

COUNCIL MEETING

7.30 pm Wednesday, 24 July 2024 At Council Chamber - Town Hall

Members of the Council of the London Borough of Havering are advised that a meeting of the Council is scheduled to take place on the date and time shown above. An indication of the business to be dealt with is given below.

Gavin Milnthorpe Monitoring Officer

G.M

For information about the meeting please contact: Anthony Clements tel: 01708 433065 anthony.clements@oneSource.co.uk



Under the Committee Procedure Rules within the Council's Constitution the Chairman of the meeting may exercise the powers conferred upon the Mayor in relation to the conduct of full Council meetings. As such, should any member of the public interrupt proceedings, the Chairman will warn the person concerned. If they continue to interrupt, the Chairman will order their removal from the meeting room and may adjourn the meeting while this takes place.

Excessive noise and talking should also be kept to a minimum whilst the meeting is in progress in order that the scheduled business may proceed as planned.

Protocol for members of the public wishing to report on meetings of the London Borough of Havering

Members of the public are entitled to report on meetings of Council, Committees and Cabinet, except in circumstances where the public have been excluded as permitted by law.

Reporting means:-

- filming, photographing or making an audio recording of the proceedings of the meeting;
- using any other means for enabling persons not present to see or hear proceedings at a meeting as it takes place or later; or
- reporting or providing commentary on proceedings at a meeting, orally or in writing, so
 that the report or commentary is available as the meeting takes place or later if the
 person is not present.

Anyone present at a meeting as it takes place is not permitted to carry out an oral commentary or report. This is to prevent the business of the meeting being disrupted.

Anyone attending a meeting is asked to advise Democratic Services staff on 01708 433076 that they wish to report on the meeting and how they wish to do so. This is to enable employees to guide anyone choosing to report on proceedings to an appropriate place from which to be able to report effectively.

Members of the public are asked to remain seated throughout the meeting as standing up and walking around could distract from the business in hand.

DECLARING INTERESTS FLOWCHART - QUESTIONS TO ASK YOURSELF What matters are being discussed? Does the business relate to or is it likely to affect a disclosable pecuniary interest. These will include the interests of a spouse or civil partner (and co-habitees): · any employment, office, trade, profession or vocation that they carry on for profit or gain; · any sponsorship that they receive including contributions to their expenses as a councillor; or the councillor's election expenses from a Trade Union; • any land licence or tenancy they have in Havering • any current contracts leases or tenancies between the Council and them; • any current contracts leases or tenancies between the Council and any organisation with land in Havering in they are a partner, a paid Director, or have a relevant interest in its shares and securities; · any organisation which has land or a place of business in Havering and in which they have a relevant interest in its shares or its securities N Declare Interest and Leave YES 0 Might a decision in relation to that business be reasonably be regarded as affecting (to a greater extent than Е the majority of other Council Tax payers, ratepayers or inhabitants of ward affected by the decision) R · Your well-being or financial position; or s · The well-being or financial position of: 0 o A member of your family or any person with whom you have a close association; or Ν - Any person or body who employs or has appointed such persons, any firm in which they are Α a partner, or any company of which they are directors; L - Any person or body in whom such persons have a beneficial interest in a class of securities exceeding the nominal value of £25,000; o Any body of which you are a member or in a position of general control or management and to N which you are appointed or nominated by your Authority; or т Е o Any body exercising functions of a public nature, directed to charitable purposes or whose R principal includes the influence of public opinion or policy (including any political party or trade union) of which you are a E member or in a position of general control or management? s Т E N You must disclose the O existence and nature of your personal interests Ρ Ε С U Would a member of the public, with You can participate in the N knowledge of the relevant facts. meeting and vote (or reasonably regard your personal remain in the room if not a interest to be so significant that it is NO member of the meeting) Α likely to prejudice your R Ε s Does the matter affect your financial position or the financial position of any person or body through whom you have a personal interest? N - Does the matter relate to an approval, consent, licence, permission or registration that affects Т you or any person or body with which you have a personal interest? NO - Does the matter not fall within one of the exempt categories of decisions? Ε R Ε Ε S Т Speak to Monitoring Officer in advance of the meeting to avoid allegations of corruption or bias

AGENDA

1 PRAYERS

2 APOLOGIES FOR ABSENCE

Received from Councillors Jason Frost, Michael White, Julie Wilkes, Jacqueline Williams and Darren Wise.

To receive any other apologies for absence.

3 MINUTES (Pages 7 - 20)

To sign as a true record the minutes of the Extraordinary and Annual Meetings of the Council held on 22 May 2024 (attached).

4 DISCLOSURE OF INTERESTS

Members are invited to disclose any interest in any of the items on the agenda at this point of the meeting.

Members may still disclose any interest in an item at any time prior to the consideration of the matter.

5 ANNOUNCEMENTS BY THE MAYOR, BY THE LEADER OF THE COUNCIL OR BY THE CHIEF EXECUTIVE

To receive announcements (if any).

6 PETITIONS

Notice of intention to present a petition has been received from Councillor Julie Wilkes (Councillor Stephanie Nunn to present the petition on behalf of Councillor Wilkes) and from Councillor Dilip Patel (two petitions).

To receive any other petition presented pursuant to Council Procedure Rule 23.

7 VACANT POSITIONS

To elect the Chairman of the Licensing Committee, Vice-Chair of the Licensing Committee and Vice-Chair of the Overview and Scrutiny Board.

Chairman of Licensing Committee:

Nomination by the Havering Residents' Association Group – Councillor Philippa Crowder.

Nomination by the Labour Group – Councillor Jane Keane.

Vice-Chair of Licensing Committee:

Nomination by Havering Residents' Association Group – Councillor Christine Smith

Nomination by Labour Group - Councillor Jane Keane (unless elected as Chairman).

Vice-Chair of Overview and Scrutiny Board:

Nomination by Havering Residents' Association Group – Councillor Julie Wilkes

Nomination by Labour Group – Councillor Matthew Stanton

8 OFSTED IMPROVEMENT PLAN (Pages 21 - 94)

NOTE: The deadline for amendments to all reports published in the final agenda is midnight, Monday 22 July 2024

Report of Cabinet on the London Borough of Havering OFSTED Improvement Plan (attached, subject to approval by Cabinet);

9 IMPROVEMENT AND TRANSFORMATION PLAN (Pages 95 - 122)

Report attached, subject to approval by Cabinet.

10 NEW PRODUCTIVITY PLAN (Pages 123 - 144)

Report attached, subject to approval by Cabinet.

11 POLITICAL BALANCE OF COMMITTEES

Report to follow.

12 RESOLUTION TO EXTEND THE SIX MONTH ATTENDANCE RULE (Pages 145 - 148)

Report of Chief Executive attached.

13 FLAG FLYING POLICY AND SOCIAL MEDIA PROTOCOL (Pages 149 - 158)

Report of Monitoring Officer attached.

14 OVERVIEW AND SCRUTINY RULES - EXCEPTIONS TO THE CALL-IN (REQUISITION PROCEDURE) (Pages 159 - 162)

Report of Chief Executive attached.

ANNUAL REPORTS OF COMMITTEES AND MEMBER CHAMPIONS (Pages 163 - 248)

Reports attached:

- Audit Committee
- Pensions Committee
- Overview and Scrutiny Board
- People Overview and Scrutiny Sub-Committee
- Corporate Parenting Panel
- Places Overview and Scrutiny Sub-Committee
- Member Champion for Equalities and Diversity

Additional reports to follow or to be given verbally at meeting.

16 MEMBERS' QUESTIONS (Pages 249 - 252)

Attached.

MOTIONS FOR DEBATE (Pages 253 - 256)

Further amendments may follow.

Public Document Pack Agenda Item 3



MINUTES OF AN EXTRAORDINARY MEETING OF THE COUNCIL OF THE LONDON BOROUGH OF HAVERING Council Chamber - Town Hall 22 May 2024 (7.00 - 7.18 pm)

Present: The Mayor (Councillor Stephanie Nunn) in the Chair

Councillors Councillors Mandy Anderson, Robert Benham, Ray Best,

Patricia Brown, Joshua Chapman, John Crowder, Philippa Crowder, Keith Darvill, Osman Dervish, Brian Eagling, Sarah Edwards, Gillian Ford. Oscar Ford, Jason Frost, Laurance Garrard, James Glass, David Godwin, Martin Goode, Judith Holt, Jane Keane, Jacqueline McArdle, Paul McGeary, Trevor McKeever, Paul Middleton, Robby Misir, Ray Morgon, Barry Mugglestone, Gerry O'Sullivan, Sue Ospreay, Dilip Patel, Nisha Patel, Viddy Persaud, Keith Prince, Philip Ruck, Timothy Ryan, Carol Smith, Christine Smith, Matthew Stanton, Natasha Summers, Katharine Tumilty, John Tyler, Christine Vickery, Bryan Vincent, Frankie Walker, Reg Whitney, Julie Wilkes. Graham Williamson, Jacqueline Williams,

Darren Wise and John Wood

Approximately 20 Members' guests and members of the public and a representative of the press were also present.

The Mayor advised Members and the public of action to be taken in the event of emergency evacuation of the Town Hall becoming necessary.

The Mayor's Official Chaplain – Reverend Amanda Keighley of St Nicholas Church, Elm Park opened the meeting with prayers.

The meeting closed with the singing of the National Anthem.

76 APOLOGIES FOR ABSENCE (agenda item 2)

Apologies for absence were received from Councillors David Taylor, Michael White and Chris Wilkins.

77 DISCLOSURE OF INTERESTS (agenda item 3)

There were no disclosures of interest.

78 ANNOUNCEMENTS BY THE MAYOR, BY THE LEADER OF THE COUNCIL OR BY THE CHIEF EXECUTIVE (agenda item 4)

Tributes were paid from all sides of the Chamber to former Councillor Barry Oddy who had sadly passed away recently.

The Leader sent the good wishes of the whole Council to Councillor Michael White was undergoing medical treatment.

79 ESTABLISHING THE COMMITTEES OF THE COUNCIL AND CONFIRMING THE SCHEME OF DELEGATION (agenda item 5)

A report of the Chief Executive set out the proposed sizes and political balance of the Council's Committees, in accordance with relevant legislation. The report also asked Council to confirm the delegations to officers in respect of those powers reserved to full Council by the Functions and Responsibilities Regulations 2000.

The report was **AGREED** without division and it was **RESOLVED**:

- (1) That, so far as necessary to enable any changes proposed and agreed during this meeting to be carried in to effect, Council Procedure Rule 20.2 (proposals to amend the Constitution to be referred to Governance Committee without discussion) be suspended.
- (2) That, subject to the Council's consideration of any motion or amendment to this report relating to changes in the Committee structure, the Committees listed in Appendix 1 of the report

be appointed for the 2024/25 Municipal Year and that:

- (a) As required by statute, two voting co-optees representing the Church of England and the Roman Catholic Church and three parent governor co-optees selected in accordance with the appropriate Regulations, be appointed to the People Overview and Scrutiny Sub-Committee.
- (b) The other non-elected member "appointments" and invitations to attend shown in the Appendix (and particularly its annexes) be confirmed.
- (3) That those Committees be appointed with:
 - (a) the membership sizes and
 - (b) the political balance indicated in Appendix 2.

- (4) That the delegation of non-executive functions (as defined by the Local Authorities (Functions and Responsibilities) (England) Regulations 2000 (amended) to officers be agreed as set out in the Council's Constitution.
- (5) That it be agreed that all officers with delegated powers have power to further delegate those powers to other officers under s.101 of the Local Government Act 1972 or as provided for by any other legislation and may agree a scheme of delegation to officers for their service areas.

80 HONORARY AWARDS PROTOCOL (agenda item 6)

A report of the Monitoring Officer proposed a revised protocol for the awarding of honorary awards by full Council.

The report was **AGREED** without division and it was **RESOLVED**:

- 1. That the Honorary Awards Protocol is approved and endorsed by full Council.
- 2. That the previous protocol, agreed by Governance Committee on 8 January 2020, be superseded.

81 MAYORAL HANDBOOK AND PROCEDURES MANUAL (agenda item 7)

This report was deferred.

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Public Document Pack



MINUTES OF A MEETING OF THE COUNCIL OF THE LONDON BOROUGH OF HAVERING Council Chamber - Town Hall 22 May 2024 (8.00 - 8.56 pm)

Present: The Mayor (Councillor Stephanie Nunn at start of meeting,

Councillor Gerry O'Sullivan thereafter) in the Chair

Councillors Councillors Mandy Anderson, Robert Benham, Ray Best,

John Crowder, Patricia Brown. Joshua Chapman, Philippa Crowder, Keith Darvill, Osman Dervish, Brian Eagling, Sarah Edwards. Gillian Ford, Oscar Ford, Jason Frost. Laurance Garrard, James Glass, David Godwin, Martin Goode, Judith Holt, Jane Keane, Jacqueline McArdle, Paul McGeary, Trevor McKeever, Paul Middleton, Robby Misir, Ray Morgon, Barry Mugglestone, Sue Ospreay, Dilip Patel, Nisha Patel, Timothy Ryan, Viddy Persaud, Keith Prince, Philip Ruck, Carol Smith, Matthew Stanton. Christine Smith. Katharine Tumilty, Natasha Summers, John Tyler, Christine Vickery, Bryan Vincent, Frankie Walker, Reg Whitney, Julie Wilkes, Graham Williamson, Jacqueline Williams,

Darren Wise and John Wood

Approximately 20 Members' guests and members of the public and a representative of the press were also present.

The Mayor advised Members and the public of action to be taken in the event of emergency evacuation of the Town Hall becoming necessary.

The meeting closed with the singing of the National Anthem.

1 PRAYERS (agenda item 1)

The Mayor presented Reverend Amanda Keighley of St Nicholas Church, Elm Park with a badge to mark her year as the Mayor's Official Chaplain.

2 APOLOGIES FOR ABSENCE (agenda item 2)

Apologies for absence were received from Councillors David Taylor, Michael White and Chris Wilkins.

3 DISCLOSURE OF INTERESTS (agenda item 3)

There were no disclosures of interest.

4 ANNOUNCEMENTS BY THE OUTGOING MAYOR, BY THE LEADER OF THE COUNCIL OR BY THE CHIEF EXECUTIVE (agenda item 4)

The Mayor thanked the Leader and all Members for the opportunity to serve as Mayor. She had valued attending events as part of her civic role and had enjoyed meeting the volunteering community as well as welcoming groups of school children to the Council Chamber.

A presentation of a lapel pin has recently been made to the Mayor's Cadet. The civic dinner had raised £5,500 for the Mayor's Charity. In total during the year, in excess of £20,000 had been raised for the charity – First Step.

The Mayor gave good wishes to the incoming Mayor. The Mayor then presented an award to her consort – Councillor Barry Mugglestone in recognition of his support with event attendance and fundraising during the year. This was undertaken in addition to his role as a Cabinet Member.

5 MAYORALTY 2024/25 (agenda item 5)

Motion on behalf of the Havering Residents Association Group

That Councillor Gerry O'Sullivan be elected to the office of Mayor for the municipal year 2024 - 2025.

Motion on behalf of the Labour Association Group

That Councillor Pat Brown be elected to the office of Mayor for the municipal year 2024 - 2025.

Following proposing speeches by the respective Group Leaders, Councillor O'Sullivan was **ELECTED** as Mayor for the 2024/25 municipal year by 26 votes to 11 for Councillor Brown with 14 abstentions (see division 1).

Councillor Gerry O'Sullivan, having made the Declaration of Acceptance of Office of Mayor as required by the Local Government Act 1972, then took the Chair and thanked the Council for the honour bestowed upon them.

The Leader of the Council expressed the thanks of the Council to the outgoing Mayor – Councillor Stephanie Nunn for her service during 2023/24. Councillor Nunn suitably replied.

The Mayor indicated that the Mayoral Consort for the year would be Mrs Susan O'Sullivan.

6 **DEPUTY MAYOR**

In accordance with the Local Government Act 1972, the Mayor signified in writing his appointment of Councillor Sue Ospreay as Deputy Mayor for the coming year and to carry out the duties of the Mayor in case of the Mayor's illness or absence.

Councillor Ospreay made the Declaration of Acceptance of Office accordingly. The Mayor indicated the Deputy Mayor's consort for the year would be Chelsea Sharp.

7 MINUTES (agenda item 6)

The minutes of the meeting of Council held on 27 March 2024 were **AGREED** as a correct record without division.

8 ANNOUNCEMENTS BY THE INCOMING MAYOR (agenda item 7)

The Mayor gave his thanks to his fellow members of the Overview and Scrutiny Board and to Councillor Philip Ruck who had served as Deputy Chair of the Board. The Mayor also thanked officers for their support in the Board running effectively.

The Mayor announced that his Official Chaplain would be Reverend Ken Wylie of St Andrews Church, Hornchurch.

9 APPOINTMENT OF THE CHAIRMEN AND VICE-CHAIRMEN OF COMMITTEES (agenda item 8)

Motion on behalf of the Havering Residents Association Group

| Committee | Chairman Councillor | Vice-Chairman Councillor | |
|--|------------------------|-----------------------------|--|
| Audit | Julie Wilkes | Jacqueline Williams | |
| Governance | Ray Morgon | Gillian Ford | |
| Licensing (3 Vice-Chairmen) | Natasha Summers | 1. David Godwin 2. 3. | |
| Pensions | | Stephanie Nunn | |
| Planning | Bryan Vincent | Robby Misir | |
| Strategic Planning | Reg Whitney | Bryan Vincent | |
| Overview and Scrutiny Board | Laurance Garrard | Natasha Summers | |
| People Overview and Scrutiny Sub-Committee | | | |

| Places Overv | view and |
|--------------|----------|
| Scrutiny | Sub- |
| Committee | |

Sub-Committee of the Governance Committee:

| Appointments | Ray Morgon | Gillian Ford | |
|--------------|------------|--------------|--|
| | | | |

Motion on behalf of the Conservative Group

| Committee | Chairman Councillor | Vice-Chairman Councillor |
|--|------------------------|---|
| Audit | | |
| Governance | | |
| Licensing (3 Vice-Chairmen) | | Christine Vickery 3. |
| Pensions | | |
| Planning | | |
| Strategic Planning | | |
| Overview and Scrutiny Board | | |
| People Overview and Scrutiny Sub-Committee | Jason Frost | |
| Places Overview and Scrutiny Sub-Committee | David Taylor | |

Sub-Committee of the Governance Committee:

| Appointments | |
|--------------|--|
| | |

Motion on behalf of the Labour Group

| Committee | Chairman Councillor | Vice-Chairman Councillor | |
|--|------------------------|-----------------------------|--|
| Audit | | | |
| Governance | | | |
| Licensing (3 Vice-Chairmen) | | 1. 2. 3. Jane Keane | |
| Pensions | Mandy Anderson | | |
| Planning | | | |
| Strategic Planning | | | |
| Overview and Scrutiny Board | Matt Stanton | | |
| People Overview and Scrutiny Sub-Committee | | Frankie Walker | |
| Places Overview and Scrutiny Sub-Committee | | Katharine Tumilty | |

Sub-Committee of the Governance Committee:

| Appointments | |
|--------------|--|
| | |

The following appointments were **AGREED** without division and it was **RESOLVED** that the following appointments be made:

| Committee | Chairman Councillor | Vice-Chairman Councillor | |
|--|------------------------|---|--|
| Audit | Julie Wilkes | Jacqueline Williams | |
| Governance | Ray Morgon | Gillian Ford | |
| Licensing (3 Vice-Chairmen) | Natasha Summers | David Godwin Christine Vickery Jane Keane | |
| Pensions | Mandy Anderson | Stephanie Nunn | |
| Planning | Bryan Vincent | Robby Misir | |
| Strategic Planning | Reg Whitney | Bryan Vincent | |
| Overview and Scrutiny Board | See below. | Natasha Summers | |
| People Overview and Scrutiny Sub-Committee | Jason Frost | Frankie Walker | |
| Places Overview and Scrutiny Sub-Committee | David Taylor | Katharine Tumilty | |

Sub-Committee of the Governance Committee:

| Appointments | Ray Morgon | Gillian Ford |
|--------------|------------|--------------|
| | | |

Councillor Laurance Garrard was **ELECTED** as Chairman of the Overview and Scrutiny Board by 26 votes to 11 for Councillor Matt Stanton with 14 abstentions (see division 2).

10 APPOINTMENT OF THE MEMBER CHAMPIONS (agenda item 9)

Motion on behalf of the Havering Residents Association Group

That the following be appointed Champions as indicated:

For the Armed Forces - Barry Mugglestone

For Equality and Diversity -

For the Historic Environment –

For the Over 50's -

For the Voluntary Sector Compact – Jackie McArdle

For Young People -

Motion on behalf of the Labour Group

That the following be appointed Champions as indicated:

For the Armed Forces -

For Equality and Diversity – Jane Keane

For the Historic Environment -

For the Over 50's – Mandy Anderson

For the Voluntary Sector Compact -

For Young People – Frankie Walker

The following positions were appointed by Council, without division:

| Member Champion | Nominee - Councillor |
|----------------------------------|--------------------------|
| For the Armed Forces | Barry Mugglestone |
| For Equality & Diversity | Jane Keane |
| For the Historic Environment | No nominations received. |
| For the Over 50's | Mandy Anderson |
| For the Voluntary Sector Compact | Jackie McArdle |
| For Young People | Frankie Walker |

11 STATEMENT BY THE LEADER OF THE COUNCIL (agenda item 10)

The Leader thanked all those involved with the recovery programme for the Rainham fires and the work to procure village green status in Rainham.

Work continued to address the Council's budget gap for which a capitalisation directive had recently been issued. The Council remained focussed on improving customer service and a new communications strategy was about to be launched. The Council's complaints process had also been overhauled. A new Council website would commence shortly and the Leader welcomed the extension of the Superloop bus route to Havering.

There had been an increase in the number of police officers in Havering and the Council continued to fund the Section 92 officers. There had also been improvements to the CCTV network. Work continued on the planned East Havering Data Centre and the recent BBC Panorama programme on Havering had been well received.

12 VOTING RECORD

The record of voting decisions is attached as appendix 1 to these minutes.

| _ | | | | | |
|---|---|----|-----|---|--|
| | I | Ma | yor | • | |

Annual Council 22nd May 2024

Voting record

Appendix 1

| DIVISION NUMBER: The Mayor (Councillor Stephanie Nunn - Vote 1, Councillor Gerry O'Sullivan - Vote 2) The Deputy Mayor [Cllr Pat Brown B=Vote 1, Cllr Sue Ospreay - Vote 2] CONSERVATIVE GROUP (16) Cllr Robert Benham Cllr Ray Best Cllr Joshua Chapman Cllr Osman Dervish Cllr Jason Frost Cllr Judith Holt | 1 × × | <i>2</i> |
|--|---------------|---------------|
| Councillor Gerry O'Sullivan - Vote 2) The Deputy Mayor [Cllr Pat Brown B=Vote 1, Cllr Sue Ospreay - Vote 2] CONSERVATIVE GROUP (16) Cllr Robert Benham Cllr Ay Best Cllr Joshua Chapman Cllr Osman Dervish Cllr Jason Frost | x | |
| Councillor Gerry O'Sullivan - Vote 2) The Deputy Mayor [Cllr Pat Brown B=Vote 1, Cllr Sue Ospreay - Vote 2] CONSERVATIVE GROUP (16) Cllr Robert Benham Cllr Ay Best Cllr Joshua Chapman Cllr Osman Dervish Cllr Jason Frost | x | |
| The Deputy Mayor [Cllr Pat Brown B=Vote 1, Cllr Sue Ospreay - Vote 2] CONSERVATIVE GROUP (16) Cllr Robert Benham Cllr Agy Best Cllr Joshua Chapman Cllr Osman Dervish Cllr Jason Frost | 0 | ~ |
| Ospreay - Vote 2] CONSERVATIVE GROUP (16) Clir Robert Benham Clir Agy Best Clir Joshua Chapman Clir Osman Dervish Clir Jason Frost | 0 | _ |
| CONSERVATIVE GROUP (16) Clir Robert Benham Clir Ray Best Clir Joshua Chapman Clir Osman Dervish Clir Jason Frost | | |
| Clir Robert Benham Clir Ray Best Clir Joshua Chapman Clir Osman Dervish Clir Jason Frost | | |
| Clir Ray Best Clir Joshua Chapman Clir Osman Dervish Clir Jason Frost | | |
| Clir Joshua Chapman Clir Osman Dervish Clir Jason Frost | 0 | 0 |
| Clir Osman Dervish Clir Jason Frost |) | 0 |
| Cllr Jason Frost | 0 | 0 |
| | 0 | 0 |
| Clir Judith Holt | 0 | 0 |
| | 0 | 0 |
| Cllr Dilip Patel Cllr Nisha Patel | 0 | 0 |
| Clir Viddy Persaud | 0 | 0 |
| Cllr Keith Prince | 0 | 0 |
| Cllr Timothy Ryan | 0 | 0 |
| Cllr Carol Smith | 0 | 0 |
| Cllr David Taylor | A | A |
| Cllr Christine Vickery | 0 | 0 |
| Cllr Damian White | Α | Α |
| Cllr Michael White | Α | Α |
| | | |
| HAVERING RESIDENTS ASSOCIATION GROUP (24 + 1) | | |
| Cllr John Crowder | ~ | ~ |
| Cllr Philippa Crowder | ~ | ~ |
| Cllr Sarah Edwards | ~ | ~ |
| Cllr Gillian Ford | ~ | ~ |
| Cllr Oscar Ford | ~ | ~ |
| Cllr Laurance Garrard | ~ | ~ |
| Cllr James Glass | V | |
| Cllr David Godwin Cllr Jackie McArdle | ٠ - | ~ |
| Clir Paul Middleton | ~ | - |
| Cllr Robby Misir | ~ | Ţ |
| Clir Raymond Morgon | , | • |
| Clir Barry Mugglestone | ~ | ~ |
| Cllr Stephanie Nunn | | ~ |
| Cllr Sue Ospreay | ~ | |
| Cllr Gerry O'Sullivan | ~ | |
| Cllr Christine Smith | > | > |
| Cllr Natasha Summers | ~ | ~ |
| Cllr Bryan Vincent | ~ | ~ |
| Cllr Reg Whitney | ~ | ~ |
| Cllr Julie Wilkes | • | ~ |
| Cllr Christopher Wilkins | Α | Α |
| Cllr Jacqueline Williams | ~ | <u> </u> |
| Cllr Graham Williamson Cllr John Wood | ~ | ~ |
| CIII JOIIII WOOD | • | |
| LABOUR GROUP (8 + 1) | | |
| Clir Mandy Anderson | × | × |
| Cllr Pat Brown | | × |
| Cllr Keith Darvill | × | × |
| Cllr Jane Keane | × | × |
| Cllr Paul McGeary | 0 | 0 |
| Cllr Trevor McKeever | × | × |
| Cllr Matthew Stanton | × | X |
| Cllr Katharine Tumilty | × | × |
| Cllr Frankie Walker | × | × |
| FACT HAVEDING DECIDENTS: COCHE (C) | | |
| EAST HAVERING RESIDENTS' GROUP (3) | | |
| Cllr Brian Eagling Cllr Martin Goode | × | × |
| Clir Darren Wise | × | × |
| On Darion Wild | ^ | |
| RESIDENTS' ASSOCIATION INDEPENDENT GROUP (2) | | |
| | ~ | ~ |
| | ~ | ~ |
| Councillor Philip Ruck CouncillorJohn Tyler | | |
| Councillor Philip Ruck | | |
| Councillor Philip Ruck | | |
| Councillor Philip Ruck CouncillorJohn Tyler | 26 | 26 |
| Councillor Philip Ruck CouncillorJohn Tyler TOTALS Y = YES X = NO | 26 11 | 11 |
| Councillor Philip Ruck CouncillorJohn Tyler TOTALS Y = YES X = NO O = ABSTAIN/NO VOTE | 11 14 | 11 14 |
| Councillor Philip Ruck CouncillorJohn Tyler TOTALS | 11 14 0 | 11 14 0 |
| Councillor Philip Ruck CouncillorJohn Tyler TOTALS Y = YES X = NO O = ABSTAIN/NO VOTE | 11 14 | 11 14 |

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REPORT OF CABINET

Full Council: 24th July 2024

LB Havering Ofsted Improvement Plan

Havering's Children's Services most recent Ofsted report was published on 16th February 2024. This followed a two-week standard Inspection of Local Authority Children's Services visit that took place between the 11 and 22 December 2023. Inspectors graded services using their one-word judgement criteria (outstanding, good, requires improvement to be good and inadequate) across three broad areas of social care practice, alongside the impact of leaders and that gave an overall effectiveness. The findings from the inspection were as follows:

| Judgement | Grade |
|--|---------------------------------|
| The impact of leaders on social work | Inadequate |
| practice with children and families | |
| The experiences and progress of children | Inadequate |
| who need help and protection | |
| The experiences and progress of children | Inadequate |
| in care | |
| The experiences and progress of care | Requires improvement to be good |
| leavers | |
| Overall Effectiveness | Inadequate |
| | |

As a result of the inadequate inspection findings, the Department for Education (DfE) served a statutory notice of improvement on the local authority on the 5th March 2024.

The improvement notice set out the requirements for Havering Council and its partner agencies (as identified by the Children's Act (s11)) to comply with the actions set out. This includes the following requirements

- Working with the Secretary of State appointed DfE improvement Advisor
- Setting up an Improvement Board with an Independent Chair of the Board with attendance from the DfE improvement advisor and DfE case lead to monitor progress against the improvement plan.
- Submitting an improvement plan to Ofsted and the DfE outlining how Havering will achieve the necessary change identified in the Ofsted report to deliver appropriate and sustainable improvements to practice, to improve outcomes for children and families.

As part of the statutory improvement notice Havering Children's Services are now subject of a period of monitoring by Ofsted and the DfE. This will include regular reviews by the DfE and monitoring visits by Ofsted followed by a re-inspection in approximately two years.

Further detail can be seen in the Cabinet report, attached to this report.

Tara Geere – Director of Starting Well, Statutory Director of Children's Services

Council, 24 July 2024

It is RECOMMENDED:

That Council adopt the Ofsted Improvement Plan as appended to this report.

Financial Implications and Risks:

The cost of the improvement plan has been costed at c£5.0011m in addition to the £11.2m growth added to Starting well in 2024-2025. There is a statutory requirement to respond to the Ofsted inspection and a risk of Central government intervention should the Council not do so which means that these costs are largely unavoidable and care has been taken to keep them as low as possible. The Service and Finance are working on identifying how this can be funded.

The £2m funding allocated to Havering for social care will be used entirely for Children's Services to offset this amount. Children's Services have requested DfE grants of £0.671 (Improvement Grant of £0.352m, Mockingbird foster carer contribution of £0.155m and Service leaders in Practice contribution of £0.164m).

This currently leaves a c£2.3301 shortfall. If further support from Central Government is not received this will very need to be funded by capital borrowing which will result in additional interest costs.

Legal Implications and Risks:

Failure to comply with the Improvement Notice by the assessment dates or poor progress is set out in the DfE notice.

Should the Council be unwilling or unable to comply with the Improvement Notice or should ministers not be satisfied with the Council's progress at any stage, ministers may choose to invoke their statutory powers of intervention (under s497A Education Act 1996) to direct the Council to enter into an appropriate arrangement to secure the improvements required in children's services.

