

Rachael Wardell / Ian Pearson		Education Service				Q4 2017/18		RED	
Indicator Ref: BEC1edAY08		At KS4, the average attainment 8 score is in the top 25% of English Local Authorities					Type: Snapshot		
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity	
			Q1	Q2	Q3	Q4			
RAG		Baseline				■	Top 25%	Higher is better	
Qrtly outturn	-	-	Annual	Annual	Annual	-			
YTD outturn	-	Rank 38/152 (51 points) (2015/16 AY) 1 st quartile	-	-	-	Rank 47/152 (47.4 points) (2016/17 AY) 2 nd quartile			
REASON FOR RED: Context: GCSE results in 2017 cannot be compared to 2016 due to further changes in the accountability system. Attainment 8 scores for 16 year olds at 47.4 points are well above national scores of 44.2 points but has just fallen short of top quartile performance. A range of measures are used to evaluate GCSE performance nationally. Of the 7 key GCSE performance measures, the LA is in top quartile for 5 out of 7 measures. Eight out of ten secondary schools have scores equal to or above the national Attainment score of 44.2 points. The two lowest performing schools are Trinity School (Academy) at 40.2 points and John O Gaunt School (Academy) at 39.6 points. This has impacted negatively on overall results. REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS: Maintained schools and academies all participate in LA organised subject leader networks to support raising attainment, especially at GCSE. Concerns about individual performance have been raised directly with the schools concerned by the Head of Education. The Regional Schools Commissioner has been informed about concerns about Academy performance. FINANCIAL IMPLICATIONS: None SERVICE PLAN UPDATES REQUIRED: None STRATEGIC ACTIONS REQUIRED: None									

Rachael Wardell / Ian Pearson			Education Service			Q4 2017/18	RED	
Indicator Ref: BEC1edAY09		At KS2, the percentage achieving the expected standard is in the top 25% in England for reading, writing and maths combined					Type: Snapshot	
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity
			Q1	Q2	Q3	Q4		
RAG		Baseline				<div></div>	Top 25%	Higher is better
Qrtly outturn	-	-	Annual	Annual	Annual			
YTD outturn	-	Top 50% Rank 50/152 (56%) (2015/16 AY) 2 nd quartile	-	-	-	Top 50% Rank 65/152 (62%) (2016/17 AY) 2 nd quartile		

REASON FOR RED:

In the primary phase, we are now in the second year of a new accountability system following the removal of national curriculum levels.

KS2 Reading Writing Maths (RWM) scores improved from 55% in 2016 to 62% in 2017 which is above the national score of 61%. Scores in Reading continue to be very strong. Separately, scores in Reading improved from 69% to 74% (national 71%); Writing improved from 69% to 75% (nat 76%); Maths improved from 69% to 73%. It has fallen short of the ambitious target of top 25% due to:

- Although writing scores have improved significantly they are just below national scores which have also improved. Writing scores are teacher assessed (not tested as in reading and mathematics). It is widely recognised by Ofsted and the DfE that teacher assessment of writing across England is currently very uneven with national scores in writing now well above that of reading which is not typically expected. Further changes to writing assessments in 2018 may result in further inconsistency as the new accountability system continues to bed in. Feedback from LA writing moderation visits to schools in 2017 reported that good improvements had been made especially in the quality and range of writing in schools and schools are continuing to build on those improvements for 2018 where further

improvement is expected.

- Performance in mathematics needs improvement in some schools. Headteachers cite lack of subject knowledge in mathematics as a key barriers in some cases.
- The general low performance and of a very small group of primary schools has impacted negatively the overall rate of improvement. Low performance of these schools can also be seen to be linked to leadership as well as quality of teaching.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

£120,000 secured as a result of bidding to the DfE Strategic School Improvement Fund to improve teacher subject knowledge in mathematics and the leadership of mathematics. The project entitled, “Growing Greater Mathematicians” involved 12 targeted schools over 5 terms. The project commenced in October 2017 to build sustainable improvements in mathematics through developing secure teacher subject knowledge.

Continued LA CPD programme in Mastery in English to improve the quality of writing. There has been a very high take up for this training.

Dedicated training for teachers in years 2 and year 6 on teaching and assessing writing

LA CPD programme on spelling

Service level agreement support for schools to support planning for writing.

LA leadership “health check review” has been undertaken in a targeted school with low results.

Additional intensive support to new leadership to improve attainment and assessment in core subjects in The Willows Primary School and Lambourn C.E Primary School.

