codes of connection Email 04 - Limit outbound email size to 30MB 05 - IT acceptable use policy provides information on the inappropriate use of sensitive information and supporting guidelines 06 - Egress email encryption 07 - Guidance available to users on sending sensitive data by email Remote Access 08 - Direct Access CESG CPA approved solution 09 - Remote Access Policy 10 - Smartphone policy 11 - Laptop Policy 12 - Memory stick policy Encryption 13- All Council laptops are encrypted 14 - All Council Memory sticks are encrypted 15 - All Smartphone devices are encrypted			
INFOSEC - Access Control - Cyber Security Attack	The Council is at significant risk of cyber attack from Ransomware, Phishing emails, APT's. DDOS attacks, Hacking and social engineering exploits.	01 - IT Acceptable Use Policy covers password use and logon responsbilities 02 - Cross referencing multi system logs - e.g. audit logs, CCTV, door access, flexi etc	🔶		
ISO27001- Security Policy - Existing security policies should be reviewed	Information Security policies must be reviewed at least every 2 years to maintain their relevancy and accuracy.	01 - Revise all security security policies older than 3 years old.	⚠️		
COMPLIANCE - Compliance - PSN Code of Connection	In order to maintain connectivity to the PSN network a series of security controls must be met. As CESG security standards are continually raised, It's increasingly difficult to	01 - GSX 2008 code of connection approved by CESG	⚠️		

🔴 Alert   🔶 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
	balance this with flexible working practices (remote/mobile access), collaborative working and data sharing promoted by the Council and therefore increasingly difficult to maintain compliance.				

🔴 Alert   🔺 High Risk   ⚠️ Warning   ✅ OK   ❓ Unknown

Published Local Government Benchmarking Framework – Finance and Integrated Service Support

Corporate Services

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
CORP1	Corporate Indicator - Central Support services as a % of Total Gross expenditure (LGBF)	4.53%	4.49%	3.93%	4.8%	6.03%	6.03%	6.34%	4.47%	17/18 Rank 18 (Third Quartile). 16/17 Rank 26 (Bottom Quartile). 15/16 Rank 22 (Third Quartile). 14/15 Rank 21 (Third Quartile)
CORP3b	Corporate Indicator - The Percentage of council employees in top 5% of earners that are women (LGBF)	44.6%	41.6%	45.6%	45.3%	47.7%	44.6%	47.0%	49.0%	17/18 Rank 25 (Bottom Quartile). 16/17 Rank 26 (Bottom Quartile). 15/16 Rank 29 (Bottom Quartile). 14/15 Rank 25 (Bottom Quartile).
CORP3c	Corporate Indicator - The gender pay gap between average hourly rate of pay for male and female - all council employees	New for 2015/16					4.59%	2.97%	2.32%	17/18 Rank 14 (Second Quartile). 16/17 Rank 14 (Second Quartile). 15/16 Rank 18 (Third Quartile)
CORP6a	Corporate Indicator - Teachers Sickness Absence Days (Cumulative) (LGBF)	4.89 days	4.79 days	5.21 days	5.25 days	5.50 days	4.17 days	4.94 days	4.59 days	17/18 Rank 4 (TOP Quartile). 16/17 Rank 3 (Top Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 6 (Top Quartile).
CORP6b	Corporate Indicator - Local Government Employees (except teachers) sickness absence days (CUMULATIVE) (LGBF)	9.63 days	9.97 days	10.47 days	10.04 days	10.11 days	9.90 days	9.64 days	8.59 days	17/18 Rank 2 (TOP Quartile). 16/17 Rank 7 (Top Quartile). 15/16 Rank 10 (Second Quartile). 14/15 Rank 11 (Second Quartile).
CORP8	Corporate Indicator - Percentage of invoices sampled and paid within 30 days (LGBF)	81.2%	83.1%	93.3%	93.4%	93.0%	89.7%	87.4%	93.1%	17/18 Rank 18 (Third Quartile). 16/17 Rank 25 (Bottom Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 15 (Second Quartile).

Economic Development and Planning

| Code | Title | 2010/11 | 2011/12 | 2012/13 | 2013/14 | 2014/15 | 2015/16 | 2016/17 | 2017/18 | External Comparison |
		Value	Value	Value	Value	Value	Value	Value	Value	
ECON4	Percentage of procurement spent on local enterprises	18.86%	24.87%	18.39%	22.4%	19.97%	17.96%	12.85%	18.07%	17/18 Rank 26 (Bottom Quartile). 16/17 Rank 30 (Bottom Quartile). 15/16 Rank 27 (Bottom Quartile). 14/15 Rank 23 (Third Quartile)

Property and Facilities Management Performance Report Quarter Four 2018/19

Progress in delivery of strategic outcomes

Midlothian Council needs to address the demographic growth by maximising its use of assets, whilst changing service design and delivery.

In order to deal with the future demands of a growing and ageing population, Property and Facilities Management continues to adopt a Transformation approach, where we become more efficient and at the same time deliver changes to improve the way we work, the services we deliver and the quality of life experienced by local people.

These changes are evidenced in the delivery of new affordable homes, new schools, improved positive destinations for school leavers and the arrival of the Borders railway as well as new initiatives such as Destination Hillend and partnerships with Third Parties to maximise returns from our land and property portfolio.

The vision for Property and Facilities Management continues to be one of the delivery of major projects, transforming service delivery and exploring alternative delivery models.

These are supported by:

- Delivering Excellence
- The Council's Financial Strategy
- The Council's Capital Strategy (Including Housing Revenue account)
- The Learning Estate Strategy

The focus for Property and Facilities Management is to address the above through:

- Maximising the utilisation of the Council's property and land portfolio including progressing sites for the building of additional Social Housing.
- Rationalisation of the Council office and depot estate to a modern fit for purpose portfolio operating from the minimum number of buildings utilising flexible ways of working whilst retaining a customer focus.
- Develop a learning estate strategy and programme to deliver Education's vision of centres of excellence and a world class status for facilities which support and enhance this aim.
- Move towards an asset management plan identifying planned preventative maintenance regimes for properties similar to those operated in our PPP contracts.
- Review Building Facility Management Services including the development of Integrated Facilities.
- Introduce renewable sources of energy production to reduce utility costs and the carbon tax including utilising available energy for district heating.
- Optimise the use of Property assets including industrial estates.
- Seek commercial opportunities and trading with a wide range of organisations including private and public sector partners.
- Explore opportunities for partnering arrangements with public and private sector organisations.
- Deliver and promote healthy nutrition and expand non-core catering services.
- Redesign service level agreements between facilities services and their clients to ensure service needs are maintained but at a realistic and efficient level including sharing janitorial services between Primary School clusters.
- Minimise the level of subsidy across services, with a particular emphasis on Sport and Leisure and Facilities Services, towards a self-sustaining status.
- Review management services with a view to amalgamation where similar disciplines cover a range of functions.

The following successes were achieved by the services in 18/19:

Sport and Leisure

The Sport and Physical Activity Strategy for Midlothian Council was developed and launched this year. The strategy provides direction for the councils approach to raising awareness of the benefits of physical activity and encouraging the people of Midlothian to be more active. Strategic aims:

- *Increase the number of people of all ages participating in active travel, active recreation and sport.*
- *Work with schools and community groups to develop and support opportunities for lifelong participation in physical activity and sport for all.*
- *Develop facilities and the built and natural environment to encourage increased participation in physical activities.*
- *Grow and develop the physical activity and sport workforce.*
- *Work with internal and external partners to increase participation in physical activity and sport.*
- *Raise the profile and public awareness of the importance of physical activity and opportunities to participate.*

A comprehensive Business Plan was developed in conjunction with the Sport and Physical Activity strategy and sets out the services aims and objectives for the next year including a detailed action plan. This is now the subject of a "bottom up" service review during 2019/20.

In support of the Council's Digital strategy that our digital services will be designed around the customer, the new Leisure Management System (Legend) went live on the 17th of April 2018 with online services going live on 19th March 2019. The introduction of a new front-of-house system for the council's leisure facilities offers customers online services to make bookings and payments.

Volunteer involvement within the Ageing Well programme continues to develop through the involvement of its 55 volunteers. The total volunteer hours contributed to the project this quarter was 1,016, this equates to just under £70,000 of value to the council in a year.

NHS funding has been agreed for the Midlothian Active Choices programme which is a referral service for adults in Midlothian who are currently suffering from mid/moderate mental health conditions, weight management problems, or long term or chronic illnesses. Successful promotion of Midlothian Active Choices through NHS direct access team, psychological services, health in mind, access point team, men's sports sheds and way ahead group has shown a significant increase in class attendances increasing by 2,170 from 17/18. The success of this programme shows 141 of 211 have converted to ToneZone memberships.

Destination Hillend business case is now complete and public and partner consultation has taken place over the last few months. Planning consultants have been appointed and they will produce to start the planning process. There will be a report to Council in May recommending to move to the next stage in the development.

Three Midlothian schools received the Sportscotland Gold School Sport Award for 2018-2020; Cornbank Primary, Lasswade High School and Kings Park receiving Gold following revalidation from 2016. Lasswade was the first secondary school in Midlothian and one of only 18% in Scotland to have been awarded the award. The Gold School Sport Award is in recognition of the schools' achievements in putting sport at the heart of their schools planning, practice and ethos. The Gold Award also highlights the schools have shown excellent practice across the core areas of the award and demonstrated an on-going commitment to increase young people's opportunities and engagement in physical education, school sport and leadership and provide clear pathways to life-long participation in sport.

Sportscotland have committed to a new 1-year Partnership Agreement with Midlothian Council. This includes a forward investment commitment to Active Schools and Community Sport Hubs. This commitment for a further 1-year allows the service to move to becoming self-sustaining by adding income to its core objectives.

In support of Midlothian's commitment to provide opportunities to improve health and wellbeing, summer sporting events were programmed to encourage children to get involved in activities such as Snowsports, Tubing, Sports, Diving and Fitness. Leisure centres offered free swimming sessions. In addition, our Sports Hub Officer along with life-long learning held successful free sporting summer camps for children.

Midlothian Active Schools supported Midlothian Women & Girls in Sport Week, which is led by the Scottish Government's Women and Girls in Sport Advisory Board. The aim was to raise awareness of increasing opportunities in sport and physical activity among women and girls, and highlighting the solutions to overcoming the barriers to participation.

Building Services

The new Loanhead Centre was awarded the "Community Development Project of the Year" at the Scottish Property Awards in 2018. The new Loanhead Centre community project was delivered in partnership with the community using a 'done with' rather than 'done to' approach. From initial Public consultation, Midlothian Council and the design team worked with the community through detailed conversations to deliver a project which met the needs of the community. The process began with a simple choice between delivering just a replacement school and taking forward the wider opportunity for a combined community facility on Council land adjacent to the local leisure centre.

The new Newbattle High School, was handed over successfully and under budget with no delay to the school programme. The centre was awarded "Development of the Year (Public Building) at the Scottish Property Awards 2019. The award was received for the development that has contributed most to the improvement of a local community. The new facility has allowed Midlothian Council to continue its ambition to create a world-class education system by pioneering a new Digital Centre of Excellence, the first of its kind in Scotland.

Building Services identified the recovery of Scottish Water contributions to the value of £500,000 from projects over 5 years old. £380,000 has been recovered through the years.

Successful completion of the installation of new windows and upgraded insulation to Penicuik Town Hall as part of the total funding of £5,635,000 secured to deliver energy efficiency projects since 2011.

Public realm improvements to Gorebridge Main Street were completed during 2018/19.

Lawfield Primary School extension outline design and costs have been negotiated and agreed with the PPP provider as an early phase of the extending Learning Estate.

Funding of £568,368 from the External Window Insulation Scheme (EWI) has been allocated to Midlothian Council to date, with projects in Penicuik and Mayfield ongoing.

Modular Units at Burnbrae Nursery, Danderhall Nursery, Mayfield Nursery, Lasswade Primary and St. David's Primary have all been designed, built and handed over and are now operational.

Facility Services

Catering Services participated in the successful launch and implementation of the Parent Pay payment system, allowing parents to pay for school lunches on-line. Parent Pay on-line system is running in all primary school for payment and recording of school meals. This project involved all kitchens having PC access which makes communication and distribution of information quicker and more cost effective.

Training has been a focus this year. All catering staff have updated Child Protection training. 5 staff achieved their REHIS Intermediate Food Hygiene Certificate, 8 staff achieved their European Computer Driving Licence which turn improved communication, reduced mailing costs and provided better access to corporate information.

The service provided catering for a number of events this year, including Newbattle High School opening, including its public cafe, summer meals programme at Newbattle, Scottish Youth Parliament weekend at Newbattle and the Carnethy Hill Race.

As part of the Early Years expansion Pilot, Catering are now providing a meals service to another 7 nurseries from February 2019, at present an extra 188 meals per day.

Successful negotiation and restructure of the Janitorial Service, implementation of the revised Management Team and restructure of the Building Cleaning within Dalkeith Office Campus following on from the Facilities Review.

Co-ordinated partnership working with Property Maintenance department ensured the completion of the holiday works program and partnership working continues with Melville Housing and NHS.

Re-negotiation of the Skanska contract and with Education on the New Service Level Agreement were implemented in August 2018.

Challenges and Risks

Sport and Leisure

Sport and Leisure Services have started the bottom up Cross Cutting Service Review which will see savings of £200,000 plus being realised.

A workforce reduction exercise within the leisure centres to effect a budget saving of £100,000 is underway whilst balancing the customers' needs and maintaining the membership and footfall.

Plans continue with Halls and Pavilions savings within the leisure services to effect a budget saving of £100,000 against the Services with Communities project. This involves working with clubs and existing tenants on Community Asset Transfers and long leases.

Impact on Active Golden Years ToneZone membership following the price increase continues to be addressed. Letters and communication went out to customers and posters were placed in leisure centres in advance of the price increase on the first of December 2018. Quarter four Golden Years membership numbers have now recovered with membership stability being restored. The overall ToneZone direct debit membership sits at 5,354 at present and continues to show signs of growth.

Building Services

Continued challenges to reduce operating costs whilst maintaining frontline services and buildings. This will be addressed by reviewing all operational/procurement procedures and prioritising work allocations.

Delivery of Major works programmes with a small internal team against a rising market of costs and labour shortage. Four Primary schools, Extensions to Sacred heart and Cuiken Primary schools, New care home at Dundas Buildings, Phase 2 and 3 Housing sites, Woodburn Hub, EWIM 2 inclusive of Buccleuch house. This will be addressed by monitoring workloads and pressure on staff making sure the correct resources are available to assist in these projects.

Difficulty in obtaining sites for the new house build programme and advancing the new house build programme to get more units on site for 2022. Building Services along with Property Assets are in the process of identifying available sites in the areas of housing need. Missives have been entered with Miller Homes to purchase 23 pre-constructed houses and will be available in 2019. Further negotiations are ongoing with other developers at this time.

Discussions are ongoing with planning and education in relation to planning issues about the Learning Estates Strategy and the Council House build Programme. Negotiations have commenced to purchase land at Kippielaw to build a new school. This would allow the schooling allocation for new housing on a number of sites in this area to be satisfied. Dialogue with Education colleagues continues to provide solutions to the Learning Estate Strategy and Capital Plan.

Ensuring contracts, processes and procedures are in place if there is no solution to Brexit continues to be a priority.

Facility Services

With reduced staffing in Facilities Services' Catering, Cleaning and Janitorial services following service reviews, it is becoming extremely challenging to cover periods of high sickness absence and holidays.

Meeting the needs of the Early Years expansion programme, extra resources required for staff, equipment and organisation of this service is an emerging challenge which is now being planned.

Supporting the supervisors during the period of change, guidance on ParentPay, computer skills and changes within the management structure has become a priority.
Managing the budget in this period of expansion for the service and background of financial reductions within the Council as a whole. This has caused issues for getting information and resources needed to manage the service whilst maintaining staff morale.

Property Assets

A current challenge is to rationalise existing processes and seek to develop efficient electronic based processes to allow staff to focus on value added and customer facing activities.

Ensuring that the revised Asset Valuation process meets the External Auditors requirements and working with Finance colleagues to achieve this.
Given the Council's financial pressures, ways to secure match funding to enable the Millerhill /Shawfair Low Carbon Infrastructure Project (LCIPT) are being sought. The aim is to proceed with the capital investment in partnership

whilst maintaining a long term Council financial return on the investment as well as wider environmental and energy security returns.

Acting on behalf of the Housing Project Team in seeking to resolve issues and objections from third parties regarding the proposed development of Site 47 Kirkhill, Penicuik and Site 110, Clerk Street, Loanhead.

Overall Budget Challenges

Continued challenges are faced by all teams in delivering services within budget, with current actions in financial management to recover a balanced budget. These include:
- identifying vacancies which do not require backfilling;
- reducing costs in underspent budget areas;
- limiting building maintenance to essential items only;
- reviewed cleaning specifications;
- promotion of cafe and leisure facilities to increase income;
- service reviews to address management structures;
- maximising income to become self sustaining;
- utilising new technology to provide accurate data allowing opening times and staff rotas to be adjusted;
- maximising returns from PPP contracts.

There are unavoidable additional/ increased costs in energy and non-domestic rates, however new energy policies are being developed to minimise the consumption and invest in renewable sources of energy. Surplus buildings and land are being identified for asset transfer or sale.

Property & Facilities Management PI summary 2018/19

Making the Best Use of our Resources											

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
01. Manage budget effectively	Performance against revenue budget	£14.604m	£13.750m	£13.710m	£14.002m	N/A		**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£12.818m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	7.54	2.01	3.81	7.34	9.64	🛑	**18/19**: Off Target The HR team continue to work with the Head of Service and Managers to offer support and guidance to address levels of sickness absence. More frequent meetings (from 6 weekly to 4 weekly as of Quarter 4 this year) are being held with key service managers and HR where sickness levels are high e.g. Catering where hygiene regulations prohibit staff attending working following sickness/illness. Sickness absences are currently being reviewed to ensure the most appropriate actions are in place to effectively manage attendance in areas of higher absence.	⬇	7.54	Number of days lost (cumulative)	5,797.03
											Average number of FTE in service (year to date)	601.57

Corporate Health											

Priorities	Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
03. Complete all service priorities	% of service priorities on target / completed, of the total number	96.3%	100%	95.65%	100%	95.65%	✅	**18/19**: On Target	⬇	90%	Number of service & corporate priority actions	23
											Number of service & corporate priority	22

6

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	Status	Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
											actions on tgt/completed	
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	82%	92%	86%	84%	80%	🛑	**18/19**: Off Target	⬇	85%	Number received (cumulative)	16,023
											Number paid within 30 days (cumulative)	12,852
05. Improve PI performance	% of PIs that are on target/ have reached their target.	69.44%	82.76%	82.76%	82.76%	68.97%	🛑	**18/19**: Off Target 9 Performance indicators off target. Services are working to bring these on target where possible. Please see individual performance indicators for more detail.	⬇	90%	Number on tgt/complete	20
											Total number of PI's	29
06. Control risk	% of high risks that have been reviewed in the last quarter	100%	0%	0%	0%	0%	✅	**18/19**: On Target No high risks identified.	⬇	100%	Number of high risks reviewed in the last quarter	0
											Number of high risks	0

Improving for the Future							

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
07. Implement improvement plans	% of internal/external audit actions progressing on target.	50%	100%	100%	100%	100%	✅	**18/19**: On Target	⬆	90%	Number of internal/external audit actions on target or complete	2
											Number of internal/external audit actions in progress	2

Property and Facilities Management Complaints Indicator Summary

					Commitment to valuing complaints			

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (cumulative)	753	193	332	486	603	📈	**18/19**: Data only	
Number of complaints closed in the year		164	316	472	598	📈	**18/19**: Data only 598 out of 603 completed.	
Number of complaints upheld (cumulative)		120	222	312	393	📈	**18/19**: Data only	
Number of complaints partially upheld (cumulative)		0	12	22	32	📈		
Number of complaints not upheld (cumulative)		3	68	117	143	📈		
Average time in working days to respond to complaints at stage 1	4.6	1.8	3.1	3.41	4.2	✅	**18/19**: On Target	5
Average time in working days to respond to complaints at stage 2	21.5	0	0	0	0	✅	**18/19**: No stage 2 complaints this year. 5 complaints escalated further and complete within 20 working days.	20
Average time in working days for a full response for escalated complaints		0	1	0.75	2.8	✅	**18/19**: On Target	20
Percentage of complaints at stage 1 complete within 5 working days	84.81%	92.68%	92.38%	88.68%	87.69%	🛑	**18/19**: Off Target Meetings held with Service Managers, Heads of Service and Performance Officer to review complaint statistics by service. Performance Officer will work with services to review training requirements to extend stage 1 complaints where complex in nature.	95%
Percentage of complaints at stage 2 complete within 20 working days	75%	0%	0%	0%	0%	🛑	**18/19**: No stage 2 complaints this year. 5 complaints escalated further and complete within 20 working days.	95%
Percentage of complaints escalated and complete within 20 working days		0%	100%	75%	100%	✅	**18/19**: On Target	95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		0	0	0	0	📈	**18/19**: Data only	

Property & Facilities Management Action Report 2018/19

Midlothian

	01. Improve children and young people's health and wellbeing				

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.1.1	Provide high quality nutritional school meals	31-Mar-2019	✅	100%	**18/19**: Complete Meal provision continues to meet to the nutrition targets set by Scottish Government. Nutritional inspection at Gorebridge and St David's High School, recommendations followed up.
PFM.P.1.2	Promote and deliver Active Schools programmes to school children	31-Mar-2019	✅	100%	**18/19**: Complete Active Schools programmes promoted through printed materials (newsletters, posters, programme letters), verbal communications (parents evenings, school assemblies, parent teach meetings, parent council meetings, staff meetings, school information evenings) and electronic media (Active Midlothian website, @active_mid Twitter, Midlothian Facebook, electronic newsletter). All schools pupils from P1 – S6 offered Active Schools school and cluster programmes with a range of activities/sports attended by 1,802 distinct participants and 13,592 participant sessions. A diverse range of 26 different activities offered as part of the Active Schools extra-curricular programme to meet the needs of all. 207 Activity Session Blocks totalling 1,899 Activity Sessions delivered through Active Schools programmes.
PFM.P.1.3	Undertake programme of work to improve/upgrade Primary School Estate	31-Mar-2019	✅	100%	**18/19**: Complete **Paradykes** Project complete, contractor still working through year end defects work. Retention being held until defects complete. **Roslin** Project complete in full. This project should now be closed. **Hopefield Joint Campus** Project has commenced on site and progress remains on programme for completion Jan 29th 2020.
PFM.P.1.4	Undertake programme of work to deliver improvement/upgrade High School Estate	31-Mar-2019	✅	100%	**18/19**: Complete **Newbattle** Project now in operational phase. Contractor now has a solution for the Combined Heat and Power (CHP) unit. They expect delivery of the required components in mid May to enable retro fit to begin.

02. Improve employability skills and sustained positive school leaver destinations for all young people

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.2.1	Maintain the percentage of trainees completing courses through training and employability sources	31-Mar-2019	✅	100%	**18/19**: Complete 29 trainees across services. For breakdown by service see performance indicators.

03. Deliver further affordable housing

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.3.1	Complete Phase 2 and Progress Phase 3 of capital plan new build programme	31-Mar-2019	✅	100%	**18/19**: Complete. 1 site in construction at this time: **23 Woodburn Terrace, Dalkeith** 10 units at Site. Start on site commenced August 2018. Completion date July 2020. Currently under pre-construction activities are: **32/34 Newbyres Crescent, Gorebridge** 75 units at Site. Contractor appointed October 2017. Pre-construction delayed due to further gas monitoring. Revised site start date late 2019. **53 Morris Road, Newtongrange** 79 units at Site. Contractor appointed December 2017. Delayed start due to issues with water main on site. Start on site now April 2019. Completion date late 2021. **47, Kirkhill Road, Penicuik** 21 units at Site. Start on site programmed for April 2019. Delayed start to due to legal matters relating to Bowling Club and access rights. Start on site now June 2019. Completion date mid 2020. **109, Conifer Road, Mayfield** 72 units at Site. Contractor appointed June 2019. Start on site mid 2019.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					Completion date early 2021. **110, Clerk Street, Loanhead** 28 units at Site. Start on site April 2019 now delayed due to land ownership issue. Completion date spring 2020. **115, Castlelaw Terrace, Bilston** 8 units at Site. Start on site January 2019. Completion date October 2019. Further procurement activity: **116 Newmills Road** 2 Stage D&B Tender Site. Consultants appointments Jan 2019, Preliminary tender stage completed. First stage tender document to issue April 2019. 2nd stage contractor on board May 2019. Likely start on site October 2019. **130 Newbattle High School** Provisional 120 units. Consultant appointments March 2019, Preliminary tender stage May 2019. First stage tender document to issue June 2019. 2nd stage contractor on board July 2019. Likely start on site December 2019. **39, Crichton Drive, Pathhead** 8 units at Site Out to tender April 2019. Likely tender award May 2019. On site target date of June 2019. Completion date early 2020. **117 Cockpen Terrace** SI report obtained – undergoing peer review. Out to tender ESPD Evaluation completed – only two bidders. Decision required whether to tender to two or re-tender. **87 High Street, Bonnyrigg** Demolition Tender award expected Feb 2019 delayed pending departure of tenant and removal of remaining contents. Demolition now likely to commence May 2019. Demolition Completion anticipated June 2019.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.3.2	Complete survey and report into EESSH compliance of Midlothian social housing. Strategy to be formulated to meet target by 2020.	31-Mar-2019	✅	100%	**18/19**: Complete Currently 87% of Midlothian Council Housing stock meet EESSH. Work streams in place to bring the remainder up to standard. 640 Exemptions.
PFM.P.3.3	Undertake programme of work to upgrade Council Houses to maintain the Scottish Housing Quality Standard.	31-Mar-2019	✅	100%	**18/19**: Complete Heating, windows, doors and roughcasting contract ongoing. Surveys for reactive repairs questionnaire have been updated. Repairs survey has been progressed through the use of the Councils Customer Satisfaction Measurement tool with reports being prepared and monitored via the Team Plan Reports.

04. Develop supports to people with long term conditions such as diabetes or stroke

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.4.1	Undertake adaptations to houses for those with specific needs	31-Mar-2019	✅	100%	**18/19**: Complete To the end of December 2018. 417 minor adaptations have been completed and 34 Major adaptations of ramps and wet floor bathrooms have been completed.

05. Support older people and those with disabilities to become more physically active

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.5.1	Promote and deliver Midlothian Active Choices (MAC) programmes	31-Mar-2019	✅	100%	**18/19**: Complete Presented to NHS Direct Access Team, Psychological Services, Health in Mind, Access Point Team, Men's Sports sheds and Way Ahead Group. Attended Steering group meetings for Type 2 Diabetes prevention and, Elderly Frailty and Weight Management in Midlothian.
PFM.P.5.2	Promote and deliver Ageing Well programmes to 50+ age groups	31-Mar-2019	✅	100%	**18/19**: Complete 41 classes offered by Ageing Well over 15 different activities in 19 different venues. There was 5,770 visits to the weekly classes showing an increase of 783 from last quarter. 297 took part in other events/taster sessions. The project has 55 volunteers and the total volunteer hours contributed to the project this quarter was 1,016 equating to over £15,000 of savings and £70,000 cumulative for year.
PFM.P.5.3	Promote and maintain uptake and use of leisure facilities	31-Mar-2019	✅	100%	**18/19**: Complete Extract from Tonezone Marketing Plan that is part of the Sport and Leisure Business Plan 2018/2019. January - Joining fee £10 February - Convert 1 month Xmas vouchers and Joining fee £10.00

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
					March - Annual membership offer, 1st – 15th, get March for £10.00 (no joining fee). Normal price from 16th. Refer a friend and try a class voucher: voucher to selected non-platinum members. Free swimming for all school children during the school holiday period. Annual Sports Awards - Once again this was a great success highlighting the sporting achievements over the past year for individuals, teams, coaches clubs and departments.
PFM.P.5.4	Delivery of high quality Healthy Living Service	31-Mar-2019	✅	100%	**18/19**: Complete Total direct debit membership is 5,354. Platinum 1,095, Gold 678, Silver 1,722, Bronze 475, AGY 687, Teenzone 311, Mac 6 month membership 215 and Mac Platinum 171.

06. Close the attainment gap between the most and least disadvantaged

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.6.1	Meet the educational needs of increased numbers of pupils in Midlothian by facilitating the implementation of the Learning Estate Strategy including adaptations and extensions to meet changing school and nursery rolls	31-Mar-2019	✅	100%	**18/19**: Complete Modular Nursery/classrooms complete. The next modular build project is the Extension to Burnbrae which is awaiting planning and building warrant approval. In the year we have delivered new nurseries at Burnbrae, Danderhall, and Mayfield and classrooms at Lasswade and St. David's primary school. Cuiken primary school extension is under construction.
PFM.P.6.2	Confirm primary school sites to be safeguarded with education	31-Mar-2019	✅	100%	**18/19**: Complete Additional new Learning Estate Strategy projects are progressing, i.e. Lawfield extension has been submitted for planning consent and feasibility studies have been undertaken for 10 sites and passed to Education for approval.