The Improvement Plan, which has already been submitted, appears to comply with the Improvement Notice and will minimise the risks of non-compliance with the Notice.

Human Resources Implications and Risks:

There are no direct or indirect impact to any staff member as a result of the Starting Well Ofsted Improvement Plan, the areas that require support from HR colleagues are outlined in the plan and any work undertaken (i.e. service redesigns) will be done following the necessary processes and procedures.

Equalities Implications and Risks:

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have 'due regard' to:

- (i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;

Council, 24 July 2024

(iii) Foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

Any of the specific projects and programmes of work within the Ofsted Improvement Plan will have an Equality and Health Impact Assessment undertaken as needed, and any subsequently identified issues responded to.

Health and Wellbeing Implications and Risks:

The Ofsted Improvement Plan contains specific actions related to physical and mental health, and addresses wider determinants of health (such as education and employment), which are expected to impact positively on health and wellbeing. As specific projects and programmes of work progress, health and wellbeing implications and risks will be reviewed, and identified issues responded to.

Environment and Climate Change Implications and Risks:

There are no environmental or climate change implications





CABINET

17th July 2024

Subject Heading:

Starting Well Ofsted Improvement Plan

Cabinet Member:

Councillor Oscar Ford

SLT Lead:

Tara Geere - Director of Starting Well

Report Author and contact details:

Sophie Ambler -

Policy context:

Project Manager, Starting Well

This report pertains to the delivery of Ofsted Improvement Plan, following the publication of our Ofsted report in February 2024 and the subsequent statutory improvement notice issued in March 2024

Financial summary:

The plan is costed at £5.011m, with £0.671m provided by DfE Improvement Grant leaving £4.3m costs to Havering

Is this a Key Decision?

Yes

Significant effect on two or more Wards

When should this matter be reviewed?

Every six months whilst in intervention.

Reviewing OSC:

Children and Learning

The subject matter of this report deals with the following Council Objectives

X People - Things that matter for residents

Place - A great place to live, work and enjoy

Resources - A well run Council that delivers for People and Place.

SUMMARY

Havering's Children's Services most recent Ofsted report was published on 16th February 2024. This followed a two-week standard Inspection of Local Authority Children's Services visit that took place between the 4 and 22 December 2023. Inspectors graded services using their one-word judgement criteria (outstanding, good, requires improvement to be good and inadequate) across three broad areas of social care practice, alongside the impact of leaders and that gave an overall effectiveness. The findings from the inspection were as follows:

| Judgement | Grade |
|--|---------------------------------|
| The impact of leaders on social work | Inadequate |
| practice with children and families | |
| The experiences and progress of children | Inadequate |
| who need help and protection | |
| The experiences and progress of children | Inadequate |
| in care | • |
| The experiences and progress of care | Requires improvement to be good |
| leavers | |
| Overall Effectiveness | Inadequate |
| | |

As a result of the inadequate inspection findings, the Department for Education (DfE) served a statutory notice of improvement on the LA on the 5 March 2024.

The improvement notice set out the requirements for Havering Council and its partner agencies (as identified by the Children's Act (s11)) to comply with the actions set out. This includes the following requirements

- Working with the Secretary of State appointed DfE improvement Advisor who has recently been appointed.
- Setting up an Improvement Board with an Independent Chair of the Board with attendance from the DfE improvement advisor and DfE case lead to monitor progress against the improvement plan.
- Submitting an improvement plan to Ofsted and the DfE outlining how Havering will
 achieve the necessary change identified in the Ofsted report to deliver appropriate
 and sustainable improvements to practice, to improve outcomes for children and
 families.

As part of the statutory improvement notice Havering Children's Services are now subject of a period of monitoring by Ofsted and the DfE. This will include regular reviews by the DfE and monitoring visits by Ofsted followed by a re-inspection in approximately two years.

RECOMMENDATIONS

It is recommended that Cabinet endorse and adopt the content of the costed Starting Well Ofsted Improvement Plan.

REPORT DETAIL

- In December 2023, Havering Children's Services was inspected by Ofsted under the Inspection of Local Authority Children's Services (ILACS) Framework. The report was published on 16th February 2024.
- 1.1. In the report, Ofsted identified that 'the progress children make, their experiences and the quality of services they receive have significantly deteriorated'. Our last full inspection by Ofsted was in June 2018, when services were found to be Good overall.
- 1.2. The report details six key areas of improvement, which have informed the development of our improvement plan, alongside our own self-evaluation and quality assurance activity.
- 1.3. Alongside the areas for improvement, the inspection report also identifies areas of strength for us to build upon, including the partnership working within the multiagency safeguarding hub (MASH), the impact of the systemic family therapist team and that, despite the challenges, most social workers like working for Havering and describe a highly visible and responsive leadership team.
- 1.4. Following the report publication, and the subsequent issuing of a statutory improvement notice, we are required to submit an improvement plan detailing the steps we will take to improve services and outcomes for children. This plan was submitted to Ofsted and the Department for Education (DfE) on 31st May 2024 in line with statutory timescales.
- 1.5. On 5th June we received a letter from Caroline Dulon HMI, Regional Director for London acknowledging receipt of the plan and noting that the plan appropriately targets the findings and areas for improvement as described in the inspection report.
- 1.6. The plan has been developed using our previous improvement plan alongside workshops and consultations with Havering Starting Well colleagues, wider council workforce and a variety of partners. This has included head teachers, nursery leads, Met. Police, local health providers, NEL ICB, Havering Safeguarding Children's Partnership, local councillors, as well as input from our recently appointed DfE advisor.
- 1.7. Our Practice Improvement Board (PIB) has been in place, with an independent chair, since April 2024 alongside our Practice Improvement Oversight Board (PIOB)

- 1.8. Work has commenced against many of the actions and priorities within the plan, and progress against the plan is being closely monitored at our monthly PIB and quarterly PIOB meetings.
- 1.9. Our recently appointed DfE independent advisor, Suzy Joyner, has provided input into the Improvement Plan and will provide ongoing support and monitoring us on our journey. Suzy will also keep the DfE appraised of our progress through formal reviews every six months.
- 1.10. Following the overall 'inadequate' judgement, Havering Children's Services is now subject to monitoring activity by Ofsted. This includes quarterly monitoring visits and a full re-inspection in approximately two years. We anticipate that our first monitoring visit will be in October 2024.
- 1.11. Ensuring Cabinet and cross-party support for the actions and priorities identified in our Improvement Plan is vital to enable us to progress and deliver the required changes for our children and families.

REASONS AND OPTIONS

Reason for the decision: To ensure that Cabinet are kept informed and appraised of the Starting Well Ofsted Improvement Plan

Other options considered: None; it is a statutory requirement for us to submit an improvement plan as per our improvement notice

IMPLICATIONS AND RISKS

Financial Implications and Risks:

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ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

There are no Environment and Climate change implications or risks for this decision

BACKGROUND PAPERS

Appendix 1; Starting Well Ofsted Improvement Plan, 31st May 2023

Appendix 2; Havering Inspection of local authority children's services December 2023

Appendix 3; Improvement notice issued to London Borough of Havering



Enabling our children and families to lead happy, healthy lives.



London Borough of Havering Starting Well Ofsted Improvement Plan 31 May 2024



Contents

| Introduction | |
|--|----|
| Governance and Oversight of the Improvement Plan | |
| Our Vision for Children and Young People | |
| Havering Improvement Action Plan | |
| Theme One; Embedding a 'Stable and Able' Workforce | 7 |
| Theme Two; Improving Practice | 14 |
| Theme Three; Removing Barriers | 43 |
| Theme Four: Governance Leadership and Management Oversight | ΛE |



Introduction

The outcome of our Ofsted inspection in December 2023 was the culmination of sustained challenges for Havering Council, and in particular Children's Services (Starting Well). We have been working within a challenging context of increasing demand linked to the unprecedented significant growth in Havering's population.

The 2021 census data evidenced that Havering has seen a 10.5% increase in the number of people living in the borough, compared to a 7.7% increase across London and a 6.6% increase across England. However, the number of children aged under 18 had increased by 15.2%, significantly outpacing the 4.8% and 3.9% increases in London and England, respectively. Havering now has a higher proportion of children aged 0-17 (22.3%) than 80% of local authorities in England. This increase has continued since 2021 and the Office for National Statistics (ONS) predicts that the 0-17 population in Havering will continue to grow to 61,350 by 2031. The growth is further evidenced by the allocation of the DfE Basic Needs Funding for new school places in 2023-2024, which shows Havering received 57% of the whole of London's 33 Borough allocation.

This increase in demand and population has been compounded by the on-going effects of the Covid-19 pandemic, which had a disproportional effect on the population in Northeast London and the cost-of-living crisis, both of which continue to have a profound impact on our residents. Significant investment has been made into Children's Services by the Local Authority, with an additional £20m invested during the period 2011 to 2023. However, this in the context that funding for Children's Social Care is still set using 2011 data which does not reflect our current population pressures. Despite the Council's challenging financial circumstances, which has resulted in a £54m capitalisation directive to address the current shortfall in funding to balance the budget, we have continued to prioritise funding to Children's Services.

In 2023-24 an additional £8m was put into Children's Services to address pressures including the development of two additional social work teams alongside growth required to cover the £4.6m overspend (caused by rising costs in accommodation for Children in Care and Home to School transport pressures).

A further £0.64m was also invested in 2023-2024 as an 'invest to save' to grow our own workforce by having an additional 10 ASYE Social workers per year over a 3-year period (total investment will be £1.92m). An additional £9.2m has been added in 2024 – 2025 to cover the 2023–24 overspend of £9.2m caused by workforce (use of agency), accommodation for children in our care and home to school transport pressures.

Despite the investment, we know we have not yet achieved our corporate ambition of enabling Havering children to live happy, healthy lives and as such we have let our children and families down, which cannot continue.

Our Starting Well Improvement Plan is focused on the journey we need to take towards better outcomes for our children, young people and families. Ofsted have told us that we are focused on the right actions to successfully deliver our improvement plan and we will increase the pace of change over the next six months.

This is the first version of the Starting Well Improvement Plan developed as part of our commitment to drive the changes highlighted in our self-evaluation alongside the recommendations and areas for improvement outlined in the Ofsted report. It is a fully costed



plan of c£5m that will require significant investment. The £2m additional money for social care awarded to Havering will be used entirely for children's services to offset this.

The Starting Well Improvement Plan is structured under four key themes;

- Embedding a Stable and Able Workforce
- Improving Practice to achieve consistently good outcomes for children and young people
- Removing Barriers to support improving Practice
- Governance, Leadership and Management Oversight

Whilst the Ofsted report is a judgement on the Local Authority Children's Services, improving outcomes for children is not something that can be achieved by the Local Authority alone. Our safeguarding partners are integral to delivering the necessary improvements and driving change at every level of their respective organisations. We also need to ensure that the voices of those who receive our services (children, young people and families) are central to helping us understand what difference we are making, and the changes required.

We are committed to investing in our workforce as our greatest asset, ensuring that Havering is a well led, supportive and progressive place to work. It is now more than ever that children need us to advocate for them, instigate and influence change on their behalf and ensure that we lay the foundations for them to thrive.

We are committed to being aspirational for every child and young person in Havering, particularly those in our care, and enabling them to enjoy the best opportunities in life, be encouraged and supported to aim high to achieve their ambitions.

We look forward to continuing our work across social care, education, and our wider partnership, building a culture of aspiration to achieve improved outcomes for children and families.

Governance and Oversight of the Improvement Plan

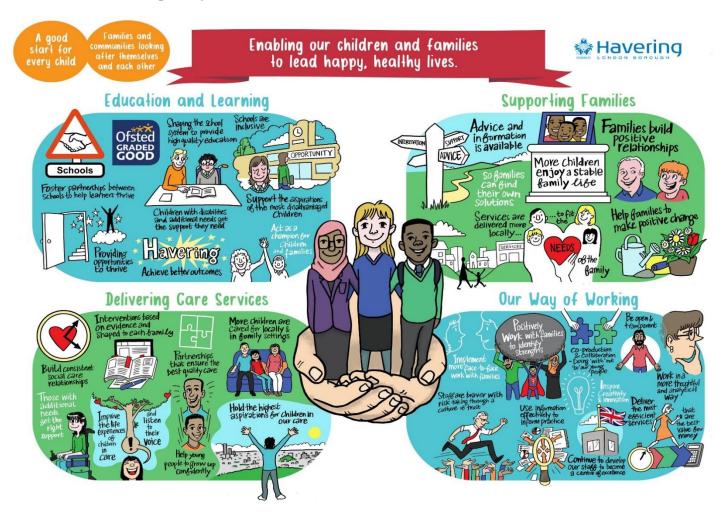
Our social work practice improvement plan in Havering is overseen through the independently chaired **Practice Improvement Board (PIB).** The PIB is operationally responsible for implementing the plan and assessing its impact on social work practice by;

- Overseeing and driving continuous improvement, innovation and consistency of high quality, excellent practice delivery.
- Scrutinising and challenging the quality of practice to identify and prioritise where improvement is required. Alongside identifying and celebrating good performance.
- Aligning with other forums/governance to avoid duplication and to use reports presented to other groups to inform its oversight of practice improvement.
- Steering and influencing targeted audit activity.
- Influencing and determining appropriate finance and allocation of resources to meet key objectives.

The PIB will report into a strategic **Practice Improvement Oversight Board (POIB)** chaired by the Chief Executive of the Council, which includes a representative group of elected members, Safeguarding Partners and the Department for Education Improvement Advisor who will set the overall objectives and monitor and assess the effectiveness of the improvement plan.



Our Vision for Children and Young People





Hearing and responding to the voice and lived experiences of children and families in all that we do

1. Stable and Able Workforce

Deliver a social care structure that has sufficient capacity to meet the needs of children and families

Improve recruitment, induction and retention of staff through delivering our workforce strategy with explicit career pathways

Review and update all training and development programmes for all staff in line with 10 days of training offer

Refocus our systemic model of practice and embed across all service areas

Take annual health check of the workforce survey

Update and embed our Case Recording Standards, Practice Standards and our Staff Guide

2.Improving Practice to Achieve Consistently Good Outcomes

Ensure that all cohorts of children are seen alone, where appropriate, and within suitable timescales, with recorded purposeful, planned and focused direct work

Improve the quality and timeliness of all assessments, plans and reviews with a focus on management oversight and achieving stability for the child

Work with partners to develop consistency in application of thresholds, improve quality of referrals and raise awareness of early help and targeted support offer

Review and update our response to cohorts of children (CiN, CP, CiC) including private fostering, children placed with parents and children living in supported accommodation

Review and update our response to contextual safeguarding, vulnerable adolescents and transitional safeguarding

Review processes for oversight and decision making across all areas of practice, including the independent reviewing service

3.Removing Barriers to Improving Practice

Develop a robust Starting Well Communications Plan for both internal staff and external partners

Review of all processes and forms within our Case Management System (Liquid Logic) to reduce inefficiencies, and secure investment to improve where required

Review use of technology and equipment to support practice e.g. 4G enabled laptops and Al apps pilot for supervision –

Review and relaunch of all tools for direct work and engaging children and young people e.g. Mind of My Own and Life Story App

Improving the way we use our performance data to identify and respond to emerging needs

Review of management systems (Fusion, LXP, Power BI) to give greater management oversight of practice

4. Governance, Leadership and Management Oversight

Secure further corporate and political investment to deliver improvement plan and necessary resources.

Coordinate a cycle of quality assurance activity across the service to drive practice improvement and develop a 'high support - high challenge' culture

Improve quality and consistency of management oversight and supervision supported by training, coaching and practice modelling

Review and improve our corporate parenting approach, ensuring that we have an effective strategy and corporate parenting panel

Review Starting Well governance structure, ensuring clear routes of escalation and decision making

Ensure clarity on roles, responsibilities and expectations with regards to quality assurance – it is everyone's business

Equality, Diversity and The Social Graces are considered in all aspects of practice, and our support offer to staff



Havering Improvement Action Plan

Theme One; Embedding a 'Stable and Able' Workforce - Strategic Lead; Principal Social Worker for Children

1. Service Structure

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Impact on Quality | Key Performance Indicators | Cost | Update May '24 | RAG rated |
|---------------------|---|---|---|--|---|--|--|--|--|--------------|
| 1.1 Pag @ 37 | Develop and embed a fit for purpose structure that enables best practice to thrive and delivers good social care services that improve outcomes for children and families Once delivered, ensure that the new structures and the names of people in post are effectively communicated to our safeguarding partners | Launch and implement Phase One of the Social Care Reorganisation (Safeguarding and Corporate Parenting) Structure can be found at Appendix A Launch and implement Phase Two of the Social Care Reorganisation (Early Help and Partnerships) Structure to be added as Appendix B when finalised | Tara Geere, Director of Starting Well | Consultation; May 2024 Implementation; July 2024 Consultation; September 2024 Implementation; November 2024 | Assistant Directors and Service Managers HR Business Partner Finance Business Partner Trade Unions | Children and young people will be able to access the right service at the right time Improvements will be seen on the quality and timeliness of interventions Children and Families will be able to access specialist and early intervention services as required Evidence in quality assurance activity that increased stability is resulting in children building trusting relationships with their workers | Average and Maximum Caseloads – ASYE, SW and AP Average waiting time for EH Services and number of families waiting % permanent SWs and managers % and number of children in care experiencing more than 2+ SW's % and number of children experiencing 3+ changes of SW in the last 12 months. | £3.3m however given the use of agency staff this is likely to be closer to £4.m To be costed as part of Autumn restructure currently projecting c£0.51m | Successful launch occurred in April 2024. HR and finance sign off being completed by the end of May for implementation by the end of July Work has commenced on developing structures | |
| 1.3 | Development of an improvement team to support the Improvement plan agenda | Recruitment of 1 x Independent Chair, 1x Improvement lead post, two times Improvement practitioners and 2 x additional auditors to support the improvement plan | Tara Geere, Director of Starting Well | April 2025 | HR Business Partner Finance Business Partner | Improvement delivered to target completion dates Increased QA activities with increased challenge and oversight evidenced Including ongoing training | QA activity increases including Dip sampling Suite of QA monthly reports produced with improved Audit Compliance % children monitored through CIN/ CP / CIC panels | £0.44m Grant bid to DfE for x1 additional auditor post £0.121m | Recruitment and on-boarding has occurred and improvement activity started. These costs will be reviewed after the first year of the plan. | |



2. Recruitment, Induction and Retention

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|---------|--|---|--|--|--|--|---|--|--|--------------|
| 2.1 | Review and implement consistent on-boarding process for all new staff. | Single point of contact in HR for permanent and agency staff recruitment | HR Talent Manager Head of Innovation and Improvement Principal Social Worker | July 2024 | HR operational team HSCA Head of Service for Practice Starting Well Talent Consultant | Feedback from newly appointed staff on effectiveness of onboarding Timely recruitment process measured by length of time for onboarding. | Fusion reports on probation periods Time from application to commencement in role | G7 - £0.058m Talent Consultant within HR | Work has commenced and Starting Well Talent Consultant appointed | |
| Page 38 | Development of an induction and information pack for all staff, with specific information for managers and supervisors and information on systemic training. | Review and update current pack and the process for induction by Heads of Service / Service Managers Bespoke induction for specific teams, such as the Children in Care Team re the health / education pathways and transition planning, Leaving Care on transitional safeguarding etc. (see 3.1) | Principal Social Worker Children's Head of Service for Practice | July 2024 | Assistant Directors and all Starting Well management team HR Talent Manager | Staff feedback identified good awareness of structures, resources and procedures as well as the offer by the HSCA. Probationary period meetings provide assurance that staff are fully inducted and understand their roles and responsibilities, including keeping their practice up to date. | All staff having completed induction (LXP reporting) Training uptake reports (LXP) | See 3.4 | Induction materials in development | |
| 2.3 | Embed use of Learning Experience Platform (LXP) for training with data set evidencing staff uptake | Interface with the HSCA and corporate L&D team | HSCA L&D Manager | In use from May 2024 Data set from June 2024 | Learning & Organisational Development Team | Uptake and impact of training Response to feedback in improving training offer | To be developed / in progress | £0.002m | Launch of LXP has started with regular meetings to ensure training programme is updated | |
| 2.4 | Ensure annual health check of the Starting Well workforce | Full council annual workforce survey to inform a workforce action plan to support improvements Alongside the LGA employer standards health check for social care staff | Principal Social Worker Children's HR Talent Manager | September 2024 | Starting Well Management Team | Senior leaders have access to the data that identifies challenges facing the workforce and are able to respond accordingly | Proportion of staff completing survey Workforce satisfaction Workforce sickness days | N/A | Staff wellbeing survey planning has started linked to the council staff any comments to add | |



3. Training, Development and Model of Practice

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|------|--|--|--|--------------------------------------|---|---|--|---------|--|--------------|
| 3.1 | Implementation of core, mandatory bitesize rolling training programme for all staff groups | Training programme with clear priorities for specific roles and service areas in core areas of training and development e.g. assessments, analysis, risk management, permanency, child protection processes, chairing meetings, case recording and pathways for accessing specialist advice / training | Principal Social Worker Children's Head of Service for Practice | September 2024 | AD's /Service Managers / Heads of Service Improvement Leads Principal Social | Training Evaluation / Feedback Quality assurance activities (including Audit findings) evidences positive impact on practice in identified areas Improved performance in supervision quality and timeliness | Training Attendance (numbers / percentages including data on perm vs agency training) Feedback / voice of staff (LGA Health Check 360 | See 1.3 | Training has commenced on assessments x 52 practitioners Further dates scheduled in June | |
| Page | | brochure via LXP and HSCA learning dataset providing information of uptake | HSCA Business Manager | July 2024 | Worker's | compliance Case recording evidences timely management | Skills for Care Tool / practice Week) % Staff satisfaction survey | See 2.3 | HSCA manager post taking place in May | |
| 39 | | Introduction of a programme of thematic training for managers and supervisors, initially focusing on team managers and the quality and impact of supervision and management oversight. | Head of Service for Practice | Roll out to start by July 2024 | | oversight and rationale for decision making which is improving outcomes for children and young people | % of staff achieving 'performing well' or better in their PDR % Supervisions completed in timescales % of Leaving care staff trained in adult safeguarding | See 1.3 | Training programme currently in development | |
| | | Develop and roll out joint training for the new CIC / leaving care teams with the NELFT LAC health teams via the ICB and improvement team | Head of Service for Corporate Parenting | October 2024 | | | | See 1.3 | HOS now meeting with the ICB and providers to commence planning | |



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|---------|--|--|--|---|---|--|--|---------|--|--------------|
| | | Development of bespoke training for managers in leaving care and wider safeguarding partnership with regards to Care Act Assessment Section 42 Safeguarding and transitions planning | Principal Social Worker Children's / Principal Social Worker Adults | October 2024 | | | See above | See 1.3 | Meeting set for June to commence planning | |
| 3.2 | Development of career progression pathways (skills matrix) | ASYE programme of support (HSCA) and CSW support in practice, alongside performance reports | Principal Social Worker Children's HSCA Professional | In Place; April 2024 Review; October 2024 | Team managers Service Managers / Heads of Service HR People Establishment | Direct feedback from NQSWs via Career Progression Panel and Skills for Care 360 | Length of service / ASYE retention post qualification Number of management vacancies appointed to externally / internally | N/A | Embedded 3 monthly reports on ASYE career progression / feedback with tracking of caseloads by PSW now in place | |
| Page 40 | | Y2 PQ aimed at bespoke support / retention post Career progression panel | Development Manager HSCA | June 2024 | Head of Service for Practice CSW Manager & Team | | Training uptake and impact | N/A | PSW Children's and HSCA manager to update as part of work planned in July | |
| | | Establishing set competencies for aspiring practitioners AP/ TM and embed into career progression panel framework, with links to CPD and PDR | | September 2024 | Principal Social Worker Children's | | | N/A | Work to be developed as part of the new PSW – Children's role in September | |
| | | Changes to supervision template to ensure career progression is discussed and actioned as part of supervision and PDR monitoring | Strategic Improvement Leads | June 2024 | | | | N/A | Template has been developed and currently being tested in the LCS test environment | |



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|---------|---|---|--|------------------------------|--|---|---|--|---|--------------|
| 3.3 | Update, alignment and relaunch of; Practice Standards Case | Improved access to information which supports staff, managers and supervisors on practice expectations within policies and procedures | Head of Service for Practice | End of July 2024 | Principal Social Worker Service Managers / Heads of Service / Team Managers | Consistency in practice evidenced through routine audit activity Improvement / consistency in quality of case recording evidenced through audit activity | % visits and supervisions recorded with 72 hours % of management decisions recorded within 24 hours Proportion of all children with systemic interventions and group supervisions | N/A | Practice Standards are in development with planned launch by the end of July 2024 | |
| | Recording Standards Staff Guide For all staff and managers | Consistency in application of the practice model and thresholds across all service documents | Principal Family Therapist | October 2024 | Head of Innovation & Improvement | | recorded (New 2024/25) Proportion of new staff who have undertaken induction % of supervisions undertaken within relevant timescales | N/A | Permanent Recruitment to post planned for July with work from SLIP to support model of practice to happen in the Autumn | |
| Page 41 | Mandatory Systemic Training to embed model of practice in all interventions especially supervision, assessments and visits | A programme of SLIP support through DfE including accredited year 1 & supervision training delivered by Centre for Systemic Social Work for permanent staff, including year 2 accreditation | Head of Service for Practice Principal Social Worker | September 2024 | Recruitment to systemic roles Centre for Systemic Social Work | Evidence of systemic approach in practice recording seen through audit activity Quality assurance activity provides assurance of good quality children's assessments which take all significant needs into account and evidences application of systemic | Proportion of permanent staff who have a systemic training qualification Reduction in complaints Proportion of all staff who have undertaken systemic training Rate of CiN, CP and CiC who exit intervention | £164,000 SLIP grant bid through the DFE | Meetings with CfSSW have occurred and bid submitted to DfE. Awaiting confirmation of DfE allocation panel | |
| | | In-house training programme that promotes Face to Face model of practice | Principal Family Therapist | December 2024 | | thinking. Staff feedback evidences that systemic training is providing practitioners with confidence and clarity in their work with children and young people | successfully | Linked to train the trainer part of above | Permanent Recruitment to manager post planned for July with work from SLIP to support model of practice to happen in the Autumn | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-----|--|---|------------------------------------|------------------------------|--|---|---|----------|---|--------------|
| 3.5 | All relevant policies, procedures and processes are easily available | Content review of Tri- X developing an options appraisal for continuation of use | Head of Service for Practice | April 2025 | Sufficient recruitment / capacity to undertake necessary tasks | All relevant documents are available on Tri-X Quality assurance activity evidences that social work practice with children and | Confirm what data is available with regards to use of Tri-X % of audits rated Good or | £0.0010m | TriX review of content has started and will continue during June and July | |
| | and understood | Defined roles and responsibilities for maintaining Tri-X established | | April 2025 | Improvement Leads and QA Team | families is informed and compliant with relevant policies and practice standards. | better | N/A | Review to inform processes started to be completed by July | |

4. Caseloads and Stability of Workforce

| Rej () | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-----------|---|--|---|---|--|--|--|---------|---|--------------|
| ıge 42 | Critically analyse and reduce caseloads via incremental targets, and set agreed | CiN, CP and CiC Panels to identify children where it is recommended intervention can step down or close | Strategic Improvement Leads | Commence April 2024 All CIN / CP / CIC to have been reviewed by September Embed process of review by December | Performance & Business Intelligence Team Principal Social Worker Children's Starting Well Managers | Reduced Caseloads for staff QA undertaken by Improvement leads then embedded with routine manager activity Improved quality of practice as seen through audit activity with increased capacity | Average and maximum caseloads across assessment teams, safeguarding teams and corporate parenting teams against incrementally reducing targets as per the monthly data set | See 1.1 | CIN / CP and CIC panels have commenced Average caseloads are reducing from December 2023 | |
| | capacity for case holding teams | Reviewing Power BI to develop caseload reporting as part of the performance dataset | PSW Children's / Head of Innovation and Improvement | July 2024 | | inologood capacity | | N/A | PowerBI reports now being run daily and data now routinely available within the monthly performance dataset | |
| | | Develop and implement caseload weighting tool | Principal Social Worker Children's | July 2024 | HSCA Professional Development Manager | HSCA Professional Development Manager | | N/A | Work has commenced and launch is due by Sept. to support new structures | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-------------|--|--|--|------------------------------|---|--|---|------|--|--------------|
| 4.2 | Develop guidance in relation to protected caseloads and expert practitioner roles for NQSW and ASYE | Close monitoring of NQSW experience in ASYE to create targeted approach to wraparound support for year 2 post qualifying. | Principal Social Worker Children's HSCA Professional Development Manager | June 2024 | Head of Service for Practice Starting Well Managers | Improved quality of practice as seen through audit activity with increased capacity Successful completion of ASYE seen through the Career progression panel and ASYE portfolio completion | % of retention of SWs in years 2, 3 and 4 post qualifying | N/A | Work has commenced as above | |
| 4.3 Pag | Workforce stability ensures children, young people and families benefit from stable and meaningful relationships and engagement with social workers. | Relaunch of workforce strategy that promotes and evidences stability and retention of staff | Principal Social Worker Children's | October 2024 | Re-org Phase One and Phase Two Recruitment / HR AD Safeguarding and Corporate Parenting AD Early Help and Partnerships | Retention of workforce A reduction in the changes of worker for children and young people seen through data and QA activity Planned handovers and appropriate endings seen in audit activity | % of CiC with 2 or more changes of SW within 12 months Feb 24; 9.1% Target; 25% % all children with 3 or more changes of SW within 12 months Feb 24; 10.4% Target; 10% | N/A | Workforce board to meet in June 2024 – strategy due to be completed by October | |
| 0 43 4.4 | Ensuring our staff feel supported, cared for and that their health and | Undertake review of our approach to understanding and improving staff morale and welfare, and the factors that are impacting upon this and make recommendations as required | Principal Social Worker Children's | November 2024 | Starting Well Managers HR | Engagement and feedback from staff with regards to wellbeing Increased staff attendance at regular Director drop-ins | Responses from staff surveys and feedback mechanisms | N/A | Phase one restructure to deliver additional PSW capacity and recruitment to the PSW Children's service may delay some activity - Staff survey planned for October. | |
| | wellbeing is priority | Introduction of monthly Starting Well Star Awards to recognise achievements and good practice across social care and education | Tara Geere, Director of Starting Well | June 2024 | Starting Well Senior Leadership Team | Prevalence and consistency of award programme, and feedback from staff / managers | Number of awards given out, and the reasons for these | N/A | Commenced in May 2024 linked to Council Star Awards | |



Theme Two; Improving Practice Strategic Lead(s); Assistant Director for Early Help and Partnerships, Assistant Director Safeguarding and Corporate Parenting