Maintained schools are categorised for support according to risk and school performance. Schools categorized category C or below receive additional School Improvement Adviser support and challenge visits.

The primary academies have RWM scores which are below national scores. The Regional Schools Commissioner has been informed about concerns about primary academies.

FINANCIAL IMPLICATIONS: None

SERVICE PLAN UPDATES REQUIRED: None

STRATEGIC ACTIONS REQUIRED: None

Rachael Wardell / Ian Pearson		Education Service				Q4 2017/18		RED
Indicator Ref: BEC2edAY07		% pupils eligible for Free School Meals (FSM) achieving a Good Level of Development (GLD) at Foundation Stage (EYFS)					Type: Snapshot	
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity
			Q1	Q2	Q3	Q4		
RAG	■	■				■	Top 25%	Higher is better
Qrtly outturn	-	-	Annual	Annual	Annual	-		
YTD outturn	Rank 45/152 (2014/15 AY) 4 th quartile	Rank 38/152 (57%) (2015/16 AY) 2 nd quartile	-	-	-	Top 75% Rank 99/152 (53%) (2016/17 AY) 3 rd quartile		

REASON FOR RED:

Free School Meal Data Analysis 2016 /2017

	FSM 2016	FSM 2017
GLD	56.9%	51.1%
No. of schools where no FSM children achieved GLD (Indicates a school where this has occurred in 2016 & 2017.)	11 schools (Aldermaston, Bradfield, Brookfields, Chaddleworth, Cold Ash, Pangbourne, PDI, Shaw-cum-Donnington, St. John the Evangelist, St. Joseph's, The Willows, Victoria Park Nursery)	11 schools (Basildon, Bradfield, Brimpton, Chaddleworth, Chieveley, Compton, Fir Tree, Hermitage, Purley, Spurcroft, Welford & Wickham)

Gap FSM / Non-FSM	19.6%	26.7%
Cohort size	123	133
1 child = %	0.8%	0.7%
No. of schools with only 1 FSM child	14	17
No. of schools with 5 or less FSM children	23	21
No. of schools with 13 or less FSM children	4	6

There were 21 schools in 2017 who had 5 FSM children or less, 18 of those schools did not achieve at least 50% of their FSM children attaining a GLD. Schools who had less than 13 FSM children performed better. 5 out of the 6 schools achieved at least 50% of their FSM children at GLD.

Free School Meal Data Analysis 2016 /2017

All schools who had a FSM child were invited to the EYFS FSM network meetings in 2017 (3 across the year). The schools had access throughout the year to LA support, workshops where good practice was shared amongst colleagues and regular data scrutiny was encouraged. The schools who were invited are listed below and those who fully engaged in the network are highlighted in yellow.

<u>School</u>	<u>No. of FSM children</u>	<u>No. who achieved GLD</u>
Aldermaston C.E. Primary School	5	1
Basildon C.E. Primary School	1	0
Beenham Primary School	2	1 (other child who did not achieve GLD joined the school very late in the year)
Birch Copse Primary School	3	2
Bradfield C.E. Primary School	1	0
Brimpton C.E. Primary School	1	0
Calcot Infant School and Nursery	7	4
Chaddleworth St Andrew's C.E. Primary School	1	0
Chieveley Primary School	1	0

Compton C.E. Primary School	1	0
Downsway Primary School	1	1
Falkland Primary School	2	1
Fir Tree Primary School and Nursery	2	0
Francis Baily Primary School	4	1
Hermitage Primary School	1	0
Hungerford Primary School	7	3
John Rankin Infant and Nursery School	5	4
Kennet Valley Primary School	4	1
Kintbury St Mary's C.E. Primary School	2	1
Lambourn C.E. Primary School	7	5
Long Lane Primary School	3	1
Mortimer St John's C.E. Infant School	4	1
Mrs Bland's Infant School	6	4
Pangbourne Primary School	5	5
Parsons Down Infant School	4	3
Purley C.E. Primary School	1	0
Robert Sandilands Primary School and Nursery	4	1
Shaw-cum-Donnington C.E. Primary School	1	1
Shefford C.E. Primary School	1	1
Speenhamland Primary School	4	3
Springfield Primary School	2	1
Spurcroft Primary School	1	0 (Attachment issues)

St Finian's Catholic Primary School	1	1
St John the Evangelist C.E. Nursery and Infant	3	2
St Joseph's Catholic Primary School	1	1
St Paul's Catholic Primary School	1	1
Streatley C.E. Voluntary Controlled School	1	1
Thatcham Park Primary	4	2
The Willows Primary School	9	6
The Winchcombe School	7	1
Theale C.E. Primary School	3	2
Welford and Wickham C.E. Primary School	1	0
Westwood Farm Infant School	3	2
Whitelands Park Primary School	5	3

The Winchcombe school has been challenged as despite contact with the school throughout the year there was no indication that the data would be so low. 85% of FSM children did not even achieve the prime areas. The EYFS Adviser has contacted the Headteacher with a series of questions to further unpick this data.