07. Support regeneration of town centres

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.7.1	Management and development of the Council's extensive land interests at Shawfair	31-Mar-2019	✅	100%	**18/19**: Complete Section 42 application by SLLP approved by Council in April 2018 subject to Conditions still to be purified. Revised master plan lodged with planning for new school and community Facilities.
PFM.P.7.2	Shawfair town centre amenities	31-Mar-2019	✅	100%	**18/19**: Complete Outline planning application to change the use of the land now lodged for Spring 2019. Community consultation event completed and land negotiation with Network Rail nearing completion.

08. Deliver efficient Services

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.8.1	Delivery of high quality Facilities Management Services	31-Mar-2019	✅	100%	**18/19**: Complete Body fluid training with Education completed in March. All new Caretakers successfully inducted into their new roles. 3 members of the Janitorial staff completed their pool plant training in March. A training plan was drafted in Dec 2018 and the training will continue to be carried out throughout the year.
PFM.P.8.2	Ensure existing facilities in PPP schools are maintained appropriately and the standards of the contracts are delivered	31-Mar-2019	✅	100%	**18/19**: Complete PPP contract monitoring, maintenance and life cycle works ongoing at PPP/DBFM Facilities. Galliford Try Facilities Management (GTFM) and Midlothian Council working well together on the Newbattle Community Centre in agreeing monthly payment mechanism reports and GTFM providing a good service in response to Helpdesk tasks. Combined Heat and Power solution agreed at Newbattle and Health and Safety issues being addressed across the PPP schools.
PFM.P.8.3	Delivery of high quality Property Maintenance Services	31-Mar-2019	✅	100%	**18/19**: Complete Monitored through satisfaction surveys and Feedback forms issued by Customer and Housing Services.

09. Optimise the use of Property Assets including industrial estates

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.9.1	Prepare and implement a rolling review of rents of the Council's non-operational land and buildings (cumulative)	31-Mar-2019	❌	93%	**18/19**: Off Target Further 3 lease renewals completed before year end taking total to 28.

10. Rationalisation of the Councils office and depot estate to a modern fit for purpose portfolio

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.10.1	Implement/set programme of office closures within Council Services	31-Mar-2019	✅	100%	**18/19**: Complete EWiM Phase 3: Depot rationalisation - ongoing engagement with planning, environmental health and roads department has resulted in consultants producing supporting documentation for change in class use. Public consultations continue. Environmental Impact Assessment is being undertaken as part of further requests from Planning and Environmental Health. Planning requests have been addressed. Procurement strategy is being finalised.

11. Introduce renewable sources of energy production to reduce utility costs and the carbon tax

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
PFM.P.11.1	Identify and instigate projects, Monitor and support actions to achieve an annual target Carbon reduction in accordance with the requirements of the Climate Change Act (2009).	31-Mar-2019	✅	100%	**18/19**: Complete Works on 10 properties complete, subject to verification.

Property and Facilities Management PI Report 2018/19

Midlothian

| | | | | | 01. Improve children and young people's health and wellbeing | | | | | | |

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
PFM.P.1.1a	% uptake of Primary School meals - aim to maintain at 11/12 level (quarterly)	72.6%	74.2%	68.8%	70%	70.4%	✅	⬇	**18/19**: On Target The increase in school meal charges after August has resulted in a decrease in the number of paid meals.	70%	60.89% - Average per family group (APSE 15/16)
PFM.P.1.1b	% uptake of High School meals (quarterly)	44.4%	38.3%	38.4%	42.1%	42.2%	🛑	⬇	**18/19**: Off Target Uptake remains in line with national averages however high street competition affects sales. Plan to revamp High School meals in line with new nutritional guidance – will require consultation.	45%	42.88% - Average per family group (APSE 15/16)
PFM.P.1.2a	Number of distinct activities involving Active Schools programmes to school children	33	30	30	28	26	🛑	⬇	**18/19**: Off Target Active Schools programmes promoted through printed materials (newsletters, posters, programme letters), verbal communications (parents evenings, school assemblies, parent teach meetings, parent council meetings, staff meetings, school information evenings) and electronic media (Active Midlothian website, @active_mid Twitter, Midlothian Facebook, electronic newsletter). All schools pupils from P1 – S6 offered Active Schools school and cluster programmes with a range	40	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									of activities/sports, attended by 1,802 distinct participants and 13,592 participant sessions. A diverse range of 26 different activities offered as part of the Active Schools extra-curricular programme to meet the needs of all. 207 Activity Session Blocks totalling 1,899 Activity Sessions delivered through Active Schools programmes. The above has been achieved whilst being one coordinator down from previous quarters.		

02. Improve employability skills and sustained positive school leaver destinations for all young people

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
PFM.P.2.1a	Number of trainees within service completing courses	37	15	19	24	29	✅	⬇	**18/19**: On Target For service breakdown see indicators below.	18	
PFM.P.2.1b	Number of trainees within Property Maintenance completing courses	8	8	8	8	8	✅	▬	**18/19**: On Target 5 apprentices moving to year 4, 2 team leaders and 1 joiner attending college to obtain an HNC.	8	
PFM.P.2.1c	Number of trainees within Facilities Services completing courses	6	4	11	12	14	✅	⬆	**18/19**: On Target 10 catering staff attending Europe Computer Driving Lessons (ECDL) course funded by Unions (15 weeks) and run by Glasgow College, completed March 19. Work experience students at	3	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									Newbattle high school, Kings Park primary, Loanhead primary.		
PFM.P.2.1d	Number of trainees within Sport and Leisure completing courses	23	3	0	4	7	✅	⬇	**18/19**: On Target During quarter four there were no people employed who had previously completed their National Pool Lifeguard Qualification (NPLQ) within Midlothian Leisure Centres to become Lifeguards. Cumulative total for year is 7 people.	7	

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03. Deliver further affordable housing

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PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
PFM.P.3.1a	Number of new build council houses (cumulative)	78	0	0	0	0	🛑	⬇	**18/19**: Off Target No houses have yet been completed as per programme for this stage. Site at Woodburn has been delayed through shortage of Contractor resources.	6	
PFM.P.3.3a	The % of the Councils housing stock meeting the 'Free from serious disrepair' Scottish Housing Quality Standard criteria	100%	100%	100%	100%	100%	✅	▬	**18/19**: Complete 100% of Midlothian Council houses are free from serious disrepair. (15 exemptions which reflect rate of 99.78%).	100%	
PFM.P.3.3b	The % of the Councils housing stock meeting the 'Modern facilities & services' Scottish Housing Quality Standard criteria	100%	100%	100%	100%	100%	✅	▬	**18/19**: Complete 100% of Midlothian Council houses have modern facilities. (479 exemptions which reflect rate of 93.24%).	100%	

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
PFM.P.3.3c	The % of the Councils housing stock meeting the 'Healthy, safe & secure' Scottish Housing Quality Standard criteria	100%	100%	100%	100%	100%	✅	▬	**18/19**: On Target 100% of Midlothian Council houses are healthy safe and secure. (479 exemptions which reflect rate of 93.24%).	100%	
PFM.P.3.3d	Progress of roughcast programme (cumulative)	0	0	0	0	38	🛑	⬆	**18/19**: Off Target 38 properties completed out of 150 due to change of contractor following a dispute.	150	
PFM.P.3.3e	Number of upgrades to central heating systems (cumulative)	415	125	231	302	373	📈	⬇	**18/19**: Data only 373 upgrades completed this year.		

04. Develop supports to people with long term conditions such as diabetes or stroke

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
PFM.P.4.1a	Proportion of adaptations requested and completed	100%	100%	100%	100%	100%	✅	▬	**18/19**: Complete As of 31 March 2019. 417 minor adaptations have been completed and 34 Major adaptations of ramps and wet floor bathrooms have been completed.	100%	

05. Support older people and those with disabilities to become more physically active

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
BS.PFM.P.5.4a	Tone zone retention rate (quarterly)	49.25%	48%	47%	61%	53.5%	🛑	⬆	**18/19**: Off Target For year end the cumulative average total is 53.5%. However	55%	No accepted industry standard.

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									the trend over the last two quarters shows an excess of the annual target with the retention rate for quarter 4 being 58%.		
PFM.P.5.1a	Number of activities offered by Midlothian Active Choices (MAC) (cumulative)	26	26	27	27	27	✅	⬆	**18/19**: On Target Target achieved. Number of activities offered by Mac per week: 27 Activities per week Total number of activities delivered for quarter = 324	20	
PFM.P.5.1b	Number of attendees during quarter (quarterly)	9,263	3,097	2,470	3,029	11,433	📈	⬆	**18/19**: Data only 273 one to one consultations 2,564 class attendances Cumulative total for Jan – March 2019 = 2,837 Cumulative for year is 11,433		
BS.PFM.P.5.2a	Number of activities offered by Ageing Well to 50+ age groups (quarterly)	23	18	18	18	15	🛑	⬇	**18/19**: Off Target 41 classes offered by Ageing Well over 15 different activities in 19 different venues. There was 5,770 visits to the weekly classes (up 783 from last quarter). Also 297 took part in other events/taster sessions. The project has 55 volunteers and the total volunteer hours contributed to the project this quarter was 1,016 this equates to over £15,000 of staff saving to the council for quarter and £70,000 cumulative for year.	20	
PFM.P.5.3a	Number of attendances per 1,000 population to all pools (cumulative)	2,210	680	1,440	2,180	2,930	✅	⬆	**18/19**: On Target Total wet side usage figures for Q4 show 64,488. Total for year is 252,395 which is 61,501 more than last years annual total.	2,800	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
PFM.P.5.3b	Number of attendances per 1,000 population for indoor sports and leisure facilities (cumulative)	6,750	1,920	3,930	5,840	7,650	✅	⬆	**18/19**: On Target Total number of Dry attendances was 157,105 for quarter 4. Total dryside use for year is 659,120,Thats up 71,456 on last years cumulative total.	6,750	
PFM.P.5.4b	Overall satisfaction rate in registered Leisure Centres	95.85%	95.09%	94.37%	83.92%	91.27%	✅	⬇	**18/19**: On Target Quarter 1 = 95.09% Quarter 2 = 94.37% Quarter 3 = 83.92% Quarter 4 = 91.70% Annual average = 91.27%	90%	

08. Deliver efficient Services

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
PFM.P.8.1b	Total square metres cleaned per hour	1.25	1.18	1.18	1.18	1.18	✅	⬇	**18/19**: On Target Our aim is to be higher than the APSE national average of 0.95 sqm cleaned per FTE, currently at 1.185 sqm as published by the Association for Public Service Excellence (APSE).	0.95	1.09 - Average per family group 2014/15(APSE)
PFM.P.8.3a	The percentage of properties achieving turnaround time of less than 20 days inclusive of homeless properties	72.9%	58.54%	55.07%	59.49%	75%	🛑	⬆	**18/19**: Off Target Total number of voids in 18/19 was 460. Day to day voids average of 20 days. At Q4 end there have been 80 more voids than at this period last year. Homeless voids have a 13 day turnover average. There have been a large number of voids that have been handed back to housing in a very poor condition. Photos are kept on file. Year on year improvements of 2%.	83%	

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
PFM.P.8.1a	Cost per square metre cleaned	£8.90	N/A	N/A	N/A	N/A			**18/19**: Data not available Figures not published by APSE.	£10.03	£12.29 - Average per family group 2014/15 (APSE)
PFM.P.8.1c	Monthly number of meals prepared/monthly labour hours across production and dining centres.	9.8	8.3	10.1	8.9	8.2	🛑	⬇	**18/19**: Off Target Productivity average in the Primary is 9.8 meals p/h and High School is 6.6 meals p/h. (Reflects Long Term Sickness and vacancies). Staff productivity is being reviewed prior to any recruitment being done. Introduction of nursery meals has increased productivity in 8 kitchens but not yet shown on productivity figures.	10	8.46- Average per family group 2013/14 (APSE)
PFM.P.8.1d	Achieve greater than the Scottish average in the annual school meals census (Primary Schools)	72.9%	70.7%	70.7%	70.7%	70.7%	✅	⬇	**18/19**: On Target School meal census published June 18 shows Midlothian uptake is 70.7%, a decrease of 2.2% on 17/18. National average is now 61.9%. School meal uptake in Primary schools decreased nationally in this period. Census published annually in June.	70%	Scottish Government Annual Survey of School Meals 2015 64.8%
PFM.P.8.1e	Achieve greater than the Scottish average in the annual school meal census (High Schools)	62.2%	62.3%	62.3%	62.3%	62.3%	✅	⬆	**18/19**: On Target School meal census published in June 18 showed Midlothian High school uptake at 62.3%, an increase of 0.1% on 17/18. However it is still above the national average of 43.9% Census published annually in June.	60%	Scottish Government Annual Survey of School Meals 2015 44.2%

09. Optimise the use of Property Assets including industrial estates

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
PFM.P.9.1a	Number of property reviews implemented (cumulative)	100	8	10	25	28	🛑	⬇️	**18/19**: Off Target Further 3 reviews completed before year end bringing the total to 28 out of 30.	30	

11. Introduce renewable sources of energy production to reduce utility costs and the carbon tax

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
BS.PFM.P.11.1a	Reduction in energy consumption on Non Domestic operational property stock per annum	50,754	10,902	12,064	12,554	47,524	✅	⬆️	**18/19**: On Target Annual target based on 3% year on year reduction is 12642 tCO2. The Q4 total figure of 12,004 tCO2 (a reduction of 638.42 tCO2 this quarter which is below the quarterly target) results in a 6.02% reduction the annual target.	50,568	

12. Local Government Benchmarking Framework

PI Code	PI	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Short Trend	2018/19 Note	Annual Target 2018/19	Benchmark
HSN3	Corporate Indicator - Percentage of the Councils housing stock meeting the Scottish Housing Quality Standard criteria (LGBF)	96.4%	Annual Measure			96.4%	✅	▬	**18/19**: On Target 96.4% of the council's housing stock meets the SHQS criteria. The remaining 3.6% of properties are being targeted by Building Services to actively attempt to obtain access to the remaining properties that remain exemption.	100.0%	17/18 Rank 14 (Second Quartile). 16/17 Rank 11 (Second Quartile).

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
									There are no failures in any of the housing stock where access has been gained. 100% of council housing stock meets the SHQS requirements for reporting purposes to the Scottish Government.		15/16 Rank 14 (Second Quartile). 14/15 Rank 10 (Second Quartile).
HSN5	Corporate Indicator - Percentage of council houses that are energy efficient (LGBF)	98.8%	100.0%	100.0%	100.0%	100.0%	✅	⬆	**18/19**: On Target 100% of council houses are energy efficient.	100.0%	17/18 Rank 12 (Second Quartile). 16/17 Rank 11 (Second Quartile). 15/16 Rank 6 (TOP Quartile). 14/15 Rank 1 (TOP Quartile).
C&L1b	Corporate Indicator - Total Number of attendances at all sport and leisure facilities	772,633	225,139	463,240	691,131	911,515	✅	⬆	**18/19**: On Target Total number of attendances was 911,515 showing an increase of 138,882 compared to cumulative figure at year end 2017/18.	800,000	
C&L1c	Corporate Indicator - Total number of attendance at all pools	190,893	59,151	124,405	187,910	252,395	✅	⬆	**18/19**: On Target Wet side usage figures for quarter four show 64,488 which is up 1,799 compared to the same quarter last year. Cumulative figures show 252,396 which is up 61,502 on last years quarter four cumulative figures.	200,000	
C&L1d	Corporate Indicator - Total number of attendance for other indoor sports and leisure facilities, excluding pools in a combined complex	581,740	165,988	338,835	503,221	659,120	✅	⬆	**18/19**: On Target Dry usage figures for quarter show 157,105. Cumulative figures show 659,120. Showing an increase on last year by 77,380	600,000	
C&L1e	Corporate Indicator - Total number of attendances at Outdoor	24,486	2,282	6,754	3,674	17,902	📈	⬇	**18/19**: Data Only Total number of attendances for quarter four was 5,192. Cumulative is 17,902.		

PI Code	PI	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19				Annual Target 2018/19	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
	Sport and Leisure Facilities										
C&L5d	Corporate Indicator - Percentage of adults satisfied with leisure facilities (LGBF)	74.33%	95.09%	94.37%	83.92%	91.27%			**18/19**: Data Only Quarter 1 = 95.09% Quarter 2 = 94.37% Quarter 3 = 83.92% Quarter 4 = 91.70% Annual average = 91.27%		17/18 Rank 16 (Second Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 21 (Third Quartile).

Property and Facilities Management Service Risks

Risk Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note
Gas Membranes	**Risk Cause:** Much of Midlothian rests on old mine workings, which can release gas from time to time. **Risk Event:** Uncontrolled release of gas within residential properties **Risk Effect:** Potential ill health effect from high concentrations of. Potentially fatal.	All New build projects carried out for Midlothian Council now include the use of a gas membrane as standard.	⚠️	Ensure all new builds have gas membranes	**18/19**: Complete All new build properties have gas membranes specified within the tender documentation
Property Investments - Rent arrears on Commercial Properties	**Cause** Failure to collect initial periods rent on commencement of tenancy. Failure to demand/collect monies due. Failure to chase payments effectively. **Risk Event** Debt is likely to rise. Debt may not be recovered. Time and money may be incurred in collecting arrears. **Risk Effect** Council is failing to funds due to the public purse. Tenants us Council as un unofficial 'credit ' facility	01 - Regular monitoring of rents collected 02 - Close liaison between sundry debt Officers and Surveyors 03 - Strong action to ensure funds are secured 04 - Enter into repayment plans to assist tenants with short term cash-flow problems	⚠️	PFM.RA.01-40	**18/19**: Rent collection process are proving resilient and liaison with sundry debt continues to be effective as shown by payment and arrears position.

🔴 Alert 🔺 High Risk ⚠️ Warning ✅ OK ❓ Unknown

Published Local Government Benchmarking Framework – Property and Facilities Management

Corporate Asset

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
C-AST1	Corporate Indicator - Proportion of operational buildings that are suitable for their current use (LGBF)	85.78%	88.21%	88.27%	88.89%	88.69%	80.65%	82.05%	74.44%	17/18 Rank 26 (Bottom Quartile). 16/17 Rank 20 (Third Quartile). 15/16 Rank 22 (Third Quartile). 14/15 Rank 9 (Second Quartile).
C-AST2	Corporate Indicator - Proportion of internal floor area of operational buildings in satisfactory condition (LGBF)	76.72%	71.28%	72.15%	81.49%	76%	77.18%	75.87%	77.11%	17/18 Rank 27 (Bottom Quartile). 16/17 Rank 28 (Bottom Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 26 (Bottom Quartile).

Culture and Leisure

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	
C&L1	Corporate Indicator - NET Cost per attendance at Sports facilities (LGBF)	£4.11	£2.79	£3.64	£2.96	£3.14	£3.51	£3.62	£4.29	17/18 Rank 29 (Bottom Quartile). 16/17 Rank 26 (Bottom Quartile). 15/16 Rank 24 (Third Quartile). 14/15 Rank 19 (Third Quartile).
C&L5d	Corporate Indicator - Percentage of adults satisfied with leisure facilities (LGBF)	79.7%	84.7%	77%	77.93%	75.33%	73.67%	74%	74.33%	17/18 Rank 16 (Second Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 21 (Third Quartile).

Housing Services

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	External Comparison
HSN3	Corporate Indicator - Percentage of the Councils housing stock meeting the Scottish Housing Quality Standard criteria (LGBF)	62.5%	80.2%	86.4%	94.4%	93.1%	93.1%	96.0%	96.4%	17/18 Rank 14 (Second Quartile). 16/17 Rank 11 (Second Quartile). 15/16 Rank 14 (Second Quartile). 14/15 Rank 10 (Second Quartile).
HSN4b	Average time taken to complete non-emergency repairs (LGBF)	New for 2013/14			7.00 days	7.37 days	9.01 days	13.04 days	13.19 days	17/18 Rank 25 (Bottom Quartile). 16/17 Rank 23 (Third Quartile). 15/16 Rank 12 (Second Quartile). 14/15 Rank 7 (TOP Quartile)
HSN5	Corporate Indicator - Percentage of council houses that are energy efficient (LGBF)	83.9%	92.2%	93.5%	99.0%	100.0%	99.8%	98.8%	98.8%	17/18 Rank 12 (Second Quartile). 16/17 Rank 11 (Second Quartile). 15/16 Rank 6 (TOP Quartile). 14/15 Rank 1 (TOP Quartile).

Midlothian Council
Annual Performance Report – 2018/19

Community Planning partners have previously agreed the following ambitious vision for Midlothian:

> "Midlothian – a great place to grow".

Midlothian Council delivers its priorities through the Community Planning Partnership (CPP) and the Single Midlothian Plan. The Council Change and Transformation programme and individual Service Plans outline how Midlothian Council will deliver its contribution to the Single Midlothian Plan.

Taking into consideration evidence about the comparative quality of life of people living in Midlothian, it is clear that less well-off residents experience poorer health, have fewer or no choices in how they use low incomes, and also that there is a proven relationship between these factors and their learning. As a result the top three priorities for 2019-22 are:

- Reducing inequalities in learning outcomes
- Reducing inequalities in health outcomes
- Reducing inequalities in economic circumstances

The council continues to face unprecedented challenges as a result of constrained funding combined with demographic and other cost pressures. In addition, managing the impact of a number of national and local challenges, including Welfare Reform, Health and Social Care Integration, The Children and Young People Improvement Collaborative (CYPIC) and the significant differences in social and economic equality across Midlothian.

Three key approaches will continue to be the focus for how the council works with its communities – preventive intervention, co- production and capacity building and localising / channel shifting / modernising access to services

In addition to the three key priorities and approaches the Council will also focus on reducing the gap between outcomes for residents living in parts of the county which for many years have shown a significant gap between their outcomes and the average outcomes for Midlothian and Scotland as a whole. The areas targeted are Dalkeith Central/Woodburn; Mayfield/Easthouses and Gorebridge.

Work continues on the outcome priorities and also the strategic priorities and budgets moving forward to 2019/20. The Council's contribution to the three year outcomes and the priorities for each of the thematic areas are set out in the individual service plans with associated actions and indicators.

The Single Midlothian Plan incorporates five overarching thematic groups which support the achievement of outcomes. This thematic approach is used for quarterly reporting, the themes are as follows:

- Adult Health and Social Care - *Responding to growing demand for adult social care and health services*
- Community Safety & Justice - *Ensuring Midlothian is a safe place to live, work and grow up in*
- Getting it Right for Every Midlothian Child - *Improving outcomes for children, young people and their families.*
- Improving Opportunities for Midlothian - *Creating opportunities for all and reducing inequalities.*
- Sustainable Growth in Midlothian - *Growing the local economy by supporting business growth and responding to growing demand for housing in a sustainable environment.*

Progress of Single Midlothian Plan Themes in 2018/19

Adult, Health and Care - Achievements
Responding to growing demand for adult social care and health services

"People in Midlothian will lead longer and healthier lives by getting the right advice, care, and support, in the right place, at the right time."

The Adult Health and Social Care service continues to undergo redesign as required by the Integration agenda. The 2016-19 Strategy and Delivery Plan outlined a major programme of service changes designed to promote prevention and recovery. Service priorities for the year included reducing avoidable admissions and unnecessary delays in acute hospitals; supporting people with long term conditions and dementia; reshaping substance misuse services; and promoting wellbeing and recovery. The enablers to achieve this included improved partnership working, public engagement and working with communities. The three major programmes of redesign are Learning Disability Day Services, Care at Home, and Learning Disability care packages.

The most challenging of these strategic redesign programmes for the IJB is Care at home. Care at home is a vital service for maintaining people's health and wellbeing. It is also a critical component of the whole health and social care system. Lack of capacity directly affects the efficiency of the hospital system; the ability of people who are vulnerable in some way to remain safely in their own homes; and the ability of family carers to manage their caring responsibilities upon which the whole system depends. Nationally and locally the delivery of Care at home services is recognised as being unsustainable in its current form. Demand for care at home is growing and care capacity cannot match that growth without whole system change. The IJB acknowledge the challenges and going forward two multiagency events will take place as part of ongoing discussion.

Integration: The Health and Social Care Strategic Plan 2019-22 has been developed and approved. The Plan includes a major programme of public and staff consultation and a compilation of a population health and wellbeing needs assessment. New services such as a Midlothian Discharge Hub are being introduced, while others are being expanded such as the COPD Respiratory Team and the Wellbeing Service now operating in all GP Practices. Musculoskeletal advanced practitioner physiotherapists and pharmacists are also in most GP practices now. The IJB has continued its efforts to strengthen its partnership working with the Voluntary Sector holding a third summit in November.

Inequalities: Action continues to be focused on addressing the unfair and avoidable differences in people's health across social groups and between different population groups. The Wellbeing Service was re-tendered and is now available in all 12 Midlothian GP Practices. Midlothian representatives involved in work that is progressing on the prevention of type 2 diabetes at a national, regional and local level. Work to develop models of homelessness support to people with complex lives is underway. A plan for COPD prevention and early identification is being prepared. The Income Maximisation post (to work with local families) has now been filled.

Substance Misuse: MELDAP held a consultation event with service users and carers that helped inform the new Strategic Plan and identified key priorities for the partnership. MELDAP continues to lead work in developing responses to changing drug trends. A number of short, mid and long term actions are being taken forward by partners with Midlothian, East Lothian and the Lothian Health Board area. This includes developing a leaflet regarding powdered Ecstasy ["Mandy"] specifically being developed for young people and planning a Lothian Wide Workshop in relation to emerging drug trends. The "drop in" clinic to offer patients who find keeping appointments challenging continues to be a success. This is a partnership with Nurses, Peers and Social Work. The aim is to keep more chaotic population engaged and reduce unused appointments. This has ensured that currently no-one is waiting for access to the SMS Service.

Technology: Technology offers a range of tools to support pathway and service redesign in terms of both iterative improvements and transformative initiatives. We continue to proactively engage with the emerging digital agenda in Scotland to maximise the value that technology, in all its forms, can add. Last quarter we acknowledged our need to assess our exciting digital maturity to match our capability with our aspiration and roadmap appropriately. Scottish Government has just released a national maturity assessment schedule for NHS and Council. Our business intelligence and analytics project to deliver an integrated operational resilience dashboard is progressing well. We have established an initial data set and now have a working prototype in a test environment to drive data driven discovery and improvement. This will be tested with senior management and end users along with seeking to make the processes of obtaining and updating data in the visualisation more robust through efforts to automate. The HSCP

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have also submitted an application for Scottish Government TEC funding, to develop an electronic frailty record that would support multi agency use in the management of our frail population.

Learning Disabilities: Cherry Road Resource Centre which provides day services for people with learning disabilities and complex needs received top marks for quality of care and quality of management and leadership following an inspection of the Care Inspectorate this year. Key areas of work continue to be focused on day service provision within Midlothian and the ongoing programme of reviews of existing care packages. Work is progressing to develop positive behavioural support services within Midlothian.

Self-Directed Support: Current focus of activities continues to be supporting the implementation of Self Directed Support and enhancing support planning processes (including option 2), back office processes and develop practice to embed principles of choice and control in the provision of support. Work is being initiated to review the budget allocation tools.

Older People: As previously referenced our biggest challenge around older people's services in Midlothian continues to be capacity for both Care at home and Care homes. The services have undertaken a number of initiatives with Care at home to increase capacity by commissioning additional contracts to our external providers, reorganising the in house service client runs, and working closely with the voluntary sector to see how they can provide alternatives to Care at home. The first graduates from our new Carer Academy have now graduated and are being interviewed for care positions. A recruitment campaign is also underway, in collaboration with our external partners. Care homes are presenting a different challenge. There is bed capacity across Midlothian, however, families/individuals often make choices based on those with lengthy waits, blocking a hospital bed for others that require medical intervention. The team are working on a suite of information leaflets for all Midlothian patients >65 years old, so consistent conversations can take place from admission. A new Care Home Strategy is in development and focusses on the management of stress and distress, unnecessary hospital admissions and falls within our Care homes. A comprehensive Quality assessment framework has been developed and will be routinely used across all care homes on a monthly basis, to detect any issues and support management teams to continually improve quality of care. The HSCP have agreed funding for additional clinical/care posts to augment the current care home team, which is testament to the focus the partnership has on improving care for older people. We have been working closely with the Care Inspectorate to develop quality of care across Care Homes, as well as Highbank Intermediate care facility and Care at Home.