5. Early Help, MASH and Partnerships

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-------|--|---|---|------------------------------|---|--|---|----------|---|--------------|
| 5.1 | Ensuring that | A review of wait times and associated processes for Early Help Services | Service Manager Early Help, MASH and Edge of Care | June 2024 | Early Help Operational Board Early Help Partnership Board AD Early Help and partnerships / SM | Reduced waiting time and evidence of effective management oversight of any families on waiting lists Evidence through quality assurance activity of increased awareness and uptake of universal and early help services | Average wait time for EHS, and number of families waiting (New 2024/25 - Four weeks maximum) Number of children stepped up and stepped down to / from EHS to statutory social care Feb 24; 156 | N/A | Review has commenced and findings to be shared in June. Linked to phase two reorganisation to add capacity to teams as appropriate. Recruitment to AD EH has commenced interviews in June | |
| ge 44 | children, young people and families are offered the right help and support at the right time | Scrutiny of Power BI and KPIs at Performance Meetings | All Service Managers | April 2024 | Head of communications | | Usage of FIS website | N/A | This is now routinely occurring at service level and monthly performance meetings | |
| | | Review of structure within the Early Help Service to ensure we can meet demand in a timely way | Tara Geere, Director of Starting Well | November 2024 | Director of customer Services / Customer services | | | See 1.2 | Phase two has commenced with implementation due in the Autumn | |
| | | Full review of the FIS / FSD content and website functionality, in conjunction with development of corporate website | Family Information Service Manager | December 2024 | Operations Manager | | | £0.0025m | Review of hosting has commenced linked to the corporate refresh of the corporate website | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion | Dependencies and Key | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-------------|---|---|--|-----------------------------|---|--|---|----------|--|--------------|
| 5.2 Page 45 | Review of transfer protocol and the processes and standards associated with case transfer at every point in the system, including stepup and stepdown | Full review of allocations and all transfer decision making processes for children including; UASC Contextual Safeguarding CWD Early Help (Family Practitioners) OOB Transfers Targeted Youth Services Court Orders Unborn Children | Service Manager Early Help, MASH and Edge of Care Head of Service for Assessment and CWD Head of Service for | August 2024 October | Head of Service for Safeguarding Head of Service for Corporate Parenting Service Manager for Early Help and Targeted Family Support Performance and Business Intelligence Team | Timeliness of transfers and allocations Quality of decision making, and management oversight evidenced for step up and step down Audit activity evidences a comprehensive understanding of thresholds for intervention across the directorate. Targeted actions identified and completed from CIN, CP, and CiC panels The interface between early help and statutory work is clearly and effectively differentiated. | Number of children stepped down and stepped down from statutory to nonstatutory intervention, via the correct pathway Feb 2023/24; 166 Proportion of transfers accepted and declined (New 2024/25) Step-up / step-down data set for all key transfer points within the service (New 2024/25) % of assessments with outcome of NFA Feb 2023/24; 20.7% % of referrals with an outcome of NFA Feb 2023/24; 20.7% | See 10.2 | Review of transfer protocol has taken place. Some changes are still required, and meetings are planned to finalise the protocol. Timeliness of transfers is improving and a formal escalation process is being developed, Ongoing HSCP multi-agency audit of children who moved into Havering from another borough spring/summer 2024- 1 child per month Practice standards work has | |
| | | transfers following review | Practice | 2024 | | | Target; 5% | | commenced | |
| 5.3 | Ensure that children and young people in need of help and protection are identified by professionals, and appropriate referrals are made to relevant services | Implementation of multi-agency referral and threshold working group and MASH partnership meeting to review case decisions | Service Manager Early Help, MASH and Edge of Care | Review September 2024 | Safeguarding Partnership Statutory Partners Schools, Education Providers and Designated | % of MASH multi-Agency audit outcomes that meet good criteria and evidence of practitioners responding to findings QA activity evidences that children and families are not subjected to unnecessary repeat interventions | Number of children with multiple contacts within the last six months Q4 ChAT; 910 % of contacts progressed to Early Help Services (including signposting) 2023/24; 37.7% Target; 35% | N/A | Monthly MASH audit partnership meeting re in place. MASH partnership meetings are taking place regularly. Regular MA audits commenced in May 2024 | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|------|--|---|---|------------------------------|---|--|--|------|--|--------------|
| | Relaunch and embed aligned threshold criteria across safeguarding partnership and within service | Embedding early help and preventative intervention offer within safeguarding partnership | Partnership and Learning Manager, HSCP | December 2024 | Safeguarding Leads | | | N/A | Early Help & Preventative intervention offer to be promoted through briefings Safeguarding Website and learning events | |
| | practice standards. | Rolling programme of training for partner agencies on the early help offer and MASH thresholds. | Head of Service for Practice | September 2024 | | Audit outcomes for cases with a re-referral show appropriate changes in | % of referrals progressing to assessment 2023/24; 93.1% Target; 95% | N/A | Training programme in place with targeted work based on audits and referrals | |
| Page | | Scrutiny of data and audits on repeat referrals to identify what action is needed to reduce these. | Head of Service for Practice | July 2024 | | circumstances, or new information Audit activity evidences use of the threshold | % of re-referrals within 12 months 2023/24; 18.6% Target; 18% | N/A | Dip sampling has commenced on a monthly basis to understand threshold application | |
| 9 46 | | Monthly Performance Meeting and Power BI scrutiny alongside programme of multi- agency audits | Service Managers and QA Team | May 2024 | | document to articulate the support needs and risks to children in multi-agency referral forms. | % of contacts progressing to referral 2023/24; 26% Target; 30% | N/A | Monthly performance meeting now in place with Power BI reports available | |
| | | Multi-agency review of multi-agency referral form (MARF) to ensure it is succinct and enables all relevant information to be shared via the MASH Steering Group | Partnership and Learning Manager, HSCP AD Safeguarding and Corporate Parenting | October 2024 | | | | N/A | Regular multi- agency audits commenced in May 2024 | |
| | | Relaunch of Safe and Together training across EH, MASH, Assessment, Safeguarding, IRO's CIC and leaving Care - integrating DV informed practice | AD Safeguarding and Corporate Parenting | November 2024 | | | | TBC | All EH, MASH and some assessment staff have now undertaken safe and together training. Starting to see improvements in EH interventions | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-------|--|---|---|------------------------------|---|--|--|----------|---|--------------|
| 5.4 | Children and young people are protected through effective multi-agency arrangements at Strategy Meetings | Review of recording of Strategy meetings on LCS to establish what can be reported on and amend where needed. | Head of Service for Assessment and CWD | July 2024 | Police Schools / Education Providers NELFT | Quality of decision making, and case recording of strategy meetings improved Timeliness of follow up actions | Timeliness of strategy meetings, (held within one working day – serious risk of harm); Complex strategy meetings and extra familial risks – up to max of 5 days; preferably | See 10.2 | Review of recording of strategy meetings will commence in June 2024 | |
| Pag | | Ensure there are clear processes, expectations and responsibilities for coordinating strategy meetings outlined in Practice Standards including invitations to school nursing and NELFT LAC health team | Head of Service for Practice | July 2024 | Social Care Systems Team Performance and Business Intelligence Team | Quality of timely action plans for children at Strategy Meetings Quality assurance activity evidences high quality and impactful contributions from multi-agency partners | sooner – (London CP Procedures – 4.20). MASH – RED contacts completed within 4 hours. Partner agency attendance at strategy meetings (New 2024/25) | N/A | Strategy meeting chairs and attendees are now using the threshold document, London CP Procedures and Barnado's risk assessment to inform decision making. | |
| ge 47 | | Develop a safeguarding partnership data set for Strategy Meetings to include timeliness and attendance from partner agencies, to enable escalation of issues. | Partnership and Learning Manager, HSCP | November 2024 | | | | N/A | Working with Partners re improving the dataset Q&E working group planned on 9/7/24 | |
| | | Recruit 2 x Child protection coordinators to support Strategy Meeting minute taking | Head of Service for Practice | August 2024 | | | | See 1.1 | Phase one reorganisation consultation launched in April | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|--------------------|---|---|--|------------------------------|--|---|--|---------|--|--------------|
| 5.5 | Review of Early Help Strategy to broaden scope and increase awareness of early help offer, particularly services offered within the Voluntary and Community Sector. | Engagement with partnership via Early Help Partnership board and relevant associated forums Addition of 6th priority to focus on use of volunteers Alignment with SEND and AP Strategy and Adolescent Safeguarding Strategy | Service Manager for Early Help and Targeted Family Support AD Early Help and Partnerships | September 2024 | Safeguarding Partnership Youth Justice Service SEND Service Schools and Education Providers | Increased involvement and engagement with VCS groups at operational forums Evaluation of referrals to ensure consistent application of threshold | Publication of refreshed Early Help Strategy Indicators as per EHS Strategy Action Plan | N/A | Recruitment to the AD for EH has commenced with interviews in June 2024. Service manager has started review of strategy. | |
| _{\$} Page | Increased awareness and uptake of Family Group Conferencing | Increase capacity in the FGC team to enable greater volume of FGCs to take place | Service Manager for Early Help and Targeted | November 2024 | Phase 2 Re-Org Starting Well Service Managers | Quality assurance activity evidences that FGCs are considered and undertaken in all cases where they could be beneficial | Number of FGCs undertaken, and the case status of the families involved | £0.046m | Phase two implementation has commenced | |
| e 48 | for all families that would benefit from them, at all stages of intervention including those working with the Youth Justice Service | Increase awareness and understanding across all social care teams with regards to benefits and impact of FGC, and where they can be most effective | Family Support | December 2024 | | Audit activity provides assurance with regards to the quality and effectiveness of FGCs that take place | | N/A | Plans are in place to increase capacity in the service. The FGC team due to attend team meetings across CSC and Youth Justice Services to promote the FGC service and to increase referrals. | |



6. Targeted Services and Interventions

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|------|--|---|--|------------------------------|---|---|---|------|--|--------------|
| 6.1 | | A review/ update of governance and strategy for Adolescent / Contextual Safeguarding including improvements to the LCS pathway | AD for Early Help and Partnership AD for Safeguarding and Corporate Parenting | September 2024 | Community Safety Safeguarding Partnership Schools / Education Providers | Scheduled auditing of children subject to contextual safeguarding risks | Number of children with contextual safeguarding recorded as a hazard (New 2024/25) | N/A | Phase two Reorganisation is now commencing with workshops to design new structures Appointment of AD roles started in May 2024 HSCP Exploitation multi-agency T&F group to begin chaired by AD | |
| Page | Adolescents and children facing risks including those | Review of roles, responsibilities and ownership of the Havering Adolescent Risk Management (HARM) Panel and MACE Panels | | September 2024 | Phase 2 Re-Org Head of Service for Safeguarding | Improved quality and effectiveness of risk assessments and safety plans presented to HARM Panel | Number of active contextual safeguarding plans (New 2024/25) Number of children with | N/A | Review planned for July 2024; Advert out for HOS EH has not been successful - AD recruitment process as above | |
| 49 | outside the home receive well-coordinated responses that reduce harm or risk of harm. | Improved identification of contextual safeguarding factors at CiN / CP and CiC reviews | Head of Service for Practice | September 2024 | Head of Service for Corporate Parenting NELFT / ICB | Evidence of children discussed and management oversight at MACE and HARM Panels | contextual safeguarding factors identified at CiN / CP and CiC reviews (New 2024/25) | N/A | Temporary IRO managers now recruited to. Adverts to go out as part of phase one implementation | |
| | | Practice standards for response to contextual safeguarding, including implementation of safeguarding consultations | Head of Service for Practice | October 2024 | | Improved quality and timeliness of decision making and response to actions from HARM Panel | Number of children with a positive NRM (New 2024/25) Breakdown of child protection plans and assessment factors by category of abuse | N/A | HOS for practice has started work on the practice standards and this will include the new ADs once appointed to | |
| | | Improvement in coordination of community response to identified concerns / issues with targeted disruption and prevention activity | Service Manager for YJS and | December 2024 | | | | N/A | Work commencing in July 2024 | |



| | | LIIA Contextual Safeguarding Self- Assessment linked to the YJS Service Plan | Specialist Safeguarding | September 2024 | | See above | See above | See 1.2 | As above work to start in July 2024 | |
|------|--|---|---|-------------------|-------------------------------------|---|--|----------|--|--|
| | | Develop and embed our approach to Sexually Harmful Behaviour / Sexual Abuse including pathways for relevant services across the partnership | AD for Early Help and Partnerships AD Safeguarding and Corporate Parenting | November 2024 | | | | N/A | As above work to start in July 2024 | |
| | | Agree and implement contextual safeguarding model including pathways outside of child protection | Š | September 2024 | | | | N/A | Creation of IRO and Child protection chairs and the appointment of a CINRO has begun | |
| Page | Children who go missing | Audit of Return Home Interviews (RHIs) | Head of Service for Practice | July 2024 | Safeguarding Partnership | Review of the impact and | Number of children missing from home 2023/24 YTD; | N/A | Audit is planned for July | |
| e 50 | from home or care receive help to reduce the risk of harm, and are helped to understand how to keep themselves safe | Review processes and procedures to reduce risk when children go missing, ensuring these are understood across the partnership, including the timeliness of return home notification | AD Early Help & Partnerships | September 2024 | Schools / Education Providers | learning of RHIs in reducing missing episodes and better understanding missing triggers for individual children Targeted auditing of children missing from home and care in the last twelve months | Number of children missing from care 2023/24; 123 % offered RHI with 72 hours, and those accepted 2023/24 YTD; Offered 29.8% (Target 85%) Accepted; 62.6% (Target | N/A | Planned work as part of the Contextual Safeguarding process development | |
| | | Missing from home and care guidance is current and has all partner agency contributions. | Head of Service for Practice | September 2024 | | Review of targeted disruption activity to understand impact Data and information from | 75%) Missing dataset including information from HARM and MACE panels (New 2024/25) | N/A | Part of the TriX review and Contextual Safeguarding development | |
| | | Introduce and embed the use of Mind of My Own for children returning from missing episodes | Service Manager for YJS and Specialist Safeguarding | September 2024 | | Mind of My Own Impact of mentoring on RHIs | | £0.0017m | Purchased module on Mind of My Own. implementation to commence in July | |



| | | HARM Panel to regularly review and respond to push / pull factors identified in RHIs and target disruption activity Access to mentoring service for children who are regularly going missing | AD Early Help & Partnerships Service Manager for YJS and Specialist Safeguarding | September 2024 July 2024 | | See above | See above | N/A | Planned work as part of the Contextual Safeguarding process development Planned work as part of the Contextual Safeguarding process development |
|------------|--|---|--|--------------------------------|---|---|---|-----|---|
| 6.3 Pag | Social workers, managers and other professionals accurately assess factors that make children more vulnerable and tailor interventions appropriately | Ensure overview and pathways of early help and our prevention offer is included as part of induction for all new staff and is shared across the partnership | Head of Service for Practice | September 2024 | Joint Commissioning Unit Head of Service for Safeguarding Head of Service for Corporate Parenting | Increase in children / families accessing support that is specific to their needs evidenced through QA activity Feedback from children / | Use of referrals dataset at end of interventions ((New 2024/25 - developing) % of children in care for | N/A | Being developed as part of the practice standards and HSCP Multi – Agency training HSCP Conference Nov 24- Transitional Safeguarding theme, including workshop with Dez Holmes for Statutory Partners |
| e 51 | | Increased awareness, referrals to and uptake of services available for specific needs and concerns i.e. Child Sexual Abuse, substance misuse, mental ill-health, SEND | Adolescent Safeguarding Board Action Plan - AD EH | September 2024 | Adolescent Safeguarding Board Safeguarding Partnership | families with regards to outcomes Evaluation of the application and use of the threshold document through dip sampling | more than a year with identified substance misuse problem, and how many were offered and received an intervention Feb 24 Identified; 4% (Target); 5% Intervention; 14.3% Offered but refused; 75% | N/A | Planned work as part of the Contextual Safeguarding process development |
| | | Ensure processes are in place to support identification and response to new and emerging risks in relation to contextual safeguarding as part of Practice Standards | Head of Service for Practice | July 2024 | Schools / Education Providers | Timeliness and quality of HARVAs and evaluation of the impact of the assessment in reducing risk | Proportion of CP, CiN and CiC with contextual risks identified at their last review (New 2024/25) | N/A | Being developed as part of the practice standards and HSCP Multi – agency training |
| | | Improved use of Havering Adolescent Risk and Vulnerability Assessment for all adolescents | Service Manager for YJS and Specialist Safeguarding | September 2024 | | | | N/A | Planned work as part of the Contextual Safeguarding development |



| Evaluation of our | Service | | | | | Planned work as | |
|------------------------|----------------|-------------|-----------|-----------|-----|-----------------|---|
| prevention offer to | Manager for | August 2024 | | | N/A | part of the | |
| understand gaps and | Early Help and | _ | | | | Contextual | |
| develop a tiered offer | Targeted | | See above | See above | | Safeguarding | |
| in response, including | Family | | | | | process | |
| commissioned | Support | | | | | development | |
| services | | | | | | | , |

7. Safeguarding (Children in Need of Help and Protection)

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-------------|---|--|--|------------------------------|--|--|--|------------|---|--------------|
| 7.1 Page 52 | All assessments are timely and proportionate to risk; they are informed by research as well as the historical context and significant events for each child. Assessments are dynamic and updated in the light of emerging issues and risks | Embedding the updated assessment template Ongoing auditing of assessments by QA team to evaluate performance and impact of training, coaching sessions. | Strategic Improvement Leads Head of Service for Practice Improvement Lead | July 2024 From April 2024 | Heads of Service Service Managers Team Managers Social Care Systems Team Havering Social | Assurance through dip sampling that review assessments of children take place routinely following changing in circumstances Use of research and direct work evidenced in assessments seen through QA activity Quality of decision making in assessments with an outcome of NFA Quality of analysis within | % of assessment completed within specified timescales (all bandings) 2023/24; 72. % within 45 days Target; 85% % children seen during an assessment Q4 ChAT; 92% Target; TBC % children seen more than | N/A N/A | Assessment template has been developed and is in the LCS test system for launch in July Monthly audits are now embedded and April compliance by managers of audits was 81% completion with improvements seen in practice and grading profiles. | |
| | Children are seen as part of all assessments and direct work is imaginative and informative. A systemic | Best Practice Briefing on writing good quality assessments for children alongside assessment training to all staff and delivery of rolling programme Implement practice and management | Head of Service for Practice Head of | June 2024 July 2024 | Care Academy | assessments specifically risk and protective factors to be evaluated through dip sampling Targeted multi-agency audit activity to evaluate quality of assessments | once during an assessment (New 2024/25) Breakdown of assessment outcomes (New 2024/25) Early Help Assessments completed within 25 working | N/A | Briefing shared with all staff and placed on SharePoint Being developed | |
| | framework ensures practitioners exercise the use of curiosity and consideration of | standards; ensure IRO & CP chair standards are in line with IRO Handbook & Working Together 2023/ LCPP and recirculate | Service for Practice | · | | Routine auditing to provide assurance that practitioners are routinely enabling children and young people to engage effectively in assessments | days Feb 24; 89.1% Target; 95% | N/A | as part of the practice standards | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|--------------------|---|--|-------------------------------------|--|---|--|--|----------|---|--------------|
| | the lived experience of the child and their family. Ensure there is a clear | guidance to all staff regarding key elements in good quality assessments with clear focus on quality of analysis. Practice standards to | Head of | | | and their voices are consistently well reflected and acted upon | | | Practice standards | |
| | exploration of difference, and factors of race. | be included in staff induction processes. Ensure as part of staff | Service for Practice | July 2024 | | | See above | N/A | in development | |
| | equality and equality as well as understanding any barriers to engagement | induction all staff have access to Care Knowledge and routinely use learning to inform best practice. | Principal Social Worker | May 2024 | | | | £0.0017m | Care Knowledge procured roll out has started | |
| ^{7.2} Pag | | Coaching, mentoring and training to all Team Managers and APs aspiring to be future managers. | Head of Service for Practice | June 2024 and ongoing | Starting Well Managers | Feedback from managers and practitioners Routine auditing to identify timely and effectives supervision with clear time | % of core groups completed in time 2023/24; 64.8% Target; TBC | See 1.3 | Improvement team are rolling out training and 1:1 mentoring with managers | |
| ye 53 | Consistent and high quality management scrutiny and oversight and decision making when evaluating and signing off assessments | Audit of assessments post sign off to evaluate quality of management oversight and scrutiny and level of challenge. | Improvement lead and auditors | June 2024 | HSCA Quality Assurance Team Principal Systemic Family Therapist | bound actions that are tracked from session to session Increase in IRO and CPC escalations, and evidence of impact | Time taken for managers to sign off assessments (New 2024/25) Number of assessments with systemic supervision or consultation recorded. (New 2024/25) | N/A | Dip sampling of assessments has occurred as part of the PIB target on assessments this will continue as part of regular audits | |
| | | Consistent use of systemic consultations and group supervision embedded within practice standards | Head of Service for Practice | July 2024 | | Routine auditing to provide assurance that drift and delay for children is identified swiftly and | | See 3.4 | Practice standards in development | |
| | | Oversight through CiN, CP and CiC panels | Panel Chairs | Commence April 2024 Embed Sept 2024 | | remedial action taken and tracked | recorded (New 2024/25) | N/A | Panels have commenced. Reviewed 168 children at CP panel, 430 children at CIN panel and 46 at CiC panel | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|------|--|--|---|-------------------------------------|--|--|--|----------|---|--------------|
| 7.3 | Children in Need of Help and Protection are consistently seen, and seen alone | Development of practice standards for each service on the expectations relating to purposeful visits to see children and young people. | Head of Service for Practice | July 2024 | Service Managers for Safeguarding x2 Staff in Safeguarding Service | Routine audit activity to provide assurance of the timeliness and quality of | % of CIN visited within the last 4 weeks Target; 90% | N/A | Practice standards in development | |
| | Children are supported to share their wishes and feelings freely | Ensure there is a robust QA approach to monitoring impact of visits. | Head of Service for Practice / Improvement Lead | July 2024 | 300 | visits to children with evidence of routine, purposeful visiting that result in a clear analysis by the social worker recorded on the child's file | Feb 2024; 75.4% % of CP visits within the last 15 days Target; 90% Feb 2024; 92% | N/A | Monthly audits are now embedded with children seen as a key focus alongside timeliness of visits | |
| Page | and independently from the views of parents, carers or other adults in their lives | All management meetings to consistently report on timeliness of visits for all children through use of Power BI reports and monthly datasets | Head of Service for Safeguarding | May 2024 | | Supervision records evidence management oversight is ensuring that children are seen alone and that visits are purposeful, informed by | (changing to 10 days) % of families with active early help assessments visited at least once a week (new 2024/25) % of children seen alone at | N/A | Routine use of Power BI and monthly performance tracking now in place | |
| 54 | | Review of uptake and usage Mind of My Own training, and target those who are not routinely using the app to engage children and young people to understand barriers | Service Manager for Early Help and Targeted Family Support | September 2024 | | the child's plan and reflect current circumstances | their last visit (New 2024/25) % of supervisions undertaken within appropriate timescales | See 10.4 | To be rolled out post Phase one implementation | |
| 7.4 | Children in need of help and/or protection have a plan clearly setting out how their needs will be met, how risk will be reduced within the timescales appropriate for | Delivery of core training to all staff on how to create and deliver high quality, SMART, well targeted plans for children that are purposeful and focused in line with the practice model. | Head of Service for Practice | Available from September 2024 | AD Safeguarding and Corporate Parenting Virtual School | Feedback from parents, children and young people on the quality of their plan and outcomes achieved Assurance through audit activity and CiN/CP panels of the effectiveness and timeliness of CiN and CP Plans for children | Proportion of children with a CIN or CP plan; the duration of the plan and time since last review (New 2024/25) Proportion of CiN plans open for more than 9 months (New 2024/25) Proportion of CP plans closed within three months; | See 1.3 | Improvement team are currently developing training for roll out post assessment training | |



| | | | Lead | Target | Dependencies | Quality Assurance | Key Performance | | | RAG |
|-------|---|---|--|-----------------------------|-----------------------------|---|--|------|---|-------|
| Ref | Priority | Delivered through | Person(s) | Completion | and Key | Indicators | Indicators | Cost | Update | rated |
| | the child, with clear priorities and goals for all involved. | Ongoing scrutiny and targeted action from both CIN and CP panels | Panel Chairs | Commencing by April 2024 | Stakeholders | Assurance through audit activity of the timeliness and effectiveness of CiN reviews and RCPCs for children | YTD 2023/24; 14.3% Target; 9% Proportion of current CP plans open for more than 12 months: | N/A | Panels now in place and ongoing reviews are occurring with escalations to the AD as appropriate | |
| | wishes and feelings of the individual children, are relevant to families, and are written in an | Developing clear practice standards. Ensure there is an effective quality assurance loop to ensure consistency of practice. | Head of Service for Practice | July 2024 | | Routine auditing to provide assurance that practitioners are routinely enabling children and young people to engage effectively in planning and | Q4 ChAT; 18% Target; 18% CiN plans updated in last six months YTD 2023/24; 95.8% Number of children with CiN | N/A | Practice standards in development | |
| Pag | accessible way, with clear measures of success. Families are engaged in the planning | Quality assurance activity targets planning and plans to ensure they are routinely updated in response to changing circumstances and emerging risks | Head of Service for Practice | July 2024 | | their voices are consistently well reflected and acted upon Feedback from partners on the impact of interventions | and CP plans who are accessing advocacy services, those who have been offered, accepted (New 2024/25) % of school age children with CiN and CP plans that | N/A | Improvement team is currently developing training for roll out post assessment training | |
| ge 55 | process, and interventions are more effective as a result, leading to better outcomes. | Ensuring that clear processes and expectations are in place for CIN/CP plans that are shared with safeguarding partners in a proportionate way e.g. DSL in child's school | Head of Service for Safeguarding | July 2024 | | Feedback via Mind of my Own | have an up to date Personal Education Plan (New 2024/25) | N/A | Practice standards in development | |
| | | Ensuring that all school age children in need of help and protection have a Personal Education Plan and are provided with support, if needed, via the Virtual School | AD for Education | September 2024 | | | | N/A | Plans are in place further work to look at quality due in September 2024 | |
| 7.5 | Neglect is effectively recognised and responded to. | Embedding the use of the neglect toolkit across the service and wider partnership | AD Safeguarding and Corporate Parenting | October 2024 | Safeguarding Partnership | Monthly auditing and child protection panel to provide assurance that all relevant children have a robust assessment and neglect | % of children with neglect identified as a factor in their assessment or plan Q4 ChAT CP Plans; 52% Q3 Assessments; 11.2% | N/A | Training to be rolled out by September 2024 | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion | Dependencies and Key | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|------------------------|--|--|--|-----------------------------|--|---|---|----------|---|--------------|
| | | Refresh of Partnership Neglect Strategy | Partnership and Learning Manager, HSCP | Date April 2025 | Stakeholders Schools / Education Providers | toolkit completed and that this routinely updated, and actions tracked by practitioners and managers. | Number of contacts with neglect as the reason; YTD 2023/24; 1429 / 15.6% Outcomes of contacts and | N/A | Being developed | |
| | | Targeted quality assurance activity focused on children where neglect is the primary reason for involvement | Head of Service for Practice | Planned for October 2024 | NELFT - Designated Nurse for Safeguarding Children | | assessments with neglect as a reason (New 2024/25) | N/A | Planned for October 2024 | |
| ^{7.6} Page 56 | All parents, carers and family members are supported, where appropriate, to be involved in providing support for the child, and keeping them safe, particularly family | Child Protection Chairs and IROs as well as SWs and TMs ensuring absent family members / parents are routinely included in assessment and planning for children, with theses expectations being clear within practice standards. | Head of Service for Practice | July 2024 and ongoing | Social Care Systems Team | Clear evidence that absent parents and family members are invited to attend conferences and are routinely and meaningfully included in assessments, plans and reviews. Targeted audit activity to capture involvement/contribution of absent family members at | Reduction in complaints regarding family members not involved in care planning | N/A | Roll out of assessment training now in place further work on planning and plans due by the Autumn. Majority of staff in the assessment service have completed the assessment training. | |
| | members or parents who are otherwise absent from child's life | Review of LCS recording of regarding absent family members to ensure they can be identified | Service Manager for Standards | September 2024 | | key points | | See 10.2 | will audit in September cross referencing with CP chairs and IRO's on absent parents | |
| 7.7 | Effective and timely planning, support and decision-making takes place during preproceedings work. | Review of all cases in PLO and authoritative action being taken to bring children into care where appropriate | AD for Safeguarding and Corporate Parenting | September 2024 | Court Progression Manager Head of Service for Corporate Parenting Performance and Business Intelligence Team | Oversight and scrutiny of PLO progression for children at CP Panel Oversight and scrutiny of PLO progression for children by Court Progression Manager and routine reporting to senior managers Routine audits to provide assurance of the | % of PLO completed within 12 weeks. % of PLO completed within 16 weeks (extended with the agreement of the Assistant Director, Safeguarding and Care Planning). Average time between LPM and getting to PLO | N/A | A review of all children in PLO commencing in June 2024. Tracker template being reviewed by improvement lead to strengthen oversight of timescales to ensure authoritative action is taken as necessary | |



| | | | Lead | Target | Dependencies | Quality Assurance | Key Performance | | | RAG |
|-------|---|--|--|--------------------|---|---|---|----------|--|-------|
| Ref | Priority | Delivered through | Person(s) | Completion Date | and Key Stakeholders | Indicators | Indicators | Cost | Update | rated |
| | | Review outcomes of all Supervision Orders to ensure quality, effectiveness and appropriateness of decision making | Head of Service for Safeguarding | July 2024 | | timeliness and quality of PLO letters to parents and reports to court | Reduction in number of children subject to long term CP plans (18 months+) Number of children with supervision orders | N/A | Audit to be undertaken in June 2024 by the improvement team | |
| | | Permanent recruitment of Court Progression Manager | Head of Service for Safeguarding | July 2024 | | | | See 1.1 | Due as part of phase one implementation | |
| P | | Review of the PLO and proceedings case tracker and development of an integrated systems tracker | Court Progression Manager Head of Innovation and Improvement | September 2024 | | | | See 1.3 | Tracker template being reviewed by improvement lead to strengthen oversight of timescales to ensure authoritative action is taken as necessary | |
| age 5 | | Development of PLO and proceedings data set with clear measures and targets | | November 2024 | | | | N/A | As above | |
| 7.8 | 57 | Addition of hazard on LCS for NRPF and 16 / 17 Homeless | Service Manager for Early Help, | | Housing Services (Living Well) Early Help Services | timeliness and effectiveness of the identification and assessments of families | Assessments with housing / homelessness identified as a factor (New 2024/25) 16/17-year-old homelessness contact | See 10.2 | LCS pathway being developed. Improvement team have delivered training to the assessment team | |
| | NRPF families (including 16- and 17-year-old homelessness) | Development of assessment pathways for NRPF and 16/17- year-old homeless | MASH and Edge of Care | November 2024 | (Universal Plus) Head of Service for Safeguarding | with NRPF and homelessness Dip sampling to provide | outcomes (Under review) Universal Plus referrals / outcomes (Quarterly Report) | See 10.2 | As above in LCS development work | |
| | to track outcomes, with a view to target audit and | Development NRPF and 16/17 year old homeless dataset | | November 2024 | Performance and Business Intelligence | assurance of the timeliness and effectiveness of the identification and support | NRPF episodes triggered on LCS (New 2024/25) | See 10.2 | As above in LCS development work | |
| | improvement activity | Refresh of Children's and Housing Joint Protocol for 16/17 year old homeless and families with NRPF | AD Early Help and Partnerships | January 2025 | Team | to 16- and 17-year-old homeless | (202 //20) | N/A | Protocol to be relaunched in June | |