The low numbers of pupils in individual schools makes it very challenging for the early years team to get and keep the engagement of all schools. The best outcomes are from the schools who regularly attend the network meetings, share practice and are proactive in their work to improve outcomes for all children.

Things to consider...

- West Berkshire has very small cohorts in many schools which has an impact on statistics particularly when presented as a percentage.
- The number of pupils eligible for FSM is small (in 2017...133 pupils out of 1959 which equates to 7% of pupils in total) 68 pupils eligible for

FSM achieved a GLD which compares to 1472 in total achieving a GLD (therefore 4.6 % of pupils achieving a GLD were FSM).

- However, the FSM gap increasing this year is a real concern. There were 21 schools who had 5 FSM children or less, 18 of those schools did not achieve at least 50% of their FSM children attaining a GLD. Schools who had less than 13 FSM children performed better. 5 out of the 6 schools achieved at least 50% of their FSM children at GLD. Analysis suggests that where there is a small number of FSM children particularly in small schools these children do not do so well. This will need to be a focus moving forward.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

The network meetings have been extended to cover all vulnerable children in the hope of greater engagement. Each school is asked for their data at key points in the year; baseline, mid-year and prior to submission at the end of the summer term. Schools who have repeatedly featured as having larger gaps and issues will be visited in year to ensure that they are providing additional support for the identified FSM pupils. The relevant SIA for the school has also been given the information so that they can challenge during visits. (Obviously this only works for schools who are either in a category or by back school improvement services).

Next steps

West Berkshire level

-Collection of Baseline data from schools

-Identify early those schools with FSM children and previously funded 2 year old children who are now in Reception. Monitor how effective schools are at putting interventions in place, if necessary, and tracking FSM / two year old funded children.

Moderation cycle

-Identify those schools who are in need of support

-Plan the next moderation cycle for 2017-2018

Training and support

FSM network and project work to support vulnerable families who have been funded as 2 year olds

School level

Schools to analyse their data and identify trends / possible actions

Pupil level

Schools to identify specific pupils who require further support moving into Year 1

We are planning additional moderation activities to look at the assessment of these pupils in detail, providing support and challenge. Head Teachers are an important part of this process and will also be invited to network meetings and moderation activities. They are responsible for signing off their end of year results at the point of submission and need to be mindful of the outcomes for these pupils.

FINANCIAL IMPLICATIONS: None

SERVICE PLAN UPDATES REQUIRED: The targets are reasonable and need to remain the same.

STRATEGIC ACTIONS REQUIRED: None

Rachael Wardell / Ian Pearson		Education Service				Q4 2017/18		RED	
Indicator Ref: BEC2edAY10		To improve on 2015/16 Academic year rankings for reading, writing and maths combined expected standard for disadvantaged pupils in KS2 in 2016/17 Academic Year					Type: Snapshot		
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity	
			Q1	Q2	Q3	Q4			
RAG		Baseline				■			
Qrtly outturn	-	-	Annual	Annual	Annual	-			
YTD outturn	-	Ranked 122/152 (33%) (2015/16 AY) 4 th quartile	-	-	-	Rank 148/152 (35%) (2016/17 AY) 4 th quartile	Rank higher than 122/152	Higher is better	

REASON FOR RED:

(Please refer also to Exception Report on KS2 RWM where the commentary on writing and mathematics is also applicable)

Context: The number of pupils entitled to FSM in West Berkshire is very small at approximately 15% of pupils. Of that cohort, a higher than national percentage of FSM pupils are also SEND (doubly disadvantaged) and white working class boys, the lowest attaining group of pupils nationally. 42% of primary schools have typically 2 or fewer disadvantaged pupils in a cohort which presents different challenges in terms of skills of meeting the needs of those pupils.

