	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
Princi	ple 1: Provide the best possible	service to the people of Herefordshi	re			•
1.	A lack of evidence that system wide processes to ensure safeguarding of both children and adults is sufficiently robust in all agencies and that accountabilities are clear and understood.	<ul> <li>a) Herefordshire safeguarding children board improvement plan in place to address weaknesses</li> </ul>	JD	Dec 15	Board has monitored progress regularly and has made some progress. Areas identified as requiring faster progress are child sexual exploitation, multi agency training and hearing directly from front line practitioners and children and families. The Board will be considering a short external evaluation in October and is identifying how to enhance progress in the areas causing concern. Improved accountability through restructure of Board governance and revised terms of	The Board has an effective child sexual exploitation strategy which is making a measurable impact in this area. There is a robust multi- agency training plan in place and effective training is commissioned and the impact on practice and outcomes for children is clear. The Board has an effective strategy to engage with front line practitioners and children and families

Area for Improvement	Actions	Owner	Timescale	Progress Update	Improvement outcome
		(see key			
 		at end)			
				reference. CSE sub	
				group has signed off a	
				strategic approach and	
				implemented multi	
				agency screening and	
				assessment tools based	
				on the National Working	
				Group best practice	
				standard. Board agenda	
				standing item includes	
				direct input from front	
				line practitioners and	
				voice of the child and	
				family.	
				The former chair of the	
				Improvement Board	
				undertook a short	
				external evaluation in	
				October and	
				recommendations made	
				to enhance progress.	
				A joint approach across	
				the children's and adults	
				safeguarding boards as	
				to multi agency	

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
				safeguarding training has been adopted to make best use of resources in implementing a training strategy, the implementation of which should be in place for 2016/17.	
	<ul> <li>b) Making Safeguarding Personal (MSP) implementation plan is completed and benefit realisation review takes place</li> </ul>	MS	Dec 15	MSP went live in January 2015 including weekly monitoring across operational teams continues. This has focussed attention on historical problem areas to ensure operational managers are able to drive improvement. A review of MSP was formally commissioned at the quarterly adult wellbeing performance review meeting, which will be lead on by the head of safeguarding. This will be linked in to the	Percentage of concerns progressing to enquiry reduced Extra capacity results in an increase in the percentage of concerns into enquiry made within 2 working days. Percentage of enquiries completed within 28 days of decision to progress NOTE – targets are monitored by management for quality assurance purposes

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
				Herefordshire Safeguarding	Percentage of service
				Adults Board agenda.	user outcomes achieved
				The review will start in January and be completed by the end March 2016. Changes to be live as of 1 April, which will coincide with changes made to the care management system, Mosaic.	Percentage of cases where the adult feels safer as a result of the enquiry
	c) Safeguarding adults peer challenge is completed and	MS	October 15	AWB safeguarding peer challenge took place in	Assurance that the changes to safeguarding
	action plan implemented for			September 2015; formal	adults board governance
	areas of improvement			feedback should be	have delivered change,
				received during	and that action plans are
				September.	sufficient in focus and
				Formal feedback has been received and an implementation plan has	pace to give confidence to the wider system, service users and carers.
				been signed off by cabinet.	Understanding how
				An integral part of this implementation plan is the	much positive impact MSP is having on both
				review of MSP (see action	practise and the
				b above), and is due for	confidence of our

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
					completion by April 2016.	<ul> <li>workforce in safeguarding vulnerable people</li> <li>Assurance on how effective changes to performance management are and how we could improve service user and carer feedback into the process</li> <li>Understanding how we could further strengthen multi partnership engagement and involvement in the safeguarding adult's agenda</li> </ul>
2.	Contract management is not consistently focused on achievement of contracted outcomes	<ul> <li>a) A commercial board will provide oversight and management of key commercial matters. Contract management will be a key feature and include the management of key</li> </ul>	RB	Ongoing	Board established with membership from all directorates. The commercial board meets monthly and has informed the scope of	Improved coordination of contract management activity and forum in place to enable sharing of good practice and experience.