| | | | Lead | Target | Dependencies | Quality Assurance | Key Performance | | | RAG |
|------|---|---|--|-------------------------------------|--|--|--|---------|---|-------|
| Ref | Priority | Delivered through | Person(s) | Completion Date | and Key Stakeholders | Indicators | Indicators | Cost | Update | rated |
| 7.9 | End to end review of services provided to children with disabilities, including raising | Specific training programme for staff in the CWD services focusing on CiN / Short Breaks / CP / CiC pathways and communication models | Head of Service for Practice | Available from September 2024 | AD for Education Services Safeguarding Partnership | Routine quality assurance activity (including audits) to provide assurance of the identification and quality of intervention across the partnership for children with disabilities | % of CWD assessment completed within specified timescales (all bandings) (New 2024/25) % of disabled children seen during an assessment, and | See 1.3 | Training programme currently in development to be rolled out to team once phase one reorganisation has been implemented | |
| | awareness across the partnership around the | Re-organisation of the CWD and SEND services (Phase one and two) | Tara Geere, Director of Starting Well | November 2024 | Recruitment of all roles in CWD | and SEND | those seen more than once (New 2024/25) Proportion of CWD | See 1.1 | Launched in April 2024 due for implementation in July | |
| | additional vulnerabilities of children with disabilities and SEND | Review of pathways for Short Breaks and commissioning arrangements | AD Safeguarding and Corporate Parenting | October 2024 | service Schools / Education | | assessments with an outcome of NFA, and those that progress to further intervention or step-down (New 2024/25) | N/A | To be developed as part of LCS developments | |
| Page | | Review of CWD cohort and targeted QA activity as part of review of service | Head of Service for Practice | November 2024 | Providers SEND Parent / Carer Forum | | Proportion of assessments with disability factors identified (New 2024/25) | N/A | In Improvement schedule of Work CIN and CP panel reviewing | |
| 58 | | Development and implementation of SEND and AP Strategy | Head of SEND | September 2024 | Family Information | | Proportion of children with CiN or CP plans and with an EHCP or SEN Support (New | N/A | In development | |
| | | Refresh of LAP SEND Self-Assessment | | March 2025 | Service Manager | | 2024/25) | N/A | Workshops and SEND board reviewing | |
| | | Review and update of SEND Local Offer in conjunction with parents / carers, PCF and young people | | December 2024 | Virtual School | | | £0.002m | Workshops and SEND board reviewing | |
| | | Coproduced workshop with parents on developments required within CWD services | Head of Service for Assessment and CWD | December 2024 | | | | N/A | Workshops being planned | |
| 7.10 | Improve quality and timeliness of child protection conferences | Re-organisation of the IRO service with adequate business support to meet demand | Tara Geere, Director of Starting Well | July 2024 | Safeguarding Partnership Performance and Business | Feedback from children / families with regards to conference experience | % of ICPCs completed within 15 days (children) YTD 2023/24; 66.2% Target; 82% | See 1.1 | Phase one reorganisation successfully launched due for implementation by July | |



| D-(| Bulleville | Dell'armed there exist | Lead | Target | Dependencies | Quality Assurance | Key Performance | 0 | Un data | RAG |
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| Ref | Priority | Delivered through | Person(s) | Completion Date | and Key Stakeholders | Indicators | Indicators | Cost | Update | rated |
| | and reviews including role of the child protection chairs | Recruitment and retention of staff within the IRO service to meet demand. | Service Manager for Standards | September 2024 | Intelligence Team Schools / Education | Attendance and quality of input and analysis from professionals at conferences | % of S47's not resulting in an ICPC YTD 2023/24; 64.2% Target; 50% | See 1.1 | Phase one reorganisation due for implementation by July | |
| | | Review of current processes and pathways to ensure efficient, timely workflow and responses | Child Protection Business Manager | September 2024 | Providers NELFT / BHRUT | Routine audit activity to provide assurance of the timeliness and effectiveness of the quality of child protection plans | % of ICPC that result in a CPP Q4 ChAT; 79% Target; % of RCPC completed | See 10.2 | currently underway as part of the restructure for IRO's and CP chair split | |
| | | Developing clear expectations and practice standards with regards to timeliness and quality of multi-agency contributions | Head of Service for Practice | July 2024 | | CP Panel to provide additional assurance to senior leaders with regards to quality of decision making, threshold application and effectiveness of child | within timescale YTD 2023/24; 98.6% Target; 95% % of child protection minutes shared with family within 21 days of conference (New | N/A | Practice standards in development | |
| Page 59 | | Training for all service areas on roles and responsibilities of the child protection chairs and business support. | Head of Service for Practice | July 2024 | | Protection plans Child protection data set and Power BI reports | 2024/25) % Children who attend or contribute to their child protection conference or review (New 2024/25) | N/A | Review of Processes underway as part of the restructure for IRO's and CP chair split to be linked to the practice standards | |
| | | Understand and make recommendations for actions to reduce the rate of S47 not requiring an ICPC | Head of Service for Practice | August 2024 | | Reduction in S47's not resulting in ICPC | | N/A | Dip sampling and auditing completed in May. Practice observations being undertaken by Senior managers and improvement team. | |
| | | Review of Designated Safeguarding Leads attendance at conferences and reviews as well as information sharing within MASH to support child protection processes | Service Manager for Standards | August 2024 | | | | N/A | LCS reports being developed and CP chair monitoring now in place | |



| | | | Lead | Target | Dependencies | Quality Assurance | Key Performance | | | RAG |
|---------|--|---|--|--------------------|---|--|---|--------------------------------|---|-------|
| Ref | Priority | Delivered through | Person(s) | Completion Date | and Key Stakeholders | Indicators | Indicators | Cost | Update | rated |
| 7.11 | Improved response to children who are privately fostered, including better | Reviewed Statement of Purpose setting out how the authority discharges its duties in relation to the private fostering legislation. | Head of Service for Corporate Parenting | July 2024 | Schools / Education Providers NELFT | Audit activity targeted at children who are privately fostered Partners and practitioners identify children who are | Numbers of children in private fostering arrangements, and length of time known (New 2024/25) % / number children in | N/A | Being reviewed for July | |
| Page 60 | including better identification of those living in such circumstances and awareness raising within the partnership | Action plan with regards to raising public and professional's awareness about private fostering and, the requirements to notify the Local Authority of any actual or planned private fostering arrangements | Partnership and Learning Manager, HSCP | December 2024 | Early Help Partnership Board Corporate Communications Team | privately fostered swiftly and respond accordingly Annual Private Fostering Report to go to the HSCP for scrutiny. Annual reviews of PF carers to ensure they continue to meet PF regulations. | private fostering arrangements visited within last six weeks (New 2024/25) % / number of children who are privately fostered with an active CiN plan and an allocated SW (New 2024/25) | £0.00075m (Design Costs) | 7-minute briefings and awareness raising has commenced including out of school settings and health settings. Termly letters are going to Head teachers / DSLs in education and health settings as part of private fostering response. All private fostering arrangements have been reviewed and further oversight is being undertaken at CIN panel. | |
| | | Action plan with regards to improving awareness, understanding and identification of children in private fostering arrangements within Starting Well and wider Council | Head of Service for Corporate Parenting | October 2024 | | | | As above Design Costs | In development | |
| | | Termly response from schools and health partners on private fostering arrangements | Partnership and Learning Manager, HSCP | September 2024 | | | | N/A | Spring 2024: 42 schools responded; 6 children identified. MASH checking referrals | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated | |
|---------|--|--|--|------------------------------|---|---|---|--|--|---|--|
| 7.12 | Edge of Care response to support children, young people and families to stay together and get the help they need | Review of the Families Together Team to understand impact | AD for Early Help and Partnerships | November 2024 | Permanency Panel CP / CiN Panel IROs and CP Chairs | Quality assurance provides evidence of children in care, or at risk of coming into care, who are successfully reunified with their parents or family members Quality assurance activity evidence that children | Rate of CiC per 10k Q3 2023/24; 44 % of CIC aged under 16 who had been looked after continuously for at least 2.5 years who were living in the same placement for at least 2 years | N/A | To be undertaken once AD in place | | |
| | | Phase 2 of starting well reorganisation to align the Families Together Team and Family Practitioner offer | Tara Geere, Director of Starting Well | November 2024 | Service Manager for MASH and Targeted Support | coming into care in a planned way Audit activity evidence that the stability of children in care placements is being prioritised and promoted | Feb 2024; 66.2% Target; 70% % of CIC with three or more placements during year Feb 2024; 10.4% Target; 11% Children returning home and then rate of repeat | See 1.1 | Structures being developed and implementation due in Autumn | | |
| Page 61 | e 6 | Introduction of Family Support Workers within our Safeguarding Teams, and reduction in use of PKS | AD Safeguarding and Corporate Parenting | August 2024 | Head of Service for Corporate Parenting | Reduction in IRO escalations in relation to drift/delay or increased concerns | interventions Reduction in spend on PKS | See 1.1 | Phase one launch in April with implementation due in July | | |
| 7.13 | Unborn Children at risk of harm are identified in a timely way, and | Further development and relaunch of Pre- Birth Assessment Template and associated processes | Head of Service for Safeguarding | June 2024 | BHRUT - Designated Midwife for Safeguarding | Audit activity targeted at unborn children evidences that processes are initiated earlier to allow improved quality of | Number of pre-birth assessments, and the outcomes of these (New 2024/25) | N/A | The draft pre-birth protocol is being revised for roll out in July. | | |
| | appropriate action taken to safeguard them | Strengthening of the PLO tracker process for unborn children | Court Progression Manager | September 2024 | Head of Service for Corporate Parenting | Head of Service assessment / planning for Corporate Parenting | assessment / planning | % of audits of pre-birth assessments rated Good or above Number of parent and child | N/A | In process, PLO tracking developments being undertaken | |
| | | Delivery of a parent and child commissioning Dynamic Purchasing System | Simon Brown, Commissioner and Project Manager | By April 2025 | Offer | | placements (New 2024/25) | TBC | In process as part of sufficiency work within new commissioning team | | |



8. Children in Our Care

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|------|---|---|--|------------------------------|---|---|---|------|---|--------------|
| 8.1 | Strengthen decision making for children in care to improve outcomes | Clear practice standards and expectations regarding decision making and quality of assessments including timescales | Head of Service for Practice | July 2024 | Service Manager for Standards | Audits evidence impact of supervision and management oversight on progression of child in care plan Evidence of assessments | % of CiC records with supervision in the last two months Feb 2023/24; 57.5% Target; 90% % of CiC with 2+ changes of | N/A | Practice standards in development | |
| Page | | Development of a monthly legal tracking meeting to ensure authoritative action is taken to support planned entry to care where appropriate | AD for Safeguarding and Corporate Parenting | June 2024 | | informing care planning through audit activity Appropriate timeliness of decisions for children to come in to care and evidence of effective threshold application | social worker within the last 12 months Feb 2023/24; 9.1% Target; 25% % of CiC with 3+ placements within the year Feb 2023/24; 10.4% Target; 11% % children who cease to be | N/A | In development | |
| 62 | | Practice fundamentals training, including understanding and application of thresholds | Head of Service for Practice | July 2024 | | | looked after as a result of permanency (Adoption / SGO) Feb 2023/24; 4.2% Target; 12% Number of children who | N/A | Roll out of training due after phase one implementation | |
| | | Embedding consistent and timely reviews for child in care with clear SMART plans focused on permanence and regular updated assessments | Head of Service for Corporate Parenting | July 2024 | | | cease to be looked after because they returned home to live with parent / relative Q3 2023/24; 18/53 | N/A | Roll out of training due after phase one implementation ; interim service manager to start in June 2024 | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|---------|---|--|--|--|---|---|---|------|--|--------------|
| 8.2 | Children and young people in care live in secure and stable homes that best meet their needs and where they feel safe | Comprehensive review of all children in care who are; -Living in foster homes to ensure matching -Living in regulation 24 or 25 placements -Returned home within the last six months -Living in residential children's homes to ensure home is meeting need -Living in supported accommodation Ensure that the Multi- | Head of Service for Corporate Parenting | Commenced May 2024 Embed by September 2024 | All Age Brokerage Team | Targeted dip sampling of the outcomes for children returned home Targeted dip sampling of children subject to Regulation 24/25 placements Oversight and scrutiny at permanency panel Dip sampling of cases discussed at MARP and the impact of the decisions made at the panel | Proportion of CiC in specific placement types Number of children living in semi-independent accommodation Feb 2023/24 (16-year-olds); 5/30 Feb 2023/24 (17-year-olds); 19/48 Children matched long term fostering at panel (New 2024/25 Number of placement support / disruption meetings (New 2024/25 - | N/A | Permanence Panel now in place and reviews of children occurring. Matching panels to be arranged once team is in place. | |
| Page 63 | | Agency Resource Panel (MARP) is effective in securing accommodation and support services that best meets the child's needs, and escalates concerns with regards to sufficiency of suitable accommodation | Panel Chair | October 2024 | NELFT / BHRUT Schools / Education Providers | made at the parter | TBC) Short-term and long-term placement stability % Number of family therapist interventions for CiC (New 2024/25) Number of IRO escalations specific to accommodation / stability (New 2024/25 – TBC) | N/A | MARP in place with agreed TOR. Joint protocol with the ICB is in development | |
| 8.3 | Ensuring Children in Care placed with their parents, are safe and risk assessed with | Review and update all current assessments and placement with parents plans | Head of Service for Corporate Parenting | June 2024 | Permanency Panel Service Manager for Standards | Targeted dip sampling of children placed with parents to provide assurance with regards to quality of decision making and effectiveness of | Number of children in care who placed with parents Feb 2023/24; 9 / 279 % visits to children placed with parents within agreed | N/A | Reviews and updated assessments taking place - Panel planned with DCS chairing in June. | |
| | ongoing assessment and support | Embed Children Placed with Parents review process and ensure appropriate management sign off with appropriate visiting and support arrangements | Head of Service for Corporate Parenting | June 2024 | | management oversight | timescales (New 2024/25) | N/A | Improvement Team oversight and policy review as part of TriX review | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|---------|--|---|---|------------------------------|--|--|--|----------|--|--------------|
| | | Ensure all children placed with their parents' decisions are ratified by the IRO, and presented at Permanency Panel and agreed by AD or DCS | AD Safeguarding and Corporate Parenting | June 2024 | | | | N/A | Panel set for June and then ongoing through Permanence panel | |
| 8.4 | Improving the effectiveness and impact of IRO's on outcomes for children in care | Implementation of ratification of plan for permanency and stability for the child at second CiC review | Service Manager for IRO's / Head of Service for Practice | September 2024 | Head of Service for Corporate Parenting | Evidence of appropriate timeliness and quality of IRO escalations and the subsequent responses from managers Quality assurance activity evidences effective, SMART plans for children | Number / % of CiC with IRO escalations recorded (New 2024/25) Contribution by CiC to their statutory reviews (full breakdown) (New 2024/25) | N/A | Processes being reviewed, implementation as part of phase one reorg split of CP chairs and IRO's by September Policies to be reviewed as part of TriX review | |
| Page 64 | | Ensuring that IROs ratify transition planning and consideration within the pathway plan by 15 years 9 months | Service Manager for IRO's | September 2024 | | in care that are focused on securing permanence Timely preparation for independence for young people leaving care | | See 1.1 | As above | |
| | | Expectations and standards with regards to IRO escalation, and resolving disputes | Head of Service for Practice | June 2024 | | evidenced through auditing | | N/A | Practice standards in development – Escalation policy being reviewed. | |
| | | Add additional capacity to the IRO management to support improvements | Head of Service for Practice | June 2024 | | | | £0.130m | Interim Service manager appointed | |
| | | Clarifying and developing QA role of IRO within practice standards | Head of Service for Practice | July 2024 | | | | N/A | Practice standards in development | |
| 8.5 | Plans for children in care are thoroughly and independently reviewed with the involvement. | Review of CiC LCS process and expectations with regards to practice standards | Head of Service for Practice Head of Service for Corporate Parenting | October 2024 | Schools / Education Providers NELFT Head of Service for Practice | The timeliness and quality of CiC review minutes to practitioners and family members | % of minutes being recorded on the system within 20 days of CiC review (New 2024/25) | See 10.2 | In development as part of phase one development of corporate parenting service | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion | Dependencies and Key | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
|-----------|---|---|--|----------------------|--------------------------------|---|--|------|---|--------------|
| | as appropriate, of parents, carers and other adults who know them well | Improve quality and timeliness of child in care review minutes through supervision; audit and training. | Senior Corporate Parenting Coordinator | October 2024 | Stakeholders | Consistency in the presentation and content of CiC review minutes | % of review minutes shared with family within 20 days of review (New 2024/25) | N/A | Development with IRO service taking place as part of the phase one changes to the service | |
| | | IRO's make effective use of Dispute Resolution Process where plans are not being effectively and timely progressed for children in care. | Service Manager for IRO's | September 2024 | | | | N/A | Practice standards in development – Escalation policy being reviewed. | |
| 8.6 Pa | Permanency planning is appropriate, ambitious and focused on ensuring that all children in care | Re-establish Permanency Panel to thematically review all children in care, ensuring effective planning to avoid drift and delay. | AD for Safeguarding and Corporate Parenting | April 2024 | Business Support Team Managers | SWs, TMs and IROs are consistently focused on achieving and securing permanence planning for children and young people | Proportion of children returning to family home or to live with relatives, in line with permanency plan (New 2024/25) | N/A | Panel now in place | |
| ıge 65 | have stable, loving homes | Establish practice standards for early permanence, including ensuring all children have a clear plan for permanence by week five of their care journey. | Head of Service for Practice | July 2024 | | SWs, TMs and IROs are consistently considering and evaluating whether children can return home Quality and effectiveness of assessments of connected and kinship | Proportion of children with a permanency plan for adoption or SGO Q3; 4% Target; TBC Number of children with repeat care episodes Q4 ChAT; 10% Target; | N/A | Practice standards in development linked to development of Corporate Parenting service as part of phase one restructure | |
| | | Improving quality and frequency of supervision for social workers in children in care teams | Strategic Improvement Leads | December 2024 | | carers | Proportion of children in care who remain in care until their 18 th birthday Feb 2023/24; 90.6% Target; 80% % of children achieving longterm stability | N/A | Mentoring to team managers has commenced. Training roll out for supervision planned as part of SLIP practice model training Supervision templates have been revised. Roll out of LXP for personal supervision has also taken place. | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion | Dependencies and Key | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
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| Itel | Thomy | | 1 013011(3) | Date | Stakeholders | marcators | mulcators | | Drastics standards | rateu |
| | | Develop practice standards and expectations for achieving long term permanency, role of Fostering Panel and ADM ratification | Head of Service for Practice | July 2024 | | | | N/A | Practice standards in development linked to development of Corporate Parenting service as part of phase one restructure | |
| 8.7 | Children in care are supported to make good educational progress, and their | IRO input into PEPs prior to agreement and to be reviewed as part of CiC review | Service Manager for IRO's | October 2024 | Education Services - Admissions and Inclusions Team Schools / Education | Quality of PEPs to be subject of targeted audit activity Evidence of appropriate use of Pupil Premium Grant | Proportion of CiC with an up to date PEP Feb 24; 100% Target; 100% Number of CiC subject to exclusions or managed moves (TBC VS) | N/A | PEP compliance is 100% - audit of quality of PEP's to take place in September 2024 | |
| Page | achievements are celebrated | Annual celebration event by Virtual School; Children in Care Awards | Assistant Head Teacher of Virtual School | December 2024 | Providers Education Strategic Partnership | Targeted audit activity providing assurance that our CiC are consistently well supported with swift access to educational provision | Number of Children in Care with EHCPs March 2024; 13/280 (LCS data) | £0.002m | Scheduled for later in Autumn | |
| . 6 6 | Children in care have their physical and mental health needs identified and met | Improve timeliness of initial health assessments / review health assessments by improving process by which health colleagues are notified of a child coming into care | Head of Service for Corporate Parenting | September 2024 | Integrated Care Board NELFT leaders | Targeted audit activity providing assurance that our children in care and care leavers receive timely and well targeted response to their identified health needs | Proportion of all CiC with up- to-date health assessments and reviews Feb 24; IHA's 94.9% RHA's; 92.5% Target 90% CiC below school age with | N/A | New health posts created as part of Phase one reorganisation to be implemented by July 2024 | |
| | | Improve timeliness of completion of SDQs, and embed practice standards with regards to response when scores are concerning | Head of Service for Corporate Parenting | September 2024 | Talent Team / HR Re-org Phase One | Assurance through IRO scrutiny at child in care reviews that health needs are being identified and met | an up-to-date medical assessment Feb 24; 79.1% Target; 90% % of CiC aged 4-17 with an SDQ completed within the | N/A | | |
| | | Ensure that the practice standards give clear guidance with regards to the processes and timescales for children receiving medical assessments and reviews | Head of Service for Practice | July 2024 | NELFT LAC Health Team | | last year Feb 24; 70% Target; 85% % of above with a score that is concerning, and how many received a CAMHS referral (New 2024/25) | N/A | Practice standards in development linked to development of Corporate Parenting service as part of phase one restructure | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
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| | | Recruitment to 2x Health Coordinator posts in the corporate parenting service | Head of Service for Corporate Parenting | July 2024 | | | | See 1.1 | Developed as part of Phase one to be implemented by July 2024 | |
| 8.9 | All children in care are offered access to mentors, advocates and independent visitors (IV) | Volunteer, Advocacy and IV Lead to work with CiC teams, and directly with children and young people in care, to promote our offer, with a view to increasing uptake | Service Manager for Early Help and Targeted Family Support | December 2024 | Service Manager, Children in Care Team Managers, Children in Care Head of SEND | Evidence of input and impact of mentors and IVs in raising the profile of child's voice, wishes and feelings in assessments, plans and reviews Quality assurance activity to provide assurance that | Proportion of children in care who have been offered, and then those who have been allocated a mentor or IV Feb 24; 6.7% Target 10% Advocacy Service Report Annual Report | N/A | Developed as part of Phase Two implementation by December 2024 | |
| Page | | Independent reviewing service to ensure advocacy offer is considered for all children in care | Service Manager for Standards | September 2024 | | the voices of children in care are consistently reflected in assessments and plans and they have access to advocates and IVs | · | N/A | Developed as part of Phase one implementation of split between IRO's and CO chairs | |
| 67 | | Improved access to Short Breaks for those children and families who would benefit from them | Head of Service for Assessment and CWD | March 2025 | | | | N/A | Being developed as part of the review of short breaks in the CWD team | |
| 8.10 | Children in Care are seen regularly and seen alone by | On-going scrutiny of data on timeliness and frequency of visits | Head of Service for Corporate Parenting | April 2024 | Service Manager, Children in Care | Evidence of IRO scrutiny at child in care reviews | % of Children in Care visited within the last six weeks March 24; 74% Target; TBC | N/A | Power BI and monthly performance meeting in place | |
| | their social worker. Children understand the reasons why they are in care and their plans in an age appropriate manner. | Setting practice standards with regards to frequency of visits in relation to risks and needs | Head of Service for Practice | July 2024 | Team Managers, Children in Care | Audit activity to evaluate the timeliness and quality of social work visits to children in care | | N/A | Practice standards in development alongside development of Corporate Parenting Service as part of phase one restructure | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
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| | | Improving quality of management oversight / supervision in informing frequency and quality of visits | Strategic Improvement Leads | December 2024 | | | | N/A | Planned delivery of training to managers and regular reporting on performance in place | |
| | | Briefings, learning programmes, mentoring and exemplars with regards to quality of visits, and good case recording | Head of Service for Practice | July 2024 | | | | N/A | Improvement team are developing training linked to the development of the Corporate Parenting service as part of phase one restructure | |
| Page 68 | Recruitment, assessment, training and support of Foster Carers is effective and robust | Improved quality of support plans for Foster Carers, ensuring they are informed by recommendations shared by Fostering Panel | Head of Service for Corporate Parenting | October 2024 | Fostering Panel Service Manager, Fostering | Quality assurance activity evidences that support plans for foster carers are enabling stability and supporting retention | Number of In-House Foster Carers Feb 2023/24; 89 Number of new In-House Foster Carers Feb 2023/24; 6 | N/A | Improvement team to work with the Fostering teams and develop training to be delivered in October 2024 | |
| | | Review of practice standards with regards to quality and frequency of visits to foster carers | Head of Service for Practice | July 2024 | Innovation and Improvement Team | | Number of established Foster Carer Constellations via Mockingbird Programme | N/A | Practice standards in development | |
| | | Review of foster carers to ensure maximum utilisation of available approved carers | Head of Service for Corporate Parenting | July 2024 | | | % of children in care living with in-house foster carers Feb 2023/24; 51.3% Target; 50% | N/A | Review has commenced and report will be completed by July 2024 | |
| | | Launch of Mockingbird Programme to support stability and foster carer retention | Head of Service for Corporate Parenting | March 2025 | | | | £0.155m (DfE grant) | Currently in development with the Fostering Network as part of the DFE North London Fostering Pathfinder | |



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| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG rated |
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| 8.12 | Improved co- production and engagement with Children in Care to improve their participation and contribution in their own journey as well as inform service delivery and aid improvements | Review of Children in Care Council to increase participation and impact Review and re-launch our pledge to Children in Care | Service Manager for Early Help and Targeted Family Support Head of Service for Corporate Parenting | December 2024 March 2025 | Youth Influence and Participation Team Innovation and Improvement Team | QA activity to evaluate the quality and impact of life story work with our Children in Care Evidence of children and young people's awareness and understanding of life story work, children in care council and our pledge | Proportion of staff trained in use of Mind of My Own App Number of Children in Care with Mind of My Own accounts, and those that have submitted statements % of CIC engaged with the CICC say it Louder | £0.00075 (Design Costs) | Linked to Phase one development of the Corporate Parenting service and phase two engagement service Dependent on Phase one development of the Corporate Parenting service and phase two engagement service | |
| P | | Improve Life Story Work via implementation of Care Life App | Head of Service for Corporate Parenting | March 2025 | | | | £0.004m | Development of the Corporate Parenting service and procurement. | |

9. Care Experienced Young People

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| 9.1 | Ensuring that young people living in supported accommodation, are doing so appropriately and that risks to their safety or welfare are assessed and managed well. | Review of all 16/17 and 18+ placed in supported accommodation to assess appropriateness and ensure updated risk assessments and visiting schedule to meet assessed needs | Head of Service for Corporate Parenting | September 2024 | All Age Brokerage Team Placement Providers Assistant Director of Housing | focusing on the quality of visits and risk assessments for children and young people living in supported accommodation young recommendation young people living in supported accommodation young people living in the property of the property | Proportion of children and young people in semi-independent accommodation with an upto-date risk assessment, that is reviewed in line with any change in circumstances (New 2024/25) | N/A | Review has taken place and will be ongoing at the Permanence and Transition panels Audit to take place in August 2024 | |
| | | Embed practice standards with regards to visits to those in supported accommodation and improving the quality of risk assessments | Head of Service for Practice | July 2024 | Demand Innovation and Improvement Team | assurance with regards to the quality of service being provided by placement providers (Commissioning Service) | | N/A | Practice standards in development | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
|-----------|---|---|---|------------------------------|--|--|---|------|--|-----|
| | | Re-launch and embed Joint Starting Well and Living Well Housing Protocol for Care Leavers | Head of Service for Corporate Parenting | November 2024 | | | | N/A | Protocol has been revisited and is due for relaunch following the implementation of the Corporate Parenting service - Development of LCS pathways being developed. | |
| P | | Review of Dynamic Purchasing System for supported accommodation providers | Independent Commissioner and Project Manager | By December 2024 | | | | TBC | In progress. Meetings with providers being set up by the Integrated all Age Brokerage placements team | |
| age 🛭 🖁 O | Improve engagement with care experienced young people, ensuring that the level of engagement with individual young people leaving care reflects their known needs and preferences | All care experienced young people are given opportunity to access mentors via Future Choices Programme | Head of Service for Corporate Parenting | October 2024 | Service Manager for Early Help and Targeted Family Support Service Manager for Leaving Care | Audit activity to evaluate the quality and timeliness of visits or engagement with care experienced young people Ongoing tracking of care experienced young people who are not in touch, and the reasons for this | % of care leavers aged 17- 18 who are in touch; Q4 ChAT; 86% Target; TBC % of care leavers aged 19- 21 who are in touch Q4 ChAT; 95% Target; TBC Number of care experienced young people who are active participants of The Cocoon Management Board | N/A | Relaunch following the implementation of the Corporate Parenting Service | |
| | | Establish practice standards with regards to effective engagement with young people, and the expectations with regards to keeping in touch | Head of Service for Practice | July 2024 | | | | N/A | Practice standards in development | |
| | and prototolides | Review of The Cocoon Management Board to improve uptake and impact | Head of Service for Corporate Parenting | October 2024 | | | | N/A | Work as part of the implementation of the Corporate Parenting service | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
|---------------|---|--|--|------------------------------|--|--|---|---|--|-----|
| 9.3 | Ensuring all young people in care and leaving care have effective pathway plans that are dynamic and reviewed regularly | Identifying all children without a pathway plan and prioritising action to have this in place | Head of Service for Corporate Parenting | Starting from May 2024 | Service Manager for Leaving Care Social Care Systems Team | Quality assurance activity to evaluate the quality and impact of pathway plans and the timely review of pathway plans. To ensure that young people are routinely engaged and actively encouraged to participate in the development and review of their plan | % of young people who participated in the development of their pathway plans. (New 2024/25) | N/A | Improvement team are targeting work with managers and practitioners to focus on care and pathway planning. Training being developed to roll out in Autumn 2024 | |
| | Young people are fully involved in co-producing, developing and reviewing their plan | Understanding and resolving system issues that are causing delay in progressing the plans | | June 2024 | | | | See 10.2 and SLIP costs to be advised | LCS review to take place as part of SLIP support from Hertfordshire Council | |
| Page | | Establish practice standards with regards to effective engagement with young people in developing and owning their plan | Head of Service for Practice | July 2024 | | | | N/A | Practice standards in development | |
| 71 9.4 | Young people leaving care are helped to understand their rights, entitlements and responsibilities | Compliance with all elements of the London Innovation and Improvement Alliance Care Leaver Compact | Head of Service for Corporate Parenting | October 2024 | Service Manager for Leaving Care Innovation and Improvement Team | Impact of complaints to be evaluated through quality assurance activity Quality assurance activity provides evidence of awareness and understanding of leaving care local offer | evidencing increased uptake | N/A | Work to be developed as part of the implementation of the Corporate Parenting service new Leaving Care teams | |
| | | Increase awareness, understanding and uptake of local offer, with our care experienced young people and staff groups with a plan in place to ensure all the information provided is kept current | Head of Service for Corporate Parenting Family Information Service Manager | October 2024 | Service Manager for Early Help and Targeted Family Support | | N/A | Work to be developed as part of the implementation of the Corporate Parenting service new Leaving Care teams | | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| 9.5 | Care experienced young people have their physical and mental health needs identified and met | Improve understanding of mental health needs for our care experienced young people, and develop a response to deliver what they tell us they need | Head of Service for Corporate Parenting | October 2024 | NELFT – Clinical lead LAC health team and Designated Nurse for Safeguarding Children Director of Ageing Well (DASS) Head of Service for Assessment and CWD Head of SEND Service Manager for Leaving Care | Care experienced young people have individual health passports tailored to their needs. Timely access to adult mental health services, for those who need it, and referrals are made to relevant services which meet their needs Impact and oversight of Leaving Care Transitions Panel | % of care experienced young people who have access to their health passport (New 2024/25) % of care experienced young people accessing mental health services (New 2024/25) % of care experienced young people aged 18-25 who have EHCPs (New 2024/25) | N/A | Work to be developed as part of the implementation of the Corporate Parenting service new Leaving Care teams | |
| | | Ensuring all care experienced young people have access to, and understanding of, their health passports | Senior Corporate Parenting Coordinator | October 2024 | | | | N/A | Work being developed as part of the phase one restructure to add health posts | |
| Page 72 | | Review of process for the transfer from children's services to adult services, for both social care and health services, including Transitions Panel and develop an action plan to respond to any improvements | Head of Service for Corporate Parenting | December 2024 | | | | N/A | Workshops being developed and restructure to a transitions team being developed | |
| | | Health zoning meeting to address and escalation processes and recording alongside CIC health Pathways | Head of Service for Corporate Parenting | October 2024 | | | | N/A | Work with the LAC health teams planned for September alongside the implementation of the Corporate Parenting service | |
| 9.6 | Young people leaving care are supported to be ambitious and aspirational about their education and employment choices | Introduce a Council offer of apprenticeships for young people leaving care | HR Talent Team Innovation & Improvement Team | September 2024 | Schools / Education Providers Prospects Virtual School Corporate Parenting Service Managers | Targeted audit activity providing assurance that our care leavers are consistently well supported with swift access to educational, employment and training opportunities | Number of care experienced young people employed in Havering Council Apprentice roles Target; 5 % of care experienced young people aged 19-21 who are engaged in education, employment or training Target; 60% | N/A | Work being undertaken both within the council and with partners such as the NHS | |
| | | Engagement work with young people to understand what barriers there are to | Head of Service for Corporate Parenting | July 2024 | | | | N/A | planned work for September in line with the implementation of | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| | | accessing education and employment, and what they need to overcome these | | | | | % of care experienced young people aged 19-21 who are in higher education Target; 10% | | the Corporate Parenting service new Leaving Care teams | |