The performance of FSM RWM improved from 31.9% in 2016 to 34.5% in 2017 which is lower than the national score at 48%. FSM pupils who have no SEND improved from 41.0% in 2016 to 50% in 2017 which is closer to, but lower than, the national score of 57%.

In addition to the commentary in the KS2 RWM exception report, the drop in performance from 2016 is due to :

- Expenditure of Pupil Premium funding being insufficiently evaluated by school leaders which results in little impact on results. Interventions and approaches used by schools are not chosen on the basis of evidence base research of “What works well” in terms of

raising attainment.

- Too low expectations of pupils by schools with pupils who are low attaining at the end of KS1 (aged 7) in some schools. Many of these pupils are also FSM.
- Some schools with very low numbers of FSM placing insufficient priority on meeting their needs.
- Weak subject knowledge of teachers which results in less than good teaching and which impacts on all pupils, including FSM.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

- Expected outcomes for FSM pupils in year 6 for 2018 are being audited by the LA in every school. As a result, 6 targeted schools will receive regular monitoring visits from designated **Pupil Premium Peer Challenge Headteachers** to ensure pupil premium spend is having sufficient impact on learning outcomes across the school. Additional training for governing bodies on monitoring the impact of PP spend will form part of this monitoring programme. The low performance of FSM pupils has been a focus of debate at Primary Heads Forum and it has been agreed that head teacher peer challenge of “collective responsibility” for improving outcomes is the next step for the LA pupil premium strategy.
- DfE funding has been secured through Strategic School Improvement Funding bids to train teachers in maths (12 schools) and phonics (10 schools) in with a focus on disadvantaged pupils. The 2 projects span 5 terms and will address teacher subject knowledge and the ability to diagnoses the gaps in learning of disadvantaged pupils in particular. The bids total £230,000 and will build long term sustainability.
- Targeted primary schools have had LA whole school pupil premium reviews.
- The successful KS1 and KS2 pupil premium network of schools for pupil premium leads will continue. A pan – Berkshire PP conference is organised for the summer.
- Intensive support is being provided to support ambitious new leadership at The Willows Primary and Lambourn C.E. Primary.
- Maintained schools are categorised for support according to risk and school performance. Schools categorized category C or below receive additional School Improvement Adviser support and challenge visits.
- The Regional Schools Commissioner has been notified about the concern about the performance primary academies which each have lower than national scores for KS2 RWM FSM.

FINANCIAL IMPLICATIONS: None

SERVICE PLAN UPDATES REQUIRED: None

STRATEGIC ACTIONS REQUIRED: None

Rachael Wardell / Ian Pearson			Education Service				Q4 2017/18	RED
Indicator Ref: BEC2edAY11		To improve on 2015/16 rankings for attainment 8 for disadvantaged pupils in KS4 in 2016/17 Academic Year					Type: Snapshot	
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity
			Q1	Q2	Q3	Q4		
RAG		Baseline				■	Rank higher than 100/152	Higher is better
Qrtly outturn	-	-	Annual	Annual	Annual	-		
YTD outturn	-	Rank 100/152 (2015/16 AY) 3 rd quartile	-	-	-	Rank 112/152 (34.5 points) (2016/17 AY) 4 th quartile		

**NB: GCSE results in 2017 cannot be compared to 2016 due to further changes in the accountability system.*

REASON FOR RED: The number of pupils entitled to FSM in West Berkshire is very small at approximately 15% of pupils. Of that cohort, a higher than national than national percentage of FSM pupils are also SEND (doubly disadvantaged) and white working class boys, the lowest attaining group of pupils nationally.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

Maintained schools and academies all participate in LA organised pupil premium network to share good practice and support raising attainment, especially at GCSE.

Concerns about individual performance have been raised directly with the schools concerned by the Head of Education.

The Regional Schools Commissioner has been informed about concerns about Academy performance.