Carers: The Carers (Scotland) Act 2016 was implemented on 1st April 2018. Work during 2018/19 has focussed on ensuring duties and responsibilities under the legislation were in place for implementation and delivery of new services/responsibilities. Agreement has been given and NCA signed for funding to support VOCAL to undertake Adult Carer Support Plans as part of sharing legislative duties; this work began in Q3 2018/19. This responsibility also involves the requirement to provide Carer Census reporting to the Scottish Government which VOCAL have submitted; the Adult Performance and Improvement Team submitted in December 2018 the first report for the carer's census per Scottish Government requirement; the second submission of this year being due in April 2019. The Carers Strategic Planning group have reformed to take stock of progress, and consider progress against the Action Plan; an updated strategy is the next task for the group. Feedback from a Carers event/consultation in November 2018 has been used to inform the Carers Strategy and Midlothian Strategic Plan. A Short Breaks Service Statement was prepared and published online by end of December 2018, as per legislative requirements.

Mental Health: Penumbra the new service provider for the remodelled mental health community based rehabilitation service commenced on 1st April 2019. The Wayfinder model will be implemented and evaluated. Utilising Action 15 funding 3 FTE Primary Care Mental Health nurses are in post and have dual roles to support the expansion of the Access Point and test the role of primary care mental health nurses initially in 4 GP practices, with a view to expanding this role across Primary Care in Midlothian.

Adults with Long Term Conditions, Disability and Impairment: The Joint Physical Disability Planning Group continues to pursue any outstanding issues in their current Action Plan with the effective sharing of information still a priority. The first Disabled Peoples' Assembly took place on the 27th March in Dalkeith. The hearing aid maintenance clinics running once a month in Dalkeith Library continue to prove extremely popular. More volunteers have been recruited and received training from Audiology. This will enable the commencement of a clinic in the Town Hall in Penicuik shortly. The LAC service continues to support the peer support side of this. The Health and Social Care Partnership are currently exploring possible funding for Audiology equipment for the Community Hospital to facilitate a local assessment provision, with a funding bid being made to the Capital Steering Group in April 2019. The Midlothian Council British Sign Language final plan is being completed on the back of the consultation information gathered. This will be submitted to Council for approval.

Community Safety - Achievements
Ensuring Midlothian is a safe place to live, work and grow up in

Criminal Justice: The Criminal Justice Team has moved to a temporary home while their building becomes a recovery hub that will bring mental health, substance misuse and criminal justice services together. The recovery hub will be called Number Eleven and will allow new ways of working across services to improve outcomes and accelerate access to services for some of the most needy and complex individuals in society. The new Unpaid Work service continues to develop with staff undertaking a 36 hour training for trainers' e-learning course with the face to face training planned for May. This will enable Unpaid Work supervisors to offer certificated training courses to service users subject to Community Payback Orders. Spring has gone from strength to strength in the past year and the Spring Team Leader and social worker posts have been made permanent. Interest in attending has significantly increased and there is now a waiting list for the service. Safe and Together represents a culture change in how domestic abuse is viewed within a child protection context. The Criminal Justice team are able and willing to work with fathers on a voluntary basis. Further training has recently taken place and the Public Protection Learning and Development Co-ordinator has completed Training for Trainers and can now deliver Safe and Together training. It is anticipated that referrals to the perpetrator service will increase, albeit slowly, as the approach becomes more embedded in child protection work.

Road Services: An application for Decriminalised Parking Enforcement was approved by the Scottish Government in March 2018, the introduction of which went live in April 2018.

A formal restart to the ELBF shared services project begun in 2018 following the setting up of a new shadow joint committee comprising elected members from each authority (new members having been appointed to the committee). Further work streams will continue to be identified and allocated to each authority.

The Council utilised considerable resources to meet the challenges following the impact to road surfaces following the 2018 severe winter, and in particular, the repair of potholes. In addition a consultation was carried out with communities and other organisations to gather feedback on performance, identify where improvements can be made and seeking confirmation where they may contribute to the winter weather challenges. Following the consultations, Council approval was obtained in 2018 for the Winter Service Policy and Operational Plan. The plan includes arrangements with private sector partners whereby they will supply additional resources had the Council experienced a period of significant severe weather.

Good progress was made on the capital carriageway and footway schemes, 4.4km of footway and 11.3km of carriageway was resurfaced this year. 911 lighting columns were replaced this year, 896 by capital funding and 15 by maintenance exceeding the annual target of 700.

Getting it Right for Every Midlothian Child - Achievements
Improving outcomes for children, young people and their families.

Permanence and Care Excellence Programme (PACE): We commenced the 12-month long programme on 1 November 2017 with a stretch aim that 75% all under 12s accommodated within the year would have a permanence decision within 7-12 months. Over the course of the year, 42 children have entered the programme and 67% of them have had a permanence decision within 7-12 months. Scottish Government and the Centre of Excellence for Looked After Children view the level of change and improvement for Midlothian's most vulnerable children as a phenomenal achievement. We have agreed to continue to be part of the PACE programme; and continue to share our learning with other Councils. We have already identified 4 further aims and will provide further information in due course

Mental Health: Following the successful bid to the Early Action Lottery project, which secured funding over the next 5 years to improve services in mental health for young people by helping local organisations collaborate to make the shift to early action and system changes so that people have better lives. As this work begins we have now recruited a project manager who is currently working on the delivery plan.

Participation: The Champions board continue to meet every fortnight and share their discussions and the need to bring about change with their corporate parents. We have also rolled out the MOMO (mind of my own) app whereby young people can liaise with their worker via the app or share their views in relation to reviews or any other meeting they wish to contribute to. To date this has been a big success with some good quality feedback from young people.

We continue to provide all children and young people with quality services: We currently have 1 young person in secure care. The working group continues to meet to discuss teenage interventions and alternatives to secure care.

Child Protection: A snapshot at the end of the year reported that we had 51 children (24 families) on our child protection register which equates to 3.0 per 1000 of the population compared with the national rate of 2.9. This figure is the same as the last quarter and only slightly above the national average.

Work on the implementation of Safe and Together is ongoing with further development in relation to the Families First (non-court mandated domestic abuse perpetrator programme). The Public Protection Office now has a trained trainer in Safe and Together core principles and will be rolling out this training with a primary focus on children services throughout the coming year.

Looked after away from Home: There are 139 children and young people looked after away from home both in and out-with Midlothian. This number is significantly lower than the previous quarter (165 children & young people). The current rate per 1,000 of young people looked after in Midlothian is 7.2 which remains well below the national of 14.5. Nationally there has been a 1% decrease from 2017 to 2018 in the number of children and young people looked after away from home, within Midlothian there has been a 10% decrease.

Looked after at home: There are 81 children and young people looked after at home. They have all been reviewed by the new Independent reviewing officer. The current rate per 1,000 of young people looked after at home in Midlothian is 4.2 which is higher than the national rate of 3.7. This area of work is out of kilter with the national picture where there has been a significant reduction of children looked after at home (26% reduction from 2008 - 2018) However within Midlothian this number has increased by 37% over the same period of time (2008-18). As already reported we are analysing this data to try and better understand what these statistics mean. It is not necessarily a negative thing that our figures for this area of work are high, given that we are not accommodating children and young people unless it is the only available option, the alternative to this would be offering one final attempt to support children at home via a compulsory supervision order prior to them coming into care. This could be one of the reasons for the higher than average rate of children looked after at home.

Scottish Child Abuse Inquiry: There continues to be a lot of work being generated from this Inquiry. We are working hard to ensure that we continue to meet deadlines with our submissions. To date we have had 21 Section 21 requests.

Raising Attainment and Achievement: (National Improvement Framework: Performance Information and School Improvement):
There continues to be a focus on curriculum for excellence levels through tracking periods for all pupils but specifically for those 'unlikely' to achieve their expected level.

We have achieved our target of 2% in almost all areas. In some areas the improvement is as much as 18% in P7 English. The area where this has seen least progress is S3 in Listening and Talking and Numeracy.

This has been achieved by implementation of 3 curriculum for excellence tracking periods last session, robust monitoring and tracking and teacher training on achievement of a level and robust conversations with Managers and Headteachers.

Early Years: Planning for the early learning and childcare (ELC) expansion to 1140 hours per year is embedded within the Learning Estate Strategy to ensure a joined-up approach and enable maximum efficiency, as well as aligning short term plans with long term strategy. To support ELC providers in the private and voluntary sectors to expand their capacities in readiness for the 2020 entitlement, £1.5 million has been made available through our funded providers capital grant scheme. Preparations are ongoing for the first two council outdoor ELC settings with the first to be opened in Vogrie Country Park.

The council is now in the fourth phase of piloting expanded hours places and by the end of the quarter, 561 children will be taking up an 1140 place (19% of the total number of places taken up in Midlothian). The Council is on track to achieve 40% of 1140 hour places being delivered in August 2019 which is in line with Scottish Government expectations. To meet the increase in the number of staff required to deliver the entitlement in 2020, 52 Modern Apprentices have begun their training this year and 32 practitioners are studying towards their HNC in childhood practice. Considerable progress has been made towards implementing the increase in hours, although much work remains to be done.

Improving Opportunities Midlothian - Achievements
Creating opportunities for all and reducing inequalities.

Positive Destinations: Record number of leavers going onto Higher Education 34.11%, up 3% on last year and 5% on 5 years ago, closing the gap on Virtual 37.92% and National 41.16% comparator figures. 1 in 3 (33%) of our leavers now going straight into Employment, above the Virtual (24%) and National (23%). Positive destinations itself (94.35) above the Virtual and on par with National figures.

Serving our Communities: The new Loanhead Centre was awarded the "Community Development Project of the Year" at the Scottish Property Awards in 2018. The new Loanhead Centre community project was delivered in partnership with the community using a 'done with' rather than 'done to' approach. From initial Public consultation, Midlothian Council and the design team worked with the community through detailed conversations to deliver a project which met the needs of the community. The process began with a simple choice between delivering just a replacement school and taking forward the wider opportunity for a combined community facility on Council land adjacent to the local leisure centre.

The new Newbattle High School, was handed over successfully and under budget with no delay to the school programme. The centre was awarded "Development of the Year (Public Building) at the Scottish Property Awards 2019. The award was received for the development that has contributed most to the improvement of a local community. The new facility has allowed Midlothian Council to continue its ambition to create a world-class education system by pioneering a new Digital Centre of Excellence, the first of its kind in Scotland.

Environmental Health: Engagement with Scottish Government representatives in conjunction with the "Community Conversation" on dog control and positive recognition for the achievements by staff, particularly Environmental Wardens in improving dog control in Midlothian through education, enforcement and partnership work.

Complex Part IIA contaminated land remediation complete.

Engagement on the Scottish Government Working Group to produce the new National Model Standards for Residential Caravan site licensing has been completed with the publication of the Standards in December 2018.

Communities Service
Working with 3rd Sector:
- New three year grants programme and allocation approved unanimously by elected members. Improved programme with less paperwork, more of a focus on reducing inequalities, more support for applicants and more equitable allocation across the sector with a particularly focus on supporting small grass-roots organisations.
- The Communities Team have supported 273 third sector and community groups to increase their capacity, attract funding and improve their governance. Community Support Agreements are in place for groups that require extensive support.

Working with Communities:
- Secured £884,000 from the Scottish Government Capital Regeneration Fund to transform a derelict site in the centre of Rosewell into a vibrant community hub.
- More than 25,000 residents participated in a place standard consultation in Bonnyrigg, funded by the Scottish Government's Place Standard Conversation Fund. This will form the basis of a new community-led neighbourhood plan.
- New asset transfer framework and governance structure in place to ensure compliance with the Community Empowerment Act and also to help achieve the savings in the Council's financial strategy.
- Elected members have agreed a way forward for their environmental funds to be allocated by Participatory Budgeting. The £90,000 pilot will be in the Dalkeith Ward and then spread across the authority. This will have the Council achieve the 1% COSLA target.
- With funding from the Scottish Government 2639 people have participated in Cost of the School Day decision making and briefings with head teachers is starting to have traction in schools beyond the Participatory Budgeting process. This has been held up as sector leading practice by COSLA and the Scottish Government.

Communities Awards/Nominations:
- Nominated by the Scottish Sports Futures for the Partnership of the Year Award for the work the undertaken to establish the Twilight Basketball programme.
- Selected as an authority to receive bespoke support from Professor Stephen Sinclair from the Scottish Poverty and Inequality Research Unit to develop the Local Child Poverty Action Plan as part of the support for the Child Poverty Act.

- Awarded the Armed Forces Covenant Employer Recognition Silver Award thanks to the work of Communities Officers.

Welfare Rights:
- Income Maximisation - Over £4.4m raised in additional benefits for Midlothian clients throughout the year.
- Support and training - Over 100 Council and 3rd sector employees have attended training and support services from the team in 2018/19.
- Pipeline project - Through ESF funding (European Social Fund) service has engaged with 91 clients to remove the barriers they face to employment and vocational training.

Landscape & Countryside: Much of the focus within Landscape and Countryside services continues around securing funding and generating income to deliver on a range of measures and contribute to the Council's financial position.

The council have secured additional external and internal income through the Soft and Hard Landscape squads and attracted larger events to Vogrie Country Park such as the Woodland Dance project and the Fire & Light event and various staff groups supported a number of large strategic events e.g. Midfest/Midstock.

In support of Midlothian's Play Strategy, funding was sourced for improvement works at Mayfield Nursery (£46,000). Phase one works at Old Gala Park, Gorebridge (£60,000) were completed, a new play area at Loanhead Paradykes (£180,000) and Arniston Park (£50,000) were completed. The Auld Gala Park area improvements has provided better facilities for young people in this area of Scottish Index of Multiple Deprivation (SIMD).

In addition, Rosewell Park wheeled sport facility ground investigations have been completed prior to the tender process.

Over the course of the year Landscape and Countryside services have completed numerous projects for third parties including schools, with particular focus on health benefits e.g. trim trails and play areas.

Following independent assessment the Council have retained green flags for Vogrie Country Park and Memorial Park, Loanhead.

Two woodland and path projects at Cuiken and Mauricewood totalling £330,000 with much of the funds being sourced externally and the remainder coming from developer contributions are now complete and will result in improved health opportunities for people and the environment.

Over 10,000 hours of volunteer time was supported to improve Midlothian's environment through a variety of projects.

The Town Centre improvements at Gorebridge were largely designed in-house by the Land and Countryside Landscape architect resulting in a very successful project delivered in partnership with other Council services and the private sector.

Sport and Leisure: The Sport and Physical Activity Strategy for Midlothian Council was developed and launched this year. The strategy provides direction for the councils approach to raising awareness of the benefits of physical activity and encouraging the people of Midlothian to be more active. Strategic aims:

- *Increase the number of people of all ages participating in active travel, active recreation and sport.*
- *Work with schools and community groups to develop and support opportunities for lifelong participation in physical activity and sport for all.*
- *Develop facilities and the built and natural environment to encourage increased participation in physical activities.*
- *Grow and develop the physical activity and sport workforce.*
- *Work with internal and external partners to increase participation in physical activity and sport.*
- *Raise the profile and public awareness of the importance of physical activity and opportunities to participate.*

In support our Council's Digital strategy, digital services will be designed around the customer, our new Leisure Management System (Legend) went live on the 17th of April 2018 with online services going live on 19th March 2019. The introduction of a new front-of-house system for the council's leisure facilities offers customers online services to make bookings and payments.

Volunteer involvement within the Ageing Well programme continues to develop through the involvement of its 55 volunteers. The total volunteer hours contributed to the project this quarter was 1,016, this equates to just under £70,000 of value to the council in a year.

NHS funding has been agreed for the Midlothian Active Choices programme which is a referral service for adults in Midlothian who are currently suffering from mid/moderate mental health conditions, weight management problems, or long term or chronic illnesses. Successful promotion of Midlothian Active Choices through NHS direct access team, psychological services, health in mind, access point team, men's sports sheds and way ahead group has shown a significant increase in class attendances increasing by 2,170 from 17/18. The success of this programme shows 141 of 211 have converted to ToneZone memberships.

Destination Hillend business case is now complete and public and partner consultation has taken place over the last few months.

Three Midlothian schools received the Sportscotland Gold School Sport Award for 2018-2020; Cornbank Primary, Lasswade High School and Kings Park receiving Gold following revalidation from 2016. Lasswade was the first secondary school in Midlothian and one of only 18% in Scotland to have been awarded the award. The Gold School Sport Award is in recognition of the schools' achievements in putting sport at the heart of their schools planning, practice and ethos. The Gold Award also highlights the schools have shown excellent practice across the core areas of the award and demonstrated an on-going commitment to increase young people's opportunities and engagement in physical education, school sport and leadership and provide clear pathways to life-long participation in sport.

Sportscotland have committed to a new 1-year Partnership Agreement with Midlothian Council. This includes a forward investment commitment to Active Schools and Community Sport Hubs. This commitment for a further 1-year allows the service to move to becoming self-sustaining by adding income to its core objectives.

In support of our commitment to provide opportunities to improve health and wellbeing, summer sporting events were programmed to encourage children to get involved in activities such as Snowsports, Tubing, Sports, Diving and Fitness. Leisure centres offered free swimming sessions. In addition, our Sports Hub Officer along with life-long learning held successful free sporting summer camps for children.

Midlothian Active Schools supported Midlothian Women & Girls in Sport Week, which is led by the Scottish Government's Women and Girls in Sport Advisory Board. The aim was to raise awareness of increasing opportunities in sport and physical activity among women and girls, and highlighting the solutions to overcoming the barriers to participation.

Sustainable Growth - Achievements
Growing the local economy by supporting business growth and responding to growing demand for housing in a sustainable environment.

Homelessness: The Rapid Rehousing Transition Plan in Midlothian has been approved by Council and submitted to Scottish Government for feedback. Rapid rehousing is about taking a housing led approach for rehousing people that have experienced homelessness, making sure they reach a settled housing option as quickly as possible rather than staying in temporary accommodation for too long. Transition to a rapid rehousing approach means that some local authorities and partners will have to redress the balance of housing and support options that are available, and how quickly they are accessed.

The Rapid Rehousing Transition Plan in Midlothian includes an Action Plan for the next five years to support this vision. With key actions including increasing the supply of new build affordable housing in Midlothian, reviewing Midlothian Council's Allocation Policy (during Q4) to ensure homeless households are housed more quickly, actions relating to the acquisition of models of temporary accommodation to reduce the need for bed and breakfast accommodation, supporting homeless households to access a tenancy in the private rented sector and development of a 'Housing First' model. This Action Plan will be implemented in partnership with tenants, stakeholders, RSLs, other agencies and the Midlothian Health and Social Care Partnership. If additional funding is provided by Scottish Government, then the pace of implementation will be increased.

In response to increasing levels of homelessness in the 16-25 year old age group, the Youth Homelessness Team have developed and delivered a SQA Pre-Tenancy Award for life skills and tenancy sustainment outcomes. The first group of students graduated in December 2018.

Affordable Housing: Midlothian Council's Strategic Housing Investment Plan was approved. This sets out strategic investment priorities for affordable housing over a 5-year period. It is a key document for identifying

strategic housing projects that contribute towards meeting the local and Government's affordable housing target. A Local Lettings Initiative (LLI) has been developed to support the allocation of housing at the Miller Homes Development at Newton Church Road, Danderhall, later in 2019. In the ESES City Deal Housing Workstream, the Housing Terms of Reference and governance arrangements are being finalised for future opportunities for collaboration.

Waste Services: The construction of the joint Edinburgh/Midlothian Energy from Waste (EfW) plant at Millerhill was completed in 2018. The plant which will allow the Council to meet its landfill obligations is now processing residual waste.

During 18/19 a Waste Management Strategy was developed, after approval, the strategy will inform the future direction of waste services. The key drivers of the Waste Strategy are:

- *Scotland's Zero Waste Plan which sets out the following key targets - Recycle 60% of household waste by 2020, a ban on biodegradable waste to landfill by 31 December 2020, recycle 70% of all waste by 2025, reduce the waste disposed of to landfill to a maximum of 5% by 2025 and restrictions on the material input to all Energy from Waste (EfW) facilities with mandatory extraction of dense plastics and metals prior to treatment.*

- *Charter for Household recycling and Code of Practice, the charter identifies a number of collection strategies which are considered to best meet the overall objectives of improving recycling performance and developing a consistent national system, whilst enabling scope for Councils to design the specific services around local context and requirements.*

- *End Markets - The biggest challenge facing Midlothian Council's recycling collection services is the availability of end markets for the materials collected. Along with increasing the recycling tonnages collected, improving the quality of materials collected is critical to ensuring the Council has a market to send them to.*

A chargeable service allowing local businesses to dispose of trade waste and recycling was introduced at Stobhill recycling centre and in a bid to generate additional income upfront charges were introduced for housing developers for waste and recycling containers.

Services worked collectively to efficiently introduce the chargeable Garden waste service in early 2019. Work was also completed to re-route the new garden waste collections. An income of over £550,000 has been realised with nearly 15,000 households paying the new charge for the kerbside collection of garden waste. 13,250 joined before the initial subscription deadline.

The Waste Aware Team continued to work with schools and the wider community, attending events such as tenant community days and carrying out presentations to increase public awareness of recycling. In addition, the team collected almost two tonnes of toys and games from across Midlothian Schools as part of a "Green Santa toy collection" scheme. Items collected were then given to charity to be reused. In addition, work has taken place with the Salvation Army to identify sites for community textile recycling banks.

Further work in relation to the waste services review is being carried out to model different waste collection frequencies, allied to establishing if direct delivery or bulk transfer offers the most economically advantageous benefit. Work was completed to re-route residual waste collections.

We were successful in bidding for match funding from Scotrail, SEStran and Paths For All, to deliver active travel initiatives throughout Midlothian until March 2019. Initiatives include a new cycleway, walking and cycling events, I-Bike schools project and marketing.

In terms of promoting sustainable travel, as well as encouraging healthy lives, continued progress was made in regards to the extension of walking and cycling routes with a new strategic active travel link from Gilmerton to Shawfair in collaboration with Sustrans and Edinburgh City Council.

Additional Areas of Interest
Internal Council actions/activities supporting the delivery of agreed outcomes

Delivering Excellence - A programme for change: Delivering Excellence is about looking at how we do things, with a focus on improving outcomes for our residents and our communities within the context of the financial and

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other challenges ahead. To do this, we need to think about: What our priorities are; What we can change or do differently; Which services can be improved and Which services we can stop.

Employee engagement and empowerment is at the core of the Delivering Excellence framework. Every council service is being asked to look at what it does, how much it costs, how it performs and how it could be changed and improved.

Financial Strategy: Successful completion of the 2017/18 accounts and audit; Completion of the 2019/20 Budget, with approval by Council in February 2019; Completion of Financial Monitoring reports for Council as part of the robust scrutiny of financial performance and subsequent submission of a recovery plan to address the projected in year overspend; Financial Strategy 2019/20 to 2022/23 presented to Council and other political or senior officer forums which outlined future years budget projections, the impact of change programmes and the financial implications of investment decisions and priorities; Approval and adoption of the first comprehensive Capital Investment Strategy by Council November 2018 and Reserves Strategy in February 2019;

Emerging Challenges

Growing Council: Population growth in Midlothian over the next 10-15 years will see Midlothian become the fastest growing Council in Scotland. 0-15 population increase, projected at 20% and 75+ population increase projected to increase by 100% between 2014 and 2039.

This brings the opportunity to support the Council vision of being 'A Great Place to Grow'. As a growing Council this brings the opportunity to redevelop parts of Midlothian, improve infrastructure with a focus on area targeting, improving economic opportunities, improving education and health outcomes.

This growth creates the opportunity to meet the housing need with 25% of new homes being built in the affordable housing bracket, in addition to the expansion in Council House building. This construction will directly support employment in construction and will see a steady increase in the volume of Council Tax received over time.

The approved, Capital Strategy sets out infrastructure required to meet those demographic pressures and includes the financial contributions Midlothian will make to the Edinburgh and South East Scotland City Region Deal.

Capacity and Quality of Care at Home Services: Increasing demand on Care at Home services continues to be a major challenge to deliver the care and support needed. This is heavily impacting on assisting hospital discharges and supporting people at home in the community who require increased care and support. However, a service review is planned for 2019 and development work is underway to attempt to manage the challenges.

Road Services: The Edinburgh Lothians Borders and Fife (ELBF) group of councils continue to meet to consider areas of road services that could be shared across council boundaries. However on a national picture, Transport Scotland are continuing to review the way road services should be Scotland-wide. With this in mind they have asked that a national review be undertaken within the scope of the National Transport Strategy (NTS). The NTS will not be published for another 2-3 years. This has led to the current arrangements with the ELBF Shadow Joint Committee's role being unsure. It is likely that the recommendation from the NTS is a national "regionalisation" of road services and therefore some councils within the ELBF are unsure whether to continue with the current arrangements. This position may well prove detrimental to Midlothian in terms of sharing of resources in the near future.

Children's Services: budget continues to remain a significant and ongoing challenge. Whilst we are currently working on a business case to consider alternative solutions to secure care, we continue to receive often unexpected and unplanned referrals for young people who have complex and severe needs and who can no longer remain at home. These young people require a high level of specialised care and it is proving more difficult to identify suitable resources to offer this level of care. Given that they are under the age of 16 there are very few companies who are registered and able to offer this level of care to children. This results in placements made in an emergency, which are invariably much more expensive, and usually out-with Midlothian.

Performance Indicator Summary

Making the Best Use of our Resources

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
01. Manage budget effectively	Performance against revenue budget	£202.932m	£209.032m	£207.512m	£206.537m	N/A	▬	**18/19**: Data will be available when it has been verified and has been presented to the Council.	▬	£205.194m		
02. Manage stress and absence	Corporate Indicator - Sickness Absence Days per Employee (All employees)	7.5	2.1	3.56	6.34	8.55	🛑	**18/19**: Off Target Sickness absence interventions are being recommended to the Corporate Management Team to further address levels of sickness absence and it is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future. Teachers stats: The Council has started negotiations with the teaching trade unions in relation to introducing a revised Maximising Attendance at Work Policy.	⬇	7.5	Number of days lost (cumulative)	34,912.61
											Total number of employees (FTE) All employees including teachers	4,082.66

Corporate Health

Priorities	Indicator	2017/18 Value	Q1 2018/19 Value	Q2 2018/19 Value	Q3 2018/19 Value	2018/19 Value	2018/19 Status	2018/19 Note	Short Trend	Annual Target 2018/19	Feeder Data	Value
04. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%	✅	**18/19**: 8 High Risks reviewed in the last quarter and are on target.	▬	100%	Number of high risks reviewed in the last quarter	8
											Number of high risks	8

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| 03. Process invoices efficiently | Corporate Indicator - Percentage of invoices sampled and paid within 30 days   (LGBF) | 93.1 % | 94.9 % | 93.4 % | 92.7 % | 91.1 % | 🛑 | **18/19**: Invoice Approval implementation continuing. E-Invoicing and lodged cards to be implemented in Q1/Q2 19/20. | ⬇ | 95.0 % | Number received (cumulative) | 86,072 |
| | | | | | | | | | | | Number paid within 30 days (cumulative) | 78,413 |

Priorities	Indicator	2017 /18	Q1 2018 /19	Q2 2018 /19	Q3 2018 /19	2018/19			Short Trend	Annual Target 2018 /19	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note				
05. Implement improvement plans	% of internal/external audit actions progressing on target.	58.7 3%	51.3 8%	73.6 8%	55.0 7%	82.2 6%	🛑	**18/19**: Off Target The outstanding actions are being addressed by the relevant managers within each Service.	⬆	85%	Number of internal/external audit actions on target or complete	51
											Number of internal/external audit actions in progress	62

Complaints Indicator Summary

Indicator	2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	2018/19			Annual Target 2018/19
	Value	Value	Value	Value	Value	Status	Note	
Total number of complaints received (cumulative)	5,201	1,417	2,721	3,866	5,107	📈	**18/19**: Data Only	
Number of complaints closed in the year	4,866	1,187	2,604	3,806	5,039	📈	**18/19**: Data Only	
Number of complaints upheld (cumulative)	3,836	997	2,016	2,879	3,771	📈	**18/19**: Data Only	
Number of complaints partially upheld (cumulative)	355	32	70	124	192	📈	**18/19**: Data Only	
Number of complaints not upheld (cumulative)	675	158	293	496	621	📈	**18/19**: Data Only	
Percentage of complaints at stage 1 complete within 5 working days	87.83%	89.3%	90.02%	88.69%	88.24%	🛑	**18/19**: Off Target Dashboards using Tableau that will provide troubleshooting opportunities and ample time to, where necessary remedy the causes of unfavourable statistics are about to be rolled out. Supporting detailed reports using Pentana Performance Management System are also provided to Head of Service at quarter end periods along with the usual reporting format, and attendance at Directors Management Team meetings by the Customer Service	95%
Percentage of complaints at stage 2 complete within 20 working days	70.24%	60%	78.95%	66.67%	72.09%	🛑		95%
Percentage of complaints escalated and complete within 20 working days	68.29%	78.57%	68.97%	58.82%	65.15%	🛑		95%

						Improvement Officer is underway.	
Average time in working days for a full response at stage 1	3.31	2.8	2.77	3.21	3.4	✅	**18/19**: On Target	5
Average time in working days for a full response at stage 2	19.32	18.6	15.63	19.85	18.23	✅	**18/19**: On Target	20
Average time in working days for a full response for escalated complaints	19.85	13.71	21.45	21.78	19.95	✅	**18/19**: On Target	20
Number of complaints where an extension to the 5 or 20 day target has been authorised (cumulative)		1	1	8	10	📈	**18/19**: Data Only	

Balanced Scorecard Indicators 2018/19 Annual Report

Cabinet
Tuesday 21 May 2019
Item No 5.21

This section of the Council report is presented using the Balanced Scorecard approach. The four Balanced Scorecard perspectives and key areas of focus are shown in the following table and the associated key indicators that follow are drawn from across the Councils services.