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
	(platinum) contracts, plus, the agreement of a contract management framework to provide consistency of approach across the authority.			the current procurement & contract management training programme. The board also provides clarity on future procurement requirements which informs the 3 year commercial pipeline and includes key contract review dates. A contract management framework has been developed and will form an appendix to the new Commissioning & Commercial Strategy to be agreed in Spring/Summer 2016	
	<ul> <li>b) A programme of contract management training is in place to improve contract management skills. Attendees are developing a community of practice to support</li> </ul>	RB	Sept 2014 – Ongoing	A total of 177 staff days of training has been delivered so far. A self-service assessment tool to rate contract risk, supported	Contract managers across the organisation able to demonstrate required skills.

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
	development of skills and			with contract	
	consistency.			management guidance in	
				in development and due	
				to be piloted in Oct 2015.	
				A total of 280 staff days	
				of training has been	
				delivered so far with the	
				majority of the training	
				programme for the	
				current year delivered. A	
				final introduction to	
				procurement course is	
				scheduled for March	
				2016.	
				Resourcing constraints	
				as a result of a number	
				of recent unsuccessful	
				recruitment processes	
				and other competing	
				priorities has delayed the	
				implementation of the	
				assessment tool. The	
				draft assessment tool is	
				to be finalised and be	
				shared with the	

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
				commercial board members in Jan 16 for review. The agreed tool will form part of the contract management framework and new commissioning & commercial strategy to be agreed in Spring/Summer 2016.	
	c) Improving contract management performance will also be included as part of the Commissioning and Commercial Strategy due to the refreshed by end of 2015.	RB	Dec 2015	Work commenced on reviewing current strategy. A commissioning and commercial strategy has been drafted and will be reviewed in the light of the corporate plan and medium term financial strategy due to be considered by Council in February, to ensure it is fully consistent with the priorities for the future, prior to adoption in	Clear commitment to effective contract management reiterated as part of new commissioning and commercial strategy

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
					Spring/Summer 2016.	
3.	As public sector resources reduce there is a need to ensure that the council's vision and objectives are clearly understood by the wider public sector	<ul> <li>a) Fully engage with WVT, the CCG, Police, Fire and Rescue, and other agencies – with the aim of jointly leading public sector reform in Herefordshire to maximise use of resources.</li> </ul>	AN	Ongoing	July Summit meeting organized to establish overall strategic changes; September Summit organised to establish definition of possible change plans. Central part of devolution deal proposal. July and September Health and Social Care summit meetings and weekly chief officer meetings have led to development of a draft proposal, now in progress – for a stronger system-wide approach to aligned heath and care within Herefordshire. The aim is to reach a formal proposal in Jan-March 2016. This remains part of our devolution deal	Council vision and objectives are clearly understood by partners.

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
					proposal.	
Princi	ple 2: Define the roles of member	ers and officers, ensure that they wor	k together	constructively a	and improve their effectivene	ess
4.	There is an identified lack of clarity amongst members (and officers) re roles/and processes	<ul> <li>a) Constitution (including codes &amp; protocols) to be reviewed in conjunction with cross-party constitution working group.</li> </ul>	CW	May 2016	Governance improvement working group work plan and timetable agreed by audit and governance committee in July; first meeting held in September. SWOT and design principles agreed by audit and governance committee on 24 November. The working group have diarised meetings to now review the constitution.	Improved understanding and awareness of roles and processes as evidenced by member feedback and compliance with governance processes.
5.	Individual directorates/ services have undergone recent elements of peer challenge. We will consider	a) Consider options of corporate peer review or ECC review.	AN	December 2015	AWB peer review has now reported, with generally positive findings of direction and	Business planning informed by peer reviews.

**10 |** Page

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
	further peer challenge to inform future strategic direction/business planning.				improvements. We will consider the value of other peer reviews in 2016.	
6.	Staff reductions have placed a new level of work pressure on staff and on particular departments. Whilst there are signs that morale related to working for Herefordshire Council has improved, we still need to work hard on giving staff a clearer sense of our direction of travel.	<ul> <li>a) Ensure clarity of vision and purpose for the organisation.</li> </ul>	AN	March 2015	In Mar/April 2016 a new employee-wide approach to performance development, individual objective setting, values and competencies will be introduced. Initial coaching sessions accompanied by staff sessions on direction of travel, are being lined up for late January 2016. Staff briefing sessions are being planned in Jan/Feb to communicate direction of travel in line with refreshed corporate plan, core strategy, economic masterplan, devolution deal, etc	Employee opinion survey: "The council has a clear sense of direction" Improve response rate to above 50% (base line 33% agree July 2015)