FINANCIAL IMPLICATIONS: None

SERVICE PLAN UPDATES REQUIRED: None

STRATEGIC ACTIONS REQUIRED: None

John Ashworth / Gary Lugg		Development and Planning				Q4 2017/18		AMBER	
Indicator Ref: SLE1dp01		To enable the completion of 1,000 affordable homes in the 2015-2020 period					Type: No. +		
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity	
			Q1	Q2	Q3	Q4			
RAG	-	-	⊙	⊙	⊙	◆	1,000 by 2020 / 225 in year	Higher is better	
YTD outturn	158	83	Annual	Annual	Annual	171			
REASON FOR RED:									
The development industry has not built out the planning permissions granted for affordable housing. There are over 700 permissions for affordable housing not yet under construction. If the development industry built these permissions then together with the 412 already constructed the target would be achieved.									
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:									
Planning permission for new housing continue to be granted including permission for affordable housing. Discussions have also been held with Homes England to see if they are willing to intervene on stalled sites. Funding has been received from the Ministry of Housing to help Sterling Cables which had stalled due to contamination issues.									
The Council and Sovereign Housing are also to work together in a Joint Venture to boost delivery of affordable housing in West Berkshire.									
FINANCIAL IMPLICATIONS:									
Loss of housing delivery grant directly related to affordable housing provision									
SERVICE PLAN UPDATES REQUIRED:									
None.									
STRATEGIC ACTIONS REQUIRED:									
None.									

Nick Carter			Chief Executive Officer (CEO)				Q4 2017/18	RED
Indicator Ref: CEO3		Redevelop London Road Industrial Estate (LRIER) with St. Modwen Plc Business plan created and approved (Milestone 1)					Type: text	
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity
			Q1	Q2	Q3	Q4		
RAG	-	■	■	■	■	■	tbc dependent on court	n/a
Qrtly outturn	-	-	-	-	-	-		
YTD outturn	-	Delayed	Delayed	Delayed	Delayed	Delayed		
REASON FOR AMBER:								
Continued delay due to ongoing court action. The case brought against the Council by Faraday Developments Ltd (FDL) was won in the High Court, however, the appellant sought leave to appeal. In October 2017 the Court of Appeal granted FDL leave to appeal and the Council will be defending its case. As a result the legal process continues.								
The case will go before a judge at the Court of Appeal 12-13 June 2018. However, the final judgement date is unknown and could take at least 6 months. Position has not changed during Q4.								
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS: None								
FINANCIAL IMPLICATIONS: None								
SERVICE PLAN UPDATES REQUIRED: None								
STRATEGIC ACTIONS REQUIRED: None								

Rachael Wardell / Tandra Forster		Adult Social Care				Q4 2017/18		RED	
Indicator Ref: PS1asc2		% of adult social care safeguarding concerns responded to within 24 hours					Type: Snapshot		
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity	
			Q1	Q2	Q3	Q4			
RAG	★	★	◆	■	■	■	=>92%	Higher is better	
Qrtly outturn	135/143 94.4%	151/157 96.2%	120/139	90/113 79.6%	93/103 90.3%	126/134 94%			
YTD outturn	718/768 93.5%	573/614 93.3%	86.3%	210/252 83.3%	303/355 85.4%	429/489 88%			
REASON FOR RED:									
YTD 429/489 (88%) concerns were responded to within 24 hours. This means 60 concerns were not responded to this over 24hours									
If Q4 data alone was to be considered, the 92% target would be met. In Q4, 126 of 134 concerns were responded to within 24 hrs (94%), only 8 concerns took longer than 24 hours. Clear evidence that since Q3 we have continued to improve, but as the target is calculated ytd we are not able to improve significantly enough to take into account past performance in the year.									
Discussion and review of practice in safeguarding in Q2 has indicated a shift in practice to ensure all concerns have been recorded on the same day in a timely way and that the recording of these concerns is on the system. Previously the safeguarding team has managed any presenting risk however recording has been delayed and on occasion completed in retrospect which is not in line with national minimum standards. However we are confident that the risk to the individual was managed.									
On occasion, concerns can be received where there is not enough necessary information to inform decision making sometimes this requires waiting one or two additional working days to receive required information from the original referrer. In this period Safeguarding ensure that arrangements are made to ensure the safety of the individual concerned.									
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:									
With the implementation of care director we have a number of mechanisms by which we can monitor concerns and S42s more closely through the use of views and dashboards, this allows the safeguarding team and operational manager to be aware of any concerns on the system and ensure they are responded to in a timely way. We will spot check and audit these records to ensure that practice is being consistently applied.									

The implemented system changes in Q3 and Q4 ensuring timely and robust recording of all concerns can now be monitored effectively by the safeguarding adult lead. Where there are exceptional circumstances that are over and beyond 24hrs (this is often in relation to contact with the original referrer being required) we can monitor these closely. The changes in process have been confirmed with the ASC management team to ensure clarity of process.

FINANCIAL IMPLICATIONS:

Remedial actions will be completed within existing resources.