Customer/Stakeholder	Financial Health
- Improving outcomes for children, young people and their families - Ensuring Midlothian is a safe place to live, work and grow up in - Creating opportunities for all and reducing inequalities - Growing the local economy and supporting businesses - Responding to growing demand for Housing and Adult Social Care services	- Maintaining financial sustainability and maximising funding sources - Making optimal use of available resources - Reducing costs and eliminating waste
Internal Processes	**Learning and Growth**
Improving and aligning processes, services and infrastructure	- Developing employee knowledge, skills and abilities - Improving engagement and collaboration - Developing a high performing workforce

Each of the perspectives shown above are supported by a number of key measures and indicators which ensure that the Balanced Scorecard informs ongoing performance reporting and helps to identify areas for further improvement. The strategy map below provides an at a glance summary of the key performance indicators identified for the Single Midlothian Plan and under each of the perspective headings of the Balanced Scorecard. Detailed performance data is available in the quarterly service performance reports.

Balanced Scorecard

SMP Key Priority Indicators

Reducing the Gap in Economic circumstances
🔴 2 ✅ 2 📈 2 ❓ 2

Reducing the Gap in Health Outcomes
🔴 0 ✅ 2 📈 3 ❓ 0

Reducing the gap in Learning Outcomes
🔴 5 ✅ 2 📈 2 ❓ 0

Customer Perspective Performance Indicators
🔴 16 ✅ 16 📈 31 ❓ 11

Financial Health PIs
🔴 1 ✅ 0 📈 0 ❓ 20

Learning and Growth PIs
🔴 2 ✅ 1 📈 9 ❓ 4

Internal Process PIs
🔴 3 ✅ 1 📈 2 ❓ 5

🔴 Off Target   ✅ On Target   📈 Data Only Indicator   ❓ The Data is not available yet

Single Midlothian Plan - Key Indicators

Midlothian
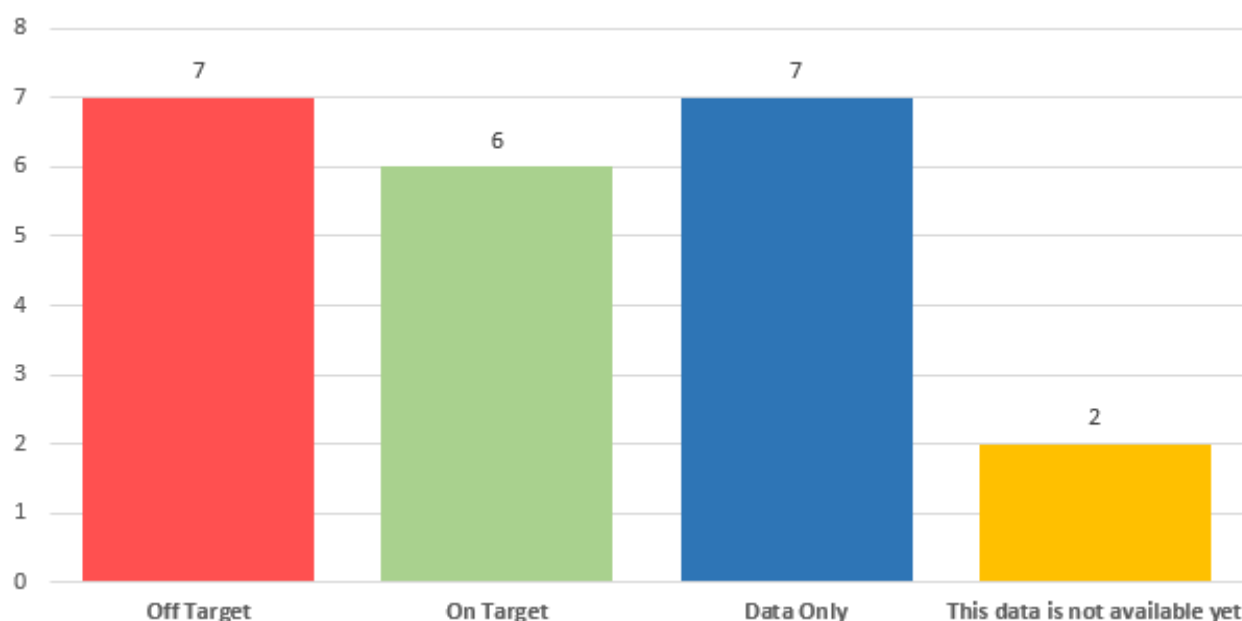
Reducing the gap in economic circumstances

PI Description	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Amount generated by Midlothian Council Welfare Rights Team (WRT)	N/A	£2,874,343	£3,408,151	£4,407,373	£2,500,000	✅	**18/19**: On Target
% of those leaving school secure a positive destination	N/A	95.1%	95%	94.35%	95%	🛑	**18/19**: Off Target 94.35% of School leavers in 17/18 secured an initial positive destination.
Number of new business start ups assisted in Midlothian area of Borders Rail Line corridor	N/A	100	202	172	Data Only	📈	**18/19**: Data Only Borders Rail Corridor = A7 + A68 corridor = Danderhall, Dalkeith, Eskbank, Bonnyrigg, Rosewell, Lasswade, Newtongrange, Gorebridge.
Number of LEADER projects funded (cumulative)	N/A	10	16	17	Data Only	📈	**18/19**: Data Only
Midlothian Citizen Advice Bureaux (CABs) will generate an income maximization of £625k per quarter	N/A	£3,820,265	£3,704,161	£3,352,380	£2,500,000	✅	**18/19**: On Target
Increase the number of households accessing energy saving or fuel poverty advice and assistance schemes	3,724	3,278	2,583	N/A	3,000	❓	
% of young people approaching the homelessness service who engage with Youth Homelessness Prevention Service	N/A	33%	65%	N/A	95%	❓	**18/19:** No data available yet

PI Description	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of new homes completed	N/A	80	114	0	165	🛑	**18/19**: Off Target 157 homes are due to be complete by the end of 2019.

Reducing the gap in health outcomes

PI Description	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of Health & Social Care staff who have participated in face to face or on-line training (in health inequalities)	N/A	233	88	131	Data Only	📈	**18/19**: Data Only
The number of service users/patients supported through Community Health and Inequalities Team	N/A	3,736	178	193	Data Only	📈	**18/19**: Data Only 193 people seen between 1st April to 31st March.
Offer immediate mental health assessments through the new Gateway pilot project. Run 2 sessions a week across Midlothian and provide 200 mental health assessments	N/A	395	237	287	200	✅	**18/19**: On Target
Number of Health & Social Care staff who have participated in face to face or on-line training (cumulative)	N/A	N/A	1,741	1,595	Data Only	📈	**18/19**: Data Only
Recovery College: number of people engaging in education, training, volunteering and employment	N/A	43	84	75	74	✅	**18/19**: On Target

Reducing the gap in learning outcomes

PI Description	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Average primary school attendance	94.08%	95%	94.47%	94.86%	96.5%	🛑	**18/19**: Off Target Primary attendance for the first two terms of 2018/19 School year was up to 94.86%.
Average secondary school attendance	89.8%	90.24%	89.39%	89.34%	92%	🛑	**18/19**: Off Target Term 1+2 data shows secondary attendance at 89.34%
SEEMiS Exclusion data - Primary (2% reduction)	143	101	74	94	72	🛑	**18/19**: Off Target There have been 94 exclusion incidents in Primary Schools in Terms 1+2.
SEEMiS Exclusion data - Secondary (2% reduction)	315	318	299	210	311	✅	**18/19**: On Target There have been 210 Secondary exclusions in Q1-4, a reduction of 89 on last year.
Number of eligible 2 year olds in receipt of Early Learning and Child Care	115	171	161	184	200	🛑	**18/19:** Off Target Up 21 on the same quarter last year.

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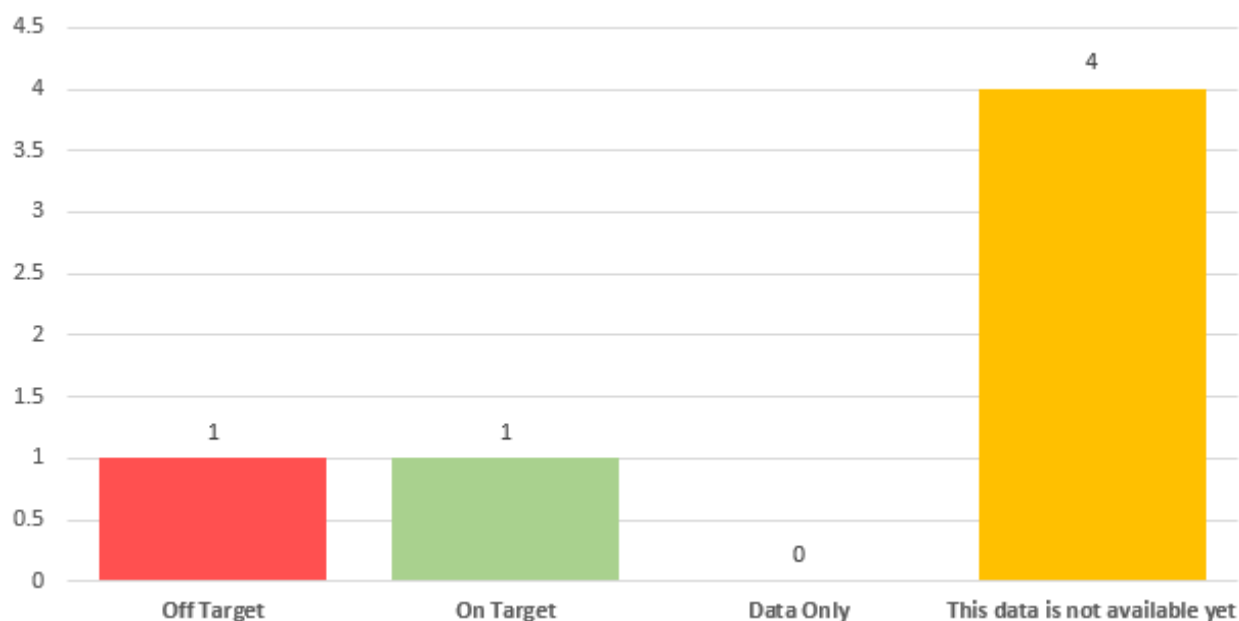| PI Description	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Increase % of NVQ4 and above qualification levels of Midlothian residents	N/A	38.5%	38.5%	41.8%	40.9%	✅	**18/19**: On Target
Midlothian residents with no qualifications have reduced	N/A	6.4%	6.4%	7.3%	7%	🛑	**18/19**: Off Target The latest available information (Jan-Dec 2017) shows Midlothian is below the Scottish average.
Improvement in the percentage of pupils from SIMD deciles 1 and 2 pupils achieving the expected CfE level by the end of P1, P4,P7 and S3	N/A	N/A	65.4%	72.47%	Data Only	📈	**18/19**: Data Only 72.47% of SIMD 1+2 pupils on average reached the expected cfe level in the 4 core areas (Listening/Talking, Reading, Writing and Numeracy) across P1, P4, P7 and S3.
Percentage of increase in PIPS score achieved by P1 pupils from SIMD deciles 1 and 2 between entry and exit compared to the Midlothian average improvement	N/A	81.2%	132%	N/A	Data Only	📈	**18/19**: Data Only All children in P1 have completed SNSA (Scottish National Standardised Assessment) which assesses their literacy and numeracy ability and schools have their own individual results, this data is still classed as "Experimental" by Scottish Government and therefore should not be used in aggregated format. These have been used to plan appropriately for individual learners. Results have been discussed by School Group Managers during school visits.

Customer Perspective – Adult, Health and Care

Midlothian
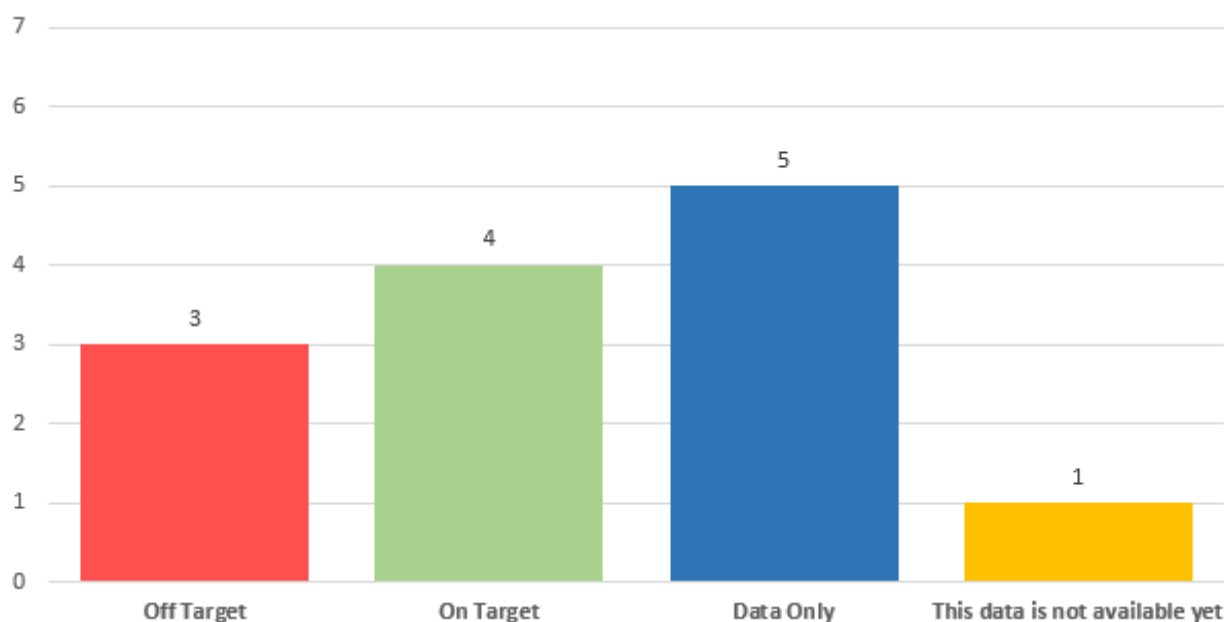
1. Adult Health and Care

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Increase the percentage of people who say they are able to look after their health or who say they are as well as they can be	83%	83%	86%	86%	83%	✅	**18/19**: On Target Information from the last annual user survey 2016 reported that 77 out of 90 (86%) of clients (who expressed an opinion) agreed with the statement "Services have helped me feel healthy". Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting.
Number of clients with new post diagnostic support	46	200	116	197	Data Only	📈	**18/19**: Data Only
Number of carers who feel valued and supported to continue in their role	55%	55%	52.7%	52.7%	85%	🛑	**18/19**: Off Target In the 2016 Carer Survey 39 out of 74 carers responded positively to the question "I feel valued and supported as a carer". Responses noted as not applicable and blank were excluded. The 2016

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Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
							survey was also distributed by Alzheimer Scotland, Woodburn and St David's Day Centres in order to reach more carers, and consistent with the 2015 process. As part of internal processes Carers Conversations also take place, and these contain a number of outcomes based questions which include questions about carer satisfaction. Target will be reconsidered in line with previous performance, and consideration will be given to future improvement.
Maximise the no. of people accessing short breaks (Accumulative)	827	700	388	320	Data Only		**18/19**: Data Only
Percentage of people who say that have a say in the way their care is provided	78%	78%	81.7%	81.7%	75%		**18/19**: On Target Information from the 2016 user survey showed that 89 out of 109 respondents who expressed an opinion stated that they agreed with the question "I have been given choices about the type of service I receive". Responses included in this are Strongly Agree; Agree; Disagree; Strongly Disagree. It does not include the response Neither Agree Nor Disagree, consistent with previous calculations.
Reduce the number of emergency admissions for people aged 75+	3,876	2,257	2,785	2,797	Data Only		**18/19**: Data Only
Number of women offenders from Midlothian who engage with support services	N/A	9	13	13	Data Only		**18/19**: Data Only
Percentage of women offenders from Midlothian who engage with support services	N/A	55.5%	50%	54%	50%		**18/19**: On Target
Decrease the percentage of falls which result in a hospital admission for clients aged 65+	4.79%	5.03%	3.8%	7%	6%		**18/19**: Off Target Hospital admissions as a result of falls continues to be monitored.
Maintain at zero the number of patients delayed in hospital for more than 2 weeks at census date	1	11	16	20	0		**18/19**: Off Target Performance is a reflection of ongoing recruitment and retention issues within the care at home sector, which is both a local and national issue.
Percentage of people aged 65 and over with long-term care needs receiving personal care at home	66.67%	66.98%	68.04%	N/A	Data Only		**18/19**: Data will be available in February 2020.
Offer immediate mental health assessments through the new Gateway pilot project. Run 2 sessions a week across Midlothian and provide 200 mental health assessments	N/A	395	237	287	200		**18/19**: On Target

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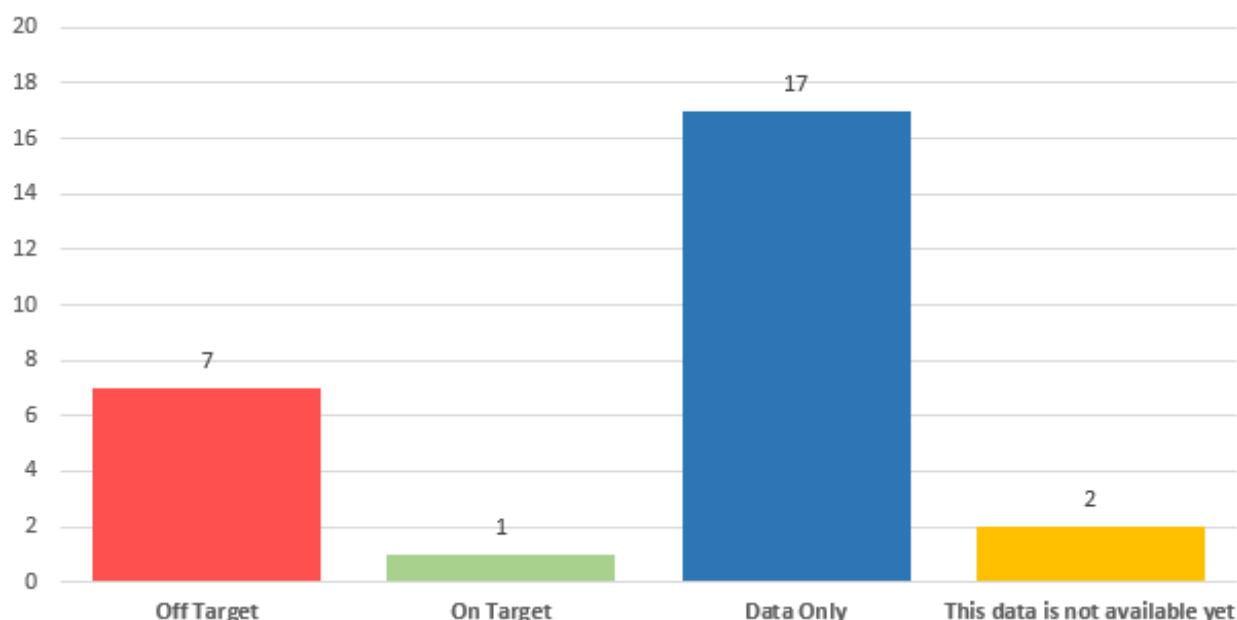| Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of Health & Social Care staff who have participated in face to face or on-line training (cumulative)	N/A	N/A	1,741	1,595	Data Only		**18/19**: Data Only

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of Health & Social Care staff who have participated in face to face or on-line training (cumulative)	N/A	N/A	1,741	1,595	Data Only		**18/19**: Data Only

Customer Perspective –
Community Safety

Midlothian 🍂

2. Community Safety

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
% of satisfactory complete Community Payback Orders	N/A	78.7%	67%	68%	80%	🛑	**18/19**: Off Target Whilst the final completion rate falls below the target set, the shortfall is not sufficient to cause concern within the service. Satisfactory completion can be affected by non attendance of offenders, and this is outwith the control of Council.
Number of high risk fire home safety visits	334	161	386	N/A	300	❓	**18/19**: Data unavailable. Data dependant on Fire and Police reporting cycles.
Percentage of all street light repairs completed within 7 days (cumulative)	96.2%	98.5%	90.6%	100%	100%	✅	**18/19**: On Target 1348 out of 1348 faults recorded were repaired within 7 days.
Reduce the percentage of acceptable behaviour contracts (ABC) breached	31.25%	57%	21%	N/A	26.25%	❓	
Reduce the % of initial warning cases escalating to ABC	2%	0.8%	2%	N/A	3%	❓	**18/19**: Data not yet available
Reduce % of ASBOs breached	20%	33.3%	60%	N/A	20%	❓	

Customer Perspective – GIRFEC

Midlothian 🍃

3. Getting it Right for Every Midlothian Child

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of outcome focused assessments undertaken (cumulative)	N/A	180	1,006	1,241	Data Only	📈	**18/19**: Data Only Q1 = 230, Q2 = 250, Q3 = 407, Q4 = 354
Number of referrals to the duty service (cumulative)	N/A	4,764	4,893	5,519	Data Only	📈	**18/19**: Data Only Q1 = 1346, Q2 = 1223, Q3 = 1531, Q4 = 1419
Number of foster carers going through prep groups on a quarterly basis (cumulative)	N/A	43	53	23	Data Only	📈	**18/19**: Data Only
Number of new foster carers approved (cumulative)	N/A	9	5	5	Data Only	📈	**18/19**: Data Only Q1 = 3, Q2 = 0, Q3 = 2, Q4 = 0
Number of foster carers de-registered quarterly (cumulative)	N/A	5	3	4	Data Only	📈	**18/19**: Data Only
Number of permanence LAAC Reviews happening quarterly (cumulative)	N/A	34	16	37	Data Only	📈	**18/19**: Data Only Q1 = 14, Q2 = 10, Q3 = 6, Q4 = 7
Number of children matched in quarter – (average months from perm LAAC to matching panel) (cumulative)	N/A	19	12	6	Data Only	📈	**18/19**: Data Only Q1 = 3, Q2 = 0, Q3 = 0, Q4 = 3
Number of places taken at residential houses - capacity 12	N/A	10	10	7	12	✅	**18/19**: On Target Not cumulative - Shapshot figure

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
The number of children living in kinship care	192	171	66	53	Data Only		**18/19**: Data Only Not cumulative - snapshot figure
The number of children living in foster care	192	171	86	63	Data Only		**18/19**: Data Only Not cumulative - snapshot figure
Number of Midlothian children on the Child Protection Register	N/A	54	36	51	Data Only		**18/19**: Data Only
Rate per 1,000 population of Midlothian children on the Child Protection Register in relation to the Scottish average	N/A	3.2	2.2	3	Data Only		**18/19**: Data Only Midlothian is slightly above the national rate of 2.9
% of Child Protection plans which have integrated chronology	N/A	79%	94%	96%	Data Only		**18/19**: Data Only
Rate per 1,000 of Midlothian Looked After Children AT HOME in comparison with the Scottish average	N/A	3.7	3.7	4.2	Data Only		**18/19**: Data Only The National rate is 3.7
Rate per 1,000 of Midlothian Looked After and Accommodated Children in comparison with the Scottish average	N/A	10.7	9.4	7	Data Only		**18/19**: Data Only The National rate is 10.6
The number of looked after children and young people not in residential placed outwith Midlothian	55	51	24	16	Data Only		**18/19**: Data Only
The number of looked after children and young people placed in Residential School outwith Midlothian	12	10	8	6	Data Only		**18/19**: Data Only
The percentage of care leavers in positive destinations.	76%	76.92%	72.73%	N/A	95%		**18/19**: Data not available Data will be available in Q3 19/20
The number of young people who are allocated/engage with Through Care and After Care service	83	88	90	65	Data Only		**18/19**: Data Only Snapshot figure
Child Protection: % of Core Group meetings held within a 8 week period.	N/A	80%	100%	99%	100%		**18/19**: Off Target 257 out of 260 core groups held in timescale.
Child Protection: % of Core Group meetings held within 15 days for Initial	N/A	87%	93%	87%	100%		**18/19**: Off Target 77 out of 88 held in timescale
Reduce exclusions in Primary schools	140.14	101	74	94	72		**18/19**: Off Target There have been 94 exclusion incidents in Primary Schools in Q1-4.
Reduce exclusions in Secondary schools	315	318	299	210	190		**18/19**: Off Target There have been 210 Secondary exclusions in Q1-4, a reduction of 89 on last year.
Improve Primary School attendance	94.08%	95%	94.5%	94.86%	96.5%		**18/19**: Off Target Primary attendance for the first two terms of 2018/19 School year was up to 94.86%.
Improve Secondary School Attendance	90%	90.24%	89.4%	89.34%	92%		**18/19**: Off Target Term 1+2 data shows secondary attendance at 89.34%
Number of eligible 2 year olds in receipt of Early Learning and Child Care	115	171	161	184	200		**18/19:** Off Target Up 21 on the same quarter last year.

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Annual percentage seen within 18 weeks for first treatment	N/A	N/A	48.8%	N/A	90%	[?]	**18/19**: Data not available

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Annual percentage seen within 18 weeks for first treatment	N/A	N/A	48.8%	N/A	90%	[?]	**18/19**: Data not available

Customer Perspective –
Improving Opportunities for Midlothian
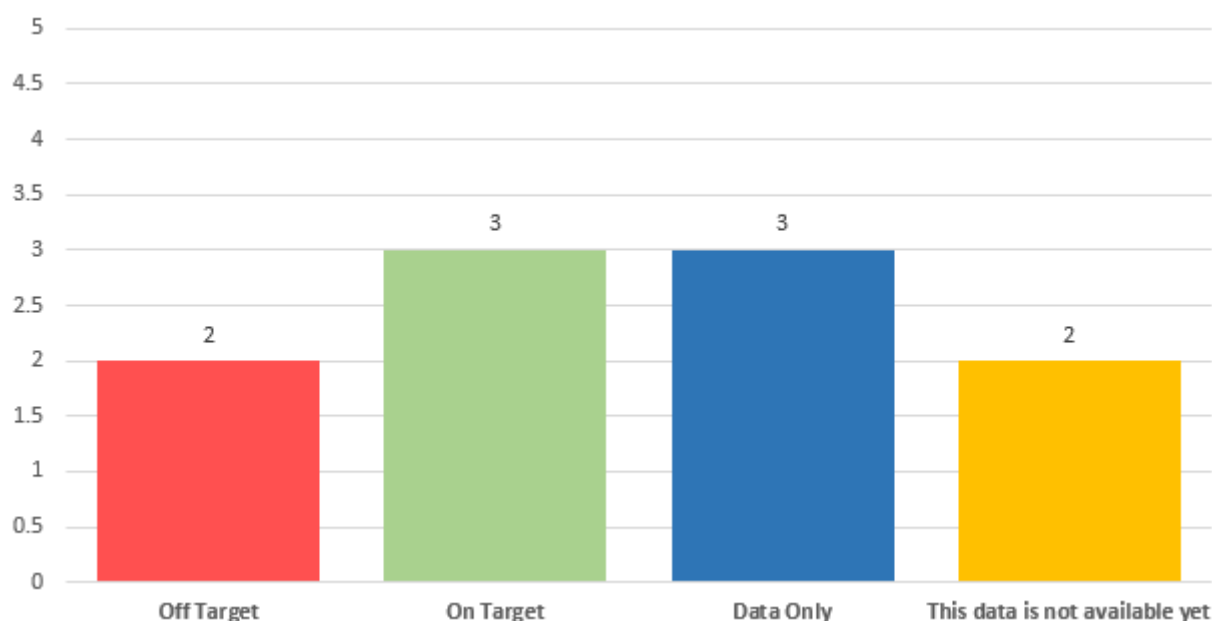
Midlothian

4. Improving Opportunities for Midlothian

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of neighbourhood plans completed	15	15	15	15	15	✅	**18/19**: On Target 15 Neighbourhood Plans Completed covering all 16 Community Council areas
Number of calls received regarding Scottish Welfare Fund	7,391	7,806	9,181	9,607	Data Only	📈	**18/19:** Data Only
Number of calls leading to application to Scottish Welfare Fund	4,220	4,270	4,754	5,116	Data Only	📈	**18/19**: Data Only
% of applications to Scottish Welfare Fund dealt with within 48 hours	97.94%	93.68%	92.3%	95.03%	Data Only	📈	**18/19**: Data Only
Amount generated by Midlothian Council Welfare Rights Team (WRT)	N/A	£2,874,343	£3,408,151	£4,407,373	£2,500,000	✅	**18/19**: On Target
Tone zone retention rate (quarterly)	56.66%	55.25%	49.25%	53.5%	55%	🛑	**18/19**: Off Target For year end the cumulative average total is 53.5%. However the trend over the last two quarters shows an excess of the annual target with the retention rate for quarter 4 being 58%.