Theme Three; Removing Barriers Strategic Lead (s); Head of Innovation and Improvement

10. Use of performance Data

| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| Page | Enhance understanding of performance data | Training for managers and supervisors in accessing, analysing and understanding performance data in day-to-day practice | Performance and Business Intelligence Team Manager | November 2024 | Performance and Business Intelligence Team | Early identification and rectifying of potential areas of concern Greater use of | Proportion of starting well managers who have undertaken initial and refresher | N/A | Training being developed for roll out in September | |
| 73 | in day-to-day practice conversations, and the understanding of the role this plays in improving outcomes, | Ensuring routine narrative is provided against monthly data set and that any gaps or issues in data are identified and rectified | Head of Service for Safeguarding Head of Service for Corporate Parenting | April 2024 | Assistant Directors and Heads of Service Head of Service for Practice | performance data in management discussions and supervision leads to reduction in drift and delay for individual children | training | N/A | Updated performance report has been developed and routine monthly meetings are in place chaired by the DCS | |
| | Improve the way we use data to understand and respond to emerging needs | Develop heat map within Power BI of known needs across SEND and Social Care to enable better targeting of services and forward planning | Head of Innovation and Improvement | December 2024 | | | | N/A | Developments being scoped as part of the SEND action plan | |
| 10.2 | Review of all processes and forms within our Case Management System (Liquid Logic) to reduce | Partnering with Hertfordshire CYPS to learn from best practice | Tara Geere, Director of Starting Well | Audit October 2024 | Social Care Systems Team Business Intelligence and Performance Team | TBC based on identified work required | TBC based on identified work required | £0.055m LCS costs alongside Hertfordshire SLIP request | Meeting with SLIP partners has been arranged and awaiting confirmation of support and costs | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| | inefficiencies, securing investment to do so where necessary. | Review and update approach for selected safeguarding partners to have read-only access to our case management system, thus improving information sharing | | Implementati on March 2025 | Partnership and Learning Manager, HSCP GDPR and IG team | | | SLIP work being developed costs to be Advised | GDPR and IG to be consulted and work regarding access to be put in place by the Autumn. | |
| 10.3 | Review use of | Review allocation of 4G laptops for case holding staff and managers | Tara Geere, Director of | | Mark Duff, ICT Director | Feedback from staff and managers with regards | TBC based on identified work | LXP see 3.3 | Pilots being developed | |
| | technology, equipment and management systems to support practice and oversight of | Review / audit of technology and identify gaps | Starting Well Head of Innovation and | March 2025 | HR Business Partner | made | Proportion of staff / managers who are actively using Mind of My Own with children they are working with | Further costs TBC | Audit of technology to be developed | |
| Page | | Review of management systems (Fusion, LXP) to give greater management oversight of practice | Improvement | | L&OD Team | | | | Training to staff to support understanding of systems to be rolled out in October | |
| 10.4 | Review of tools and methodologies for engaging with children and young people | Audit of Mind of My Own usage and impact, and make recommendations for improvement as required | Service Manager for Early Help and Targeted Family Support | October 2024 | Youth Influence and Participation Team Quality Assurance | work and management direct work tools managers who are actively using Mind of My Own with | | See 6.2 | Review to take place in September and training roll out to staff re Mind of My Own | |
| | | Introduction of Direct Work Boxes for all case holding teams | AD for Safeguarding and Corporate Parenting | June 2024 | Team Head of Service for Practice | | £0.003m | Direct work champions being identified to roll out tools | | |
| 10.5 | Develop a robust Starting Well Communications | Monthly Directors Briefings / Vlog | Tara Geere, Director of Starting Well | April 2024 | AD for Education Partnership and Learning Manager, HSCP Mechanisms are in place to receive and respond to feedback (you said, we did) | Number of people accessing the briefings, vlogs and | N/A | Now in place | | |
| | Plan for both internal staff and external partners | AD Let's Talk about Children Weekly Briefing | AD for Safeguarding and Corporate Parenting AD Early Help and Partnerships | June 2024 | | Mechanisms are in place to receive and respond to feedback | newsletters | N/A | In development for roll out in June 2024 Regular all Council and Starting Well staff briefings have | |



| Ref | Priority | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| | | Quarterly Starting Well newsletter to all safeguarding partners with service updates and developments | Tara Geere, Director of Starting Well HSCP Business Manager | October 2024 | | Open and transparent communications increases levels of trust, leading to high support, high challenge across the professional network | | N/A | In development with the HSCP | |
| Page /5 | Glidiod | Implementation of service specific administrator and coordinator roles as part of Phase One and Phase Two of Starting Well reorganisation, followed by successful permanent recruitment to these roles | Tara Geere, Director of Starting Well | October 2024 | HR / Recruitment Innovation and Improvement Team | Improved efficiency with regards to the organisation and minute taking of meetings within the service e.g. strategy meetings and child protection conferences, and improved quality of minutes Social Workers and Managers report that they are spending less time on administrative tasks, enabling more space to focus on social work practice | Proportion of administrative and support roles that are recruited to permanently | See 1.1 | Being developed as part of phase two restructure | |
| 10.7 | Development of AI apps to support managers and staff | Creation of a People Directorate AI board and development of AI apps to support managers and staff with recording | Barbara Nicholls, Strategic Director of People Tara Geere, Director of Starting Well | June 2024 | ICT GDPR / IG team | Supervisions evidenced in case recording Improved case recording in audits | % of supervisions completed within appropriate timescales | TBC; AI costs including Co- pilot licence costs (See 10.3) | Development of an Al board being scoped. Pilot of Co- pilot launched with Director use in May | |
| 10.8 | Embed use of workforce planning tools | Robust use of quarterly workforce planning cycle with HR to produce workforce data that supports the Starting Well workforce strategy System generated staffing dataset | PSW Children's Talent Manager HR operations | Implement and embed by October 2024 | AD/ HOS/ Service managers and Team Managers in Starting Well | Future Vacancies HR Workforce Succession plans | Future Vacancy dataset | £0.0007m | Foresight workforce planning platform has been commissioned and training to staff planned in September r | |



Theme Four; Governance, Leadership and Management Oversight **Strategic Lead**; Tara Geere, Director of Starting Well

| Ref | Action | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
|--------------|---|---|---|---|--|--|---|--|---|-----|
| 11.1 Page 76 | | Growth money added by Havering Council - £11.2M Government grant funding – social care - £2m Improvement Plan additional corporate funding circa £2.3m - request to DLUC DfE Improvement Grant - £0.352m Mockingbird contribution £0.155m And SLIP contribution £0.164m | Tara Geere. Director of Starting Well Andrew Blake- Herbert, Chief Executive | April 2024 April 2024 July 2024 June 2024 | Elected members and corporate centre S151 officer | Growth in teams will reduce caseloads and improve quality of practice and management oversight | As above re caseloads % Supervisions in timescales Reduction in overspend | £5.011m improvement cost Offset by DfE Improvement Grant – in total of £0.671m Leaving £4.3m costs to Havering | 2024- 2025 growth money allocated Fully costed improvement plan developed. Full Council sign off re costs in July 2024. Monitoring of agency costs against budget ongoing. | |
| 11.2 | Improve engagement with and impact of | Refresh and relaunch Quality Assurance Framework, and ensure this is shared with our partners | Head of Service for Practice | October 2024 | Starting Well Management Team | Increased participation of social workers and managers in audit activity. Increased participation of children, young people | Reduction in number of repeat inadequate audit outcomes Increase in the number | N/A | Completed – and further revision due in October 2024 | |
| | quality assurance activity across all service areas | Develop clear guidance within practice standards on roles and responsibilities with regards to Quality Assurance | Head of Service for Practice | June 2024 | | and families in audit activity Moderation to reflect increased understanding of audit grade descriptors | of audits that are moderated by senior managers Reduction in the number of audits where the | N/A | Practice standards in development | |



| Ref | Action | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
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| | | Embed routine training programme with regards to undertaking quality assurance for current, new and aspiring managers and supervisors | Head of Service for Practice | September 2024 | | demonstrated by a decreasing number of audit judgements being changed at moderation | grade is changed following moderation | N/A | Training in development for roll out in September | |
| 11.3 | Review and improve our corporate parenting approach, ensuring that we have an effective strategy and corporate parenting panel which raises awareness of corporate parenting responsibilities across safeguarding partnership and wider Council | Co-produce our updated Corporate Parenting Strategy with care experienced children and young people, wider council and safeguarding partnership | Head of Service for Corporate Parenting | March 2025 | Say it Louder Forum (CICC) The Cocoon Management Group Corporate Parenting Panel Innovation and Improvement Team | Annual Corporate Parenting Report evaluates effectiveness of the Council and partner's delivery of services for children in care and care experienced young people. | Publication of Corporate Parenting Strategy | N/A | LGA audit to take place followed by restructure of the CIC teams and EH participation team. By November | |
| <u> </u> | | Engage with LGA support programme to improve the effectiveness of our corporate parenting offer, including the undertaking of the corporate parenting self-assessment | AD for Safeguarding and Corporate Parenting | July 2024 | | Corporate Parenting Panel oversees the Corporate Parenting Strategy and promotes our pledges for children in care. | | N/A | DCS and AD have met with the LGA and self-evaluation has started | |
| | | Embed improved template for supervision in case management system | Strategic Improvement Leads | June 2024 | Social Care Systems Team | Quality of reports to permanence panel, child protection panel, child in need panel and HARM | % of supervisions completed within expected timescales (all case types) | N/A | Developed and currently in the LCS test system | |
| 11.4 | Improve quality and consistency of management oversight and supervision | Training for all managers on the use of LXP for monthly personal supervision | Learning & Organisational Development Manager | September 2024 | Starting Well Senior Management Team Starting Well Team Managers | ng Well Panel Pane | Feb 2023/24 CP (1 Month); 55.1% CiC (2 Months); 57.5% CiN (2 Months); 71.2% LC (3 Months); 50.9% Reports from LXP on proportion of staff receiving monthly supervision N/A | See 3.3 | Training due as part of the Improvement team and Systemic training roll out from July | |
| | | Review and relaunch Supervision Policy/Strategy | Head of Service for Practice | July 2024 | | | | N/A | Template developed and policy reviewed ready for relaunch | |



| Ref | Action | Delivered through | Lead Person(s) | Target Completion Date | Dependencies and Key Stakeholders | Quality Assurance Indicators | Key Performance Indicators | Cost | Update | RAG |
|------|---|--|---|------------------------------|--|--|-------------------------------|------|--|-----|
| 11.5 | Review Starting Well Governance structure, ensuring clear routes of escalation and decision making points Delegation and Parking panels and bo interface with to governance st Review of all of panels and bo interface with to governance st CAMHS Strate the Safeguard | Develop new Scheme of Delegation and Delegated Authority | Tara Geere, Director of Starting Well | September 2024 | Safeguarding Partnership NELFT / ICB | Quality assurance activity evidences clear understanding of decision making and escalation routes, and that every effort is made to reduce drift and delay for the child | | N/A | New Head of Innovation and Improvement starts in June and will lead on this work | |
| | | Review of all operational panels and boards and interface with wider governance structure | Head of Innovation & Improvement | July 2024 | | | | N/A | As above for new Head of Innovation and Improvement | |
| | | Refresh and relaunch CAMHS Strategy across the Safeguarding Partnership | Tara Geere, Director of Starting Well Luke Burton, | March 2025 | | | | N/A | Work has started with the NEL ICB | |
| | | . 3.11.5.5.1. | Director of Place Based Partnership | | | | | | | |





Inspection of Havering local authority children's services

Inspection dates: 11 to 22 December 2023

Lead inspector: Claire Beckingham, His Majesty's Inspector

| Judgement | Grade |
|--|---------------------------------|
| The impact of leaders on social work practice with children and families | Inadequate |
| The experiences and progress of children who need help and protection | Inadequate |
| The experiences and progress of children in care | Inadequate |
| The experiences and progress of care leavers | Requires improvement to be good |
| Overall effectiveness | Inadequate |

Since the last inspection in June 2018, when services for children in the London Borough of Havering were judged to be good overall, the progress children make, their experiences and the quality of the services they receive have significantly deteriorated. Poor management oversight and supervision across social work teams, coupled with a weak reviewing service, have led to widespread drift and delay for too many children. The majority of social workers in Havering have complex and high caseloads. These combined weaknesses have led to a small number of children remaining at risk or experiencing harm for too long.

The recently permanently appointed director of children's services (DCS) has quickly identified the areas that need to improve and has ensured that leaders have an accurate appraisal of the quality of service provision. With the support of corporate and political leaders, work is under way to strengthen services. While the scale and nature of the necessary improvements are well understood, and plans for improvement are in development, this is within a challenging context of increasing demand linked to marked growth in Havering's child population. Substantial resources are needed to deliver core statutory services. Services have been deteriorating over several years and only recently has action begun to address this.



What needs to improve?

- Further corporate and political investment in children's services, alongside increased social work capacity and consistency.
- The quality and consistency of management oversight and supervision.
- The oversight of, and the response to, vulnerable children who are privately fostered, children living at home under placement with parents regulations and children in supported accommodation.
- The quality and timeliness of social work assessments.
- The quality of planning and subsequent monitoring and review of plans for children in care, children in need and children subject to child protection plans, so that children achieve safety and permanence without delay.
- The quality of children's and care leavers' case records.

The experiences and progress of children who need help and protection: inadequate

- 1. Services for children and families in Havering who are in need of help and protection have declined since 2018, and weak practice is prevalent in longer-term work. The quality of practice in the assessment service and longer-term teams, including with disabled children, is not consistent. Some children benefit from committed social workers who are successfully improving children's safety and outcomes, but this is not the case for many children. Changes in social worker, high caseloads and a lack of management oversight impact on the quality of assessments, planning and interventions. Because of these factors, the delays in children's circumstances improving are widespread. The response to private fostering is particularly weak. Appropriate checks and risk assessments are not evident, and children are often not visited or seen at the required frequency. Leaders cannot be assured of the safety of children living in these arrangements. Early help and work in the multi-agency safeguarding hub (MASH) are stronger.
- 2. Most families receiving early help benefit from the support they receive, with a range of services making a difference to children's lives. A small number of children wait too long for support to be provided. As a result, some of these children experience statutory intervention that may have been avoided had the support been provided earlier.
- 3. The MASH is responsive and effective. Experienced and professionally curious social workers collect and evaluate information quickly and competently. They consider and record consent in the majority of cases, and historical information is appropriately considered to inform risk assessments. This means that risks to children are well understood and responded to appropriately. Management



oversight is evident at all stages within the MASH. Partnership-working in the MASH is effective and the co-location of services is a strength, with good information-sharing and early identification of urgent matters leading to a timely response for children at risk of harm.

- 4. When allegations of significant harm come into the MASH, strategy meetings are convened quickly and usually include all the relevant agencies. For children who are already open to statutory services, there is often a delay in strategy meetings being held, due to police capacity.
- 5. A significant minority of initial child protection conferences take place outside timescales due to insufficient capacity in children's services. In these instances, the quality and impact of interim safety planning are not consistent, and some children are not safeguarded effectively while awaiting conference.
- 6. For a small number of children, there are delays in their needs being assessed. Social worker availability and delay at the point of transfer between teams contribute to this. As a consequence, these children are left in a situation of unassessed risk for a number of weeks and can continue to experience harm.
- 7. The quality of assessment is inconsistent. Stronger assessments are timely, and children are seen promptly and frequently to understand their views and experiences. Weaker assessments take too long, children are often only seen once and there is a lack of curiosity, understanding and analysis of the child's world. This, as well as some assessments not being updated when children's circumstances change, hinders effective planning and safeguarding.
- 8. Some children, particularly more recently, benefit from creative direct work and relationship-building from thoughtful and curious social workers who know them well. For other children, changes in social worker have contributed to drift and an incomplete understanding of their experiences.
- 9. The quality of child-in-need and child protection plans is highly variable. Too many child protection plans are not clear about who is doing what and by when. Some are too long and do not focus on what actions should achieve for children. It is not always clear to parents, professionals or workers what the most important concerns are. While core group and review meetings take place, they do not always make a difference for children. A lack of management oversight, ineffective and infrequent supervision, and a lack of escalation from child protection conference reviewing officers contribute to this.
- 10. When children's lives are not improving, Public Law Outline (PLO) preproceedings are initiated. Some children wait too long for these to be initiated and others are subject to these interventions for too long. For the most recent escalations into pre-proceedings, assessments have been commissioned in a more timely way.



- 11. The quality and impact of return home interviews, an area for improvement in 2018, remain variable. Recent interviews undertaken by two newly appointed return interviewers show an improvement in the timeliness and quality.
- 12. There is a clear protocol in place for children aged 16 and 17 who Havering has established to be homeless. These children are informed of their rights and accommodated swiftly in appropriate placements. Data in respect of all those who present as homeless is not sufficiently collated to track the experiences and outcomes reliably.
- 13. Disabled children in Havering receive an inconsistent service. Some families wait too long for an assessment before they receive a service, including those seeking to access short breaks. Social workers see disabled children regularly and at the frequency they need. Some disabled children's lives improve because of the help and support they receive. For others, there are delays in improvements being achieved.
- 14. The out-of-hours service, hosted by another London local authority, responds to children's and families' needs in a timely and proportionate way.
- Local authority designated officer arrangements in Havering are effective in managing allegations against professionals who work with children in a timely and robust way.
- 16. The local authority maintains clear oversight of children receiving elective home education. If concerns arise, they are dealt with swiftly and effectively. This includes concerns about children's safety or welfare. Leaders work effectively with a range of partners, including schools, the schools admissions team and children's social care, to swiftly identify children missing education. Leaders quickly and appropriately escalate concerns if children may be at risk or vulnerable.

The experiences and progress of children in care: inadequate

- 17. The quality of social work practice for children in care is variable, and too many children have a poor experience. Children return to the care of their parents without having risks assessed or mitigated and these plans are not always endorsed by senior managers. The safety and well-being of older highly vulnerable children in supported accommodation are not sufficiently monitored by social workers and their managers.
- 18. Some children do not come into care soon enough. They continue to experience harm in their home and, as a result, enter care in an emergency. This is an unsettling experience for children and makes it harder for them to be matched to the most appropriate placement.
- 19. Children have too many changes of social worker and, for these children, visits are not consistently purposeful or always at the frequency they require to form a trusting relationship with their new social worker. Practice when social



workers visit children is variable. In weaker examples, there are gaps in visits taking place or records are missing. Social work visits to children lack purpose. Some are completed by duty social workers and are of particularly poor quality. In stronger examples, visits are purposeful and based on what children would like and in a venue of their choosing. Creative and regular direct work is taking place with some children to capture their experiences of their journey in care.

- The quality of care planning and reviews is poor. This means children's plans 20. lack clarity or timely implementation, including for children subject to court proceedings, who wait too long for their permanency plans to be established, implemented or approved. The independent reviewing officer (IRO) service does not offer an effective quality assurance role and does not sufficiently escalate concerns. The quality of minutes of children's review meetings is highly variable and minutes are missing from some children's records. Most review records contain outdated historical information and actions; the density of these review records makes it harder for social workers, carers and children to know the priorities. IROs are not always ensuring that children's wishes are influencing their plans.
- 21. Children's records are often sparse and difficult to follow. This compounds the lack of continuity created by the turnover of social workers and weak management oversight. Children returning to read their records would not understand the reasons why they came into care or why decisions were made for them. For too many children, there is no rationale for delays in important aspects of their plans, such as permanency decisions or arrangements for them to see important family members.
- There is variable social work practice for children achieving permanency, with some experiencing drift and delay. Inconsistent management oversight and irregular supervision mean that drift is not always identified and remedied effectively. This includes planning for children requiring adoption. Once adoption decisions are made, adoptive placements are thoughtfully considered against matching criteria.
- Risks to children in care are mostly recognised and responded to. However, as not all children receive statutory visits when they should, this is not consistent. If children make allegations against their carers, these are responded to and children are safeguarded. Bullying by peers or at school is mostly well responded to by social workers. Children who go missing have not always been offered a timely return home interview and the quality of the return home interviews remains too variable, despite recent efforts to improve their quality.
- Most children in care have up-to-date health assessments and eye and dental checks and their physical needs are well met. Strengths and difficulties questionnaires are used to support identification of services to support children's emotional and mental well-being. Some children are enjoying a variety of social activities and hobbies.



- 25. The systemic family therapist team interventions make a positive difference in helping improve carers' understanding of children's needs. Children's matching to permanent placements is not consistently informed by learning from their previous placement breakdowns.
- 26. The participation group run for children in care is valued by children who attend. They enjoy meeting others and taking part in activities. Children are able to share some of the things they have been doing to influence service development, but they are not being supported to help shape services effectively. Independent visitors are used appropriately to assist children in sharing their views and wishes about where they live.
- 27. Unaccompanied asylum-seeking children receive regular visits, with positive relationship-based work, so that they are able to build trusting relationships with their workers.
- 28. Personal education plans (PEPs) have effective targets, which are reviewed appropriately. There is variability in the timeliness of completion of PEPs due to changes in social worker, and some tasks are left incomplete. The virtual school makes effective use of pupil premium funding to support children to achieve and to ensure that support is accessed without delay where tasks and PEPs are awaiting social worker actions. The virtual school also ensures that education plans incorporate the views of children in care. The virtual school works in close partnership with schools to support children's education, and many children in care make strong progress from their starting points.
- 29. While assessments of foster carers are thorough, it is not consistently clear how any vulnerabilities identified in their assessments feed into the training, support and action plans for carers. Foster carers mostly feel well supported, but communication between foster carers and supervising social workers and children's social workers is often fragmented, which hampers care planning and support for children.
- 30. The arrangements with the regional adoption agency (Adopt London East) are working well. There is effective recruitment of adopters that meets the needs of children who require adoption as their plan. Assessments of adopters are generally completed in a timely manner, but do not always clearly and comprehensively consider how vulnerabilities identified will be mitigated.

The experiences and progress of care leavers: requires improvement to be good

31. Children in care do not have the opportunity to build trusting or stable relationships with their personal adviser (PA) prior to transfer at age 18. Most care leavers are positive about the support received from their PAs once allocated and most Havering care leavers are accessing support from the service. Many are also being helped to reconnect with family and friends.



- 32. A good proportion of care leavers benefit from living with their foster carers after the age of 18, in 'staying put' arrangements.
- 33. PAs keep in touch with care leavers, including those up to, and sometimes over, 25 years of age where this is wanted and needed. This is a strength in Havering. The recording, quality and frequency of visits to care leavers are variable. Most are visited at a frequency that meets their needs and there is persistent communication and checking in with care leavers via text messages and email. For a small number of care leavers, visiting is not reflective of their needs and is not consistently evident on the system. This includes recording whether they were seen face to face or virtually.
- The quality of pathway plans is variable. Although most plans are regularly reviewed, too many are basic and do not fully reflect young people's needs and abilities. Plans are not sufficiently tailored to the unique and individual needs of care leavers.
- 35. Care leavers' basic health needs are met, although records do not consistently capture detailed information in this area. Care leavers with more complex mental health needs do not receive timely and effective support. Leaders have plans in place with partners to reduce waiting times and provide earlier intervention. Care leavers have access to their health histories, with PA support, via their GP.
- Most care leavers are living in suitable accommodation that meets their needs. Care leavers are supported to develop their independent living skills before they take on their own tenancy, but most pathway plans do not include detailed information about the help and support provided. Most care leavers are provided with key personal and identification documents.
- 37. Care leavers who were formerly asylum-seeking children are living in appropriate accommodation and support is generally meeting their needs. Care leavers who are parents are appropriately supported to access parenting classes, family centres and universal services. There is mostly effective support, visiting and oversight for those care leavers in custody.
- 38. Most care leavers are encouraged and supported into education, employment or training, supported by Havering's employment and skills service. This includes help with travel and equipment.
- Care leavers have access to recreational and social opportunities to help maintain positive relationships and feel part of a wider community. Care leavers speak warmly about the value of 'The Cocoon', a safe space where they come together for support, social events and to access practical facilities.
- The corporate parenting board consults with care leavers but leaders have not gone far enough to involve them in shaping and improving services.



41. Most care leavers are aware of their rights and entitlements; they know how to complain and access advocacy support when needed. The local offer sets out the statutory support and expectations for care leavers. Most care leavers are accessing the offer, but this is not consistently evidenced in records. There is confusion from workers and some care leavers about what is available in the written offer.

The impact of leaders on social work practice with children and families: inadequate

- 42. Since the last inspection of Havering local authority children's services in 2018, the service provided to children by Havering has deteriorated. All areas for improvement identified at the last inspection remain areas for improvement, with further deterioration in some seen at this inspection. Over a sustained period of time, there has been a lack of effective management oversight, support and challenge across the local authority, from frontline managers through to senior, corporate and political leaders. This has meant that some children have been left at risk and too many children are subject to plans that drift.
- 43. Havering's self-assessment accurately identifies most areas for improvement. The DCS has brought a more rigorous focus and vision to children's services and has provided a realistic appraisal of the quality of the service and practice for children in Havering. Although this inspection highlighted some areas for improvement that the local authority was not fully aware of, the immediate response has been decisive and robust. Governance has recently been strengthened; the DCS has the confidence and support of the chief executive and political leaders. They have a clear line of sight regarding the challenges facing the service. Corporate and political leaders have worked together to understand the needs of children and have begun to invest in children's services. However, significant further financial investment is needed to deliver core statutory services. Leaders recognise the scale of improvement needed, which now requires whole-system change through comprehensive plans for restructuring and improvement. The DCS and key members of the senior leadership team are simultaneously implementing multiple plans to improve outcomes. Most have only recently been agreed or established and, while the changes target areas where improvement is most needed, it is too early to see impact in practice for children. The implementation of a robust senior leadership team structure to increase capacity and effective oversight for this work has been slow and is still not fully in place.
- 44. Strategic partnerships are starting to become more effective. Partner agencies hold Havering and the DCS in high regard and appreciate the straightforward and honest approach to problems and solutions. Constructive and mature relationships contribute to a sense of shared accountability. Leaders in Havering repeatedly escalated issues regarding police capacity impacting on children's safety until the police were able to secure agreement to additional resources, to be implemented in January 2024. Through the integrating of commissioning



teams with the integrated health board, Havering is pooling resources to create joint funding initiatives. Leaders are aware that more progress is needed to overcome challenges in relation to increased demand, complexity, need and resources, particularly the provision of mental health services for children and care leavers. The operation of early help services is a good example of strategic partnerships enabling effective multi-agency help to vulnerable families.

- 45. Havering's approach to corporate parenting is underdeveloped and, while there is a commitment to hearing children's voices, this has not been consistently acted on.
- 46. Alongside multiple changes in social worker, children experience multiple changes in IRO. The safety net and consistency that IROs can provide where social workers are inconsistent is missing. Very few children have effective reviews or plans. Havering's self-assessment recognises the issue and the DCS has taken decisive action to rebuild the service and has recently secured agreement to recruit permanent IROs at a suitably experienced level, with recruitment anticipated in the January 2024 whole-service restructure. Strengthened senior leadership oversight of placement moves has resulted in placement stability improving for children.
- Strengthened performance information through the recently redeveloped quality assurance programme in Havering is translated into learning, which is used to target areas for service improvement and learning for individual social workers. However, capacity at an operational level means actions identified for individual children are not followed through sufficiently. Havering shares learning and themes from audits with the workforce via seven-minute briefings and practice-reflection discussions following audits; social workers value this opportunity to learn and receive case direction. In addition to quality assurance audits, Havering uses a range of analytics to understand performance and respond to any identified areas for improvement. Difficulties with the case recording system, alongside convoluted structures and processes for some teams and services, impede comprehensive and accurate oversight of practice.
- Learning and development opportunities are encouraged and well advertised. Workers know how to access learning and development and regularly do so, however, this is hampered by workers' capacity issues. This investment in them develops their skills and helps to keep them working for Havering.
- Social workers almost unanimously report feeling supported and guided through the complexities of their work. Despite this, recorded supervision and management oversight are areas of weakness in terms of both frequency and quality. For most, supervision notes are a summary of events, repeated history and confirmation of actions already taken by social workers. Actions are compliance-focused on next visits and updating relevant documents. They lack challenge, case progression and reflection. For many workers, there are exceptionally long gaps between supervisions and hence delays in work with children being reviewed. As a result, children are experiencing drift and delay



- and social work practice deficits are not addressed. There is inconsistency in recording the rationale for casework decisions. Management oversight of frontline practice has been an area for improvement since 2018.
- 50. Havering has very recently increased capacity through extensive and targeted recruitment of social workers in their assessed and supported year of employment (ASYE) and recently qualified permanent staff. Some have recently started in post. More social workers have been secured for 2024. A reduction in agency staff, conversion of agency staff to permanent posts and a robust workforce strategy have seen an improving picture in staff turnover, and caseloads have started to reduce. However, caseloads are still too high and social workers are struggling to manage these effectively. There is a negative impact on the quality of work. Newly qualified social workers have complex caseloads and there is limited evidence of effective supervision progressing plans for children. Social workers report that they are expected to do too many administrative tasks following the loss of business support staff. This is directly impacting on their availability to undertake direct work with children and families. Despite the challenges, most social workers like working for Havering. They describe a highly visible and responsive leadership team; they know, and are loyal to, their leaders. This is impressive in the context of the demands on both workers and the leadership team.