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
	b) Ensure effective staff and member engagement in change and clear, resourced	PR	December 2015	Improved establishment information aligned to budget – either through	Employee opinion survey: "I am kept informed of the
	succession planning processes are developed			recruitment or managing change processes. Succession planning –	changes". Improve response rate to above 65%
				identify key roles (e.g. chief officers / heads of service / critical) – and determine through a	(base line 56% agree July 2015)
				process a plan for that post should it become vacant template used in other organisation that	Resource plan for each directorate in place.
				we could look to adapt to save reinventing the wheel).	Succession planning process in place for all chief officer and critical
				For children's social workers – the Newly Qualified Social Worker programme is already in	posts.
				place that will make the shift from agency to permanent in the medium term.	

	Area for Improvement	Actions	Owner	Timescale	Progress Update	Improvement outcome
			(see key			
			at end)			
					Staff consultation	
					processes are in place to	
					manage service changes	
					and impact on staff.	
					Staff engagement sessions	
					are planned for end	
					January/February with chief	
					executive and directors.	
					This will be to share and	
					discuss the council's sense	
					of direction and also to set	
					out an individual personal	
					performance development	
					programme (PPdP) that	
					focuses on clear objective	
					setting and personal	
					development.	
					The succession planning	
					process will link with the	
					PPdP process	
Princ	iple 3: Require high standards of	conduct	•			
7.	Fraud – A lack of focus	a) Higher profile given to fraud	PR	October	Days allocated in the	Greater awareness of
	across the authority and input	awareness through leadership		2015	internal audit plan, this	fraud and pro-active use
	by Internal Audit	group			includes work on national	of NFI data by council
		9.044			fraud initiative (NFI) to	officers
						0110615

**13 |** Page

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
				help services with the	
				review of the matches	
				where they are finding it	
				difficult to do this	
				A bulletin to schools is issued through the schools forum following the themed review of prevention of fraud in schools to raise awareness across all schools.	
				Fraud alerts are also an ongoing process and are sent to officers in the council.	
				Work is continuing on the National Fraud Initiative (NFI) data matches. A report on progress against matches was presented to the management board on 10 November 2015. A key officer has been identified for each data set.	

	Area for Improvement	Actions	Owner	Timescale	Progress Update	Improvement outcome
			(see key			
			at end)			
					Fraud is always considered	
					as part of each audit. For	
					the audits completed in	
					2015-16 fraud has not been	
					identified.	
					SWAP will deliver face to	
					face fraud awareness	
					training to all staff – 1 or 2	
					days a month (4 sessions	
					per day) for the next 6 -12	
					months and in liaison with	
					Hoople develop into a e-	
					learning module to be	
					included as part of the	
					council's induction	
					programme for new starters	
8.	Data protection/information	a) Implement action plan to	NS	April 2016	Continued improvement	Target level 3 in some
	security – as evidenced by	deliver national information			in the standard reached	areas by 2016 and re-
	number of breaches,	governance (IG) toolkit and			for the IG toolkit.	inforce and embed leve
	including those arising	progress to level 3 of				2 (the statutory
	through interim staff and	compliance				minimum) of the tool kit
	partnership arrangements					in all areas. Reduced
						number of data
						breaches.

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
9.	Performance and quality data is not used as effectively as it could be to inform improvement activity eg as evidenced by the effectiveness of controls re use of agency staff.	<ul> <li>a) Corporate performance and financial monitoring reporting will be combined to improve linkages between performance and required improvement activity with new format in place from quarter 1. Reports will also incorporate risk and strategic HR information.</li> </ul>	RB	Ongoing	Combined performance and financial reporting has been achieved with quarter 1 reporting to management board and cabinet. The format will be refined over the coming quarters to further improve the effectiveness of the report for decision makers. Work in progress, ongoing improvements are being made to content and format of reports.	Cabinet and management board able to make use of clear performance and financial information to identify areas for improvement
10.	Lack of robustness of challenge re business cases/benefits – consistency of business cases; follow up re benefits realisation	<ul> <li>a) Finance team to instigate more robust challenge on business case and benefits and follow-up re. benefits realisation</li> </ul>	PR	October 2015	New business templates in place, finance team challenging cases and monitoring savings plans which are published in cabinet reports. The business case is being used across the council and is appended to reports	Achievement of business case proposed outcomes