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Proportion of Pupils Entering Positive Destinations (LGBF)	95.1%	94.7%	94.4%	N/A	93%	?	**18/19**: LGBF Indicators. 2018/19 data will be available in February 2020.
Percentage of Unemployed People Assisted into work from Council (LGBF)	8.57%	15.47%	6.71%	N/A	Data Only	?	
Midlothian Citizen Advice Bureaux (CABs) will generate an income maximization of £625k per quarter	N/A	£3,820,265	£3,704,161	£33,523,820	£2,500,000	✓	**18/19**: On Target
Number of activities offered by Ageing Well to 50+ age groups (quarterly)	24	23	23	15	16	⬤	**18/19**: Off Target 41 classes offered by Ageing Well over 15 different activities in 19 different venues. There was 5,770 visits to the weekly classes (up 783 from last quarter). Also 297 took part in other events/taster sessions. The project has 55 volunteers and the total volunteer hours contributed to the project this quarter was 1,016 this equates to over £15,000 of staff saving to the council for quarter and £70,000 cumulative for year.

Customer Perspective –
Sustainable Growth and Housing

Midlothian
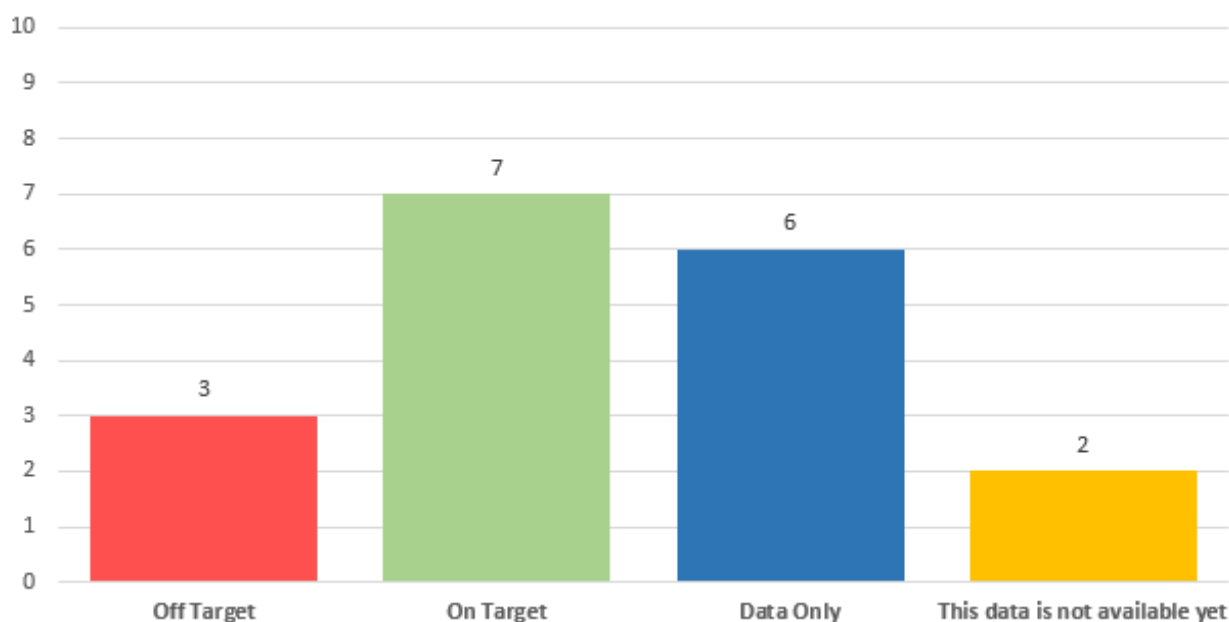
5. Sustainable Growth and Housing

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
No of participating Midlothian tourism businesses (Target – 15)	5	45	31	34	30	✅	**18/19**: On Target
% premises to have access to next generation broadband Target – 98% by Dec 2017	78.5%	98.1%	98.1%	98.4%	98%	✅	**18/19**: On Target
Number of young people receiving support through the Youth Homelessness Service	263	192	150	160	Data Only	📈	**18/19**: Data Only
Number of homeless households accommodated in Midlothian Temporary Accommodation at quarter end (snapshot)	520	467	418	413	Data Only	📈	**18/19**: Data Only Snapshot at quarter end.
Number of new build properties	N/A	59	107	85	Data Only	📈	**18/19**: Data Only
Re-let time permanent properties (days)	52 days	48 days	50 days	49 days	45 days	🛑	**18/19**: Off Target A slight increase in the average days with Building Services from 38 in 2017/18 to 39 2018/19. Actions are currently in place to address this. Average days with Housing Services 9 days. This represents a 3 day improvement on 2017/18.

Performance Indicator	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Number of environmental awards e.g. Green flags	5	5	5	2	2	✅	**18/19**: On Target Green Flags attained for Vogrie and Loanhead Memorial. Limited to 2 due to budget restrictions.
Number of individuals involved in Community Schemes	N/A	1,580	1,771	2,431	1,800	✅	**18/19**: On Target Exceeded target by 631 participants.
Reduction in energy consumption on Non Domestic operational property stock per annum	57,284	47,402	50,754	47,524	50,568	✅	**18/19**: On Target Annual target based on 3% year on year reduction is 12642 tCO2. The Q4 total figure of 12,004 tCO2 (a reduction of 638.42 tCO2 this quarter which is below the quarterly target) results in a 6.02% reduction the annual target.
Number of new Business Start Ups assisted (cumulative)	173	168	158	376	Data Only	📈	**18/19**: Data Only
Average Percentage of roads that should be considered for maintenance treatment	28.55%	28.57%	30.96%	34.02%	Data Only	📈	**18/19**: Annual measure, indicative figure will verified by improvement service in Feb 2020.
% of total road network resurfaced (cumulative)	1.15%	1.1%	1.3%	1.67%	1%	✅	**18/19**: Complete 18/19 programme complete with 11.3km of carriageway resurfaced.
The percentage of Council fleet which is 'Green' (cumulative)	2.1%	4.68%	5.41%	5.34%	6%	🛑	**18/19**: Off Target Currently 14 electric vehicles in fleet. (based on 262 vehicles in fleet). 6 further vehicles on order.
% of waste going to landfill per calendar year (quarterly)	34.0%	33.0%	40.9%	N/A	35.0%	❓	**18/19**: Data not available Awaiting information from our contractors, returns into waste data flow will be available at Q1 19/20. In Q3 19.1% of Mixed Municipal Waste was landfilled.
Street Cleanliness Score (LGBF)	98.7%	98.7%	95.98%	91.3%	97.5%	🛑	**18/19**: Off Target Decrease in this year's street cleanliness score due to the deployment of staff to other priority areas. This is an indicative figure which will be verified by the improvement service in February 2020.
Percentage of total household waste that is recycled (LGBF)	47.9%	53.5%	51.6%	N/A	54.0%	❓	**18/19**: Data not available Awaiting information from our contractors, returns into waste data flow will be available at Q1 19/20. Q3 18/19 recycling rate was 53.3%.
Corporate Indicator - Percentage of the Councils housing stock meeting the Scottish Housing Quality Standard criteria (LGBF)	93.1%	96.0%	96.4%	96.4%	100.0%	✅	**18/19**: On Target 96.4% of the council's housing stock meets the SHQS criteria. The remaining 3.6% of properties are being targeted by Building Services to actively

Performance Indicator	2015/16 Value	2016/17 Value	2017/18 Value	2018/19 Value	Target	Status	Note
							attempt to obtain access to the remaining properties that remain exemption. There are no failures in any of the housing stock where access has been gained. 100% of council housing stock meets the SHQS requirements for reporting purposes to the Scottish Government.
Number of void properties re-let	219	258	280	309	Data Only		**18/19**: Data Only

Financial Health Perspective

Midlothian

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Business Transformational Funding Applied (cumulative)	N/A	N/A	£3.287 m	N/A	Data Only	?	**18/19**: Data not available
Business Transformational Funding Remaining	N/A	N/A	£3.838 m	N/A	Data Only	?	**18/19**: Data not available
Value of Transformational Savings Delivered (cumulative)	N/A	N/A	£14.334 m	N/A	Data Only	?	**18/19**: Data not available until final outturn prepared.
Performance against revenue budget	£191.344m	£198.446m	£202.932m	N/A	£205.194m	?	**18/19**: Data will be available when it has been verified and has been presented to the Council.
Corporate Indicator - Primary Education - Cost per pupil (LGBF)	£4,822.58	£4,963.55	£5,120.37	N/A	Data Only	?	
Corporate Indicator - Secondary Education - Cost per pupil (LGBF)	£6,525.17	£6,818.93	£6,941.53	N/A	Data Only	?	
Corporate Indicator - Pre- Primary Education - Cost per pupil (LGBF)	£3,705.18	£4,464.51	£4,295.59	N/A	Data Only	?	
Corporate Indicator - The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week (LGBF)	£3,074.23	£2,773.51	£3,735.35	N/A	Data Only	?	**18/19**: LGBF Indicators. 2018/19 data will be available in February 2020.
Corporate Indicator - The Gross Cost of "Children Looked After" in a Community Setting per Child per Week (LGBF)	£333.16	£333.29	£339.71	N/A	Data Only	?	
Corporate Indicator - Central Support services as a % of Total Gross expenditure (LGBF)	6.03%	6.34%	4.47%	N/A	Data Only	?	
Corporate Indicator - Cost of collecting council tax per dwelling (LGBF)	£11.40	£9.80	£9.25	N/A	Data Only	?	

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Corporate Indicator - Percentage of invoices sampled and paid within 30 days (LGBF)	89.7%	87.4%	93.1%	91.1%	95.0%	🛑	**18/19**: Invoice Approval implementation continuing. E-Invoicing and lodged cards to implemented in Q1/Q2 19/20.
Corporate Indicator - Net cost of waste collection per premise (annual) (LGBF)	£73.24	£74.94	£74.34	N/A	Data Only	❓	
Corporate Indicator - Net cost of waste disposal per premise (annual) (LGBF)	£87.84	£85.51	£85.01	N/A	Data Only	❓	
Corporate Indicator - Net cost of street cleaning per 1,000 population (LGBF)	£12,095.21	£12,662.23	£11,810.41	N/A	Data Only	❓	
Corporate Indicator - Cost of maintenance per kilometre of roads (LGBF)	£5,949.63	£7,798.77	£8,214.91	N/A	Data Only	❓	
Corporate Indicator - Cost of Trading Standards, Money Advice & Citizen Advice per 1000 population (LGBF)	£6,625.47	£5,744.27	£4,917.30	N/A	Data Only	❓	**18/19**: LGBF Indicators. 2018/19 data will be available in February 2020.
Corporate Indicator - Cost of environmental health per 1,000 population. (LGBF)	£10,115.57	£10,382.58	£11,311.00	N/A	Data Only	❓	
Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£26.98	£24.65	£36.88	N/A	Data Only	❓	
Corporate Indicator - SDS spend on adults 18+ as a % of total social work spend on adults 18+(LGBF)	3.95%	6.11%	4.75%	N/A	Data Only	❓	
Corporate Indicator - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£408.30	£363.41	£411.59	N/A	Data Only	❓	

Learning and Growth Perspective

Midlothian

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Corporate Indicator - Sickness Absence Days per Employee (All employees)	8.29	8.34	7.5	8.55	7.5	🔴	**18/19**: Off Target Sickness absence interventions are being recommended to the Corporate Management Team to further address levels of sickness absence and it is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future. Teachers stats: The Council has started negotiations with the teaching trade unions in relation to introducing a revised Maximising Attendance at Work Policy.
Percentage of employees who are performing as 'Outstanding' in their individual performance framework	N/A	5.87%	6.7%	N/A	Data Only	❓	**18/19**: Data not available until June 2019.
Percentage of employees who are performing as 'High' in their individual performance framework	N/A	26.72%	25.55%	N/A	Data Only	❓	

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Percentage of employees who are performing as 'Good Overall' in their individual performance framework	N/A	43.12%	39.9%	N/A	Data Only	[?]	**18/19**: Data not available until June 2019.
Percentage of employees who are performing as 'Below Standard' in their individual performance framework with appropriate improvement plans in place	N/A	0.44%	0.59%	N/A	Data Only	[?]	
Percentage of staff turnover (including teachers)	N/A	10.48%	10.3%	10.38%	Data Only	📈	**18/19**: Data only We track our employee turnover rates on a quarterly basis by expressing it as a percentage of employees overall when taking account of all leavers.

We need to be aware of our employee turnover rates and understand how these affect our performance and ability to achieve our strategic outcomes. Consideration of the levels of turnover across services, locations and particular groups of employees helps to inform workforce planning and resourcing. |
Number of Work Experience Placements undertaken in Midlothian Council including external qualifications	N/A	N/A	939	949	Data Only	📈	**18/19**: Data only For this year, 949 young people participated on work placements.
Number of Apprenticeships and trainee positions	N/A	N/A	N/A	85	Data Only	📈	**18/19**: Data only
Employee Survey - I enjoy the work I do	N/A	94.4%	N/A	91.21%	Data Only	📈	**18/19**: Data only Last survey undertaken was in 16/17 and result was 94.4%. Ongoing and widespread budgetary reductions and service reviews creates a climate of uncertainty for our employees which could have an impact on the results. A manager's guide to action planning has been issued to Heads of Service and shared with service managers alongside their team results. Engagement sessions to allow managers to discuss the results with their teams and develop action plans is ongoing.
Employee Survey - I am proud to work for Midlothian Council	N/A	79.3%	N/A	81.15%	Data Only	📈	**18/19:** Data only Last survey undertaken was in 16/17 and result was 79.3%. A manager's guide to action planning has been issued to Heads of Service and shared with service managers alongside their

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Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
							team results. Engagement sessions to allow managers to discuss the results with their teams and develop action plans is ongoing.
Employee Survey - I can see how my objectives link to the councils objectives and priorities	N/A	85.3%	N/A	75.39%	Data Only		**18/19**: Data only Last survey undertaken was in 16/17 and result was: 85.3% Ongoing and widespread budgetary reductions and service reviews creates a climate of uncertainty for our employees which could have an impact on results. A manager's guide to action planning has been issued to Heads of Service and shared with service managers alongside their team results. Engagement sessions to allow managers to discuss the results with their teams and develop action plans is ongoing. Work on the MAD ideas project will also encourage staff to consider how what they do links to the council's objectives.
Progress against Council's mainstream report (Equality and Diversity)	N/A	100%	100%	100%	100%		**18/19**: Equality and Diversity Report published on our website and will be reviewed April 2019.
Corporate Indicator - The Percentage of council employees in top 5% of earners that are women (LGBF)	44.6%	47.0%	49.0%	49.2%	50.0%		**18/19**: Off Target This year we continued our positive trend of 49% of women in the top 5%. This figure does not include teaching staff. The Council's workforce is approximately 75% female and 25% male. We are committed to monitoring gender information and determining any appropriate positive action.
Corporate Indicator - The gender pay gap between average hourly rate of pay for male and female - all council employees	4.59%	2.97%	2.32%	3.94%	Data Only		**18/19**: Data only The gender pay gap indicator is a measurement of average female pay versus average male pay within the organisation and the figures show that the Council has more male staff at higher rates of pay by 3.94%.
Corporate Indicator - Teachers Sickness Absence Days (Cumulative) (LGBF)	4.17 days	4.94 days	4.59 days	5.15 days	Data Only		**18/19:** Data only The Council has started negotiations with the teaching trade unions in relation to introducing a revised Maximising Attendance at Work Policy it is anticipated that in conjunction with the

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
							Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future.
Corporate Indicator - Local Government Employees (except teachers) sickness absence days (CUMULATIVE) (LGBF)	9.90 days	9.64 days	8.59 days	9.86 days	Data Only		**18/19**: Data only It is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future.

Internal Processes Perspective

Midlothian

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
% of internal/external audit actions progressing on target.	N/A	26.67%	58.73%	67.74%	85%	🔴	**18/19**: Off Target The outstanding actions are being addressed by the relevant managers within each Service.
% of high risks that have been reviewed in the last quarter	N/A	100%	100%	100%	100%	✅	**18/19**: 8 High Risks reviewed in the last quarter and are on target.
Corporate Indicator - Percentage of adults satisfied with libraries (LGBF)	68.33%	66.67%	66%	N/A	Data Only	❓	**18/19**: Data will be available in February 2020.
Corporate Indicator - Percentage of adults satisfied with parks and open spaces (LGBF)	79%	78.33%	78.67%	N/A	Data Only	❓	**18/19**: Data will be available in February 2020.
Corporate Indicator - Percentage of adults satisfied with leisure facilities (LGBF)	73.67%	74%	74.33%	91.27%	Data Only	📈	**18/19**: Data Only Quarter 1 = 95.09% Quarter 2 = 94.37% Quarter 3 = 83.92% Quarter 4 = 91.70% Annual average = 91.27%
Corporate Indicator - Percentage of Adults satisfied with local schools (LGBF)	78%	78.33%	78.67%	N/A	Data Only	❓	
Corporate Indicator - Percentage of Adults satisfied with refuse collection (LGBF)	83%	86.67%	89.67%	N/A	Data Only	❓	**18/19**: LGBF Indicators. 2018/19 data will be available in February 2020.
Corporate Indicator - Percentage of adults satisfied with street cleaning (LGBF)	72.33%	73%	71.33%	N/A	Data Only	❓	

Short Name	2015/16	2016/17	2017/18	2018/19			
	Value	Value	Value	Value	Target	Status	Note
Total number of complaints received (cumulative)	4,756	5,936	5,201	5,107	Data Only		**18/19**: Data Only
Percentage of complaints at stage 1 complete within 5 working days	94.87%	97.66%	87.83%	88.24%	95%		**18/19**: Off Target Dashboards using Tableau that will provide troubleshooting opportunities and ample time to, where necessary remedy the causes of unfavourable statistics are about to be rolled out. Supporting detailed reports using Pentana Performance Management System are also provided to Head of Service at quarter end periods along with the usual reporting format, and attendance at Directors Management Team meetings by the Customer Service Improvement Officer is underway.
Percentage of complaints at stage 2 complete within 20 working days	88.14%	63.95%	70.24%	72.09%	95%		**18/19**: Off Target: Dashboards using Tableau that will provide troubleshooting opportunities and ample time to, where necessary remedy the causes of unfavourable statistics are about to be rolled out. Supporting detailed reports using Pentana are also provided to Head of Service at quarter end periods along with the usual reporting format, and attendance at Directors Management Team meetings by the Customer Service Improvement Officer is underway.

2017/18 Local Government Benchmarking Results

Report by Grace Vickers, Chief Executive

1   Purpose of Report

The purpose of this report is to provide the Cabinet and Performance Review & Scrutiny Committee with an update on the Local Government Benchmarking Framework (LGBF) for 2017/18. This report offers a refresh of the data presented to Cabinet on the 26th of February, it now includes the Children's Services Data published by the Scottish Government in April 2019.

2   Background

All councils have been working with the Improvement Service and SOLACE to develop a common approach to benchmarking. Information is collected on a set of indicators that lets us know how we are performing in comparison to others, this is known as the Local Government Benchmarking Framework (LGBF). The LGBF allows us to share best practice and learn from councils who are performing well in certain areas.

There has been an increase in the number of LGBF indicators for 2017/18 with the main additions being to the indicator sets for Economic Development. This work has resulted in a national dataset comprising of 80 indicators. The key principle of the indicators was that they were comparable across all 32 councils. It should be noted that two of the indicators relate to museums and galleries therefore only 78 are relevant to Midlothian and 4 Children's Services indicators are reported biennially and these will be available for the 2018/19 cycle.

The indicators are grouped under the following categories:
- Social Work Services
- Children's Services
- Corporate Assets and Services
- Culture and Leisure
- Economic Development
- Environmental Services
- Housing Services

The framework reports on how much councils spend on particular services, service performance and how satisfied people are with the major services provided by councils. The cost indicators have been developed using the best available cost information for councils from existing sources such as the Local Financial Return (LFRs). A range of satisfaction measures have also been included from the Scottish Household Survey (SHS).

Local results are considered in the context of the national picture, including comparison of 2017/18 data with the Scottish average and graphs showing Midlothian trend data against the Scottish and Family Group averages.

Rather than being viewed as a league table, the data-set can be regarded as a useful 'can-opener' in flagging up issues worthy of further investigation For example, high costs for one indicator may reflect investment to affect a policy change rather than inefficient spend and a trade-off between cost and performance can be expected.

When considering the data, it is also important to be aware of intended/expected levels of performance, rather than focusing on the collective number of indicators in the top quartile. For example the Council's spend on our schools means we are meeting our objective to achieve higher educational attainment year on year.

It is important to remember that councils across Scotland do not have common service structures. Each council has a structure and service arrangement that it believes is the most appropriate and cost effective way to support its local community.

3.   **Current Position**

Within the Council, performance against the indicators will be monitored as part of the performance management arrangements which includes quarterly reporting to Cabinet and Performance, Review and Scrutiny Committees.

Cabinet and Performance Review and Scrutiny Committee should note that the framework continues to be reviewed and this year the suite of Economic Development measures have been expanded to include: Cost of Economic Development & Tourism per 1,000 Population; Proportion of people earning less than the living wage; Proportion of properties receiving superfast broadband; Town vacancy rates; Immediately available employment land as a % of total land allocated for employment purposes in the local development plan.

In summary, whilst there are questions about the relevance, comparability and reliability of some of the indicators, there is nevertheless clear value in a number of the indicators, particularly those that are direct measures of performance. These show some areas of strength and some areas for improvement in Midlothian, and point to areas such as the time it takes us to complete non-emergency repairs and the percentage of unemployed people assisted into work from Council funded employability programmes where improvement is necessary.

Whilst details of the 17/18 Benchmarking results are shown in appendix 1, the table below provides a high level summary of our performance across the four quartiles. The first quartile contains the best performing councils for particular indicators and the fourth quartile contains the poorest performing councils

It should be noted that there are 4 indicators whereby the data is collected biennially and will be reported in the 2018/19 cycle. At this time 54% of our indicators are in the top two quartiles.

Scottish ranking	Percentage % of indicators falling within each quartile	
	2017/18	2016/17
1st and 2nd Quartile (ranked 1-16)	40/74 54%	38/76 50%
3rd and 4th Quartile (ranked 17-32)	34/74 46%	38/76 50%

Information comparing performance information from all councils 32 Scottish councils is available on a national website called Mylocalcouncil. The website compares performance information from all 32 Scottish councils. The Improvement Service also published the data for all councils in February 2019 and refreshed the data in April to include the Children's Services data, details can be found at **http://www.improvementservice.org.uk/benchmarking/**

4   Report Implications

4.1   Resource

There are no resource implications

4.2   Risk

This report seeks to mitigate the risk that the Council does not meet its obligations in terms of the requirement to publicly report on performance information.

4.3   Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- ☐ Getting it right for every Midlothian child
- ☐ Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☒ Business transformation and Best Value
- ☐ None of the above

4.4 Key Priorities within the Single Midlothian Plan
The LGBF measures for 17/18 contribute to all three Priorities identified in the SMP, Reducing the gap in learning outcomes; Reducing the gap in health outcomes and Reducing the gap in economic circumstances.

4.5 Impact on Performance and Outcomes
The LGBF benchmarking dataset along with service plan outcomes are incorporated in the Balanced Scorecard and form a key component of the ongoing performance reporting requirements.

4.6 Adopting a Preventative Approach
The council's Planning Performance Management Framework is underpinned by the previously identified Future Model key principles, one of which focuses on prevention.

4.7 Involving Communities and Other Stakeholders
This report does not directly relate to involving communities and stakeholders though access to the information is widely available via the council's website and the national website noted **in section 3.**

4.8 Ensuring Equalities
The LGBF indicators monitor some aspects of equalities with a few of the indicators relating to the equality characteristics of gender and disability.
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4.9 Supporting Sustainable Development
The Councils Planning and Performance Management Framework demonstrates a sustainable approach to service delivery by ensuring that stakeholders and Elected Members are informed and able to comment on Council planning and performance. LGBF indicators are included in the framework.

4.10 IT Issues
There are no IT issues directly relating to this report. The LGBF results will be made available on the council Website.

5 Recommendations
Cabinet and Performance Review and Scrutiny are asked to:
- Note the refreshed 2017/18 LGBF comparison results detailed in Appendix 1.

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Background Papers: Appendix 1 – Local Government Benchmarking Framework 2017/18 Report

Local Government Benchmarking Framework - Midlothian Council Performance 2017/18

As a council we deliver our priorities through the Community Planning Partnership and the Single Midlothian Plan. The Council Transformation Programme and individual service Plans outline how Midlothian Council will deliver its contribution to the Single Midlothian Plan.

Community Planning partners have agreed the following vision for Midlothian:

> "Midlothian – a great place to grow".

With the following three areas as key priorities:

- Reducing the gap in learning outcomes
- Reducing the gap in health outcomes
- Reducing the gap in economic circumstances

Three approaches to how the council works with its communities have been agreed – preventive intervention, co- production and capacity building and localising / modernising access to services

In addition to the three key priorities and three approaches the Council will also focus on reducing the gap between outcomes for residents living in parts of the county which for many years have shown a significant gap between their outcomes and the average outcomes for Midlothian and Scotland as a whole. The areas targeted are Dalkeith Central/Woodburn; Mayfield/Easthouses and Gorebridge.

Service plans demonstrate commitment to reducing the outcome gap for residents in areas of concentrated deprivation.

The Single Midlothian Plan incorporates five overarching thematic groups which support the achievement of outcomes. This thematic approach is used for quarterly performance reporting, the themes are as follows:

- Adult Health and Social Care - *Responding to growing demand for adult social care and health services*
- Community Safety & Justice - *Ensuring Midlothian is a safe place to live, work and grow up in*
- Getting it Right for Every Midlothian Child - *Improving outcomes for children, young people and their families.*
- Improving Opportunities for Midlothian - *Creating opportunities for all and reducing inequalities.*
- Sustainable Growth Midlothian - *Growing the local economy by supporting business growth and responding to growing demand for housing in a sustainable environment.*

The council records and monitors a wide range of information to make sure we are performing well and working to continually improve services. A host of performance information, including progress towards the outcomes of the Single Midlothian Plan can be found on our performance web pages at https://www.midlothian.gov.uk/performance. These pages also provide a number of links to signpost you to further information on our Quarterly Performance

Reports, Balanced Scorecard approach, our Local Government Benchmarking Framework data, as well as that for other Scottish councils which can also be found at the [Mylocalcouncil](#) website.

In this paper we present an overview of Midlothian Council's performance against the **Local Government Benchmarking Framework (LGBF)** indicators for the period 2015-16 to 2017-18.

Local Government Benchmarking Framework (LGBF): Background

Over the last eight years all councils in Scotland have been working with the Improvement Service and SOLACE to develop a common approach to benchmarking. Information is collected on a set of indicators that lets us know how we are performing in comparison to others. This is called the Local Government Benchmarking Framework (LGBF). It allows us to share best practice and learn from councils who are performing well in certain areas. The indicators are grouped under the following categories:

    (a) Adult Social Care
    (b) Children's Services
    (c) Corporate Assets and Services
    (d) Culture and Leisure Services
    (e) Environmental Services
    (f) Economic Development
    (g) Housing Services

The LGBF provides a set of indicators around cost, performance and satisfaction. The cost indicators have been developed using the best available cost information for councils from existing sources such as the Local Financial Return (LFRs). A range of satisfaction measures have also been included from the Scottish Household Survey (SHS).

Benchmarking Data: How it is used

Benchmarking is a comparison exercise. It is an important method for assessing how we are performing with the resources available. It shows us areas of good practice, and those for improvement through comparing our performance, processes, and costs with others.

Benchmarking data not only tells us how we are performing in relation to others, but can also support us in improving services. The data in this report should not be viewed as a crude "league table" analysis as it is inappropriate to consider indicators in isolation. In the first instance the data can be regarded as a useful starter for exploring issues in more detail. The ultimate goal is to use benchmarking data to improve services. The council will use this data to compare how we are performing, 'drill-down' to identify where there is room for improvement and take action to achieve service improvements.

Summary of LGBF Performance 2017/18

The Benchmarking framework reports on how much councils spend on particular services, service performance and how satisfied people are with the major services we provide. This report provides a summary of Midlothian's performance against key indicators for the period 2015/16 to 2017/18. The indicators are analysed across the seven categories of the LGBF. Within the Council, performance against the indicators is monitored as part of the performance management arrangements which includes quarterly reporting to Cabinet and Performance, Review and Scrutiny Committee.