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Improvement Notice

To: London Borough of Havering ('the Council')

Town Hall

Main Road

Romford

RM1 3BD

This Improvement Notice is issued to London Borough of Havering on Tuesday 5 March 2024, following significant concerns highlighted by the publication of Ofsted's inspection report of the Council's Children's Services, published 16th February 2024

- 1. This Notice is given to address all the areas for improvement identified in the report of the inspection of children's social care services dated 16th February 2024.
- 2. To comply with this Notice, the following actions are required of the Council, working with its partner agencies ("partners") as identified by the Children Act 2004 (Section 11).

Adviser arrangements

3. The Secretary of State has chosen to appoint an Adviser to provide advice to the Department for Education ("the Department") and the Council. The Council will work with the Adviser until some such time that the Secretary of State is satisfied that this is no longer required.

Improvement plan

- 4. The Council's improvement plan will deliver appropriate and sustainable improvement. The plan should cover the areas identified in the Ofsted report of 16th February 2024, as well as recommendations made by the Improvement Adviser appointed by the Department. The plan should be submitted to the Department by a date determined by the Improvement Adviser.
- 5. To ensure there is clear evidence of progression:
 - a. the content of the improvement plan and a record of progress against it must be kept up to date.
 - b. the Council must ensure there is an improvement board with an independent Chair in place (to be attended by improvement advisor and DfE case lead) to oversee the implementation of the improvement plan and report to the improvement board on progress against the objectives in the plan, to a timetable agreed with the

Department. It can commission updates from partners in order to do this.

- reports to the improvement board should include data, analysis and recommendations supported by evidence of the impact of improvements on the quality of practice and experience of children and families;
- d. the Council should highlight those objectives which are slow to progress and highlight where contributions need to be strengthened; and
- e. the views of frontline staff, children and young people will be taken into consideration in the development of practice and standards.

Department for Education reviews

- 6. Officials or advisors from the Department will undertake reviews of progress against the improvement plan at least every six months and more regularly where appropriate.
- 7. These reviews may cover but are not exclusive to culture; performance; leadership, management, and governance; workforce and management oversight; arrangements at the front door/ Multi-Agency Safeguarding Hub (MASH), early help; and multi-agency arrangements.
- 8. From time to time, the Improvement Adviser may require that a diagnostic review or assessment of performance in a specific service area is undertaken by a local authority or other party agreed with the Department.
- 9. For any review or assessment, the Council must provide the persons conducting it with:
 - a. access to, and time with, staff and leadership.
 - b. accurate and up to date data on performance and quality.
 - c. facilities to carry out the reviews.
 - d. access to case files, minutes of meetings, supervision records or any other relevant information.
 - 10. Prior to any reviews, the Council should provide its own assessment of improvement. This may reflect, but is not limited to:
 - a. progress against the improvement plan objectives.
 - b. involvement of safeguarding partners and the Improvement Board.
 - c. staff surveys.
 - d. staff supervision and the quality of feedback.
- 11. Taking account of the measures set out in this Improvement Notice and the diagnostic report once produced by the Department's Improvement Adviser,

the Council should aim for actions included in the improvement plan to be delivered by the end of December 2024 or sooner, where appropriate.

<u>Improvement against the above measures will be assessed as follows:</u>

- 12. The Improvement Adviser will provide to the Department 6 weekly reports of progress or concern against the areas set out in this Notice; and progress against the Improvement plan; and any other such information relevant to the improvement journey.
- 13. The Department will be represented at the Council's Improvement Board.

<u>Failure to comply with this Improvement Notice by the assessment dates or poor progress:</u>

14. Should the Council be unwilling or unable to comply with this Improvement Notice or should ministers not be satisfied with the Council's progress at any stage, ministers may choose to invoke their statutory powers of intervention (under s497A Education Act 1996) to direct the Council to enter into an appropriate arrangement to secure the improvements required in children's services.

Signed:

. Date: 05/03/2024

Alan Parnum

A senior civil servant in the Department for Education



Agenda Item 9



REPORT OF CABINET

Full Council: 24 July 2024

Improvement and Transformation Plan

Council have been asked to note and endorse the Improvement and Transformation Plan.

The Council takes its financial responsibilities very seriously. We have maximised Council Tax income, have one the lowest unit costs in the country, we have sold assets, we don't have high levels of borrowing and now we are depleting our reserves.

After significant systemic underfunding since 2010, the Council's financial challenge is no longer one we could manage without Government intervention. A Capitalisation Direction was applied for to prevent us from issuing a S114 for this financial year (2024/25). In order for the Department of Levelling Up, Housing and Communities (DLUHC) to provide a final capitalisation direction, the Council is required:

- To undergo an external assurance review which will include, but will not be limited to, an assessment of the Council's financial position and financial management practices and the Council's work to improve its productivity and efficiency, linked to the broader work expected by the Department to produce productivity plans to improve service performance and reduce wasteful expenditure.
- 2. To produce an improvement and transformation plan within six months of the date of this letter that is focused on delivering the Council's key objectives and securing the medium-term financial position. The plan should take into account broader work required by the Department to produce productivity plans to improve service performance and reduce wasteful expenditure. This plan should be rooted in clear deliverables and tangible, measurable outcomes over the next 12-months and beyond. The plan should incorporate any recommendations identified as part of the external assurance review once that review is completed and a commitment to ongoing reporting on the progress that is made."

Our Improvement & Transformation Plan sets out how we intend to respond to these challenges and aligns with the Governments Productivity plan.

Accordingly, it is RECOMMENDED:

That Council approves and endorses the Improvement and Transformation Plan and associated actions.





CABINET 17th July 2024 **Subject Heading:** Improvement & Transformation Plan **Cabinet Member:** Councillor Ray Morgon **ELT Lead:** Kathy Freeman, Strategic Director, Resources Report Author and contact details: Louise.warner@havering.gov.uk Jodie.Gutteridge@havering.gov.uk **Policy context:** The plan is intended to meet the requirement to produce an Improvement and Transformation plan, as a condition of the 'exceptional financial support' approved in principle by the Secretary of State. **Financial summary:** The Improvement and Transformation Plan is required to secure the Capitalisation Direction. No Is this a Key Decision? When should this matter be reviewed? **Reviewing OSC:** Overview and Scrutiny Board The subject matter of this report deals with the following Council **Objectives**

Page 97

People - Supporting our residents to stay safe and well x

Resources - Enabling a resident-focussed and resilient council

Place - A great place to live, work and enjoy

SUMMARY

Havering is a well-run cost effective Council. Our unit costs are the 16th lowest compared to 16 other Outer London boroughs, i.e. the lowest as assessed by LG Futures. We are ranked by IMPOWER (at their last point of formal publication) as being the 5th most productive council in the country. Our income collection for Council Tax is in the top-quartile in London. We have consistently sold off assets (over £160m since 2013/14) to minimise borrowing costs of our capital programme, and Members have maximised Council Tax increases throughout austerity.

The Council takes its financial responsibilities very seriously. We have maximised Council Tax income, have one the lowest unit costs in the country, we have sold assets, we don't have high levels of borrowing and now we are depleting our reserves.

After significant systemic underfunding since 2010, the Council's financial challenge is no longer one we could manage without Government intervention. A Capitalisation Direction was applied for to prevent us from issuing a S114 for this financial year (2024/25). As part of the requirements to receive the capitalisation direction, an Improvement & Transformation Plan is required to be submitted no later than 27th August.

Another condition of the Capitalisation Direction is for the Council to undergo an independent Financial Management review. The review is an assessment of Havering's Financial Management arrangements and governance arrangements, and the Chartered Institute of Public Finance and Accountancy have been commissioned by the Department of Levelling Up, Housing and Communities to undertake this on their behalf, and submit a report to them directly in due course.

This review has commenced and is likely to conclude at the end of July. The Council must incorporate the review recommendations in the Improvement and Transformation Plan prior to its submission.

RECOMMENDATIONS

Cabinet is asked to make the following recommendations:

(1) Approve the Improvement and Transformation Plan.

(2) Authorise the Chief Executive to implement and deliver the Plan and to agree any changes to the Plan as he shall deem necessary to satisfy the terms and conditions of the capitalisation directive.

Cabinet is asked to note that the delivery of actions set out within this plan is the responsibility of the Executive Leadership Team and that this plan will be subject to regular and frequent monitoring and reporting.

REPORT DETAIL

- 1.1 On the 14 November 2023 the Strategic Director of Resources and S151 Officer, wrote a letter to the Minister for Local Government, requesting 'exceptional financial support'. On 27 February 2024 the Leader received a response from the Minister which confirmed that: "With respect to the financial year 2024-25, the Secretary of State is minded to approve a capitalisation direction of a total not exceeding £53.7 million."
- 1.2 The letter continues to confirm that 'Before the capitalisation direction can be approved, your council will need to undertake certain actions. This is consistent with the approach used by the Department since 2020 to those councils that have applied for exceptional financial support.'
- 1.3 The annex to this letter said: "In order for the Department to provide a final capitalisation direction, the Council is required:
 - To undergo an external assurance review which will include, but will not be limited to, an assessment of the Council's financial position and financial management practices and the Council's work to improve its productivity and efficiency, linked to the broader work expected by the Department to produce productivity plans to improve service performance and reduce wasteful expenditure.
 - 2. To produce an improvement and transformation plan within six months of the date of this letter that is focused on delivering the Council's key objectives and securing the medium-term financial position. The plan should take into account broader work required by the Department to produce productivity plans to improve service performance and reduce wasteful expenditure. This plan should be rooted in clear deliverables and tangible, measurable outcomes over the next 12-months and beyond. The plan should incorporate any recommendations identified as part of the external assurance review once that review is completed and a commitment to ongoing reporting on the progress that is made."
- 1.4 In the statement on 5 February 2024, accompanying the Local Government Finance Settlement, the Secretary of State, Michael Gove MP, announced that "As part of our efforts to return the sector to sustainability in the future, we are also asking all local authorities to develop and share productivity plans
- 1.5 This Improvement & Transformation Plan sets out how we intend to respond to these challenges and aligns with the Governments Productivity plan.

REASONS AND OPTIONS

Reasons for the decision:

Simon Hoare outlined the process and conditions in order for the council to receive the capitalisation direction, one of which was for the plan to be produced and submitted by the 27th August.

Other options considered:

Do not approve the Improvement and Transformation plan. This option was quickly dismissed as if Cabinet do not approve we will not receive the capitalisation direction.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no immediate additional financial implications arising from approving the Productivity Plan. It is expected that the work identified within the Productivity Plan will be delivered within approved Revenue and Capital budgets in this financial year and any issues arising will be flagged as part of the normal budget monitoring process. The Financial implications of specific proposals will be assessed on an individual basis as part of the relevant decision-making processes. Additional future costs and any new savings or benefits delivered will be considered as part of the annual MTFS (Medium Term Financial Strategy) cycle.

Legal implications and risks:

There are no immediate legal implications arising from this report.

Human Resources implications and risks:

There are no major direct HR implications or risks from this report. Any HR issues which occur will be managed in accordance with the Council's HR policies and procedures and any change processes that are required will be managed in accordance with both statutory requirements and the Council's Organisational Change Policy and Procedure and associated guidance.

Equalities implications and risks:

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) the need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) foster good relations between those who have protected characteristics and those who do not.

Cabinet, 17 July 2024

Note: 'Protected characteristics' are: age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

Equality impact assessments are systematically carried out for any services, projects or other schemes that have the potential to impact on communities and / or staff on the grounds of particular protected characteristics or socio-economic disadvantage.

Equalities assessment is normally required for significant impacts upon ANY of the "protected characteristics". As this is a Plan that pulls together the work that is already being completed or due to start, an assessment is not required at this stage, but will be considered for any future projects.

Health and Wellbeing implications and Risks

Under the Health and Social Care Act 2012 the Council is responsible for improving and protecting the health and wellbeing of local residents. Havering Council is committed to improving the health and wellbeing of all residents.

There are no health and wellbeing implications arising from the proposed decision to approve and publish this Improvement & Transformation Plan.

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

The Council has committed to taking action towards the organisation and the borough becoming carbon neutral by 2040.

No detrimental climate change implications or risks are expected as a direct outcome of this plan.

BACKGROUND PAPERS

Appendix 1: Havering Improvement & Transformation Plan 2024





Improvement & Transformation Plan July 2024

Contents

| Introduction | 2 |
|--|----|
| Background | 3 |
| Our Vision – The Havering you want to be part of | 4 |
| Continuous Improvement | 5 |
| Partnerships & Community Engagement | 6 |
| Actions | 7 |
| Data Centre and Thames Freeport | 8 |
| Reducing Wasteful Spend | 8 |
| Transformation and Service Delivery | 11 |
| Technology & Innovation | 15 |
| Agile and Engaged Workforce | 18 |

Introduction

In March 2024, Havering applied for a Capitalisation Direction of £54m to balance the 2024/25 budget and ensure that vital services continue to be delivered, without triggering a 114 situation.

As highlighted in our letter to Minister Hoare of 28th February 2024, we will endeavour to deliver additional efficiencies wherever possible, but it will be challenging to secure our medium term financial position unless the much needed Local Government funding reforms redress the inadequacies and imbalance of the national funding formula.

Through this Improvement & Transformation Plan we aim to provide assurance to DLUHC that our continuous improvement and transformation arrangements meet their Best Value Guidance issued in May 2024, and to demonstrate how we meet the characteristics of a well-run Council. We will also take into account the broader work required by the department to produce productivity plans to improve service performance and reduce wasteful expenditure. PLACEHOLDER LINK TO PUBLISHED DOCUMENT

A requirement of the Capitalisation Direction, is for the Council to have an independent Financial Management review. The review is an assessment of Havering's Financial Management arrangements and governance arrangements. The Chartered Institute of Public Finance and Accountancy were commissioned by DLUHC to undertake this and submit a report directly to them. The review recommendations will be incorporated into this Plan.

Havering's Position

The council has forecast a budget gap of £32.5m for 2024/25 rising to £81.3m over the four years to 2028.

Presently there are only three ways by which this funding gap can be closed:

- 1. A significant and fundamental reform of the funding formula.
- 2. Business rates from the East Havering Data Centre¹. If approved, the East Havering Data Centre Campus, Green Energy Infrastructure and Ecology Park Project will deliver thousands of local jobs, a new public green space, and new digital infrastructure to support the local and wider UK economy. It is **imperative** that the site is included in the Thames Freeport² to enable Havering to retain 100% of the NNDR for the next 25 years, in the region of £50m.
- 3. National intervention from the government in terms of regulation of the social care provider market and a move towards a not-for-profit model, particularly for Children's Social Care. As part of this the Council is also exploring creating an in-house provision which could help reduce costs.

¹ https://www.havering.gov.uk/info/20135/regeneration/882/east_havering_datacentre_and_ecology_park

² https://thamesfreeport.com/

Background

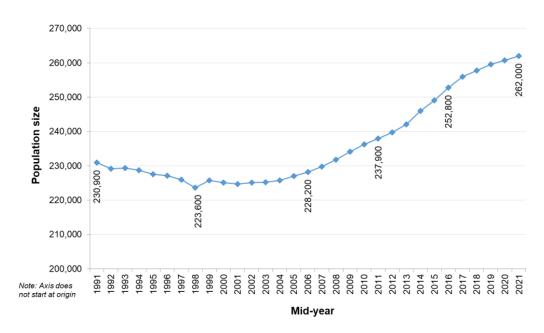


Chart 1 Trend in population size in Havering, 1991-2021³

As shown in Chart 1, Havering's population has increased year on year since 1998 to approximately 262,000 in 2021. The Borough's young people population is growing rapidly and, according to the census⁴, we are the fourth fastest growing in percentage terms nationally. This is alongside the second oldest population in London⁵, which is also increasing. This demographic growth in our younger and older population has resulted in increased costs to the council for which we are receiving inadequate funding to support.

Chart 2 shows that Havering currently receives the third lowest level of general grant support of all London boroughs.

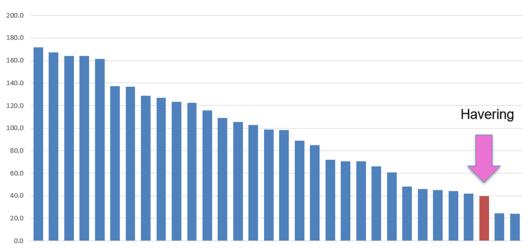


Chart 2 Settlement Funding Assessment 2024/25 by London Borough

³ Source: ONS 2021 Mid-Year Population Estimates; Produced by LBH Public Health Intelligence

⁴ https://www.ons.gov.uk/visualisations/censusareachanges/E09000016/

 $^{^5} https://www.ons.gov.uk/people population and community/population and migration/population estimates/bulletins/population and householdest imates england and wales/census 2021 unrounded data$

Havering is a well-run and cost effective Council. Our unit costs are the 16th lowest compared to 16 other Outer London boroughs, i.e. the lowest as assessed by LG Futures⁶. We are ranked by IMPOWER⁷ (at their last point of formal publication) as being the 5th most productive council in the country. Our income collection for Council Tax is in the top-quartile in London, and, despite having the 5th lowest core spending power in London, our performance against the Oflog⁸ dataset is strong overall.

Over 70% of the Council's revenue spend goes on funding statutory Adults' and Children's social care, which is provided to a small proportion of the Council's most vulnerable residents, many of whom have very complex needs requiring extensive support. Demand for services has increased to significantly greater than the sum of the funding we receive and are able to generate through council tax and other fees and charges. It is, therefore, becoming more difficult to deliver universal services with the remaining budget, and harder to find the savings required to deliver a balanced budget each year.

The Council has made £164m of savings since 2010 and sold assets to the value of £160m. We have evidenced within this plan and our productivity plan that we are keen to innovate and maximise productivity within the limited resources available. Regrettably, unless there is fundamental reform which recognises our systemic underfunding in light of the diverse and complex needs of our fast growing population, then the progress we can make will be limited.

Our Vision – The Havering you want to be part of

Since November 2022, the Council has set a vision and has also agreed three member priorities and a refreshed corporate plan. Member priorities are: 'Improved Customer Service and Resident Engagement', 'Digital Capability' and more recently 'Financial Stability', (with an emphasis on lobbying of central government as outlined in our Corporate Plan).

The Vision⁹ and new Corporate Plan start the 'Golden Thread' in Havering. This feeds into Director Service plans through a balanced scorecard approach, and filters down to individual performance reviews. Interactive Power BI Corporate Performance Reports monitor the Corporate Plan KPIs, with the first report due in August for Q1 2024-25 data. We did not publish our corporate KPIs quarterly last year, however we produced an annual report for 2022/23 summarizing our performance and achievements over the year¹⁰. We are currently finalising the 2023/24 annual report¹¹.

Our Annual Governance Statement¹² follows the CIPFA/SOLACE Good Governance Framework¹³ and is updated every year by officers. Our Executive Leadership Team see and comment on the draft version, following updates from specific significant governance issue (SGI) owners. The final version is then reviewed by our S151 officer and Chief Executive before formal sign-off by the Leader and publication on the Havering website. A revised Constitution was approved by full Council 21st March 2024¹⁴.

⁶ https://lgfutures.co.uk/

⁷ https://www.impower.co.uk/reports/which-councils-are-best-2/

⁸ https://oflog.data.gov.uk/

⁹ https://www.havering.gov.uk/vision

 $^{^{10}\} https://www.havering.gov.uk/download/downloads/id/6306/havering_annual_report_2022_to_2023.pdf$

¹¹ https://www.havering.gov.uk/downloads/download/1001/corporate_annual_reports

¹² https://www.havering.gov.uk/download/downloads/id/6517/annual_governance_statement_2022_to_2023.pdf

 $^{^{13}}$ https://www.cipfa.org/policy-and-guidance/publications/d/delivering-good-governance-in-local-government-framework-2016-edition

¹⁴ https://democracy.havering.gov.uk/ieListDocuments.aspx?CId=588&MId=6098&MD=Constitution&Ver=4&info=1

Continuous Improvement

Havering welcomes and benefits from opportunities for independent external scrutiny and challenge. Examples over the last three years include our LGA Corporate Peer Challenge, Adult Social Care Peer Review delivered by ADASS, a number of deep dives delivered by our Independent Scrutineer in the areas of child and adult safeguarding, and our READI review.

A Race, Equality, Accessibility, Diversity, and Inclusion (READI) review was undertaken by the LGA in May 2021, which outlined 15 recommendations¹⁵. Work on these have been gathered into an improvement plan which is monitored through the Equality, Diversity, Inclusion & Cohesion (EDIC) Development group and corporate plan. A self-service model has now been adopted which has removed the need for a permanent EDI team.

A Corporate Peer Challenge was undertaken in November 2022 by the LGA¹⁶, and 11 recommendations have been worked up into an action plan¹⁷. A one-day progress review took place in May 2024.¹⁸

The Department of Levelling Up, Housing and Communities visited Havering in June 2023 to review the progress and development of the Local Authority's Supporting Families Programme and how we are working towards evidencing significant, sustained change for children and families. Feedback received from the visit highlighted the service's emphasis on preventative, early interventions and the strength of the local partnership approach, underpinned by a shared practice framework via the co-produced Early Help Strategy. The service's approach to Contextual Safeguarding (and the development of the Single View Dashboard), improving school attendance through the 'Peace of Mind' programme, implementing our Text Service, our Cost of Living dashboard and the co-production of Parenting networks were all recognised as strengths.

In the last two years, our Children's Services have been subject of two inspections. The first was of our Youth Justice Service, by HMIP, in August 2022, which found the service to be 'Good'¹⁹. More recently, in December 2023, we were inspected by Ofsted under the Inspection of Local Authority Children's Services (ILACS) framework. Inspectors found Havering to be 'Inadequate'²⁰ for Overall effectiveness and in all areas with the exception of "The experiences and progress of care leavers", which requires improvement to be good. In their report, Ofsted recognised that "With the support of corporate and political leaders, work is under way to strengthen services"; however the report also noted that "While the scale and nature of the necessary improvements are well understood, and plans for improvement are in development, this is within a challenging context of increasing demand linked to marked growth in Havering's child population. Substantial resources are needed to deliver core statutory services". It is imperative that we are able to demonstrate progress against our fully costed improvement plan, (currently in the process of being finalised). Corporate investment of £13.2m will be necessary to secure the required level of improvement in our services, and in outcomes for children. Of this, *ca.* £4.7m will be needed for the Ofsted Improvement Plan to appoint more staff and reduce the social worker – client ratios which were central to the weaknesses identified by Ofsted.

In March 2024, we invited the Association of Directors of Adult Social Services (ADASS) to undertake a peer challenge, as part of our preparation for assurance under the new Care Quality Commission (CQC)

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¹⁵ https://www.havering.gov.uk/downloads/file/5131/readi_review_feedback_report

¹⁶ https://www.local.gov.uk/our-support/council-assurance-and-peer-support/peer-challenges-we-offer/corporate-peer-challenge-89

¹⁷ https://democracy.havering.gov.uk/ieDecisionDetails.aspx?AlId=33028

¹⁸ https://www.local.gov.uk/our-support/council-assurance-and-peer-challenge/peer-challenges-we-offer/corporate-peer-3

¹⁹ https://www.justiceinspectorates.gov.uk/hmiprobation/inspections/haveringyos/

²⁰ https://files.ofsted.gov.uk/v1/file/50239788

framework. The review confirmed the areas for improvement we had already identified as well as a number of strengths, including the commitment of our workforce to doing the best for our residents. A comprehensive action plan is being developed in response, as part of our on-going self-directed improvement work.

Our Data Intelligence Hub²¹ contains a number of links to useful 'open data' resources which we promote, including those published by the DfE, DHSC, OHID, Oflog, etc. and the LG Inform data explorer. Our Local Insight platform²² is a data explorer which hosts an interactive JSNA and related data at lower geography levels. We make regular use of benchmarking in our internal reporting and when setting targets and our quarterly corporate performance reporting from April 2024 will include comparative data for England / London or Statistical Neighbours, where available, to aid the understanding of context as well as scrutiny.

Partnerships & Community Engagement

Our statutory Directors engage well with their peers across London and the sub-region, and with sector-led improvement initiatives, regularly bringing best practice and learning back into the authority. We have entered collaborative commissioning arrangements for areas such as foster carer recruitment and the Pan London Vehicle for Children's Complex Commissioning (to build and operate a secure children's home for London). We are also the host authority for the regional adoption agency, Adopt London East. Our recent Ofsted inspection report found that "Constructive and mature relationships contribute to a sense of shared accountability" and that "Through the integrating of commissioning teams with the integrated health board, Havering is pooling resources to create joint funding initiatives". Our ADASS Peer Review also noted the strength of relationships within the local partnership as a key strength.

Our work during the Covid-19 pandemic and more recently our Cost of Living crisis response demonstrates how we work with our local voluntary and community sector partners to support our residents through challenging times. Through our Integrated Care System, we are beginning to embed Population Health Management, using our collective data to identify populations who would benefit from targeted interventions. We have adopted a 'whole systems' approach to tackling obesity (a key priority for the borough) and recently consulted partners and the community on our new Healthy Weight Strategy.²³

The administration is keen to improve resident engagement and recently approved a new Resident Engagement and Participation Strategy.²⁴ This sets out an intention to build on the good progress we have made over the last year in engaging under-represented groups, including children and young people. Our consultation platform²⁵ is being used extensively by services both to undertake and also to feed back on the results of consultations. Recent successes include our record-breaking budget consultation, which for the first time also sought the views of children and young people on our various savings proposals. Following the Havering Youth Wellbeing Census, (delivered in Summer 2023), the Executive Leadership team have collectively committed to improving engagement with this growing population.

We recognise that we are early in our journey to move up the ladder of participation and that whilst we have increased consultation activity, this is only one aspect of engagement. Examples of true coproduction are minimal. We are implementing a new social prescribing platform, the Joy App, which will act as a referral and case management system for social prescribers, as well as increasing the accessibility of information

²¹ https://www.haveringdata.net/

²² https://havering.localinsight.org/

 $^{^{23}\} https://democracy.have ring.gov.uk/documents/s73892/5.1\%20 Healthy\%20 Weight\%20 Strategy\%20 draft\%20 version\%200.2.pdf$

²⁴ https://democracy.havering.gov.uk/documents/s72943/11.1%206886%20Resident%20engagement%20V11.pdf

²⁵ https://consultation.havering.gov.uk/

about services via the Joy Marketplace. Plans are being developed to coproduce the site, including with some of our less engaged communities.

We continue to develop in our role as corporate parents, and we accept Ofsted's finding that "Havering's approach to corporate parenting is underdeveloped and, while there is a commitment to hearing children's voices, this has not been consistently acted on."

We recognise that we need to develop a clear, long-term strategy for place shaping. Our Corporate Plan sets out our priorities for the next three years and the high-level actions we will take to deliver these, however our financial position, as a result of years of underfunding, has forced us to scale back on our ambitions and this makes longer term planning more challenging. We remain very cognisant of the changing demographic and needs of our borough and continue to pursue conversations with our integrated care system partners about our respective roles as anchor organisations. We are exploring how we can embed a focus on borough productivity, including relevant insight such as the Productivity Institute's scorecard, within our Health and Wellbeing Strategy (currently being refreshed).

Partners in Havering are keen to invest more in our community and voluntary sector. The Havering Place based Partnership oversaw circa £90,000 of investment in Community and Voluntary sector organisations in the borough through our Community Chest funding, linked to reducing Health Inequalities. Social Prescribers and Local Area Coordinators were involved in the development and review process, using their knowledge of the community and voluntary sector services that local people use the most to inform the programme.

Services are taking steps to better understand who is accessing their services and whether the needs of different groups within the community are being met. For example, within Adults and Children's Social Care, demographic analysis is provided as standard to help identify under and over-represented groups. We have produced a standardised set of equalities monitoring questions for use in our consultations, and committed to publishing our Equality and Health Impact Assessments (EqHIAs) to aid transparency around the impact of our decisions on those sharing various protected characteristics (though this has not yet started). Our new Corporate Plan includes a commitment to use feedback from those receiving support to inform service improvement.

Actions

Please note, actions that have already been published in the Council's Productivity Plan have been included for completeness but are shown in grey.