SERVICE PLAN UPDATES REQUIRED:

No changes required, remedial actions should address performance.

STRATEGIC ACTIONS REQUIRED: None

Nick Carter / Nick Carter		Better Communities Team					Q4 2017/18	RED
Indicator Ref: HQL1kt9bct4		% of identified communities that have agreed what actions will be undertaken to address locally identified issues					Type: %snap	
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity
			Q1	Q2	Q3	Q4		
RAG			★	◆	◆	■	100%	Higher is better
Qrtly outturn	-	-	0/0	4/6	7/11	10/15		
YTD outturn	-	-	0%	66.7%	63.6%	66.7%		
REASON FOR AMBER: <p>The number of community conversations held have increased during 2017/18 with the BCT Team supporting their instigation.</p> <p>Qtr 2 – Conversation held in Hungerford, Calcot, Newbury, Burghfield, Aldermaston and Thatcham. 4 identified potential actions (Hungerford, Calcot, Newbury and Burghfield) but no timescales were set.</p> <p>Qtr 3 – the 6 above plus Conversations with a Peer Mentors Event, Rough Sleepers, and in the communities of Hermitage, Lambourn and Bucklebury. 7 identified potential actions. Topics raised at the Peer Mentors Event were shared with colleagues across Education; outcomes from the meeting with some Rough Sleepers informed the development of the Making Every Adult Matter project.</p> <p><i>Qtr 4 – The outcomes from the two conversations at the primary school have been taken forward by the Health and Wellbeing Schools officer. Thatcham, Hungerford, Calcot, Hermitage, Independent Advisory Group (IAG), Community Alcohol Project (CAP) in Thatcham, Aldermaston and Holybrook are all progressing the issues. Hermitage is looking into youth provision; Calcot a community cafe, Thatcham is looking at speeding and have had 7 members come forward to do the Speed Indicator Device training. The Hungerford Professional Lens Meeting influences what the community hub may offer.</i></p> <p>The activity of convening community conversations is being achieved but, it is important to note that the whole purpose of having community led conversations is for each community to decide what actions, if any, will arise and are taken forward and in what format. It is not within the gift of the Building Communities Together Team to decide on the action planning.</p> <p>REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:</p> <p>As explained above. The BCT Team cannot take management action to ensure that all identified issues are progressed into actions.</p>								

This is down to the community to decide. However the BCT has been very proactive in actually ensuring that Community Conversations have taken place i.e. Hermitage Parish Council asked for a public meeting which was held as a community conversation and was chaired by the BCT Team Manager. BCT Team members have supported police colleagues when they have organised a community conversation in Aldermaston and Beansheaf.

Importantly whilst there may not have Actions arising from each Conversation there have been new and innovative ways of identifying community issues and for potentially empowering communities in finding ways of addressing them.

On reflection it may not have been a good idea to set a target of 100% for a measure that is not within the control of the BCT Team and for a way of working that is still relatively new within the district. Community Conversations appear to have a great potential in supporting community engagement and building community resilience so whilst the target measure may not be achieved at year end it has been valuable work.

STRATEGIC ACTIONS REQUIRED: None

Rachael Wardell		Children and Family Service				Q4 2017/8	RED	
Indicator Ref: CBaCFS11		Number of weeks taken to conclude care proceedings (Children Social Care)					Type: snapshot	
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity
			Q1	Q2	Q3	Q4		
RAG	★	■	■	■	■	■	<=26	Lower is better
Qrtly outturn	-	-	-	-				
YTD outturn	23	28	35	35	32	32		

REASON FOR RED:

This indicator measures the average number of weeks taken to conclude care proceedings for those concluded ytd. The target of 26 weeks is a national one. The National Average is some way adrift from this at 30 weeks (2013-2016).

In West Berkshire, a small number of case proceedings have gone over the required 26 weeks because of the complexity of the cases concerned and this is accepted by the courts as legitimate delay.

It is accepted that Court capacity has also contributed to our proceeding timescales.

We are in discussion with the judiciary and the Local Family Justice Board about the delays which relate to court capacity and are avoidable.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

As above – we’re in continued discussion with the judiciary and Local Family Justice Board about these delays.