Local results are considered in the context of the national picture, including comparison of 2017/18 data with the Scottish average and graphs showing Midlothian trend data against the Scottish and Family Group averages.

A report on Midlothian's performance against the LGBF indicators for 2016/17 was considered at Cabinet and Performance Review and Scrutiny committees in June 2018. Since then, the national LGBF framework has been subject to review resulting in the expansion of the Economic Development measures which will strengthen the framework coverage of Economic Development. These measures are: Cost of Economic Development & Tourism per 1,000 Population; Proportion of people earning less than the living wage; Proportion of properties receiving superfast broadband; Town Vacancy Rates; Immediately available employment land as a % of total land allocated for employment purposes in the local development plan.

The customer satisfaction data that is included in the LGBF is derived from Scottish Household Survey (SHS). Whilst this data is proportionate at Scotland level, it is acknowledged there are limitations at local authority level in relation to small sample sizes and low confidence levels in the data available. In order to boost sample sizes three-year rolled averages have been used. The data used represents satisfaction for the public at large rather than for service users. It should be noted that satisfaction rates for service users gathered locally are consistently higher than those reported by the general population.

The Improvement Service has been coordinating wider benchmarking activity across all Scottish councils. Each council has been allocated to a 'family group' made up of councils of similar characteristics for more meaningful comparisons, analysis and sharing of best practice. Family group projects are underway for a range of service areas including: absence management, economic development, libraries, street cleaning, adult social care, Council Tax collection and Looked after Children.

Participation in other benchmarking networks enables us to share and compare data and processes with other organisations. It also helps us to identify new solutions to common problems. We take part in other benchmarking networks. These include: Association for Public Sector Excellence (APSE); Scotland's Housing Network (SHN); Complaints Handlers' Network (CHN); Scottish Performance Management Forum (SPMF) and Scottish Leisure Networking Group (SLNG)

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The graph below provides a high level summary per LGBF category of our performance across the four quartiles for this year. The first quartile contains the best performing councils for particular indicators and the fourth quartile contains the poorest performing councils.

2017/18 (78 indicators relevant to Midlothian)

■ 1st quartile   ■ 2nd quartile   ■ 3rd quartile   ■ 4th quartile
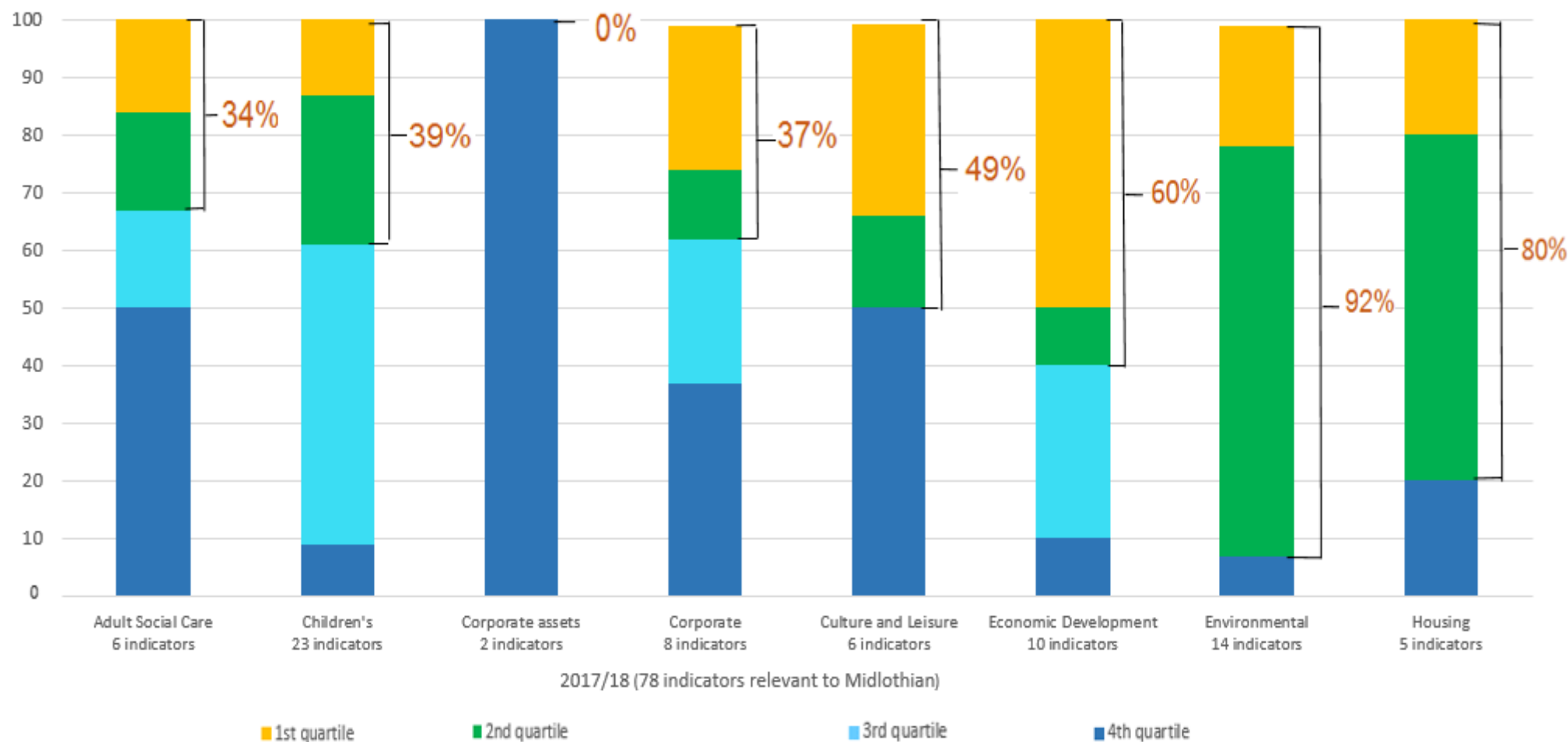
Notes: 1. Children's Services includes education. 2. Children's Services has 4 indicators which are reported biennually and will be reported in 18/19. 3. 'Corporate' includes indicators of sickness absence; council tax collection; spend on support services etc. Corporate Assets includes indicators on the suitability and condition of council buildings. 4. The first quartile shows where we are amongst the top performing councils

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ADULT SOCIAL CARE 2017/18
National Overview

In Scotland, spending on home care services for older people has been standardised around home care costs per hour for each council. This includes expenditure across all providers.

Total social care spending on adults has grown across the period by 10.2% but spending on home and residential care for older people has fallen as a % of that total. Expenditure in all areas grew between 2016/17 and 2017/18.

Spending on home care for older people has risen by 15% since 2010/11, and 3% in the past 12 months, but the number of hours of homecare provided has been relatively static across the last few years. Home Care costs per hour have risen by 5.4% since 2010/11 from £22.54 to £23.76, and by 3% in the past 12 months. A significant element of this will be focussed on meeting living wage commitments.

Spending on residential care has fallen across the period, by over 12%. This is largely because the net cost of residential care has come down rather than because the number of residents has fallen (-11.2% and -1.7% respectively). The average cost of residential care per week per resident is now £386, compared with £435 in 2010/11.

There has been progress in shifting the balance of spend between residential and home care. A record proportion of older people assessed to have long term care needs are being dealt with at home, 61.7% in 2017/18. However, hours of care at home are not growing, and the number of residents in residential care is declining, which indicates that demand is not growing at the rate expected. Modelling has typically assumed growth of around 3% per annum in demand for care: the effective rate has been less than 50% of that.

Council performance

The **Home Care costs** (%) reflect the current models of care within Midlothian, which includes responder services such as MERRIT, which has a higher qualified staff team. The results also reflect challenges that external providers have experienced in delivering sustainable services. For this year our price has inflated due to an increase in staffing numbers due to rising dependency levels.

The bulk of **Residential Care Services costs** are associated with Care Home provision, we currently only purchase residential care at the approved National Care Home Contract rate, our figure is lower than the national average and our family group average

Self-Directed Support (SDS) is now a business as usual process incorporated into social care provision, with a decrease to 4.75% from 6.11% the previous year. We are lower than the national average of 6.74% and higher than our family group average of 4.72%.

Service users 65+ with intensive needs relates to the percentage of people who receive more than 10 hours of support per week in the community, instead of living in a care home, it does not include those clients receiving 7-10 hours or two additional services from assistive technology or meal services, or attending a day centre. Our percentage increased to 68.04% from 66.98% in 2016/17.

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Presented below is an overview of Adult Social Care performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

Adult Social Care												
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	Older Persons Home Care Costs per Hour (Over 65)	£26.98	£24.65	£36.88	⬇	£23.76 (+£13.12) MC Poorer than Scot Ave	4	3	4	25	21	29
Cost	SDS spend on adults 18+ as a % of total social work spend on adults 18+	3.95%	6.11%	4.75%	⬇	6.72% (-1.97%) MC Poorer than Scot Ave	2	1	2	13	8	13
Performance	Percentage of service users 65+ with intensive needs receiving care at home.	66.67%	66.98%	68.04%	⬆	61.72% (+6.32%) MC Better than Scot Ave	2	1	1	10	6	5
Satisfaction	Percentage of adults receiving any care or support who rate it as excellent or good.	73%	Biennial Data	71.35%	⬇	80.18% (-8.83%) MC Poorer than Scot Ave	4		4	32		32
Satisfaction	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life.	85.7%		73.05%	⬇	79.97% (-6.92%) MC Poorer than Scot Ave	2		4	15		31
Cost	The Net Cost of Residential Care Services per Older Adult (+65) per Week	£408.30	£363.43	£415.05	⬇	£372.42 (+£42.63) MC Poorer than Scot Ave	3	2	3	19	12	19

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What the Council is doing to improve Adult Social Care Services

Older People: Older peoples services has experienced many challenges in the last year responding to increased demand on services across the board within a time of reduced resources. The MERRIT team has seen a significant increase with its call outs responding to people experiencing crisis at home and therefore preventing avoidable hospital admissions. The increased referrals for hospital discharges from unplanned admissions continues to present pressures on all services including care at home, care home placements, community and district nursing along with GP and community supports. The development of an intermediate care strategy will set out a clear direction and key actions to manage this increased demand to ensure we are able to respond effectively to the needs and demands of the citizens of Midlothian at the right time and in the right place. There was a real dedicated and partnership approach from across all services and resources when the severe weather arrived. Home carers demonstrated a highly conscientious commitment to ensure those most vulnerable clients received the appropriate care and support despite the treacherous conditions they were faced with. Third sector organisations also demonstrated an enthusiastic approach to the partnership working both through the severe weather and on a day to day basis ensuring those who are most at risk of social isolation and loneliness can be connected to their communities and promoting their wellbeing.

Learning Disabilities: Implementation plans for the Day Services Policy and Strategy is now progressing and a number of options are being progressed with providers. Teviot Court, the development of 12 houses for people with complex care needs in Penicuik, is complete and fully occupied. Reviewing packages of care continues to be a focus with guidelines being developed to ensure individuals are receiving the right level of support to meet their needs.

Self-Directed Support: Work continues to embed Self Directed Support into a 'business as usual' activity. Significant work has been undertaken to ensure back office processes support Self Directed Support. Work is commencing to enhance support planning to support choice and control in the provision of support. Work has also been taken to support introduction of the Carers Act and ensure SDS principles are embedded in this.

CHILDREN'S SERVICES 2017/18
National Overview

Despite real reductions in the education budget of 2.5% since 2010/11, the number of pre-school and primary places in Scotland has increased by over 30,000, and measures of educational outcome continue to show positive progress, particularly for children from the most deprived areas.

In pre-school, real costs per place have risen for the fourth year in a row, increasing by 4.3% in the past 12 months. This reflects the additional costs associated with new entitlements introduced in the Children and Young People (Scotland) Act 2014. The percentage of funded early years provision graded 'good or better' has improved from 87.1% to 91.0% since 2010/11.

Although total spending on primary and secondary education has grown in cash terms, real spend per primary and secondary pupil has fallen by 8.0% and 3.7% since 2010/11 reflecting changes in pupil numbers. In the past 12 months, there has been a small increase in real spend per primary pupil and a small reduction in real spend per secondary pupil (1.7% and -0.8% respectively). The reduction in spend is partially offset by the increasing role of school /college partnerships and apprenticeships who are delivering outcomes using different skills and focuses, and not necessarily in school settings.

Pupil performance in education has continually improved since 2010/11 on the measures used in the LGBF. The average tariff score for all pupils improved by almost 16% across the period from 2011/12. In line with key priorities in education, the average tariff score for the most deprived quintiles improved most rapidly across the period since 2010/11 (improving by almost 30%). This pattern of improvement slowed in 2017/18, with no significant change in figures from the previous year. The pattern in the total tariff score data is replicated in the data on 5+ passes at SCQF level 5 and level 6 with substantial long-term improvement since 2011/12 in the attainment of all pupils, and for those from deprived areas. However, as with tariff scores, the rate of improvement has slowed across the last 2 years for all groups. While this reflects an overall slowing in progress to close the attainment gap, it is important to recognise the significant improvements achieved by Scotland's schools since the introduction of Curriculum for Excellence, particularly given the context of continuing change within the school system over recent years.

Scottish schools have a strong focus on employability, supported by national policies like *Developing the Young Workforce*. The continued improvements in positive destinations from school reflect the positive impact that this approach is having, particularly for young people living in Scotland's most deprived areas. Post school destinations have seen a general improvement over recent years and further analysis of the data shows a measurable closing in the "destinations gap" for those living in Scotland's most disadvantaged areas. Similarly, the participation of 16-19-year olds in further education, higher education, apprenticeships, training and employment has improved year on year to an overall participation rate of almost 92%.

Presented below is an overview of Children's Service performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

Children's Services												
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	Primary Education - Cost per pupil	£4,823	£4,964	£5,120	⬇	£4,984 (+£136) MC Poorer than Scot Ave	2	2	3	14	15	19
Cost	Secondary Education - Cost per pupil	£6,525	£6,819	£6,942	⬇	£6,880 (+£62) MC Poorer than Scot Ave	1	2	3	4	14	18
Cost	Pre- Primary Education - Cost per pupil	£3,705	£4,465	£4,296	⬆	£4,437 (-£141) MC Better than Scot Ave	2	3	2	10	18	15
Performance	% achieving 5 or more awards at SCQF Level 5	58%	54%	58%	⬆	62% (-4%) MC Poorer than Scot Ave	3	4	4	19	29	25
Performance	% achieving 5 or more awards at SCQF level 6	29%	26%	30%	⬆	34% (-4%) MC Poorer than Scot Ave	4	4	3	25	29	23
Performance	% SIMD Quintile 1 achieving 5 or more awards at SCQF level 5	37%	43%	47%	⬆	42% (+5%) MC Better than Scot Ave	3	2	1	18	10	6
Performance	% SIMD Quintile 1 achieving 5 or more awards at SCQF level 6	12%	9%	17%	⬆	16% (+1%) MC Better than Scot Ave	3	4	2	21	27	12

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	Children's Services											
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week	£3,074	£2,774	£3,735	⬇	£3,485 (+250) MC Poorer than Scot Ave	2	1	3	10	8	22
Cost	The Gross Cost of "Children Looked After" in a Community Setting per Child per Week	£333	£333	£340	⬇	£328 (+£12) MC poorer than Scot Ave	3	3	3	21	19	21
Performance	Balance of Care for looked after children: % of children being looked after in the Community	90%	89%	91%	⬆	90% (+1%) MC Better than Scot Ave	2	2	2	15	15	10
Satisfaction	Percentage of Adults satisfied with local schools	78%	78.33%	78.67%	⬆	72.33% (+6.34%) MC Better than Scot Ave	3	3	2	23	19	10
Performance	Proportion of Pupils Entering Positive Destinations	95.1%	94.7%	94.4%	⬇	94.4% MC is same as Scot Ave	1	2	2	4	9	16
Performance	Overall Average Total Tariff	889	801	832	⬆	891 (-59) MC Poorer than Scot Ave	2	4	4	12	29	25
Performance	Average Total Tariff SIMD Quintile 1	581	577	653	⬆	618 (+35) MC Better than Scot Ave	2	3	2	12	20	11
Performance	Average Total Tariff SIMD Quintile 2	697	719	699	⬇	750 (-51) MC Poorer than Scot Ave	3	3	3	23	19	22

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		Children's Services										
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Average Total Tariff SIMD Quintile 3	850	789	847	⬆	896 (-49) MC Poorer than Scot Ave	3	4	3	22	28	23
Performance	Average Total Tariff SIMD Quintile 4	1,042	921	965	⬆	1,016 (-51) MC Poorer than Scot Ave	2	4	3	12	25	23
Performance	Average Total Tariff SIMD Quintile 5	1,227	1,038	1,149	⬆	1,221 (-72) MC Poorer than Scot Ave	1	4	3	8	27	20
Performance	Percentage of children meeting developmental milestones	85.82%	79.62%	83.43%	⬆	57.11 (+26.32%) MC Better than Scot Ave	1	1	1	2	4	2
Performance	Percentage of funded early years provision which is graded good/better	90%	90.7%	91.38%	⬆	91% (+0.38%) MC Better than Scot Ave	3	3	3	24	22	19
Performance	School attendance rates (per 100 pupils)		92.6	Attendance and Exclusion Rates indicators in the LGBF are reported biennially and will be reported in the 2018/19 cycle. Locally, attendance and exclusion indicators are monitored annually as part of our Balanced Scorecard approach.				4			26	
Performance	School attendance rates (per 100 'looked after children')		89.12					4			27	
Performance	School exclusion rates (per 1,000 pupils)		44.35					4			31	
Performance	School exclusion rates (per 1,000 'looked after children')		135.14					4			26	

	Children's Services											
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Participation rate for 16-19 year olds (per 100)	88.7	93.6	94.3	⬆	91.8 (+2.5) MC Better than Scot Ave	4	1	1	27	7	8
Performance	Percentage of child protection re-registrations within 18 months	14%	8%	7%	⬆	6.12% (-0.88%) MC poorer that Scot Ave	4	3	3	29	23	20
Performance	Percentage LAC with more than 1 placement in the last year (Aug-July)	14.8%	26.25%	26.18%	⬆	20.55% (5.63%) MC poorer than Scot Ave	1	4	3	4	25	22

What the Council is doing to improve Children's Services

Committed to the creation of a World-Class Education system through excellence and equity, the report for this quarter focuses on outcomes for the last year for the education service. The theme for 2017/18 is Mind the Gap: Taking a closer look at progression, progression, progression.

In session 2017/18 we set 3 main strategic priorities under the following broad headings: **Raising Attainment and Achievement; Learning Provision and Leadership.** In addition we will also continue to implement the 1140 hours in early years and the two strategic priorities for Lifelong learning and employability which were reported in their recent inspection.

Attainment: Moderation, tracking and assessment of progress through the Broad General Education (BGE): Rigorous tracking and monitoring has been implemented for session 2017-18 including 3 attainment visits by the local authority. All schools have participated in moderation activities in literacy and numeracy, and teaching staff in all primary schools are being trained in the use of Holistic Assessment. Schools' tracking systems been discussed and developed through an increased number of QI Reviews, and set tracking periods are supporting Head Teachers to have regular, challenging discussions with practitioners about raising attainment and making robust judgements about achievement of a level. A three year professional learning programme through Osiris Education is planned across 2017-2020.

Attendance and Exclusions: Continuing our focus on improving attendance and reducing exclusion, the following end of year achievements are notable: A drop of 27 primary exclusions (from 101 in 16/17 to 74 in 17/18) A drop of 19 secondary exclusions (318 in 16/17 to 299 in 17/18). Reducing exclusions in the secondary sector will remain a key priority in 2018/19.

However, attendance has not made the same level of improvement and has fallen by 0.6% in primary and 0.8% in the Secondary. This remains an area of focus in both the secondary and primary. As a result, Education and Children's services will work together on an attendance campaign as this is an urgent area of improvement.

Positive Destinations: Positive destinations remain at 94.4% securing performance above the virtual comparator and the national average for the second year in a row. There has been a significant and continuous overall improvement trend in this measure since 2010-11 and there is a focus on continuing to add value to this measure through incremental target setting in improvement planning.

Permanence and Care Excellence (PACE) programme: Over the past year we aimed to improve outcomes for our looked at children. The PACE programme has supported us in beginning to achieve this outcome, as part of our improvement plan developed in October 2017, we are now tracking all children accommodated under the age of 12 and ensuring they have a permanence plan within seven and half months of being accommodated. This will ensure there is no drift in their planning. The work shall be evaluated by an external agency in October 2018 and any learning from this shall be shared with workers and an action plan devised.

Looked After at home and away from home (LAC/LAAC): The numbers of children and young people looked after away from home has decreased over the past year as has the number of children who have been placed on the child protection register. These are both positive trends and support our early intervention and prevention strategy of working with families intensively when an issue arises to de-escalate a crisis and provide proportionate and additional support when required.

CORPORATE SERVICES 2017/18
National Overview

Corporate services spend has fallen by 23% in real terms since 2010/11, and corporate services now account for only 4.5% of total spending. This is the lowest corporate overhead ratio yet recorded and in part reflects the maturation of councils' digital strategies.

This reduction has gone along with continuing improvement in key areas of performance. Council tax collection within year is at an all-time high of 96% and the cost of collection has reduced by over 50% in real terms since 2010/11. The gender pay gap has reduced by 12.5% across the last three years and by 6.6% in the last year, and the proportion of the 5% highest earning staff who are female has risen to almost 55%. The % of all invoices paid within 30 days has increased to over 93%, again the highest rate yet recorded.

Sickness Absence days for teaching staff have reduced by 10% since 2010/11 and by 2.1% in the past 12 months. However, for non-teaching staff, sickness absence has increased by 5.7% since 2010/11, and by 4.5% in the past 12 months. This is alongside a 10% reduction in FTE's for non-teaching staff.

Whilst this is an important measure reflecting the progress which has been made in relation to gender equality in senior positions, there is a need to capture the progress being made across the wider workforce. As such, the Gender Pay Gap measure was introduced to represent the difference between men's and women's earnings and is a key measure under the Public Sector Equality Duty. In 2016/17 the Gender Pay Gap was 4.14% ranging from -7.0% to 13.7%.

Across Scotland, there has been consistent improvement in the condition of councils' corporate assets since 2010-11. The percentage of operational buildings that are suitable for their current use has improved from 73.7% to 79.8%. The proportion of internal floor area of operational buildings in satisfactory condition has improved over the period and has remained consistently high at above 80%.

Council performance

In relation to **operational buildings that are suitable for their current use** in 2017/18 there were 180 operational properties of which 134 were suitable; this gave a ratio of 74% and the **proportion of internal floor area of operational buildings in satisfactory condition** consisted of a total of 224,662 square meters (gross internal area) with 173,233 square meters of that recorded in satisfactory or good condition giving a ratio of 77.1%.

Central Support services as a % of Total Gross expenditure - This indicator provides information on the level of support that is required within Councils such as finance, human resources, corporate management, payroll, legal services and a number of other corporate functions. This indicator has improved this year due to ongoing efficiencies across all Support Services. We spent a total of 4.47% of total gross expenditure on support services compared to 6.34% the previous year, we spent slightly more this year than the Scottish average which was 4.45%.

The **gender pay gap between average hourly rate of pay for male and female - all council employees**. This indicator is a measurement of average female pay versus average male pay within the organisation and the figures show that the Council has more male staff at higher rates of pay by 2.32%. This is an improvement from 2.97% in 16/17, we are in the top half of best performing councils.

Cost of collecting council tax per dwelling saw a decrease from £9.80 to £9.25. The number of dwellings continues to increase reflecting Midlothian being one of the fasted growing Council's in Scotland.

Sickness Absence Days per Teacher and per Council Employees – Our sickness/absence levels for teachers are known for their top performance. We have maintained our position in the top quartile and are in the top 4 this year for teacher's absence with a figure of 4.6 days from 4.9 days in 2016/17, as a consequence there is interest from other councils in our family group on our policy for Sickness/Absence. There is continuous improvement in all other local government workers absence rates reducing to 8.59 days from 9.64 days and we remain in the top quartile.

49% is the **Percentage of council employees in top 5% of earners that are women** - This year saw a positive trend with an increase to 49% from 47% in 2016/17. This figure does not include teaching staff.

Percentage of income due from council tax received by the end of the year saw a significant improvement of 0.6% from previous year. Income received increased by £4.86 million from the previous year, including £0.576 million in direct deductions under the Department for Work and Pensions (DWP) Water Direct scheme.

Percentage of invoices sampled and paid within 30 days - has risen from 87% in 2016/17 to 93.1% in 2017/18. The percentage total value of invoices paid within 30 days is 97% as per LGBF indicator definition.

Presented below is an overview of Corporate Service performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

Corporate Services												
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Proportion of operational buildings that are suitable for their current use	80.65%	82.05%	74.44%	⬇	80.96% (-6.52%) MC Poorer than Scot Ave	3	3	4	22	20	26
Performance	Proportion of internal floor area of operational buildings in satisfactory condition	75.86%	75.87%	77.11%	⬆	86.31% (-9.2%) MC Poorer than Scot Ave	4	4	4	25	28	27
Cost	Central Support services as a % of Total Gross expenditure	6.03%	6.34%	4.47%	⬆	4.47% MC is same as Scot Ave	3	4	3	22	26	18
Performance	The Percentage of council employees in top 5% of earners that are women	44.6%	47%	49%	⬆	54.6% (-5.6%) MC Poorer than Scot Ave	4	4	4	29	26	25
Performance	The gender pay gap between average hourly rate of pay for male and female - all council employees	4.58%	2.96%	2.32%	⬆	3.93% (-1.61%) MC Better than Scot Ave	3	2	2	18	14	14
Cost	Cost of collecting council tax per dwelling	£11.40	£9.80	£9.25	⬆	£7.35 (-£1.90) MC Poorer than Scot Ave	3	3	4	21	19	25

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		Corporate Services										
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Sickness Absence Days per Teacher	4.16	4.90	4.59	⬆	5.93 days (+1.34 days) MC Better than Scot Ave	1	1	1	1	3	4
Performance	Sickness Absence Days per Employee (non-teacher)	9.90	9.64	8.59	⬆	11.41 days (+2.82 days) MC Better than Scot Ave	2	1	1	10	7	2
Performance	Percentage of income due from council tax received by the end of the year %	94.4%	94.5%	95.1%	⬆	96% (-0.9%) MC Poorer than Scot Ave	4	4	4	29	29	26
Performance	Percentage of invoices sampled and paid within 30 days	89.7%	87.4%	93.1%	⬆	93.2% (-0.1%) MC Poorer than Scot Ave	4	4	3	25	25	18

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What is the Council doing to improve Corporate Services

Percentage of council employees in top 5% of earners that are women: We are committed to monitoring gender information and determining any appropriate positive action.

Sickness/Absence: Sickness absence interventions are being recommended to the Corporate Management Team to further address levels of sickness absence and it is anticipated that in conjunction with the Wellness@Midlothian project plan there will be further positive change in the levels of sickness absence in the future.

Teacher's stats: The Council has started negotiations with the teaching trade unions in relation to introducing a revised Maximising Attendance at Work Policy.

Percentage of invoices sampled and paid within 30 days: A new set of measures took effect from 1st April 2017 which will exclude internally generated payments such as petty cash, grant payments etc. Service areas will continue to work to ensure invoices are paid within 30 days and a review of overall performance is to be undertaken. The Purchase to Pay project has a number of workstreams that will change the way we process payments to suppliers, this has shown improved performance in 2017/18 and we will continue to benchmark our performance against other councils and will adopt best practice, where appropriate, through benchmarking activities.

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CULTURE AND LEISURE 2017/18

National Overview

Culture and leisure services play an important role in the quality of life in local communities. In addition to the social and economic benefits delivered, the impact they have on promoting better health and wellbeing of the population and in reducing demand on other core services is well documented.

Despite a real reduction in spend of 22% since 2010/11, leisure and cultural services have sharply increased their usage rates and reduced their costs per use. During this time the substantial increases in visitor numbers across sports (19%), libraries (36%), have resulted in unit cost reductions of 32% and 45% respectively. In the past 12 months, uptake of leisure services, swimming pools, libraries has fallen.

While council spending across Scotland stabilised against trend for many service areas in 2017/18, culture and leisure expenditure decreased by a further 5.6%. This reflects a 5% reduction in parks expenditure, 8% reduction in Libraries, and 6% reduction in Sports. Notwithstanding the reductions in expenditure, the equivalent performance has not reduced at the same rate. Close monitoring will be required to assess the extent to which further efficiencies are possible or whether further performance reductions are inevitable as we further reduce expenditure on the services or change delivery that relies more on community rather than municipal delivery. This is an area which will be explored further with VOCAL and Community Leisure UK.

Public satisfaction rates have fallen for all Culture and Leisure services in the past 12 months. Since the base year, satisfaction with Libraries has reduced by 11.5 percentage, points; museums and galleries by 6.5%, and leisure facilities by 2.6 percentage points. Only satisfaction levels with parks and open spaces remain at similar levels to the base year, increasing by 1.9 percentage points.