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
					relating to key decisions, Finance staff provide challenge at a strategic level and benefits are now being appraised at the end of projects	
11.	Insufficient linkages between strategic planning processes, project management, and individual decisions e.g. as evidenced by the Colwall school building decision, and compliance with health and safety procedures	a) Review performance management arrangements to ensure compliance issues are addressed	PR	December 2015	New project management templates are in place, project review structures are agreed with highlighted reporting considered at senior manager level .The building strategy takes into consideration of the health, safety, wellbeing and safeguarding requirements of current legislation to ensure buildings are fit for purpose and meet current legislator requirements The health and safety advisor is now part of the schools property liaison group meetings and key work planned takes into consideration of the health and safety requirements and this also helps shape	Capital strategy group in place and issues dealt with in a programmed way.

Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update priorities of spend	Improvement outcome
	b) Corporate health and safety board strengthened	PR	September 2015	Cabinet approved refreshed policy (including revised governance arrangements) in September 2015. Policy on Sharepoint Health and Safety site accessible to all staff. Communicated changes via the Safety Committee, through Directorate representatives, via safety training of all staff, through Directorate Safety Groups and communication briefings sent to all staff. Minutes and actions from Corporate Health and Safety meetings are reviewed at Board level on a quarterly basis and where required significant issues are escalated . Copies of the minutes are on the Sharerpoint site and	Health and Safety issues identified in a timely fashion and properly risk assessed and mitigated.

Area for Improvement	Actions	Owner	Timescale	Progress Update	Improvement outcome
		(see key			
		at end)			
				available to all employees.	
				Corporate Risks are	
				adjusted according to	
				findings. Serious issues are	
				then brought to the notice	
				of Council Leadership.	
				Monthly health and safety	
				reports are sent to ECC	
				DMT on significant issues	
				with an up-to-date action	
				plan. So that issues can be	
				escalated where.	
				appropriate. The number	
				of reported incidents have	
				fallen over the last 3 years	
				and there is a greater	
				awareness for the need to	
				report incidents and review	
				what happened using trend	
				analysis Using National	
				Statistics for – LA and	
				Government Offices	
				Annually (2014/2015)	
				injuries from slips/trips and	
				falls are 8% lower than the	
				nation average and injuries	
				from lifting and handling is	
				4.5 % lower	

	Area for Improvement	Actions	Owner (see key at end)	Timescale	Progress Update	Improvement outcome
					H&S issues are now	
					routinely considered as	
					part of schools estate	
					management meetings	
					which has health and	
					safety representation	
					Landlords consent requirements resent on the 1 <sup>st</sup> October to remind schools of what they need to do to prior to making any significant changes to structures which could impact on staff, pupils and visitors health, safety or welfare	
Princi	ple 5 – Be transparent and open	: responsive to Herefordshire's need	s and accou	untable to its p	eople	
12.	Although there is a significant amount of information made available publically, including in relation to decision taking,	a) Update website to improve transparency and make it more user-friendly.	NS	February 2016	Implementation plan in place. Improvements to	Updated user friendly website in place and operational, user satisfaction improved
	it is not always easy to find on the website or easily				functionality of the website have taken place (council tax, reporting	

Area for Improvement	Actions	Owner	Timescale	Progress Update	Improvement outcome
		(see key at end)			
understood once found leading to a perception that information is being withheld and/or decisions are taking place 'behind closed doors'.	b) Review decision-making governance processes to ensure there is a proportionate approach to transparency re decision- making so that information is available about decisions taken, that schemes of delegation are clear, but that the process of documenting decisions is not overly bureaucratic.	CW	May 2016	function, resilience), with further investment in digital communications in 2016. Included within the remit of the review of the constitution (see 4a above)	Clear governance processes which enable effective engagement and timely decision- making.

## Owner:

- RB = Richard Ball, assistant director place based commissioning
- JD = Jo Davidson, director children's wellbeing
- AN = Alistair Neill, chief executive
- MS = Martin Samuels, director adults and wellbeing
- PR = Peter Robinson, director of resources

## **21 |** Page

Annual Governance Statement Action Plan 2015/16

NS = Natalia Silver, assistant director communities CW – Claire Ward, monitoring officer