²⁶ https://www.productivity.ac.uk/the-productivity-lab/the-tpi-uk-itl3-productivity-scorecard-series/

Data Centre and Thames Freeport

| Objective | Action | ELT lead | Timescales |
|---|--|-------------------|------------|
| Open the East Havering Data Centre Campus, Green Energy Infrastructure and Ecology Park Project, subject to planning approval ²⁷ . | Lobby central Government to be included in the Thames Freeport ²⁸ , which will enable Havering to keep 100% of the NNDR for the next 25 years, in the region of £50m. | Neil Stubbings | |

Reducing Wasteful Spend

Havering is a well-run Council and significantly experienced in the elimination of wasteful expenditure, borne from years of systemic underfunding against unprecedented levels of demand. We are focused on maximising our financial sustainability by reducing demand and increasing productivity. We have resilience and recovery boards to monitor spending activity and our ongoing plans to reduce wasteful spend include the following:

| Sage | Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|------|---|---|--|------------------|-----------|---------------|
| 110 | | Reduce agency and consultancy cost Success Criteria: Agency and consultancy costs are reduced. | Review of agency and consultancy costs across all services whilst increasing capacity in critical services including social care and housing | Kathy Freeman | Ongoing | |
| | Workforce Review of staff resources to ensure the right capacity and capability supports delivery of efficiencies and savings Success Criteria: Maintenance of vacancies across the Council wherever | | Recruitment panel for all posts to see if the vacancy can be held or the role stopped/paused | | | |
| | | Maintaining holding of vacancies across the Council wherever possible | Kathy | Complete | | |
| | | Reduced agency use Reduced sickness and turnover | Move staff who are working for Havering as agency onto fixed term/permanent contracts | Freeman | | |
| | | | Invest to save proposals to support delivery of MTFS | | | |

²⁷ https://www.havering.gov.uk/info/20135/regeneration/882/east_havering_datacentre_and_ecology_park

²⁸ https://thamesfreeport.com/

| Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|-------------|---|---|---------------------|-----------|---------------|
| | LGA commissioned independent review of our EDI arrangements Success Criteria: A self-service model is adopted and the EDI team is no longer required. | Invest £250k in a programme of work to support the move to a self-service model and reduced the need for a permanent EDI team. | Kathy Freeman | Complete | |
| | Reduce tenancy arrears Success Criteria: Arrears reduced | Focus on collecting former tenant arrears for Council and PSLs (currently about £2m each) | Paul Walker | Ongoing | |
| Housing | Supported accommodation for care leavers | Monthly review of each young person's plan. | | | |
| riousing | Success Criteria: To ensure all our care leavers eligible for housing obtain their tenancy and hold on to it as a responsible adult. To reduce the spend on supported accommodation for this cohort of young adults | New Panel, to track all care leavers who require housing in the borough. | Tara Geere | Ongoing | |
| | Social care placements are both appropriate for the service user and represent best value for the authority | Reviews of all high-cost social care placements | Annette Kinsella | Ongoing | |
| | Success Criteria: • Reduction in cost of high-cost social care placements • Reduction in no of out of borough placements | Review of placements to identify in-house opportunities rather than more expensive out of borough placements | Tara Geere | Ongoing | |
| Health & | Review agency expenditure in Starting Well | Implementation of AYSE newly qualified social worker posts | Tara Geere | Ongoing | |
| Social Care | Success Criteria: £1.23m of overspend in Starting Well during 2023/24 was largely attributed to staffing costs and reliance on agency workers. We will reduce costly agency expenditure | The Council is currently developing new staff structures as part of its response to the recent OFSTED judgement and will actively aim to recruit permanently to this structure in order to minimise dependency on agency staff moving forwards. | Tara Geere | Ongoing | |
| | Joint work with Health and hospitals to ensure costs for continuing care are shared appropriately | Work even more closely with NHS NEL to: provide a more robust process to ensure children and adults are supported jointly in care planning | Luke Burton | Ongoing | |

| Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|-------------|--|--|------------------|-----------|---------------|
| | Success Criteria: Children and adults are supported in care planning Fairer formula is agreed Funding is shared | ensure system-wide funding is shared using a fairer formula agreed by NHS NEL ICB an NEL Local Authorities. ensure better value from health and social care commissioning through joined up funding where possible and reduced friction between services. | | | |
| Education | Reduce spend on Home to school transport by promoting the use of a personal transport budget. Success Criteria: Spend on Home to school transport reduced | Use of a prepaid card and individual accounts offered to families so they can organise their own transport, in addition to paying for a travel card for parents to escort their child to school/college using public transport. | Tara Geere | Ongoing | |
| | MTFS and Star Chamber processes are built into the annual budget setting cycle Success Criteria: Savings are made through Members and officers reviewing the following: Assumptions in the MTFS on income, expenditure, inflation, demographic growth Delivery of savings put forward to date | Identification of in-year savings proposals and stopping all non-essential or non-statutory spend | Kathy Freeman | Ongoing | |
| Savings | Policy decisions that will have a financial impact, incl. areas of investment required Baselining budgets so there is a shared and deeper understanding of what our money pays for. | Undertake Star Chambers to ensure we are delivering the £15m of savings agreed in 2024/25 and identify further savings for 2025/26 onwards | Kathy Freeman | Ongoing | |
| Procurement | Support local economic growth, when feasible, and foster a procurement ecosystem that minimises waste and maximises resource utilisation. Success Criteria: The procurement team is committed to exploring and implementing procurement practices which | To maximise the social value opportunity & local economic activity | Kathy Freeman | Ongoing | |

| Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|-------------------|---|--|-------------|----------------|---------------|
| | carefully weigh the financial benefits of local purchasing against the efficiencies provided by frameworks. | | | | |
| | Reduce spend on energy across the Corporate Estate | | | | |
| Climate Change | Success Criteria: • Energy spend is reduced | Consider and agree options for medium term (4 years) flexible Procurement Framework for the supply of electricity and gas. | Paul Walker | August 2024 | |

Transformation and Service Delivery

A report to Overview and Scrutiny Board in June 2021 "Transformation in Challenging Times" set out the core principles of our transformation programme and some examples of recent work at that time. Whilst impressive in some instances (particularly in relation to our Covid-19 response), not all of these have led to demonstrable improvements or efficiencies that can be evidenced.

Despite our financial position, there are a number of examples of innovation in Havering, including the delivery of our new Target Operating Model which includes an integrated team across the Council and NHS and embedding of the life stage approach to improving outcomes for residents.

In order to support greater productivity and resilience, we need to agree an affordable transformation programme to build on the progress we have already made.

| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|------------------------------|--|---|-----------------------------|-----------|---------------|
| Target Operating Model | Redesign the organisation to include clear design principles that support collaboration and promote efficiency and productivity. Success Criteria: Organisation structure in place and culture change taking place | Redesigned the organisation into three areas of 'People', 'Place' and 'Resources' | Andrew Blake- Herbert | Complete | |

 $^{^{29}\} https://democracy.have ring.gov.uk/documents/s52750/Final \% 20 for \% 20 agenda \% 20-\% 20 Transformation \% 20 Update \% 20-\% 20 OSC \% 20 Jun \% 20 20 21.pdf$

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| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|---|---|---|-----------------------------|-----------|---------------|
| Health and Social Care | Bring together key elements of health and care and the budgets that support those services. Success Criteria: Integrated teams set up and joined up working arrangements established | Create an integrated team between Havering and NHS North-East London (NEL) | Andrew Blake- Herbert | Complete | |
| the decision to return several services to each borough. Detailed plans were put in place to bring specific services back into Havering over an 18-month period. Human | Human Resources & Organisational Development to move back into Resources Directorate | | Complete | | |
| | Financial Business Partners to move back to the Resources Directorate. | | Complete | | |
| oneSource Shared Service | Resources & Organisational Development, Financial Business Partners and Procurement have now all moved back to the Resources Directorate. | Procurement to move back to the Resources Directorate. | Kathy Freeman | Complete | |
| | Success Criteria: Teams returned to respective boroughs and provide excellent support services | Legal & Governance and Transactional Services are currently remaining as a shared service in OneSource. | | Ongoing | |
| ICT | ICT to process the division back to a sovereign IT service which will secure access to dedicated technical resources and a Havering-only focused digital strategy. Success Criteria: Successful separation of technology and IT services from oneSource. Establishment of a fully functional Sovereign IT Service. Measurable improvements in service agility and responsiveness. | Under the new operating model, work has started on understanding, refocusing and reframing current transformation project portfolios into four new categories. These are: IT Sovereignty: Decoupling of technology and IT services provided by oneSource and creation of Sovereign IT Service Service and System Improvement: Upgrade and migration from ageing legacy systems (presenting cyber and operational failure risks) to modern Software as a Service platforms. In doing so we are reviewing service outcomes, processes and data to ensure we maximise the opportunity of change to modernise our ways of working and deliver better resident outcomes. BAU: IT BAU projects | Mark Duff | Ongoing | |

| _ | | improvement & transformation than | | | | | |
|--------|---------------------------|--|---|---------------------|-----------|---------------|--|
| | Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating | |
| | | | Business Lead: Projects request that come directly from a service | | | | |
| Page 1 | Commissioning | Improvements in commissioning arrangements are expected under our new integrated team at place. This brings together key elements of health and care and the budgets that support those services, with a joint senior leadership structure under the Director of Partnership, Impact and Delivery, that aims to reduce barriers and duplication, and increase value for money. Focus on partnership working, including leveraging funding from partners to increase the reach of our voluntary sector Success Criteria: Team bought together and vacant roles recruited into. Develop joint commissioning priorities focussed on quality, efficiencies and value for money, particularly where there is duplication. Manage large commissioning programmes to deliver savings and spend reductions | Programme Plan for each life cycle (starting well, living well, ageing well), including delivery of Supported Housing and Residential Care programme. Commissioning of service for Mawneys Close and Mowbrays Close site development Costed business case development for future schemes, including capital and net revenue savings | Luke Burton | Ongoing | | |
| 15 | | Reduce hospital readmissions and associated costs. | Use a ward-led enablement pilot to support patients against decline during their hospital stay and increase their confidence in returning to their home environment. | | | | |
| | Health and Social Care | Success Criteria: Delivery of 2024/25 MTFS following pilots Ward led enablement Community reablement | Discharge to Assess (D2A) residential pilot is to trial the use of block beds for residential D2A. This will align therapy support alongside the care home and the social workers. | Annette Kinsella | Ongoing | | |
| | | | Creation of local care home capacity | | | | |

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| | improvement a transformation run | | | | | |
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| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating | |
| Customer Relationship Management (CRM) | Deliver improved resident experience and service efficiency through the implementation of a modern, fit for purpose Digital Platform. Success Criteria: User Satisfaction: Ensuring that the new CRM platform enhances the user experience for residents, with a focus on ease of use and accessibility Service Efficiency: Measuring the improvement in service delivery times and efficiency, including faster response times for service issues, Freedom of Information requests, and complaints Scalability and Future-Proofing: The platform should be scalable to accommodate future growth and adaptable to potential changes in technology or service requirements | A CRM platform will deliver improved resident experience and service efficiency through the implementation of a modern, fit for purpose Digital Platform built on Dynamics 365. This will replace the Council's ageing 'My Havering' online portal, and its associated contact centre processes and back office integrations. The programme will be delivered incrementally over a four-year period. CRM Phase 1, which is now in the closedown stage, has improved the online customer experience with enhanced maps for reporting service issues, meaningful status updates and closure reasons on completion of works, Freedom of Information requests, and complaints. | Mark Duff | Ongoing | | |
| | Improve customer satisfaction levels | Review our complaints policy and move to a simplified two stage process. | Paul Fisher | Complete | | |
| Complaints | Success Criteria: Effective monitoring and reporting arrangements established Improvement in speed of response to complaints Introduction of CaseTracker platform to reduce admin burden on services Opportunity to identify trends, insights and lessons learned to improve service delivery | Performance data, including that relating to complaint handling and learning, is regularly reviewed by our Executive Leadership Team (ELT) and Cabinet, and will be reported through our quarterly published report from April 2024. | Paul Fisher | Ongoing | | |
| Debt | Continue to be in the top quartile for income collection in London for Council Tax, business rates and rent. Success Criteria: Collection rates maintained for NNDR and Council Tax, debt is dealt with quickly to reduce the debts owed to the Council. Reduction in debt levels achieved | Set up a debt recovery board to focus on high volume / high amount debts. Using data to focus and target our efforts to identify | Kathy Freeman | Ongoing | | |

| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|-------------------|--|---|----------------------------|-----------|---------------|
| Housing | The reliance on hotel accommodation, particularly chain hotels, remains a risk to the council Success Criteria: Supply from private rented sector is able to help mitigate demand. | Deliver 2000 units over 5 years, across 11 schemes with equity fund partners, (to be used to reduce the reliance on hotel accommodation and typically expensive night rates). Improve the quality of our private sector lease stock. | Patrick Odling- Smee | Ongoing | |
| Climate Change | To implement the Havering Climate Change Action Plan Success Criteria: • The Council is carbon neutral by 2024 | Continue to monitor the Climate Change Action Plan through annual report to Cabinet | Kathy Freeman | Ongoing | |

Technology & Innovation

We recognise that a key driver to improving productivity is to manage our systems and data well in order to become a data driven organisation, as emphasised in our Corporate Plan for 2024/25. Our data is regarded as a valuable resource which is used every day to run our services, and in a proactive manner to inform early intervention and demand management.

Technology

| Objectives | Actions | ELT lead | Timescale | RAG Rating |
|--|---|-----------|-----------|---------------|
| Reduce the challenges from ageing legacy systems including cyber and operational failure risks, the lack of APIs to interrogate the data and the need for maintenance budgets to keep them supported. | As part of the Service and System Improvement Plan, review, upgrade and migrate away from legacy systems to modern Software as a Service platforms. | Mark Duff | Ongoing | |
| Success Criteria: All new systems provided as SAAS or hosted in our cloud environment Native API integration for all new systems Implementation of new system procurement principals based on the above | Add rigour to the selection of new systems through the use of guiding principles, to ensure compatibility and integration with our current systems. | Mark Duff | Ongoing | |

| LBH IIIIprovenient & Transformation Plan | | | | July | |
|--|---|---|---------------------|-----------|---------------|
| Objectives | | Actions | ELT lead | Timescale | RAG Rating |
| Azure tools which inclu | map incorporates the introduction of MS ude AI and predictive analytics. | Test generative AI in the form of Beam Magic notes in Adult Social Care and co-pilot in People initially for supervision, notetaking, minuting and document creation. | Barbara Nicholls | Ongoing | |
| Predictive accuracy | iciency for key workers y in BI to predict tends and outcomes | Expand the use of Co-Pilot to our BI environment to assist us with general report creating and also predictive analytics. | Mark Duff | Ongoing | |
| services for health, we health, such as cost of clinical services, (such | mlessly into local and nationwide support ellbeing and the wider determinants of living support to reduce demand on key as urgent care and GP practices) as | Implement the "Joy" app, a new referral and case management system for all frontline workers and social prescribers. | Luke Burton | Ongoing | |
| services themselves. Success Criteria: Frontline workers preventative suppo | using "Joy" to refer residents into ort cessing preventative support | Use the wealth of analytics on the Joy platform to show the volumes of referrals into different services, key support needs of residents of different demographics and gaps in service provision, to inform future commissioning decisions. | Luke Burton | Ongoing | |
| Provision of timely and Success Criteria: | d pertinent datasets across all services | Develop and publish a suite of Power BI management reports for officers and decision makers in various services such as social care and housing. | Mark Ansell | Ongoing | |
| Data is used to inform | evidence based decision making | Use the provision of exception highlight reports to allow managers to quickly establish any issues with data quality and therefore supports continuous improvement. | Mark Ansell | Ongoing | |
| | | Look at developing this automation further by exploring data lake technologies. | Mark Duff | Ongoing | |
| Success Criteria: Delivery of the 'Trigger | on of health and social care data rs for Care' project and subsequent nagement (PHM) interventions arising | Support more joined up working and improved data integration between the local authority and its health partners | Mark Ansell | Ongoing | |

Innovation

Despite our financial position, there are a number of examples of innovation in Havering, including the delivery of our new Target Operating Model which includes an integrated team across the Council and NHS and embedding of the life stage approach to improving outcomes for residents. We are making good progress in our use of data, with our cost of living risk model attracting interest from other LAs in the region, and Havering (with Newham) is leading the way within North East London on a number of projects involving the integration of health and social care data. DLUHC were very impressed with our 'single view of adolescent risk' at a visit (June 2023) under the Supporting Families programme.

| | Innovation | Expected Outcome | ELT Lead | Timescale |
|------|---|---|---------------------|-----------|
| | A proposed "Family Welcome Centre" will provide emergency accommodation for vulnerable families in Havering. It will form the first phase of the Harold Hill Town Centre Regeneration Masterplan vision, and includes the redevelopment of the Farnham and Hilldene Estate, Chippenham Road and the current Abercrombie House hostel. | Reduce costs in an area where demand is increasing. | Tara Geere | Ongoing |
| Page | Use the 'Barking Havering & Redbridge (BHR) Integrated Hospital Discharge Hub' as a shared efficiency. | Reduce the duration and cost of hospital stays and get the best outcomes for people. | Annette Kinsella | Ongoing |
| 119 | The 'Triggers for Care' project is an innovative project involving the linkage of data from social care and health records in order to better understand the circumstances that most commonly lead to an individual requiring a first social care package, or an enhancement of an existing care package. | Progress in delivering the 'Triggers for Care' project*. This will then inform our approach to Population Health Management. The foundational work undertaken to support this project will also enable, at a later stage, the linkage of data for direct care purposes, with the aim of providing a more joined up service and better experience and outcomes for individuals receiving care. | Mark Ansell | Ongoing |
| | Through the Supporting Families Programme explore how | Launch our 'automatic feedback' module through our case management system to build on partnership engagement and communication routes. | Tara Geere | Complete |
| | best to make use of our resources (especially digital) to ensure positive momentum is continued with evidencing multi-agency interventions and outcomes for families. | Exploring the completion of Multi-Agency Safeguarding Hub (MASH) checks through this system, which would make the collation and analysis of data more efficient, reduce manual processes and duplication and ultimately lead to timelier decision making outcomes. | Tara Geere | Complete |

| Innovation | Expected Outcome | ELT Lead | Timescale |
|--|---|-------------------------|-----------|
| As part of the Council's strategy relating to the on-going Cost of Living Crisis, develop a household-level Risk Model of Havering residents by combining datasets from the Council, the NHS and external sources. | Target communications, signposting those most at need, to financial information and support, for example advice on unclaimed benefits or grants | Patrick Odling- Smee | Complete |
| | Predict and reduce escalation of need, for example financial hardship leading to crisis intervention and use of statutory services. | Patrick Odling- Smee | Complete |

Agile and Engaged Workforce

Research by Gallup³⁰ substantiates the link between employee engagement and productivity. Engaged employees are critical for high performance: they are more productive, better collaborators, and likely to stay with the company longer. In contrast, disengaged employees can lead to decreased productivity, lower morale, and higher turnover rates. In Havering the staff turnover rate of 9.3%, which is lower than the London borough average of 12.9%. The following actions demonstrate the value we place in our workforce and our commitment to ongoing development.

| Objective | Action | ELT lead | Timescale |
|--|--|------------------|-----------|
| Continuous professional development and learning opportunities Success Criteria: All staff and members to have access to 10 days' of learning. Staff are able to take advantage of apprenticeships, mentorships and webinars 24/7 access to over 400 training modules that can be undertaken online or face to face. | Embed a new Learning Experience Platform and continue to review content and ensure relevance | Kathy Freeman | Ongoing |
| Leadership development to enable programmes managers to feel more confident in their roles. Success Criteria: • Staff attending training and embedding in their work | Introduce 'Aspiring Leadership' and 'Developing Diverse Leaders' | Kathy Freeman | Ongoing |

 $^{^{30}\} https://www.gallup.com/workplace/236927/employee-engagement-drives-growth.aspx$

| Objective | Action | ELT lead | Timescale |
|--|---|------------------|-----------|
| Staff feel informed and empowered. Success Criteria: • Staff attendance at update meetings / forums • Launch of staff intranet • Staff engagement measured by Pulse survey | Continue the regular two-way communication channels such as Let's Talk, Member and Leader updates, colleague forums and regular meetings with our union partners. | | Ongoing |
| | Development of a new staff intranet to provide the opportunity to co-design ideas and processes and create groups of change champions from across the council. | Paul Fisher | Ongoing |
| | Staff surveys will be undertaken every six months as measure of staff engagement. | Kathy Freeman | Ongoing |

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Agenda Item 10



REPORT OF CABINET

Full Council: 24 July 2024

New Productivity Plan

Council have been asked to note and endorse the New Productivity Plan (attached).

The Government is reviewing productivity across all public services and local government is included in this exercise. DLUHC have asked all councils to complete a Productivity plan which must be approved and published by the 19th July.

The plans will be used to identify common themes and issues across the sector to highlight best practice, but the plans will neither be rated nor scored, nor will there be any league tables. Potentially the plan may inform future funding.

Our Productivity plan aligns with the Councils Improvement and Transformation Plan, which is one of the Conditions of the Capitalisation Direction the Council applied for in February 2024, and sets out the work that we, the council, undertakes alongside other public services.

Accordingly, it is RECOMMENDED:

That Council notes and endorses the New Productivity Plan and associated actions.





CABINET 17th July 2024 Subject Heading: **DLUHC Productivity Plan Cabinet Member:** Councillor Ray Morgon ELT Lead: Kathy Freeman, Strategic Director, Resources Report Author and contact details: Louise.warner@havering.gov.uk Jodie.Gutteridge@havering.gov.uk **Policy context:** The recent Local Government Finance Settlement announced that all councils would be asked to produce productivity plans. Financial summary: There are no specific financial issues arising from the approval of the plan. It is expected that the Productivity Plan will be delivered within approved budgets. Financial implications of specific proposals will be assessed on an individual basis as part of the relevant decision-making process. No Is this a Key Decision? When should this matter be reviewed? Reviewing OSC: Overview and Scrutiny Board

The subject matter of this report deals with the following Council Objectives

People – Supporting our residents to stay safe and well x

Place - A great place to live, work and enjoy x

Resources – Enabling a resident-focussed and resilient council

SUMMARY

Χ

The Government is reviewing productivity across all public services and local government is included in this exercise. The recent Local Government Finance Settlement announced that councils would be asked to produce productivity plans. A letter received 16th April 2024 formally started that process with a submission deadline for plans on the 19th July 2024.

Local Government have done a huge amount in recent years to improve productivity and efficiency, however, lock down and the more recent cost of living crisis have proved challenging. The productivity plan has been requested of all councils and will help DLUHC understand what is working well, and what more is needed to unlock future opportunities and any gaps.

This is a particular challenge for Havering council, due to the significant systemic underfunding since 2020 and the low costs, actions already taken to date.

RECOMMENDATIONS

Cabinet is asked to make the following recommendations:

1. Approve the Productivity Plan.

REPORT DETAIL

- 1.1 The purpose of this report is to present the content of the Council's Productivity Plan in response to the Local Government request from the Department of Levelling Up, Housing and Communities (DLUHC).
- 1.2 DLUHC have asked all councils to complete a Productivity plan. The plan must have member oversight and endorsement of the plan before it is submitted and published on our website by the 19th July.
- 1.3 Although the plans were not expected to be written in a particular template they were expected to be around three or four pages in length and set out what the council has done in recent years, alongside current plans to transform the organisation and services.

1.4 The plan should consider 4 themes, and reference the work we, the council, undertakes alongside other public services.

Theme one: How we have transformed the way we design and deliver services to make better use of resources.

Theme two: How we plan to take advantage of technology and make better use of date to improve decision making, service design and use of resources.

Theme three: Our plans to reduce wasteful spend within our organisation and systems.

Theme four: The barriers preventing progress that the Government can help to reduce or remove.

- 1.5 The Council's Productivity Plan will respond to the four themes with an independent approach with language appropriate to the Council Plan and associated processes that are already delivering productivity.
- 1.6 The plans will be used to identify common themes and issues across the sector to highlight best practice, but the plans will neither be rated nor scored, nor will there be any league tables.
- 1.7 For Havering, the Productivity plan will align with the Councils Improvement and Transformation Plan, which is one of the Conditions of the Capitalisation Direction the Council applied for in February 2024.

REASONS AND OPTIONS

Reasons for the decision:

All councils must provide a productivity plan, which has received member oversight, by the 19th July 2024 as set out in the letter to all chief executives on the 16th April 2024.

Other options considered:

Do not approve the productivity plan. This option was quickly dismissed as if Cabinet do not approve we will miss the submission deadline of the 19th July.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no immediate additional financial implications arising from approving the Productivity Plan. It is expected that the work identified within the Productivity Plan will be delivered within approved Revenue and Capital budgets in this financial year

Cabinet, 17 July 2024

and any issues arising will be flagged as part of the normal budget monitoring process. The Financial implications of specific proposals will be assessed on an individual basis as part of the relevant decision-making processes. Additional future costs and any new savings or benefits delivered will be considered as part of the annual MTFS (Medium Term Financial Strategy) cycle.

Legal implications and risks:

There are no immediate legal implications arising from this report.

Human Resources implications and risks:

There are no major direct HR implications or risks from this report. Any HR issues which occur will be managed in accordance with the Council's HR policies and procedures and any change processes that are required will be managed in accordance with both statutory requirements and the Council's Organisational Change Policy and Procedure and associated guidance.

Equalities implications and risks:

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) the need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are: age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

Equality impact assessments are systematically carried out for any services, projects or other schemes that have the potential to impact on communities and / or staff on the grounds of particular protected characteristics or socio-economic disadvantage.

Equalities assessment is normally required for significant impacts upon ANY of the "protected characteristics". As this is a Plan that pulls together the work that is

Cabinet, 17 July 2024

already being completed or due to start, an assessment is not required at this stage, but will be considered for any future projects.

Health and Wellbeing implications and Risks

Under the Health and Social Care Act 2012 the Council is responsible for improving and protecting the health and wellbeing of local residents. Havering Council is committed to improving the health and wellbeing of all residents.

There are no health and wellbeing implications arising from the proposed decision to approve and publish this Productivity Plan.

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

The Council has committed to taking action towards the organisation and the borough becoming carbon neutral by 2040.

According to figures from Google, one internet search produces 0.2g of CO₂. The average website produces as much as 1.76g of CO₂ per page view. An average website with 10,000 page views per month could generate 211kg of CO₂ per year, which is the same as would be absorbed by 105 trees in a year. It is not envisioned that the productivity plan on the council's website will reach 10,000 views per year, so by approving and publishing the productivity plan is unlikely to make a significant impact on the climate.

No detrimental climate change implications or risks are expected as a direct outcome of this plan.

BACKGROUND PAPERS

Appendix 1: Havering Productivity Plan 2024



Introduction & Background

Havering is a well-run and cost effective Council, despite being systemically underfunded since 2010, and receiving the third lowest level of general grant support of all London Councils. Our unit costs are the 16th lowest compared to 16 other Outer London boroughs, i.e. the lowest as assessed by LG Futures. We are ranked by IMPOWER (at their last point of formal publication) as being the 5th most productive council in the country. Our income collection for Council Tax is in the top-quartile in London, and, despite having the 5th lowest core spending power in London, our performance against the Oflog dataset is strong overall.

The Borough's young people population is growing rapidly and, according to the Census, we are the fourth fastest growing in percentage terms nationally. This is alongside the second oldest population in London, which is also increasing. We have been vocal and transparent about the need for fundamental reform which recognises our systemic underfunding in light of the diverse and complex needs of our fast growing population, which we cannot resolve on our own. In November 2023 we applied for a capitalisation direction of *ca.* £54m to enable the Council to set a legally balanced budget for 2024/25. This has been agreed in principle subject to an external assurance review of our current financial management arrangements, and the production of an Improvement and Transformation plan, focused on delivering the Council's key objectives and our plan to secure the medium term financial position.

We welcome this opportunity to evaluate what productivity means for Havering, and to broaden our focus from efficiency and cost saving.

ar Vision – The Havering you want to be part of

Since November 2022, the Council has set a vision and has also agreed three member priorities and a refreshed corporate plan. Member priorities are: 'Improved Customer service and Resident Engagement', 'Digital Capability' and more recently 'Financial Stability', with an emphasis on lobbying of central government as outlined in our Corporate Plan).

The Vision and new Corporate Plan start the 'Golden Thread' in Havering. This feeds into Director Service plans through a balanced scorecard approach, and filters down to individual performance reviews. Interactive Power BI Corporate Performance Reports monitor the Corporate Plan KPIs, with the first report due in August for Q1 2024-25 data.

Transforming the way we design and deliver services

Despite our financial position, there are a number of examples of innovation in Havering, including the delivery of our new Target Operating Model which includes an integrated team across the Council and NHS and embedding of the life stage approach to improving outcomes for residents.

In order to support greater productivity and resilience, we need to agree an affordable transformation programme to build on the progress we have already made. As members of the Local Government AI network we are keen to push forward with projects that could realise future savings, however the investment to undertake this in a cash poor, albeit well run council, is a significant barrier.

| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|------------------------------|---|--|--------------------------|-----------|---------------|
| Target Operating Model | Redesign the organisation to include clear design principles that support collaboration and promote efficiency and productivity. Success Criteria: Organisation structure in place and culture change taking place | Redesigned the organisation into three areas of 'People', 'Place' and 'Resources' | Andrew Blake- Herbert | Complete | |
| Health and Social Care | Bring together key elements of health and care and the budgets that support those services. Success Criteria: Integrated teams set up and joined up working arrangements established | Create an integrated team between Havering and NHS North-East London (NEL) | Andrew Blake- Herbert | Complete | |
| Page ` | | Human Resources & Organisational Development to move back into Resources Directorate | Kathy Freeman | Complete | |
| 132 | borough. Detailed plans were put in place to bring specific services back into Havering over an 18-month period. Human Resources & Organisational | Financial Business Partners to move back to the Resources Directorate. | | Complete | |
| oneSource Shared | Development, Financial Business Partners and Procurement have now all moved back to the | Procurement to move back to the Resources Directorate. | | Complete | |
| Service | Service Resources Directorate. Success Criteria: Teams returned to respective boroughs and provide excellent support services | Legal & Governance and Transactional Services are currently remaining as a shared service in OneSource. | | Ongoing | |
| ICT | ICT to process the division back to a sovereign IT service which will secure access to dedicated technical resources and a Havering-only focused digital strategy. | Under the new operating model, work has started on understanding, refocusing and reframing current transformation project portfolios into four new categories. These are: • IT Sovereignty: Decoupling of technology and IT services provided by oneSource and creation of Sovereign IT Service | Mark Duff | Ongoing | |

| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|---------------------------|--|--|-------------|-----------|---------------|
| | Success Criteria: Successful separation of technology and IT services from oneSource. Establishment of a fully functional Sovereign IT Service. Measurable improvements in service agility and responsiveness. | Service and System Improvement: Upgrade and migration from ageing legacy systems (presenting cyber and operational failure risks) to modern Software as a Service platforms. In doing so we are reviewing service outcomes, processes and data to ensure we maximise the opportunity of change to modernise our ways of working and deliver better resident outcomes. BAU: IT BAU projects Business Lead: Projects request that come directly from a service | | | |
| Page 133 Commissioning | Improvements in commissioning arrangements are expected under our new integrated team at place. This brings together key elements of health and care and the budgets that support those services, with a joint senior leadership structure under the Director of Partnership, Impact and Delivery, that aims to reduce barriers and duplication, and increase value for money. Focus on partnership working, including leveraging funding from partners to increase the reach of our voluntary sector Success Criteria: Team bought together and vacant roles recruited into. Develop joint commissioning priorities focussed on quality, efficiencies and value for money, particularly where there is duplication. Manage large commissioning programmes to deliver savings and spend reductions | Programme Plan for each life cycle (starting well, living well, ageing well), including delivery of Supported Housing and Residential Care programme. Commissioning of service for Mawneys Close and Mowbrays Close site development Costed business case development for future schemes, including capital and net revenue savings | Luke Burton | Ongoing | |

| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|---|--|--|------------------|-----------|---------------|
| Reduce hospital readmissions and associated costs Success Criteria: Delivery of 2024/25 MTFS following pilots Ward led enablement Community reablement | Reduce hospital readmissions and associated costs. Success Criteria: | Use a ward-led enablement pilot to support patients against decline during their hospital stay and increase their confidence in returning to their home environment. | | | |
| | Ward led enablement | Discharge to Assess (D2A) residential pilot is to trial the use of block beds for residential D2A. This will align therapy support alongside the care home and the social workers. | Annette Kinsella | Ongoing | |
| | | Creation of local care home capacity | | | |
| Page 134 Customer Relationship Management (CRM) | Deliver improved resident experience and service efficiency through the implementation of a modern, fit for purpose Digital Platform. Success Criteria: User Satisfaction: Ensuring that the new CRM platform enhances the user experience for residents, with a focus on ease of use and accessibility Service Efficiency: Measuring the improvement in service delivery times and efficiency, including faster response times for service issues, Freedom of Information requests, and complaints Scalability and Future-Proofing: The platform should be scalable to accommodate future growth and adaptable to potential changes in technology or service requirements | A CRM platform will deliver improved resident experience and service efficiency through the implementation of a modern, fit for purpose Digital Platform built on Dynamics 365. This will replace the Council's ageing 'My Havering' online portal, and its associated contact centre processes and back office integrations. The programme will be delivered incrementally over a four-year period. CRM Phase 1, which is now in the closedown stage, has improved the online customer experience with enhanced maps for reporting service issues, meaningful status updates and closure reasons on completion of works, Freedom of Information requests, and complaints. | Mark Duff | Ongoing | |
| Complaints | Improve customer satisfaction levels | Review our complaints policy and move to a simplified two stage process. | Paul Fisher | Complete | |

| Area | Transformation Objective | Action | ELT Lead | Timescale | RAG Rating |
|-------------------|---|---|-------------------------|-----------|---------------|
| | Effective monitoring and reporting arrangements established Improvement in speed of response to complaints Introduction of CaseTracker platform to reduce admin burden on services Opportunity to identify trends, insights and lessons learned to improve service delivery | Performance data, including that relating to complaint handling and learning, is regularly reviewed by our Executive Leadership Team (ELT) and Cabinet, and will be reported through our quarterly published report from April 2024. | Paul Fisher | Ongoing | |
| Page 135 | Continue to be in the top quartile for income collection in London for Council Tax, business rates and rent. Success Criteria: Collection rates maintained for NNDR and Council Tax, debt is dealt with quickly to reduce the debts owed to the Council. Reduction in debt levels achieved | Set up a debt recovery board to focus on high volume / high amount debts. Using data to focus and target our efforts to identify | Kathy Freeman | Ongoing | |
| Housing | The reliance on hotel accommodation, particularly chain hotels, remains a risk to the council Success Criteria: • Supply from private rented sector is able to help mitigate demand. | Deliver 2000 units over 5 years, across 11 schemes with equity fund partners, (to be used to reduce the reliance on hotel accommodation and typically expensive night rates). Improve the quality of our private sector lease stock. | Patrick Odling- Smee | Ongoing | |
| Climate Change | To implement the Havering Climate Change Action Plan Success Criteria: • The Council is carbon neutral by 2024 | Continue to monitor the Climate Change Action Plan through annual report to Cabinet | Kathy Freeman | Ongoing | |

Use of technology and better use of data to improve decision making

We recognise that a key driver in improving productivity is to manage our systems and data well in order to become a data driven organisation, as emphasised in our Corporate Plan for 2024/25. Our data is regarded as a valuable resource which is used every day to run our services, and in a proactive manner to inform early intervention and demand management.