Council performance

Sports facilities – Attendance figures indicate the extent to which pools and indoor leisure facilities are used. This indicator calculates the cost of sport and leisure facilities across councils, per attendance. The total footfall at our sports and leisure facilities for 17/18 was 772633 which was a reduction from the previous year due to various centres being closed for maintenance and Loanhead Leisure centre being closed for over four months.

Libraries – Total physical visitors was 545,494 and Total virtual visits was 545,118. A Total of 1,090,612 visits. Our physical visits actually increased by 3.9% from 524,817 (16/17) to 545,494 (17/18). We would have predicted a larger overall increase of physical visits with the opening of Loanhead Centre, however we have had to take into account the closure of old Loanhead library from June 2017 until August 2017 where we had no physical visits and visits started to be recorded again in September 2017. We would predict that in 18/19 we would see an impact from a full year of physical visits to Loanhead and 8 months of physical visits to Newbattle.

Net Cost of parks and open spaces per 1000 population – There was a very small increase in our costs this year. We remain in the top 4 of the best performing councils and remain better than the Scottish and Family Group average.

Presented below is an overview of the Culture and Leisure Service performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

Culture and Leisure												
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	NET Cost per attendance at Sports facilities	£3.51	£3.62	£4.29	⬇	£2.71 (+£1.58) MC Poorer than Scot Ave	3	3	4	24	23	29
Cost	NET Cost per library visit	£1.73	£1.02	£1.25	⬇	£2.08 (-£0.83) MC Better than Scot Ave	1	1	1	5	3	6
Cost	Net cost of parks and open spaces per 1000 population	£5,745	£7,153	£7,359	⬇	£19,803 (-£12,444) MC Better than Scot Ave	1	1	1	2	4	4
Satisfaction	Percentage of adults satisfied with libraries	68.33%	66.67%	66%	⬇	73% (-7%) MC Poorer than Scot Ave	4	4	4	31	31	30
Satisfaction	Percentage of adults satisfied with parks and open spaces	79%	78.33%	78.67%	⬆	85.67% (-7%) MC Poorer than Scot Ave	4	4	4	29	31	28
Satisfaction	Percentage of adults satisfied with leisure facilities	73.67%	74%	74.33%	⬆	72.67% (+1.66%) MC Better than Scot Ave	4	3	2	25	19	16

What the Council is doing to improve Culture and Leisure Services

Sport and Leisure: The promotion of healthy lifestyles is evident in the development of facilities and the ongoing promotion of the Tonezone, Teenzone, junior and student memberships. Midlothian Active Choices (MAC) and Ageing Well classes/groups offered weekly with the assistance of volunteers and instructors. Promotion is through newsletters, website, libraries and health professionals as well as word of mouth.

The programme of events is continuously expanding to ensure a wide diversity of participation including a fuller Active School summer programme, the launch of Walking Rugby, Dance showcases, Football challenge festivals, Club Golf Sessions, Rugby Rascals, Walk the Line, special Olympics, Senior Games and swimming galas.

Local surveys carried out in our leisure centres show that 96% of our customers were satisfied with our sport and leisure facilities.

Land and Countryside: Five Countryside sites have been awarded Environmental Green Flags across Midlothian. Resurfacing work was completed on the bridge at Westerhaugh on the Penicuik to Dalkeith walk way. Funding from the Forestry commission grants scheme for four sites will further enhance Midlothian's Environment. In support of the Health and Wellbeing outcome for Midlothian residents, Mayfield Park improvements and Play area development grant and play funded work of £80,000 will see an additional outdoor gym installed in 18/19. The annual walking festival attracted over 700 participants which is the highest number in 10 years.

Libraries: The decrease can be attributed to our virtual visits solely - In 16/17 we had a dedicated member of staff working on our online library resources which resulted in a number of campaigns during Book Week Scotland in November, Midlothian Science Festival in October and our Summer Reading Challenge in July and August. Due to our structural review in 17/18 we had a number of gaps in our staffing resource which meant that these dedicated campaigns were not delivered, and analysis of the virtual visits demonstrate that the lack of these campaigns in 17/18, had a direct impact on the virtual visits and a resultant decrease. Virtual visits for 18/19 was analysed, as we now have dedicated staffing resource working on these campaigns through various online channels, and we are back to 16/17 levels with virtual visits and it may be likely that we will see an actual increase in virtual visits, due to our focus over the summer months and also planned campaigns for Book Week Scotland etc.

ECONOMIC DEVELOPMENT and PLANNING 2017/18

National Overview

To reflect the strategic importance of Economic Development and Planning and the particular challenges facing discretionary services, an expanded suite of measures has been introduced to the framework following work with the Scottish Local Authorities Economic Development Group (SLAED).

Economic Development and Planning have seen some of the largest reductions in revenue spending since 2010/11, falling by 29% and 34% respectively. Expenditure has stabilised against trend in the past 12 months, both showing marginal growth (1.9% and 0.7%). There has been significant capital expenditure in economic development and tourism across this period reflecting the regional economic growth agenda. This has grown by 105% since 2010/11, and by 25% in the past 12 months.

Most measures of Economic Development and Planning performance within the framework show maintained or improved performance across the period, although there is evidence that the improvement rate may be slowing in some areas. The percentage of unemployed people assisted into work from council funded/operated employability programmes has increased from 9.1% in 2012/13 to 14.4% in 2017/18.

In terms of infrastructure for business, there is a 33% improvement in terms of efficiency in processing business and industry planning applications, reducing from 14 weeks to 9 weeks between 2012/13 and 17/18. Town vacancy rates have remained stable across the period despite challenging economic times. There has been a 28% increase in the availability of immediately available employment land, from 12.9% to 40.8% since 2014/15. There has been a 35 percentage point improvement in access to superfast broadband. Despite these improvements, the Business Gateway start-up rate has reduced from 19% to 16.8% across the period, although has shown a slight improvement in the past 12 months.

Councils continue to spend over 25% of their procurement spend on local enterprises, increasing slightly in the past 12 months to 27.4%. Given the pressures on council budgets this is a positive outcome as it suggests that the drive to reduce costs has not resulted in local enterprises being displaced by national suppliers of goods and services. However, while the value of money spent locally has held up well, there has been an overall drop in the number of local suppliers. There has been a commitment in recent months for local government economic development and procurement professionals to work on joint initiatives to enhance the impact of local government procurement spend.

The proportion of people earning less than the living wage has not reduced significantly across the period, fluctuating at around 18% to 19%. This partly reflects the move towards a more flexible labour market including zero-hour contracts.

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Council performance

Percentage of Unemployed People Assisted into work from Council Funded/Operated Employability Programmes - 114 people were assisted into work this year from a variety of activities and initiatives. In the previous year Fort Kinnaird Skills and Recruitment Centre helped 137 out of 266 clients into work on its own, but for this year they informed the Council that they are no longer able to track those they engage with so they wouldn't be able to supply figures for this measure. It is estimated that if the clients had been tracked our figure for 17/18 would be in the region of 15%

Cost of Planning per Application - **Average time for commercial planning application** - There was 459 planning applications this year and it took an average of 7.3 weeks to complete each one at a cost of £4,970 per application, we are better than our family group average for these measures.

Percentage of procurement spent on local small/medium enterprises - The previous procurement measure (procurement spend on local small & medium enterprises (SMEs) has been changed to reflect only the percentage of procurement spend spent locally. Data is sourced from Scottish Government Procurement Hub and the measure is calculated using the definitions below. This indicator only includes enterprises defined as "Core trade" i.e. where the councils spend is over £1,000. "Local" – is defined as enterprises within the same Local Authority. Enterprises location is defined by their postcode. For the purposes of this indicator where supplier's postcode is not known they have been excluded from the calculation. Due to the change to this indicator, our data has increased to 18.07%

No. of business gateway start-ups per 10,000 population - We assisted 202 Business Start-ups in 2017/18 from a resident population of 90090. An increase from 165 the previous year.

Presented below is an overview of Economic Development performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

Economic Development and Planning											
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Percentage of Unemployed People Assisted into work from Council Funded/Operated Employability Programmes	8.57%	15.47%	6.71%	⬇	14.4% (-7.69%) MC Poorer than Scot Ave	3	2	3	19	9	23
Cost	Cost of Planning per Application	£4,040	£5,077	£4,970	⬆	£5,087 (+£117) MC Better than Scot Ave	2	3	3	9	22	20
Performance	Average time for Commercial planning application	7.9 weeks	8.4 weeks	7.3 weeks	⬆	9.3 weeks (+2 weeks) MC Better than Scot Ave	2	2	1	9	11	8
Performance	Percentage of procurement spent on local small/medium enterprises	17.96%	12.85%	18.07%	⬆	27.4% (-9.33%) MC Poorer than Scot Ave	4	4	4	27	30	26
Performance	No of business gateway start-ups per 10,000 population	19.91%	18.6%	22.4%	⬆	16.8% (+5.6%) MC Better than Scot Ave	2	2	1	11	14	6
Cost	Cost of Economic Development & Tourism per 1000 population	£44,456	£125,749	£42,724	⬆	£91,779 (+£49,055) MC Better than Scot Ave	2	4	1	11	26	6

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					Economic Development and Planning						
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Percentage earning less than the Living Wage	23.3%	17.2%	13.8%	⬆	18.4% (+4.6%) MC Better than Scot Ave	3	1	1	17	3	1
Performance	Proportion of properties receiving superfast broadband	76%	85%	91.18%	⬆	91.13% (+0.05%) MC Better than Scot Ave	3	3	3	19	19	19
Performance	Town centre vacancy rates	7.24%	5.7%	6.72%	⬇	11.49% (+4.77%) MC Better than Scot Ave	1	1	1	7	5	3
Performance	Immediately available employment land	57.14%	57.14%	55.49%	⬇	40.78% (+14.71%) MC Better than Scot Ave	2	2	2	9	9	9

What the Council is doing to improve Economic Development and Planning Services
4427 young people have attended our positive destination projects focussing on young people, 573 more than last year. Positive destinations are 95%. 1505 qualification have been achieved by adults and young people, 62% increase from last year. 312 young people have started Duke of Edinburgh (D of E) (70 more than last year) 156 awards have been gained. 19 young people participated in Pave with over **80%** of PAVE participants gaining five or more qualifications and moved onto positive destinations**: 32%** to college, **42%** to employment, **10%** to vocational training and **16%** to Activity Agreements. Midlothian Local Development Plan has reached an advanced stage of preparation and was adopted in November 2017: providing the statutory planning context over a ten year period for driving economic development, meeting housing needs, and promoting environmental sustainability. Business Gateway programme provides direct support to new start up, and growing businesses in Midlothian. Substantial funding allocated by the Borders Rail Blueprint Fund to promote and develop the tourism sector along the route of the Borders Rail corridor Supporting the local economy is one of the principle objectives of our Procurement Strategy, the Councils current spend is circa £111m with 18.07% of this being spent with local providers, 43.46% spent in the Lothian region an 77.12% spent nationally (Scotland).The procurement team continues to work closely with economic development by hosting local supplier surgeries, attending 'Meet the Buyer' events locally and nationally, encouraging and developing local providers capabilities to bid for and deliver public sector work.

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ENVIRONMENTAL SERVICES 2017/18

National Overview

Real spending on Environmental Services has reduced by 9.6% since 2010/11 with reductions in Waste Management (-3.2%), Street Cleaning (-27%) and Trading Standards and Environmental Health (-18%). The reduction in spend stabilised in the past 12 months, with overall spend reducing by only 0.3%. While recycling rates continue to improve and are now at 45.6%, recent years have seen further reductions in satisfaction with refuse and cleansing, and reductions in street cleanliness scores.

Across the period, real spending on roads has fallen by 16%, although this has stabilised in the past 12 months. Since 2010/11, the road conditions index indicates conditions have been largely maintained across all class of roads, however in the last 12 months, the condition of A, B and C class roads have all deteriorated.

Council performance

One of the main environmental services provided by councils is **waste collection**. The cost of this per premise is a simple way of assessing this service. Using a Net Cost measure recognises that waste management has the potential to generate significant income for the council, and that our performance in this area is equally as important in managing our costs. This year we reduced our costs in both collection and disposal and we should continue to reduce following the ongoing review of the service.

There has been a slight decrease to 51.6% in the **total household waste that is recycled** this year. This is due to the introduction of a food waste collection service which is now an established service. The intention is to maintain over 60% of household waste by 2020.

Net cost of street cleaning per 1,000 population and **Street Cleanliness Score** – These indicators measure how clean our streets are looking and how much it costs; an assessment of street cleanliness is carried out by 'Keep Scotland Beautiful' each year, this remains a priority for us both in terms of improving the appearance of our streets but also in terms of environmental improvements in the quality of people's lives. Our costs have reduced this year and should continue to reduce following the ongoing review of the Service. Our costs are better than our Family Group Average and the Scottish Average. For this year there was a slight decrease in our street cleanliness score due to the deployment of staff in to other priority areas. However, the cleanliness of our streets remains consistently high.

Over the last five years the **road** condition was maintained at a steady state condition. This was due to additional funding made available through the capital budget whereby £1m per annum was approved by the Council from 2014/15 until 2017/18. The road indicators are a function of the investment in the infrastructure rather than a measure of performance. Any reduction in available funding is likely to see deterioration in the condition of the network.

Cost of maintenance per kilometre of roads - This measure is under review to provide more robust time series data. Until a revised measure becomes available the current measure has been amended to include capital and revenue to provide a more meaningful measure of expenditure on roads.
Cost of Trading Standards, Money Advice & Citizen Advice per 1000- This indicator definition has been reviewed this year to reflect a uniform approach for all Councils who are obliged to pay grant funding to Citizens Advice Bureaux. As a result our figure reduced to £4,917 for this year.
Cost of environmental health per 1,000 population - Environmental Health costs increased by £929 for this year to £11,311 we are better than the Scottish Average which was £15,496 and we remain one of the top eight performing councils.

Presented below is an overview of Environmental Service performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

Environmental Services												
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	Net cost of waste collection per premise	£73.24	£74.94	£74.34	⬆	£65.96 (+£8.38) MC Poorer than Scot Ave	4	3	4	25	24	28
Cost	Net cost of waste disposal per premise	£87.83	£85.51	£85.01	⬆	£101.36 (-£16.35) MC Better than Scot Ave	2	2	1	12	10	8
Cost	Net cost of street cleaning per 1,000 population	£12,097	£12,661	£11,810	⬆	£15,452 (-£3,642) MC Better than Scot Ave	2	2	2	12	15	16
Performance	Street Cleanliness Score	98.7%	98.7%	95.98%	⬇	92.2% (+3.78%) MC Better than Scot Ave	1	1	1	1	2	5

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		Environmental Services										
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	Cost of maintenance per kilometre of roads	£5,920	£7,850	£8,215	⬇	£10,519 (+£2,304) MC Better than Scot Ave	1	2	2	6	9	11
Performance	Percentage of A class roads that should be considered for maintenance treatment	20.4%	20.9%	25%	⬇	30.2% (-5.2%) MC Better than Scot Ave	1	1	2	7	7	13
Performance	Percentage of B class roads that should be considered for maintenance treatment	28%	29.2%	30.46%	⬇	35.9% (-5.44%) MC Better than Scot Ave	2	2	2	13	15	14
Performance	Percentage of C class roads that should be considered for maintenance treatment	30.5%	28.9%	33.15%	⬇	36.16% (-3.01%) MC Better than Scot Ave	2	2	2	12	13	15
Performance	Percentage of unclassified roads that should be considered for maintenance treatment	35.3%	35.3%	35.23%	⬆	38.99% (-3.76%) MC Better than Scot Ave	2	2	2	12	14	16
Cost	Cost of Trading standards per 1,000 population.	£6,627	£5,750	£4,917	⬆	£5,890 (-£973) MC Better than Scot Ave	3	2	2	17	16	13

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	Environmental Services											
Indicator Type	Indicator Name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Cost	Cost of environmental health per 1,000 population.	£10,116	£10,383	£11,311	⬇	£15,496 (-£4,185) MC Better than Scot Ave	1	1	1	3	5	8
Performance	Percentage of total household waste that is recycled	47.9%	53.5%	51.6%	⬇	45.6% (+6.2%) MC Better than Scot Ave	2	2	2	16	9	15
Satisfaction	Percentage of Adults satisfied with refuse collection	83%	86.67%	89.67%	⬆	78.67% (+11%) MC Better than Scot Ave	3	2	1	21	10	4
Satisfaction	Percentage of adults satisfied with street cleaning	72.33%	73%	71.33%	⬇	69.67% (+1.66%) MC Better than Scot Ave	3	3	2	22	18	16

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What the Council is doing to improve Environmental Services

Waste: In relation to meeting the stated target of 60% recycling of household waste by 2020 an interim contract has been awarded for the disposal of residual waste. The contract includes front end treatment for further separation/recycling of Midlothian's waste thereby increasing the councils recycling figure. The tender for Trade food waste collection was awarded which will ensure that all food waste from trade waste customers is recycled.

A comprehensive waste strategy is being developed that will inform the direction of travel in relation to waste services for the foreseeable future. This will focus on the Household Waste Charter which the Council is a signatory to, in an effort to ensure that legislative recycling levels can be achieved and that the separated material continues to be taken by the market.

Our street cleanliness score remains high and we are the fifth top performing council. A factor in this are the changes made to the street cleansing operations whereby all compact sweepers now follow the re-cycling vehicles en-route consequently reducing the amount of litter.

Road Network: A formal restart to the ELBF shared services project has begun following the setting up of a new shadow joint committee comprising elected members from each authority (new members having been appointed to the committee). Further work streams will now be identified and allocated to each authority with Midlothian having previously successfully procured a joint weather forecasting service.
Continued progress has been made in regards to the planning for the extension of walking and cycling routes linked to the new Borders rail line

HOUSING 2017/18

National Overview

Councils continue to manage their housing stock well with rent lost to voids reducing from 1.3% in 2010/11 to 0.9% in 2017/18, and a 26.2% reduction in average repair times across this period. There have also been consistent and significant improvements in terms of housing standards and energy efficiency standards, both of which are now above 90%.

However, at the same time, the growth in tenant's rent arrears from 5.6% to 6.7% between 2013/14 and 2017/18 reveals evidence of the increasing financial challenges facing both housing residents and councils alike.

Council performance

Rent arrears: The purpose of this indicator is to minimise our rent arrears and for this year there was an increase to 6.92% from 6.39% the previous year. We are below the Scottish Average which was 6.75% and we were placed in the top half of the best performing councils.

Rent lost to voids: The purpose of this indicator is to reduce the percentage of rent lost to us and for this year we increased our rent loss to 0.7% from 0.5% the previous year. We are still within the top six of the best performing councils.

We improved to 96.4% from 96% of council housing stock **meeting the Scottish Housing Quality Standard (SHQS)** criteria. Building Services are actively attempting to obtain access to the remaining 3.9% of properties that remain exemptions. There are no failures in any of the housing stock where access has been gained therefore in line with reporting to the Scottish Government, we meet 100%. We are placed in the top half of the best performing councils and we are better than the Scottish Average which was 93.9%

Average time taken to complete non-emergency repairs: We increased to 13.19 days from 13.04 days the previous year, as a consequence we are higher than the national average of 7.50 days.

98.8% of Midlothian Council houses are **energy efficient**. There were 36 exemptions where access was denied by tenants whereby regardless of actions taken in remedial works, the council still couldn't meet the Energy Efficient Social Housing (EESCH) due to restrictions of heating type within property. We are better than the Scottish Average which was 97%.

31

Presented below is an overview of Housing Service performance against the Local Government Benchmarking Framework (LGBF) indicators from 2015-16 to 2017-18.

	Housing Services											
Indicator Type	Indicator name	2015/16 Value	2016/17 Value	2017/18 Value	Short Trend	17/18 Scot Average. (MC difference)	2015/16 Quartile	2016/17 Quartile	2017/18 Quartile	2015/16 rank	2016/17 rank	2017/18 rank
Performance	Gross rent arrears (all tenants) as at 31 March each year as a percentage of rent due for the reporting year	6.85%	6.39%	6.92%	⬇	6.75% (-0.17%) MC Poorer than Scot Ave	2	2	2	16	13	12
Performance	Percentage of rent due in the year that was lost due to voids	0.8%	0.5%	0.7%	⬇	0.9% (-0.2%) MC Better than Scot Ave	2	1	1	12	4	6
Performance	Percentage of the Councils housing stock meeting the Scottish Housing Quality Standard criteria	93.1%	96%	96%	⬆	93.9% (+2.1%) MC Better than Scot Ave	2	2	2	14	11	14
Performance	Average time taken to complete non-emergency repairs	9.01	13.01	13.19	⬇	7.50 days (+5.7 days) MC Poorer than Scot Ave	2	3	4	12	23	25
Performance	Percentage of council houses that are energy efficient	99.8%	98.8%	98.8%	⬆	97.2% (+1.6%) MC Better than Scot Ave	1	2	2	6	11	12

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What the Council is doing to improve Housing Services

Anticipated increase in current tenant rent arrears due to introduction of Universal Credit Full Service in Midlothian from March 2017. Number of tenants receiving UC housing costs increased from 132 to 929 over past 12 months. Increase in arrears mitigated by early intervention to assist tenants in maximising income and maintaining affordable repayment plans, including direct payments to landlord for vulnerable tenants or by new Scottish UC payment choices from October 2017. Maximising entitlement to Discretionary Housing Payments (DHP) to mitigate effects of Welfare Reform, including under-occupancy and benefit cap.

To reduce the income lost due to voids we deployed an extra resource to reduce turnover time in the re-let repairs works required for voids and the Housing Services have improved the allocation process for offers and to reduce refusals.

Due to shortages in trying to employ trades staff Building Services (BS) have been concentrating on emergency jobs. A report is currently being produced in relation to apprentices and hopefully this will assist with the trades shortfall. new back-up term contracts are being introduced with penalties for contractors who do not meet the priorities given for the completion of completion of jobs.

The **percentage of houses that are energy efficient as measured by the SHQS**:   There are 36 exemptions, we annually contact the tenants where we didn't gain entry. A decision was taken by the council that should elderly tenants not wish the upheaval of new heating then we would not force the issue. We have also asked the Scottish Government if we can use the Home Energy Efficiency Programmes (HEEPs) funding to install External Wall Insulation (EWI) to the external of houses who are not on the national grid but are traditional built. We still await a response and should this be accepted then we will be able to reduce the number of the exemptions.

All Local Authorities need to have a Tenant Participation and Customer Engagement Strategy detailing how tenants can become involved and improve their landlord's services. A summary of our Tenant's Participation Strategy for 2017-2020 is available on our website. We publish our Tenants Today Annual newsletter for tenants and housing applicants of the Council. We work together with tenants to improve council services by the sharing of information, ideas and power. All council tenants in Midlothian are invited to Midlothian's annual Tenants Day

Overall Summary

The percentage of recurring outcome-focused performance indicators in the top two quartiles has decreased from 58 percent in 2011/12 to 55 percent in 2017/18
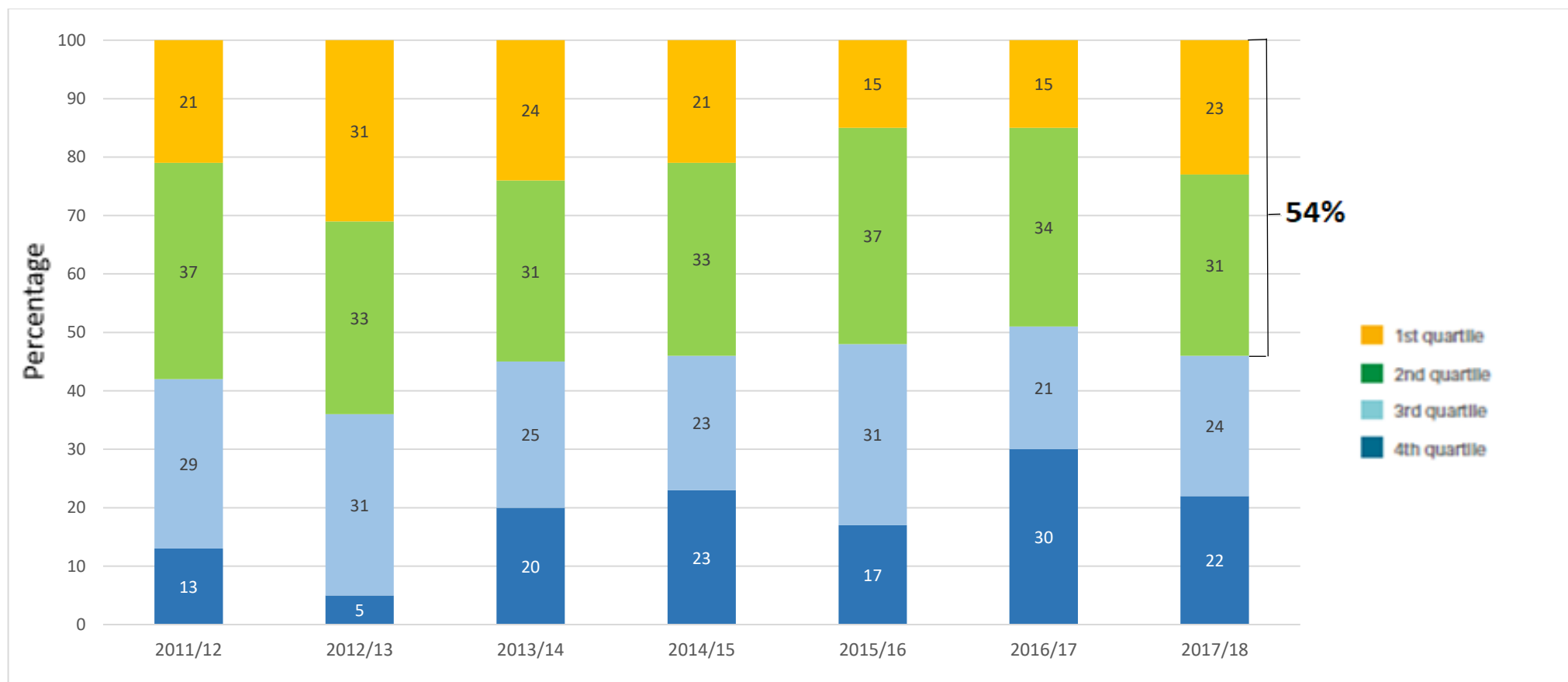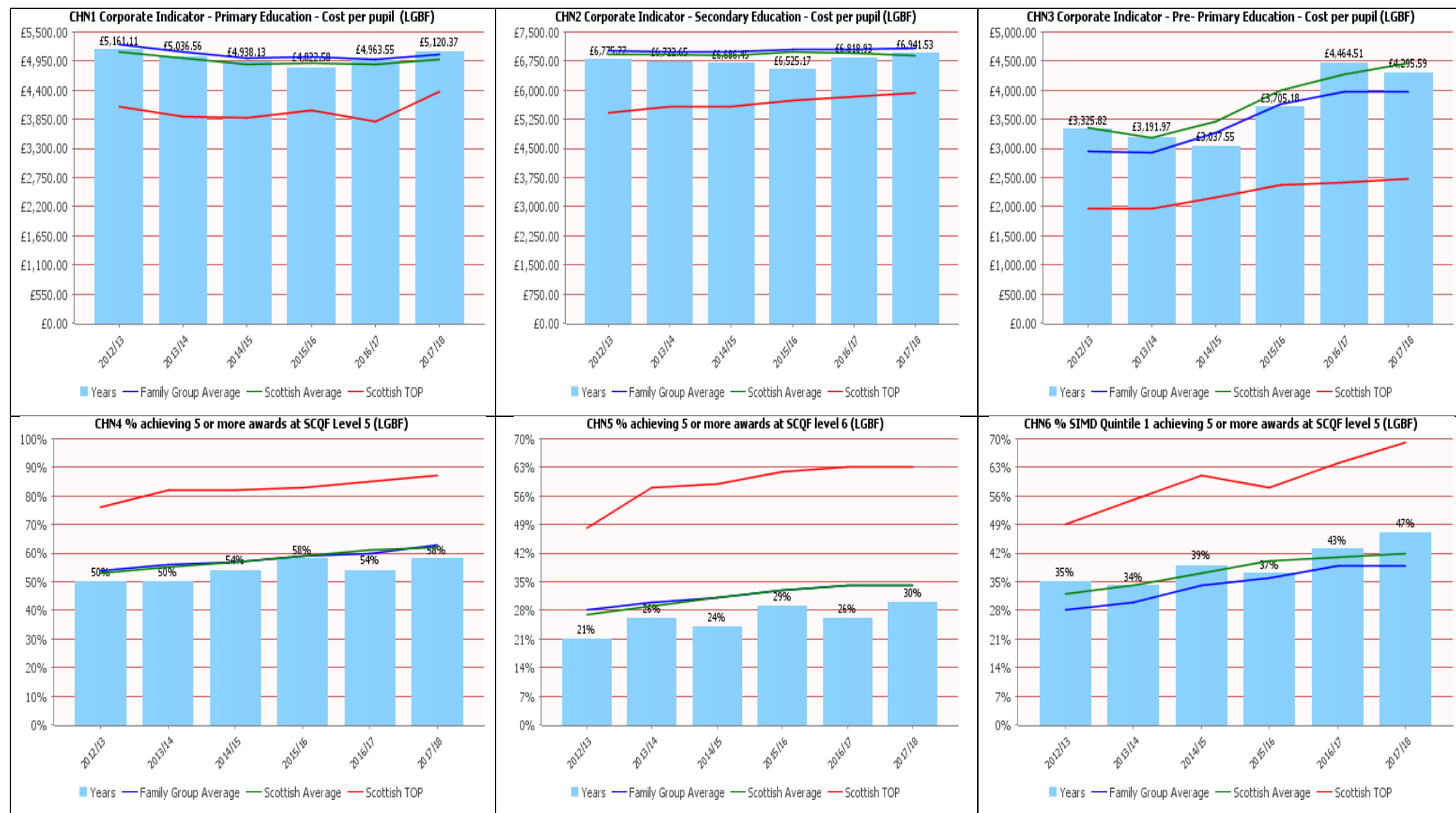

All indicators

We compare our performance by considering how all councils are performing for each indicator. Relative performance against other councils is divided into four equal quartiles. The first quartile contains the best performing councils for each indicator and the fourth quartile contains the poorest performing councils. For 2017/18 performance improved from the previous year for 44 (59%) of 74 indicators (4 are not measured this year). 30 (41%) showing reduced performance.