FINANCIAL IMPLICATIONS: None

SERVICE PLAN UPDATES REQUIRED: None

STRATEGIC ACTIONS REQUIRED: None

Rachael Wardell / Tandra Forster			Adult Social Care				Q4 2017/18		RED	
Indicator Ref: CBfasc05		% of clients with Long Term Service (LTS) receiving a review in the past 12 months					Type: snapshot			
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity		
			Q1	Q2	Q3	Q4				
RAG	★	■	◆	◆	■	■	75%	Higher is better		
Qrtly outturn	1,129/1,187	826/1,240	806/1,239	903/1,264	895/1,229	841/1,219				
YTD outturn	95.1%	66%	65%	71.4%	72.8%	69% (P)				
REASON FOR RED:										
<p>During Q1 of 2017/18 we completed analysis of the cases that were overdue a review, this identified that a high proportion (43%/88 people) had a primary support reason (PSR) of Learning Disabilities or Mental Health. Care reviews for individuals with these types of need tend to be more complex which means they take longer. Whilst the team had been established as multi-disciplinary a skills analysis identified the need to increase the number of staff with expertise in learning disabilities and mental health.</p> <p>This was addressed by recruiting two full time staff with the relevant skills, which has had a positive increase in our performance in Q2. In addition the Care Act allows us to take a proportionate approach to reviews; this means we can use a range of different methods including telephone</p> <p>In Q3 performance continued to improve, however the additional resource that was put in place has now been removed as part of in year changes to address over spend. We highlighted this this could impact on our ability to achieve this target and this has become evident in Q4.</p>										
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:										
<p>Weekly reports provides detail of reviews required and is being actively used to focus work.</p> <p>During Q1, review of the data and skill set within the team took place to understand support needed to meet year end targets Increased team FTE temporarily to focus on overdue reviews where the primary support reason is Learning Disability and Mental Health (the main proportion of overdue reviews) which will allow us to meet target. Work continues to focus on these areas.</p> <p>Care Director supports a proportional approach to reviews and minimises paperwork to be completed; looking to fully apply this approach where appropriate and safe to do so.</p>										
FINANCIAL IMPLICATIONS:										

Remedial actions will need to be completed within existing resources.

SERVICE PLAN UPDATES REQUIRED:

KPI will remain for 2018/19, but it is clear that significant more resource would be required to meet the target of 75%.

On the basis of reduced capacity we are proposing that we revise and reduce the target to 70% to ensure this is achievable.

STRATEGIC ACTIONS REQUIRED: None

Rachael Wardell / Tandra Forster			Adult Social Care				Q4 2017/18		RED	
Indicator Ref: CBfasc06		Decrease the number of bed days due to Delayed transfers of care (DToC) from hospital					Type: Nsnapshot			
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity		
			Q1	Q2	Q3	Q4				
RAG	■	■	◆	◆	★	■	Variable 446 for YE Q	Lower is better		
Qrtly outturn		808	733	613	438	573 (P)				
YTD outturn		808	733	613	438	573 (P)				
REASON FOR RED:										
DToC has been a key measure in the BCF programme of work.										
Department of Health set the targets nationally in July 2017, based on snapshot previous performance; these were always considered to be significantly challenging.										
<ul style="list-style-type: none">Volumes of Referrals through hospital pathways have been high.Capacity in the market for care at home is significantly challenged.MH delays are often long due to finding suitable placements to support complex needs										
Despite target not being met, a significant improvement can be evidenced from performance in April 2017 to performance in March 2018										
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:										
A number of work streams through the BCF have been initiated as a system to work towards improving our DToC; these include: Early discharge planning; Systems to monitor patient flow ; Multi-disciplinary/multi-agency discharge teams; Home first/discharge to assess; Seven-day service and Trusted assessors										
LGA peer review into DToC will enable us to review our challenges and consider improvements across Health and Social Care sector that can be delivered in an integrated way. Anticipating further actions to be developed from this to further develop the BCF programme of work, overseen by the H&WB Board										

FINANCIAL IMPLICATIONS:

We have invested funding from ASC budgets as well as BCF to support us to improve performance on the target. Spend on short term packages funded from the BCF was £140k. ASC also spent a further £320k specifically on short term packages to move people out of hospital on a more timely basis.

iBCF carried forward from 2017/18 and iBCF from 2018.19 allocation, totalling £467k, has been made available to deliver short term care packages in 2018.19.

SERVICE PLAN UPDATES REQUIRED:

Updates to how DToC is reported will be dependent on DH requirements for reporting DToC next reporting year. The methodology in the BCF utilised for 2017/18 (including targets set) was not defined until July 2017. We have asked for earlier clarity.