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Appendix 1

Adult, Social Care

SW1 Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF)

SW2 Corporate Indicator - SDS spend on adults 18+ as a % of total social work spend on adults 18+(LGBF)

SW3 Percentage of people aged 65 and over with long-term care needs receiving personal care at home

SW4a Percentage of adults receiving any care or support who rate it as excellent or good. (LGBF)

SW4b Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life. (LGBF)

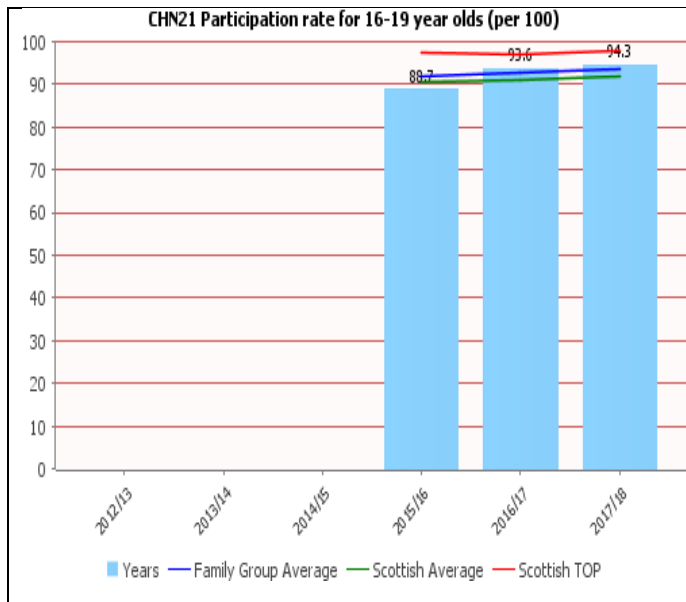SW5 Corporate Indicator - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)

Children's Services

CHN1 Corporate Indicator - Primary Education - Cost per pupil (LGBF)

£5,161.11 £5,036.56 £4,938.13 £4,822.58 £4,963.55 £5,120.37

CHN2 Corporate Indicator - Secondary Education - Cost per pupil (LGBF)

£6,775.77 £6,722.65 £6,686.45 £6,525.17 £6,818.93 £6,941.53

CHN3 Corporate Indicator - Pre- Primary Education - Cost per pupil (LGBF)

£3,325.82 £3,191.97 £3,037.55 £3,705.18 £4,464.51 £4,295.59

CHN4 % achieving 5 or more awards at SCQF Level 5 (LGBF)

50% 50% 54% 58% 54% 58%

CHN5 % achieving 5 or more awards at SCQF level 6 (LGBF)

21% 26% 24% 29% 26% 30%

CHN6 % SIMD Quintile 1 achieving 5 or more awards at SCQF level 5 (LGBF)

35% 34% 39% 37% 43% 47%

36

CHN7 % SIMD Quintile 1 achieving 5 or more awards at SCQF level 6 (LGBF)

CHN8a Corporate Indicator - The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week (LGBF)

CHN8b Corporate Indicator - The Gross Cost of "Children Looked After" in a Community Setting per Child per Week (LGBF)

CHN9 Balance of Care for looked after children: % of children being looked after in the Community (LGBF)

CHN10 Corporate Indicator - Percentage of Adults satisfied with local schools (LGBF)

CHN11 Proportion of Pupils Entering Positive Destinations (LGBF)

CHN12a Overall Average Total Tariff (LGBF)

CHN12b Average Total Tariff SIMD Quintile 1 (LGBF)

CHN12c Average Total Tariff SIMD Quintile 2 (LGBF)

CHN12d Average Total Tariff SIMD Quintile 3 (LGBF)

CHN12e Average Total Tariff SIMD Quintile 4 (LGBF)

CHN12f Average Total Tariff SIMD Quintile 5 (LGBF)

38

CHN17 Percentage of children meeting developmental milestones

CHN18 Percentage of funded early years provision which is graded good/better

CHN19a School attendance rates (per 100 pupils)

CHN19b School attendance rates (per 100 'looked after children')

CHN20a School exclusion rates (per 1,000 pupils)

CHN20b School exclusion rates (per 1,000 'looked after children')

39

CHN21 Participation rate for 16-19 year olds (per 100)

CHN22 Percentage of child protection re-registrations within 18 months

CHN23 Percentage LAC with more than 1 placement in the last year (Aug-July)

Corporate Asset

C-AST1 Corporate Indicator - Proportion of operational buildings that are suitable for their current use (LGBF)

C-AST2 Corporate Indicator - Proportion of internal floor area of operational buildings in satisfactory condition (LGBF)

40

CORP1 Corporate Indicator - Central Support services as a % of Total Gross expenditure (LGBF)

Data labels: 3.93%, 4.8%, 6.03%, 6.03%, 6.34%, 4.47%

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP3b Corporate Indicator - The Percentage of council employees in top 5% of earners that are women (LGBF)

Data labels: 45.6%, 45.3%, 47.7%, 44.6%, 47.0%, 49.0%

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP3c Corporate Indicator - The gender pay gap between average hourly rate of pay for male and female - all council employees

Data labels: 4.59%, 2.97%, 2.32%

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP4 Corporate Indicator - Cost of collecting council tax per dwelling (LGBF)

Data labels: £15.41, £14.72, £11.18, £11.40, £9.80, £9.25

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP6a Corporate Indicator - Teachers Sickness Absence Days (Cumulative) (LGBF)

Data labels: 5.21 days, 5.25 days, 5.50 days, 4.17 days, 4.94 days, 4.59 days

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP6b Corporate Indicator - Local Government Employees (except teachers) sickness absence days (CUMULATIVE) (LGBF)

Data labels: 10.47 days, 10.04 days, 10.11 days, 9.90 days, 9.64 days, 8.59 days

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP7 Corporate Indicator - Percentage of income due from council tax received by the end of the year %

Years: 93.2%, 91.8%, 93.8%, 94.4%, 94.5%, 95.1% (2012/13 to 2017/18)

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

CORP8 Corporate Indicator - Percentage of invoices sampled and paid within 30 days (LGBF)

Years: 93.3%, 93.4%, 93.0%, 89.7%, 87.4%, 93.1% (2012/13 to 2017/18)

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

Culture and Leisure

C&L1 Corporate Indicator - NET Cost per attendance at Sports facilities (LGBF)

Years: £3.64, £2.96, £3.14, £3.51, £3.62, £4.29 (2012/13 to 2017/18)

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

C&L2 Corporate Indicator - NET Cost per library visit (LGBF)

Years: £2.74, £2.82, £2.58, £1.73, £1.02, £1.25 (2012/13 to 2017/18)

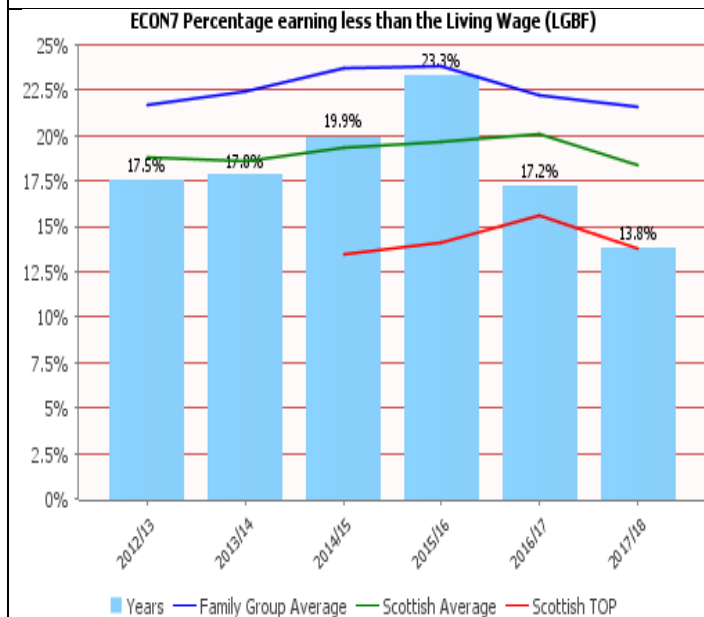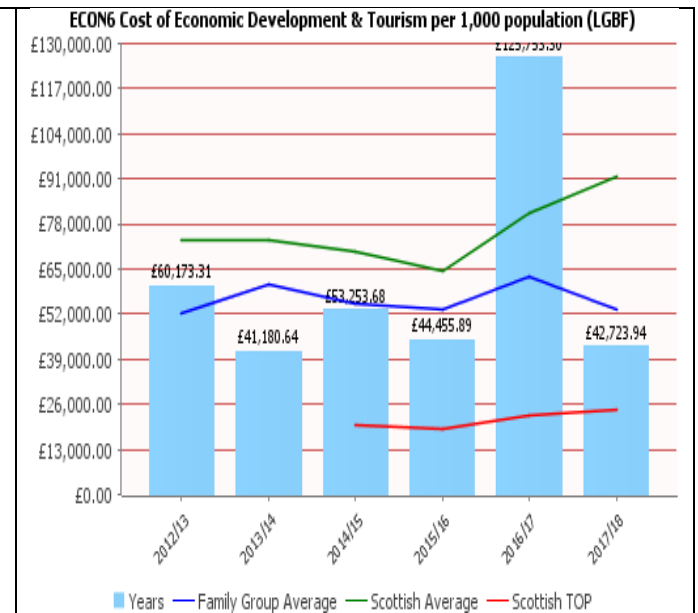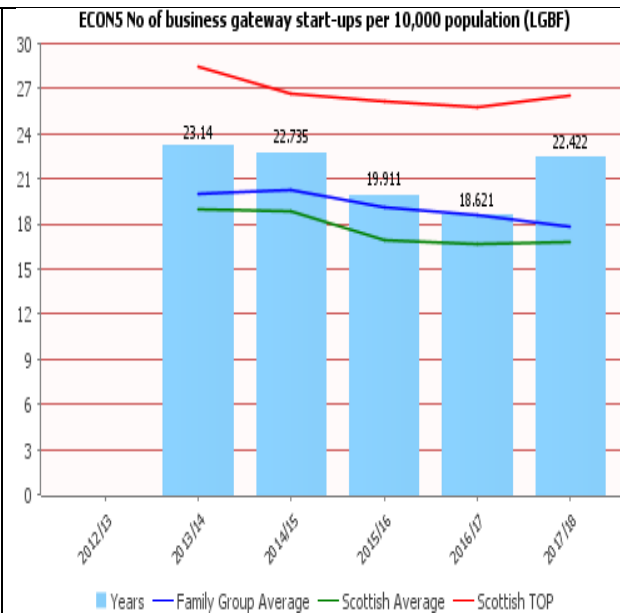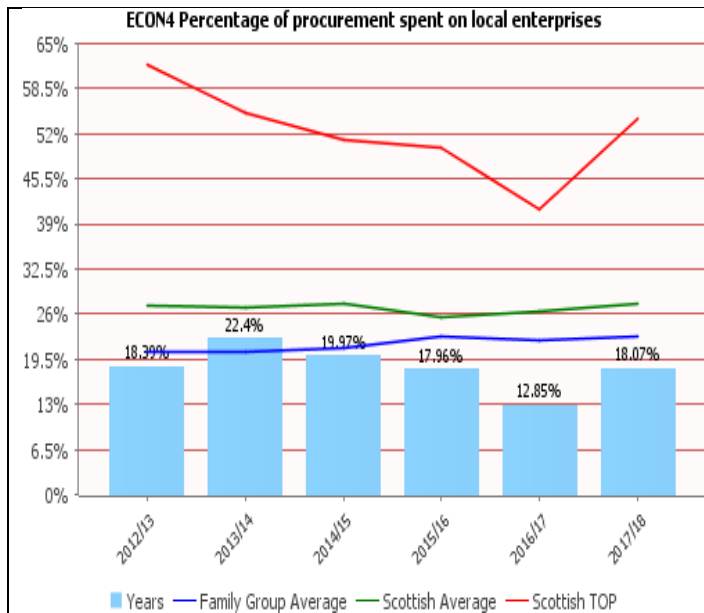Legend: Years, Family Group Average, Scottish Average, Scottish TOP

C&L4 Corporate Indicator - Net cost of parks and open spaces per 1000 population (LGBF)

Years: £11,312.30, £5,837.96, £6,698.13, £5,744.77, £7,152.78, £7,359.30 (2012/13 to 2017/18)

Legend: Years, Family Group Average, Scottish Average, Scottish TOP

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C&L5a Corporate Indicator - Percentage of adults satisfied with libraries (LGBF)

C&L5b Corporate Indicator - Percentage of adults satisfied with parks and open spaces (LGBF)
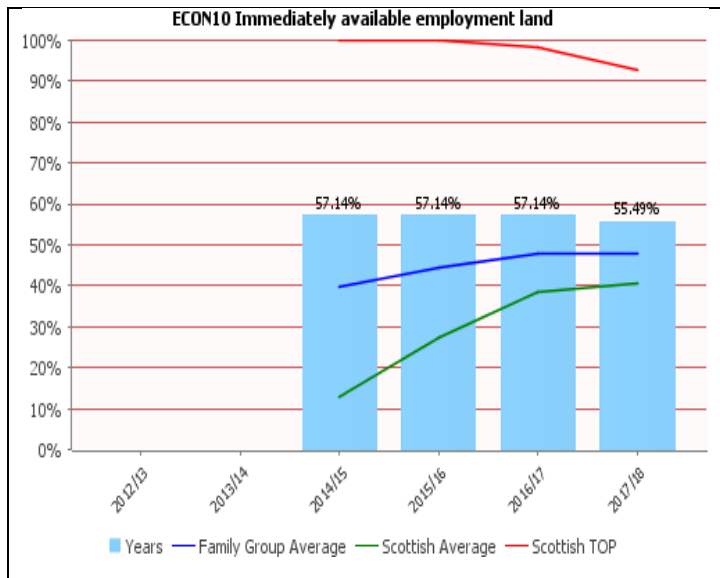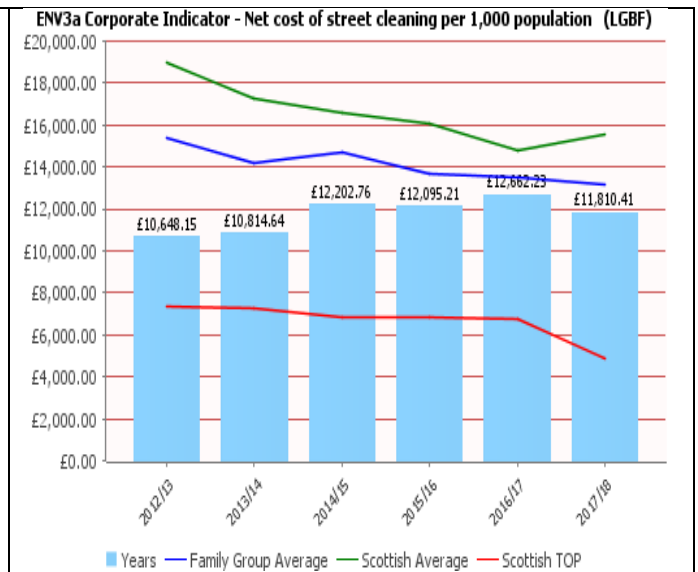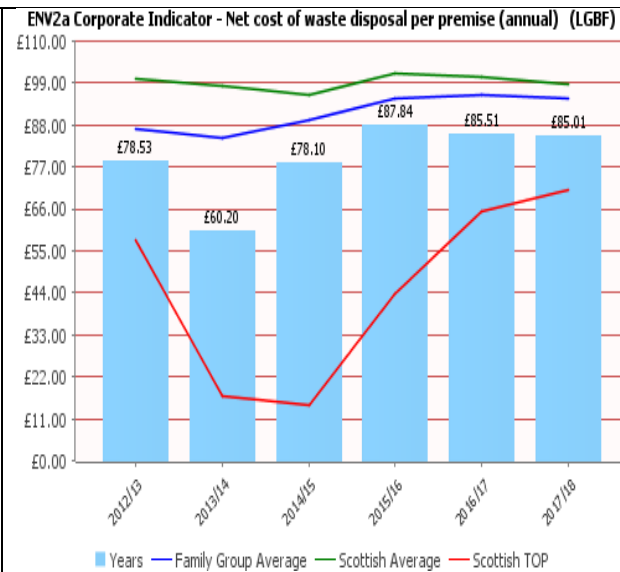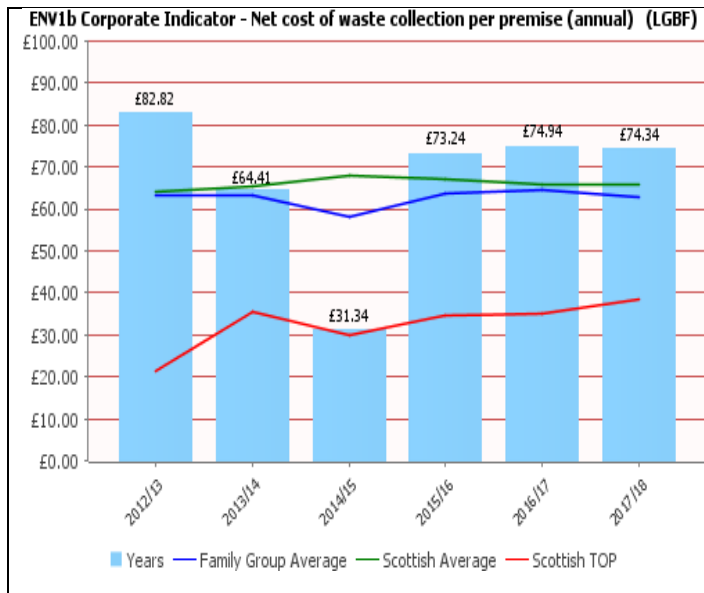

C&L5d Corporate Indicator - Percentage of adults satisfied with leisure facilities (LGBF)

Economic Development and Planning

ECON1 Percentage of Unemployed People Assisted into work from Council (LGBF)

ECON2 Cost of Planning per Application

ECON3 Average time for Commercial planning application (LGBF)

43

ECON4 Percentage of procurement spent on local enterprises

ECON5 No of business gateway start-ups per 10,000 population (LGBF)

ECON6 Cost of Economic Development & Tourism per 1,000 population (LGBF)

ECON7 Percentage earning less than the Living Wage (LGBF)

ECON8 Proportion of properties receiving superfast broadband (LGBF)

ECON9 Town Centre vacancy rates

44

ECON10 Immediately available employment land

Environmental Services

ENV1b Corporate Indicator - Net cost of waste collection per premise (annual) (LGBF)

ENV2a Corporate Indicator - Net cost of waste disposal per premise (annual) (LGBF)

ENV3a Corporate Indicator - Net cost of street cleaning per 1,000 population (LGBF)

45

ENV3c Street Cleanliness Score (LGBF)

ENV4a Corporate Indicator - Cost of maintenance per kilometre of roads (LGBF)

ENV4b Percentage of A class roads that should be considered for maintenance treatment (LGBF)

ENV4c Percentage of B class roads that should be considered for maintenance treatment (LGBF)

ENV4d Percentage of C class roads that should be considered for maintenance treatment (LGBF)

ENV4e Percentage of unclassified roads that should be considered for maintenance treatment (LGBF)
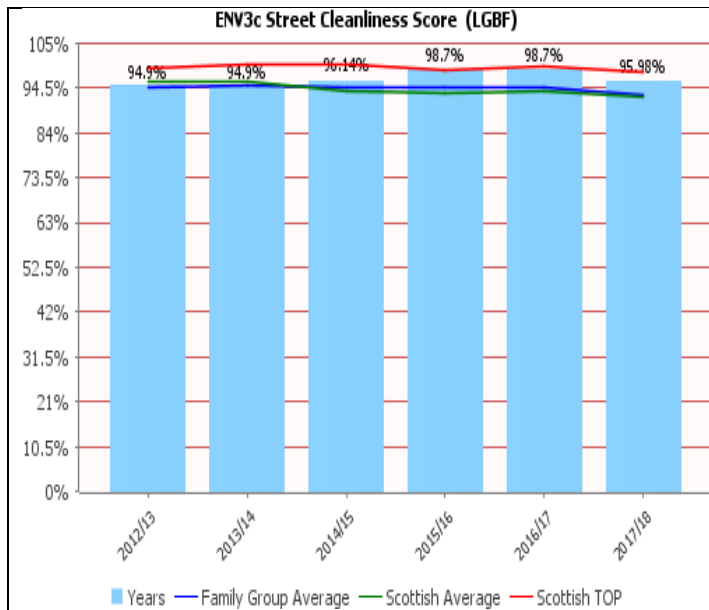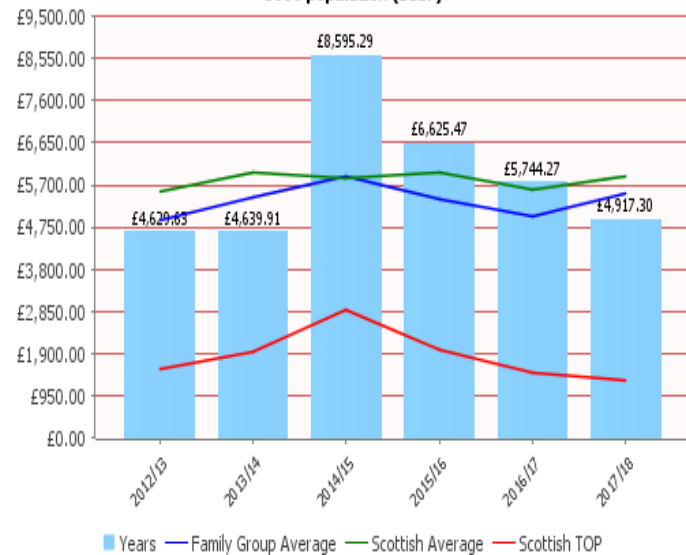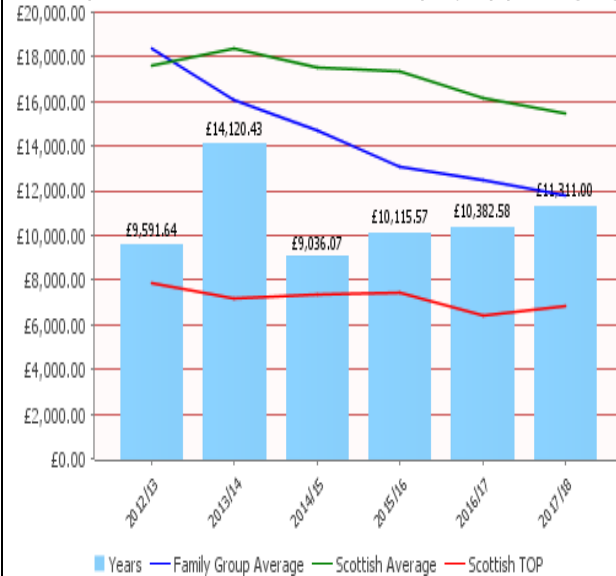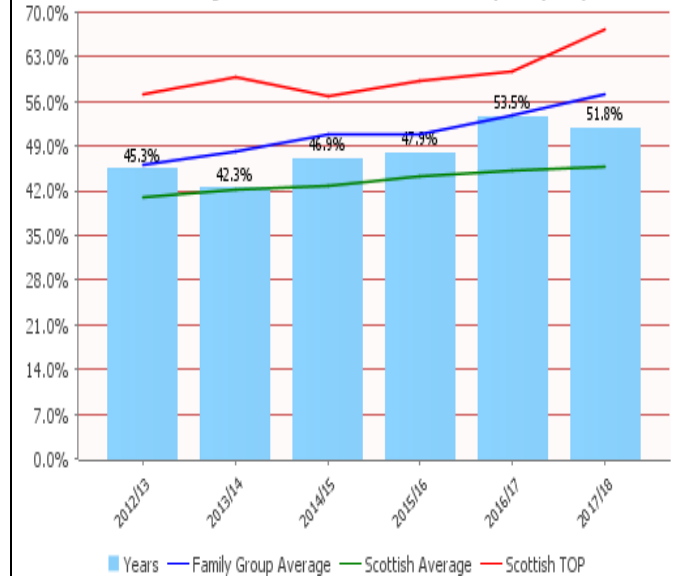

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ENV5a Corporate Indicator - Cost of Trading Standards, Money Advice & Citizen Advice per 1000 population (LGBF)
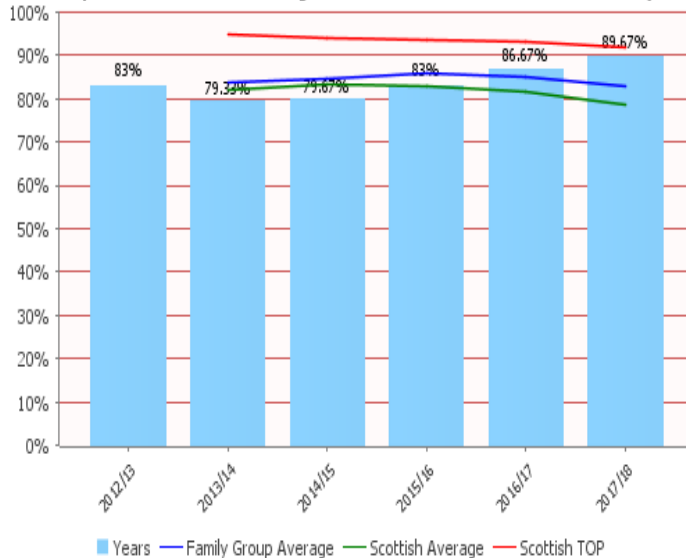

ENV5b Corporate Indicator - Cost of environmental health per 1,000 population. (LGBF)
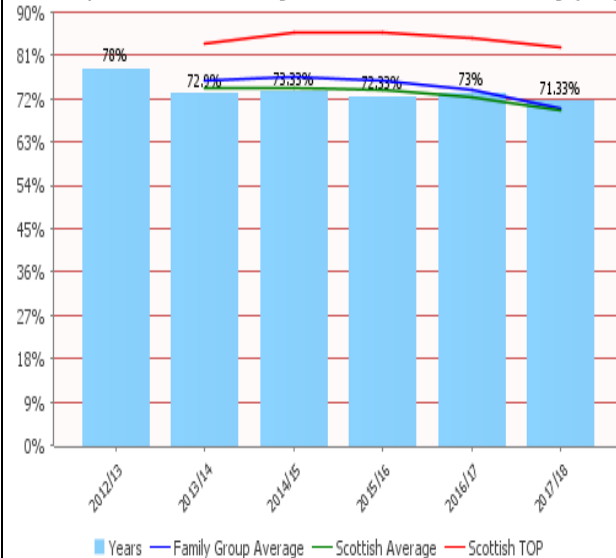

ENV6 Percentage of total household waste that is recycled (LGBF)

ENV7a Corporate Indicator - Percentage of Adults satisfied with refuse collection (LGBF)

ENV7b Corporate Indicator - Percentage of adults satisfied with street cleaning (LGBF)

47

Housing Services

HSN1b Gross rent arrears (all tenants) as at 31 March each year as a percentage of rent due for the reporting year

HSN2 Percentage of rent due in the year that was lost due to voids

HSN3 Corporate Indicator - Percentage of the Councils housing stock meeting the Scottish Housing Quality Standard criteria (LGBF)

HSN4b Average time taken to complete non-emergency repairs (LGBF)

HSN5 Corporate Indicator - Percentage of council houses that are energy efficient (LGBF)