STRATEGIC ACTIONS REQUIRED:

LGA peer review into DTOC will enable us to review our challenges and consider improvements across Health and Social Care sector that can be delivered in an integrated way

Rachel Wardell / Tandra Forster			Adult Social Care				Q4 2017/18		RED	
Indicator Ref: CBfasc08			% of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services							
Executive	2015/16Year End	2015/16 Year End	2017/18				Target	Polarity		
			Q1	Q2	Q3	Q4				
RAG	■	★	★	★	★	■	83 %	Higher is better		
Qrtly outturn	-	103/111	117/127	100/111	70/83	99/123				
YTD outturn	79.1%	92.8%	92.13%	90.0%	84.3%	80.5%				
REASON FOR RED: (Briefly describe what has happened):										
This indicator is known to be volatile due to low cohorts. Our target was set in line to be above the England average. Outturn for 2017/18 is 99/123 (80.5%)										
This indicator only measures the last 3 months in the year (reporting period) and as a consequence it remains volatile.										
Q1, Q2 and Q3 we had achieved the target set.										
However, in Q4 the number not remaining at Home after 91 days related to 13 individuals that have died and a further 11 that were in permanent care home placements, an indication that we are supporting more vulnerable people to return home.										
Small cohort means this KPI has been prone to fluctuations in performance.										
Reablement service works with vulnerable people, so this PI is always at risk and with the added pressure from DToC to get people out of hospital in a timely way.										
In relation to national context, the average for England in 2016/17 was 82.1 %, and an average of 80.1 % for the SE region.										
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN (What is being done to make the situation better?) AND ALTERNATIVE PLANS:										
LGA peer review into delays will enable us to review our challenges and consider improvements across Health and Social Care sector that can be delivered in an integrated way. This will impact positively on the 91 day indicator.										
FINANCIAL IMPLICATIONS: None.										
SERVICE PLAN UPDATES REQUIRED: None.										
STRATEGIC ACTIONS REQUIRED: None.										

John Ashworth / Gary Lugg			Development and Planning				Q4 2017/18		RED	
Indicator Ref: CBO1dp04		Submit a New Local Plan for examination						Type: Project		
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity		
			Q1	Q2	Q3	Q4				
RAG	■	★	★	★	★	■	Dec-19	N/A		
YTD outturn	Behind Schedule	On track	On track	On track	On track	Behind Schedule				
REASON FOR RED:										
The programme has slipped six months due to staffing and pressure to do complex planning enquiries to ensure the Council maintains a five year land supply. It has not been helped by Government proposals to change the way in which the housing number for the authority is calculated.										
REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:										
The planning policy team has recruited to all current vacancies and has jointly commissioned studies with other Berkshire UAs to ensure that the evidence base is not delayed. Some-time will be made back by this joint working but the biggest single issue is defending the Objectively Assessed Need calculations, the five year land supply and the Councils planning policies at appeal.										
FINANCIAL IMPLICATIONS:										
No direct financial implications.										
SERVICE PLAN UPDATES REQUIRED:										
Proposed new target is April 2020.										
STRATEGIC ACTIONS REQUIRED:										
To agree the new target.										

John Ashworth / Gary Lugg		Development and Planning				Q4 2017/18		RED	
Indicator Ref: CBO2dp05		Submit a Minerals and Waste Local Plan for West Berkshire to the Secretary of State for examination					Type: Project		
Executive	2015/16 Year End	2016/17 Year End	2017/18				Target	Polarity	
			Q1	Q2	Q3	Q4			
RAG	■	★	★	★	★	■	Dec-19	N/A	
YTD outturn	Behind Schedule	On track	On track	On track	On track	Behind Schedule			
REASON FOR RED: The team leader resigned and the recruitment to that post plus maternity leave resulted in the team being at 50%. REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS: Recruitment has been successful and the maternity leave has ended meaning that the team is at 100% for the first time in two years. A detailed project plan has been drawn up and is in the process of being implemented. If the project slips again additional resources might need to be considered FINANCIAL IMPLICATIONS: There will be a budgetary pressure in 2020, as the team was scheduled to be reduced by two posts once the local plan had been produced. However, there is now a statutory duty to keep the plan updated on a rolling five year cycle. SERVICE PLAN UPDATES REQUIRED: Proposed new target is April 2020. STRATEGIC ACTIONS REQUIRED: That the proposal is endorsed,									