A good example of how we use data is through our Single View of people, properties and businesses. Combining the data from the different systems used by Council services through the use of unique identifiers and matching algorithms enables us to see a full picture or "single view" of our residents. This in turn allows data to be shared internally between departments, subject to the correct access permissions. It is a valuable resource for checking data integrity and maintaining accurate records, to minimise the proliferation of disparate and non-standardised data sources and support effective decision-making and service delivery. It is also used for our own in-house detection of potential fraud and in annual savings exercises, (such as those undertaken by the London Counter Fraud hub), for example Council Tax single person discount and Freedom Pass verification. It is used in services such as Electoral Registration to verify the details of new voters and as an additional check before the removal of those no longer eligible. We have recently been able to use single view data to underpin our targeted marketing campaign "Havering helps", which aims to get financial support quickly to eligible residents when they need it most.

The particles there is an ongoing process of continuous improvement which is supported by diligent Information Governance, and transparent reporting protocols. Foliable data resources include:

- •_The Havering Data Intelligence Hub https://www.haveringdata.net
- wavering Local Insight https://havering.localinsight.org/, which focusses on public health
- Havering online mapping https://www.havering.gov.uk/info/20143/contact_us/186/online_mapping_system
- Havering Consultation site https://consultation.havering.gov.uk/
- Havering internet site www.havering.gov.uk which has a specific page dedicated to the publication of financial data and transparency information https://www.havering.gov.uk/info/20044/council data and spending
- The MyHavering account https://www.havering.gov.uk/info/20205/my account. This is an online facility which supports self-service by allowing residents to view their Council accounts in one place.

We regularly share data with many partners including the NHS, Companies House, Electoral Reform Commission, and the ONS. We also value the benefit of collaboration with organisations such as the London Office of Technology and Innovation (LOTI), who have substantially improved digital collaboration across London since 2019. Sharing data is essential to a number of Council processes and improves outcomes for residents by getting things right first time and speeding up processes. It is monitored through the use of data sharing impact assessments and data sharing agreements. Our privacy notice https://www.havering.gov.uk/privacynotice informs residents of how we gather and process their personal information and their individual data rights.

| Objectives | Actions | ELT lead | Timescale | RAG Rating |
|---|---|---------------------|-----------|---------------|
| Reduce the challenges from ageing legacy systems including cyber and operational failure risks, the lack of APIs to interrogate the data and the need for maintenance budgets to keep them supported. Success Criteria: • All new systems provided as SAAS or hosted in our cloud | As part of the Service and System Improvement Plan, review, upgrade and migrate away from legacy systems to modern Software as a Service platforms. | Mark Duff | Ongoing | |
| environment Native API integration for all new systems Implementation of new system procurement principals based on the above | Add rigour to the selection of new systems through the use of guiding principles, to ensure compatibility and integration with our current systems. | Mark Duff | Ongoing | |
| Our Technology Roadmap incorporates the introduction of MS Azure tools which include AI and predictive analytics. | Test generative AI in the form of Beam Magic notes in Adult Social Care and co-pilot in People initially for supervision, note-taking, minuting and document creation. | Barbara Nicholls | Ongoing | |
| Success Criteria: Increased time efficiency for key workers Predictive accuracy in BI to predict tends and outcomes | Expand the use of Co-Pilot to our BI environment to assist us with general report creating and also predictive analytics. | Mark Duff | Ongoing | |
| connect residents seamlessly into local and nationwide support services for health, wellbeing and the wider determinants of health, which as cost of living support to reduce demand on key clinical services, | Implement the "Joy" app, a new referral and case management system for all frontline workers and social prescribers. | Luke Burton | Ongoing | |
| (Such as urgent care and GP practices) as residents will be empowered to find more appropriate support services themselves. Success Criteria: Frontline workers using "Joy" to refer residents into preventative support More residents accessing preventative support | Use the wealth of analytics on the Joy platform to show the volumes of referrals into different services, key support needs of residents of different demographics and gaps in service provision, to inform future commissioning decisions. | Luke Burton | Ongoing | |
| Provision of timely and pertinent datasets across all services | Develop and publish a suite of Power BI management reports for officers and decision makers in various services such as social care and housing. | Mark Ansell | Ongoing | |
| Success Criteria: Data is used to inform evidence based decision making | Use the provision of exception highlight reports to allow managers to quickly establish any issues with data quality and therefore supports continuous improvement. | Mark Ansell | Ongoing | |

| Objectives | Actions | ELT lead | Timescale | RAG Rating |
|---|--|-------------|-----------|---------------|
| | Look at developing this automation further by exploring data lake technologies. | Mark Duff | Ongoing | |
| Progress the integration of health and social care data Success Criteria: Delivery of the 'Triggers for Care' project and subsequent Population Health Management (PHM) interventions arising from it | Support more joined up working and improved data integration between the local authority and its health partners | Mark Ansell | Ongoing | |

Your plans to reduce wasteful spend within your organisation and systems

Havering is a well-run Council and significantly experienced in the elimination of wasteful expenditure, borne from years of systemic underfunding against unprecedented levels of demand. We are focused on maximising our financial sustainability by reducing demand and increasing productivity. We have resilience and recovery boards to monitor spending activity and our ongoing plans to reduce wasteful spend include the following:

| ပ Grea O | Objective | Actions | ELT Lead | Timescale | RAG rating |
|------------------|---|---|------------------|-----------|---------------|
| 138 Workforce | Reduce agency and consultancy cost Success Criteria: Agency and consultancy costs are reduced. | Review of agency and consultancy costs across all services whilst increasing capacity in critical services including social care and housing. | Kathy Freeman | Ongoing | |
| | Review of staff resources to ensure the right capacity and capability supports delivery of efficiencies and savings | Recruitment panel for all posts to see if the vacancy can be held or the role stopped/paused | Kathy Freeman | Complete | |
| | Success Criteria: Maintenance of vacancies across the Council wherever | Maintaining holding of vacancies across the Council wherever possible | | | |
| | possibleSuccessful MTFS deliveryReduced agency use | Move staff who are working for Havering as agency onto fixed term/permanent contracts | rreeman | | |
| | | Invest to save proposals to support delivery of MTFS | | | |
| | LGA commissioned independent review of our EDI arrangements | Invest £250k in a programme of work to support the move to a self-service model and reduced the need for a permanent EDI team. | Kathy Freeman | Complete | |

| Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|--|---|---|---------------------|-----------|---------------|
| | Success Criteria: A self-service model is adopted and the EDI team is no longer required. | | | | |
| | Reduce tenancy arrears Success Criteria: Arrears reduced | Focus on collecting former tenant arrears for Council and PSLs (currently about £2m each) | Paul Walker | Ongoing | |
| Housing | Supported accommodation for care leavers | Monthly review of each young person's plan. | | | |
| , and the second | Success Criteria: To ensure all our care leavers eligible for housing obtain their tenancy and hold on to it as a responsible adult. To reduce the spend on supported accommodation for this cohort of young adults | New Panel, to track all care leavers who require housing in the borough. | Tara Geere | Ongoing | |
| Page 139 | Social care placements are both appropriate for the service user and represent best value for the authority | Reviews of all high-cost social care placements | Annette Kinsella | Ongoing | |
| | Success Criteria: Reduction in cost of high-cost social care placements Reduction in no of out of borough placements | Review of placements to identify in-house opportunities rather than more expensive out of borough placements | Tara Geere | Ongoing | |
| Health & | Review agency expenditure in Starting Well | Implementation of AYSE newly qualified social worker posts | Tara Geere | Ongoing | |
| Social Care | Success Criteria: £1.23m of overspend in Starting Well during 2023/24 was largely attributed to staffing costs and reliance on agency workers. We will reduce costly agency expenditure | The Council is currently developing new staff structures as part of its response to the recent OFSTED judgement and will actively aim to recruit permanently to this structure in order to minimise dependency on agency staff moving forwards. | Tara Geere | Ongoing | |
| | Joint work with Health and hospitals to ensure costs for continuing care are shared appropriately | Work even more closely with NHS NEL to: provide a more robust process to ensure children and adults are supported jointly in care planning | Luke Burton | Ongoing | |

| Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|-------------|---|--|------------------|-----------|------------|
| | Success Criteria: Children and adults are supported in care planning Fairer formula is agreed Funding is shared | ensure system-wide funding is shared using a fairer formula agreed by NHS NEL ICB an NEL Local Authorities. ensure better value from health and social care commissioning through joined up funding where possible and reduced friction between services. | | | |
| Education | Reduce spend on Home to school transport by promoting the use of a personal transport budget. Success Criteria: Spend on Home to school transport reduced | Use of a prepaid card and individual accounts offered to families so they can organise their own transport, in addition to paying for a travel card for parents to escort their child to school/college using public transport. | Tara Geere | Ongoing | |
| Page 140 | MTFS and Star Chamber processes are built into the annual budget setting cycle Success Criteria: Savings are made through Members and officers reviewing the following: • Assumptions in the MTFS on income, expenditure, inflation, demographic growth • Delivery of savings put forward to date | Identification of in-year savings proposals and stopping all non-essential or non-statutory spend | Kathy Freeman | Ongoing | |
| Savings | Policy decisions that will have a financial impact, incl. areas of investment required Baselining budgets so there is a shared and deeper understanding of what our money pays for. Opportunities for further savings and what we would stop if we had e.g. 10% less Areas where we can push full cost recovery on fees and charges. | Undertake Star Chambers to ensure we are delivering the £15m of savings agreed in 2024/25 and identify further savings for 2025/26 onwards | Kathy Freeman | Ongoing | |
| Procurement | Support local economic growth, when feasible, and foster a procurement ecosystem that minimises waste and maximises resource utilisation. Success Criteria: The procurement team is committed to exploring and implementing procurement practices which | To maximise the social value opportunity & local economic activity | Kathy Freeman | Ongoing | |

| Area | Objective | Actions | ELT Lead | Timescale | RAG rating |
|-------------------|---|--|-------------|----------------|---------------|
| | carefully weigh the financial benefits of local purchasing against the efficiencies provided by frameworks. | | | | |
| Climate Change | Reduce spend on energy across the Corporate Estate Success Criteria: Energy spend is reduced | Consider and agree options for medium term (4 years) flexible Procurement Framework for the supply of electricity and gas. | Paul Walker | August 2024 | |

Barriers preventing progress that the Government can help to reduce or remove

As emphasised in our letter to Minister Hoare of 28 February 2024, we believe the financial landscape for councils such as Havering is extremely bleak. The Council has made £164m of savings since 2010, sold assets to the value of £160m, and our unit costs are amongst the lowest compared to our neighbouring boroughs. The most significant barrier that Government can support us with is to address the inadequacy of the national funding formula to ensure that funding reflects need. We have evidenced within this plan that we are keen to innovate and maximise productivity within the limited resources available. Regrettably, unless there is fundamental reform which recognises our systemic underfunding in light of the diverse and complex needs of our fast growing population, then the progress we can make will be limited.

Indidition to updating the funding formula, the following Government actions would also help to reduce barriers to productivity:

| ⊕ a | Barrier | Request | ELT lead |
|----------------------|--|---|---------------------|
| For Priority a | attention | | |
| Fees & Charges | Thames Freeport decision | The inclusion of the East Havering Data Centre Campus, Green Energy Infrastructure and Ecology Park in the Thames Freeport, would enable Havering to keep 100% of the business rates for the next 25 years, currently estimated at £50m per year. (Project subject to planning approval). | Neil Stubbings |
| Adult Social Care | Deliver the adult social care funding reforms which are crucial to providing long-term financial certainty for the sector. | Baseline all existing ASC grants and consolidate them into one fund. Implement the Hewitt Review recommendation of 1% of ICB budgets towards prevention. | Barbara Nicholls |
| | The high number of care homes in the borough means we are effectively "importing" residents, and when their funding runs out, we are required to pick up the cost. | Review the definition of a person's "ordinary residence (LA)" within the Care Act. This should be based on their address when they started receiving social care (either from the local authority or self-funded). | Barbara Nicholls |
| | When people funded by another LA/ICB area are placed in Havering and then are sectioned (e.g. S3) again, we are then responsible for the ongoing costs. | Review the definition of a person's "ordinary residence (LA)" within the Section 117 (Mental Health Act). This is a similar issue to the point above for the Care Act. | Barbara Nicholls |

| Area | Barrier | Request | ELT lead |
|---------------------------|---|---|------------------|
| Children's Social Care | Profit making and Risk in Independent Children's Social Care Placement Providers. | Urgently reform the children's social care market to reduce profiteering, as per the Independent review of Children's Social Care. The LGA's report estimates the aggregated income of the top 20 providers to be around £1.94 billion, with the top 6 providers making up as much as 85% of the total profit. | Tara Geere |
| Education | There is a rising demand in the number of children requiring EHCPs and not enough spaces locally. | Allow Local Authority Maintained Schools to change their designation to be able to admit greater numbers of children with EHCPs or convert to become a special school. | Tara Geere |
| Multi-year settlements | One-year settlements. | The uncertainty driven by one-year settlements is a huge barrier to becoming more productive and enabling boroughs to plan services strategically and take invest-to-save decisions. Consider three or four-year settlements as an alternative. | Kathy Freeman |
| P | Ringfences and reporting | Remove ringfences and reporting requirements associated with grant funding to empower and trust councils to get on with delivering services. | Kathy Freeman |
| P ရွှ @ rant | Funding pots | Reduce the number of specific funding pots and arduous bidding processes, particularly in economic development and skills. | Kathy Freeman |
| fanding 42 | Public Health grant | Address Public Health underfunding relative to need, (data used to determine fair share more than 10 years old and historical underfunding by NHS never fully remedied), to reflect the rapidly changing population and needs of the borough. Currently Havering's 24/25 Public Health Grant (PHG) is £12,287, the equivalent of £45.6 per head. This is the 125 th lowest out of 155 local authorities in receipt of the grant. | Mark Ansell |
| Pay Award | At the moment Havering spends in the region of 5-10% of our reserves on inflation costs. | Updating the funding formula to include the pay award would reduce this financial burden. | Kathy Freeman |
| ICT / Innovation | Investment cost of AI projects | Becoming a funded partner in government projects would enable us to realise the full potential from AI and reduce costs | Mark Duff |
| Social Care | LAs competing on Agency worker Pay | Consider expanding legislation around children's agency workers to adult social care and other key roles (for example Occupational Therapists). | Tara Geere |
| | Outdated funding formula not reflective of our population needs | Ensure the Social Care Grant reflects children's social care needs (rather than only adult social care relative needs) | Tara Geere |
| Education | Improve identification of children at risk of harm | Introduce a mandatory register for electively home educated children | Tara Geere |

| Area | Barrier | Request | ELT lead |
|----------------------|--|--|----------------------------|
| Education | Lack of financial certainty in respect of DSG | Extend the DSG statutory override to provide financial certainty for councils – otherwise at least a quarter of councils risk running out of general fund reserves | |
| | | Consider writing-off accumulated DSG deficits | Tara Geere |
| Apprentice- ships | Requirement of unused Apprenticeship funds to be returned to government. | We would like to use more of the levy to fund employment opportunities for young people and carers and not just the courses/qualifications, instead of having to return the grants back to government. If we continue on the projector that we are seeing today, we give approximately £700k back which we would be able to offer approximately 20 young people employment on a G4 role an average salary of £35k (including on costs) | Julie Harris |
| | Right to buy legislation | Allow councils to retain 100% of Right to Buy receipts generated to support new housing development | Paul Walker |
| | | Remove the cap on the proportion of individual sites that can be funded through Right to Buy receipts | Paul Walker |
| P | Temporary increases in LHA rates | Make the increase in Local Housing Allowance rates from Autumn Statement 2023 a permanent measure. | Paul Walker |
| Page Housing | Cap on Local Housing Allowance payable for Temporary Accommodation | Remove the cap on Local Housing Allowance payable for Temporary Accommodation in Housing Benefit subsidy (set at 90% of January 2011 LHA rates). | Patrick Odling- Smee |
| 143 | Lack of funding | Provide funding to help councils buy accommodation sold by private landlords | Patrick Odling- Smee |
| | Government policy changes have altered the existing 2012 agreement beyond recognition. | Deliver a new HRA debt settlement based on updated assumptions | Neil Stubbings |
| | Home office bidding outbidding council | Reduce number of hotel rooms bulk booked by the Home Office. (The need for hotel accommodation, particularly chain hotels, remains a risk to the council as low levels of supply from private rented sector are unable to help mitigate demand). | Patrick Odling- Smee |
| | | Reduce number of local properties purchased by the Home Office in the borough. | |
| Regulatory | | Simplify the regulatory framework, including developing a coordinating role for Oflog. | Kathy Freeman |
| framework | Regulatory Framework | Ensure regulators have the appropriate capacity and understanding of councils and local places, including their financial context. | Kathy Freeman |

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COUNCIL, 24 JULY 2024

REPORT OF THE CHIEF EXECUTIVE

SUBJECT: RESOLUTION TO EXTEND SIX MONTH ATTENDANCE

RULE

SUMMARY

Section 85 of the Local Government Act 1972 provides that if a Councillor fails throughout a period of six consecutive calendar months from the date of their last attendance to attend any qualifying meeting of the Authority, they cease to be a Member of the Council unless the failure was due to some reason approved by Council before the expiration of the period.

Councillor Michael White is currently undergoing some medical treatment which has prevented him from attending meetings for some months. The last meeting which qualifies towards his attendance record was at the full council meeting held on 28th February 2024. The six-month expiry period is therefore 28th August 2024.

The matter is being brought to this meeting in order for Council to consider whether there is a reason to approve Councillor Michael White's non-attendance at meetings.

Should the Council approve the reasons for absence, the six-month attendance requirement recommences from the point that the previous six-month period expires. Therefore, Councillor Michael White would continue to be a councillor until at least 28th February 2025. In the event of Councillor Michael White attending a qualifying meeting before 28th February, the dispensation would fall and the six-month rule would reapply from the date of that attendance.

RECOMMENDATIONS

Council is asked to consider whether there is reason to approve Councillor Michael White's non-attendance at meetings and, if appropriate, agree that he be deemed to be exempted from the requirements of Section 85(1) of the Local Government Act 1972 and, accordingly, shall continue to be a Member of the Council.

REPORT DETAIL

Section 85 of the Local Government Act 1972 provides that if a Councillor fails throughout a period of six consecutive calendar months from the date of their last attendance to attend any meeting of the Authority ('six-month rule'), they cease to be a Member of the Council unless the failure was due to some reason approved by the Council before the expiration of the period.

For qualification purposes, attendance can be at any committee, sub-committee or other body discharging functions of the Council or at any meeting to which the Councillor has been formally appointed as a representative of the Council.

The decision whether or not to grant relief from the six-month rule in the case of a councillor failing to attend meetings of the Council is at the Council's discretion.

Councillor Michael White has served on the Council since 5th May 1994.

Councillor Michael White last attended the Council meeting held on 28th February 2024 and has been unable to attend further meetings due to ongoing treatment.

Following this evening's meeting which Councillor White has been unable to attend due to his continued treatment, there are no other qualifying meetings currently scheduled which he could attend before the expiry of the six-month period. The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020 (SI 2020/392), made under section 78 of the Coronavirus Act 2020, previously enabled councillors to remotely attend meetings. However, those regulations expired on 7 May 2021.

Should the Council approve the reason for absence, the six-month attendance requirement recommences from the point that the previous six-month period expires. Therefore, in the event that Councillor does not attend a qualifying meeting between now and 28th August 2024 the dispensation would commence from that date, meaning that Councillor would continue to be a Councillor until at least 28th February 2025.

Should Councillor attend a qualifying meeting before 28th February 2025, the dispensation would fall and the six-month rule would reapply from the date of that attendance.

The Council must consider whether there are reason(s) to grant relief from the application of the Section 85 six-month rule. It is entirely at the Council's discretion whether or not to grant an exemption from the Section 85 requirements and each case should be considered on its individual merits.

Public Background Papers Used in the Preparation of the Report: None

List of appendices: None

Financial Implications and Risks:

In the event of a councillor ceasing to be a Member of the Council, the basic allowance of £10,240 per annum will no longer be payable. The Council would bear the costs of conducting a by-election if one was subsequently requested. However, these are relatively small amounts of money in terms of the Council's budget and can be met from existing resources.

Human Resource Implications and Risks:

None arising directly.

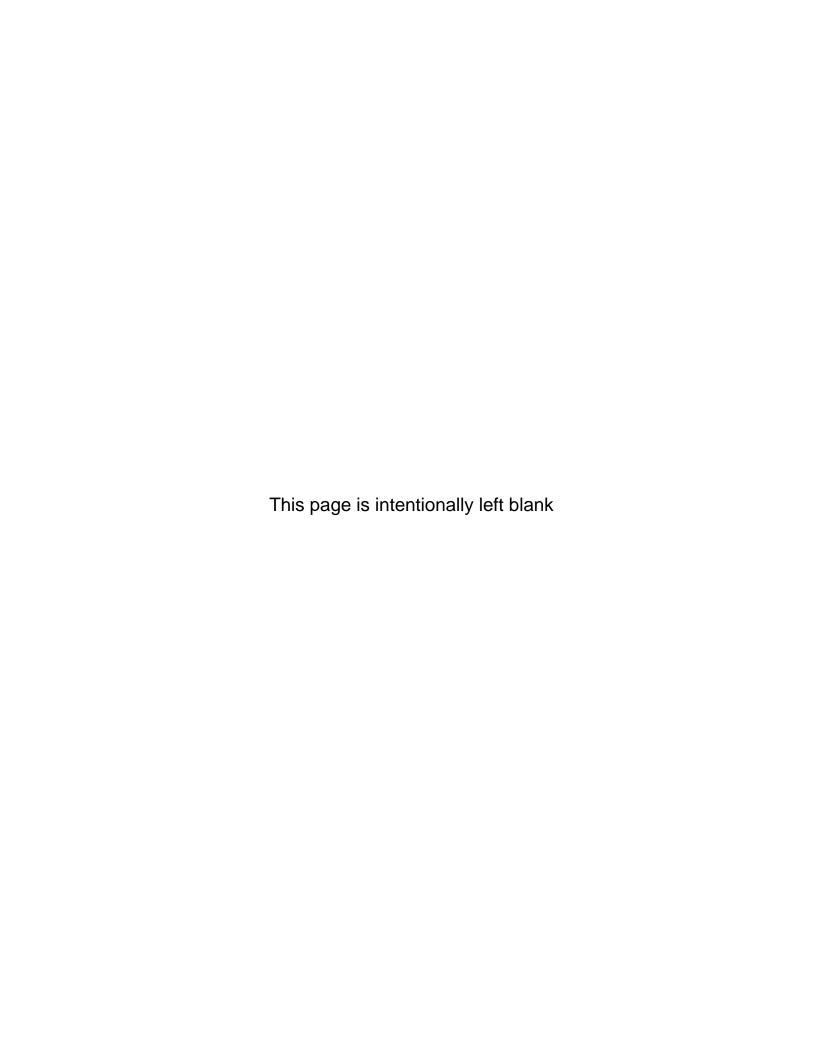
Legal Implications and Risks:

The requirement to attend qualifying meetings and the consequence of non-attendance is set out in Section 85 of the Local Government Act 1972. Failure to attend a qualifying meeting within the stipulated six-month period means that the individual ceases to be a Member of the Council immediately, and that their office as Councillor is vacated, unless that absence is for a reason approved by the Assembly.

There is no specific provision within Section 85 of the Act regarding any extension period that may be granted in the event of non-attendance. Therefore, if the reason for non-attendance is approved the six-month attendance requirement recommences from the point that the previous six-month period expires.

Staff Contact: Zena Smith, Head of Committee and Election Services

zena.smith@havering.gov.uk





COUNCIL 24 JULY 2024

REPORT OF THE MONITORING OFFICER

SUBJECT: CONSTITUTIONAL UPDATES (FLAG FLYING POLICY AND SOCIAL MEDIA PROTOCOL)

Basis

1. This report is presented to Full Council pursuant to para. 2(g) of Part 4.5 of the Constitution.

Background

- 2. This report concerns:
 - a. the Flag Flying and Lighting Up Policy; and
 - b. the Social Media Protocol.
- The Flag Flying and Lighting Up Policy sets out the Council's policy for raising flags over, and lighting up of, the Council's owned (or otherwise controlled) land and buildings.
- 4. The Social Media Protocol is intended to provide such guidance to Members in their use of social media and complements the general rules under the Members' Code of Conduct.
- 5. Neither document is included within the body of the Constitution itself, but sit parallel to it.
- 6. Both documents have been updated by the Monitoring Officer under the guidance of the (cross-party) Constitutional Working Group and have been approved by Governance Committee.
- 7. Full Council is asked to endorse the documents and to direct that Members and Officers abide by it.

Council, 24 July 2024

Recommendations

- 8. Full Council is recommended to approve and endorse the Flag Flying and Lighting Up Policy and the Social Media Protocol.
- 9. Any previous policy or protocol, agreed by the Council or any of its subcommittees, be superseded.

Implications and risks

Financial Implications and Risks:

None directly associated with this report.

Legal Implications and Risks:

There are no immediate legal implications directly associated with this report.

Human Resource Implications and Risks:

There are none directly associated with this report.

Equalities and Social Inclusion Implications and Risks:

There are none directly associated with this report.

Staff Contact: Gavin Milnthorpe
Designation Monitoring Officer

Email: <u>Gavin.milnthorpe@havering.gov.uk</u>

Background papers

None

LONDON BOROUGH OF HAVERING FLAG FLYING AND SPECIAL LIGHTING POLICY (revised 2023)

- 1. This document sets out the Council's policy for raising flags over, and lighting up of, the Council's owned (or otherwise controlled) land and buildings.
- The Council recognises the importance and significance of such gestures.
 However, it needs to mindful of being consistent in its approach and also of the logistical burden it places upon the Council to comply with such requests.
- 3. Please note this is not a technical guide as to how flags should be flown, nor does it describe when flags shown be flown at half-mast. The Council will follow central government guidance on such matters.
- 4. Further, the Council reserves the right to suspend this policy and to remove any existing flags where directed by central government and / or local political circumstances. For example, as a mark of respect to a deceased monarch or the death of the Council's mayor.
- 5. The Council currently flies the Union Flag, the Cross of St George and the Havering flag on the central green (at the Town Hall).
- 6. Residents may make requests to the Council, via the Council's Assistant Director of Regeneration & Place Shaping or Director of Housing & Property. The Director / Assistant Director shall refer the matter to the Leader of the Council (or Deputy Leader in his / her absence) for a decision, such decision to be taken in consultation with the Chief Executive.
- 7. The decision will be at the discretion of the Leader / Deputy Leader, but the decision maker shall be mindful of the criteria below. The same criteria shall apply to any internal decision of the Council to fly a flag or light up a building.
- 8. Requests are more likely to be accepted if they mark:
 - (a) Events of exceptional local, national or international significance or achievement, such as: (list not intended to be exhaustive)
 - (i) Holocaust Memorial Day, 27 January
 - (ii) St George's Day, 23 April
 - (iii) LGBTQ+ Month, June
 - (iv) Remembrance Sunday

- (v) Armistice Day, 11 November
- (vi) Armed Forces Day.
- (b) Events directly organised or financially supported by the Council;
- (c) Events not directly organised by the Council but which may be held wholly or in part in the Borough and be regarded as of significant benefit to the Borough from a tourism or promotional perspective; and
- (d) Significant anniversaries or occasions for charitable, community or other non-profit making organisations based in or with a significant connection to the Borough
- 9. Requests will not be approved where such flag / lighting is:
 - (a) Linked to a party political issue or issue that is politically sensitive;
 - (b) Obviously contentious and risks reputational damage to the Council;
 - (c) Generates a commercial advantage; and
 - (d) Is not in keeping with the purpose and dignity of our civic buildings.
- 10. Requests should normally be made at least one month in advance of the date on which the buildings are to be illuminated or the flag is to be flown.

LONDON BOROUGH OF HAVERING SOCIAL MEDIA PROTOCOL FOR MEMBERS

Purpose of this protocol

- 1. The widespread availability and use of social media networking presents the Council with new opportunities to understand, engage and communicate with our residents. However, if misused, it has the potential to cause considerable damage to the Council, and to those we seek to engage with.
- 2. The Council welcomes Members' use of social media and would like to support this by giving guidance so that Members have greater clarity as to what is and is not acceptable usage of social media.
- 3. This protocol is intended to provide such guidance and complements the general rules under the Members' Code of Conduct.

What is Social Media?

- 4. Social media is the term to describe websites and online tools which allow people to interact with each other by creating their own content. The content could, for example, be blogs, videos, or short messages; these are posted on a wide range of social media platforms including (but not limited to) Facebook, Twitter, LinkedIn, Snapchat, Instagram, YouTube etc.
- 5. It is an innovative way of engaging with people in consultation and participative activities. Local Authorities are expected to lead the way in engaging with residents in local decision making and in improving and strengthening communities and neighbourhoods, and used effectively, social media can be particularly useful in engaging with those who would not normally have access to local councillors and politics.

Social Media and Members

- 6. It is not a requirement for Members to use other forms of social media to fulfil their job as a Member. However, if you are using or planning to use social media in connection with your work as a councillor, or are already using such media in your private capacity, these guidelines will be relevant.
- 7. Remember that, whenever you act or appear to act in your official capacity, you must comply with the Members' Code of Conduct.
- 8. Social Media can be used:
 - a. To support councillors in performing their community leadership role

- b. To keep in touch with or obtain local views and opinions
- c. For political campaigning
- d. For campaigning on local issues

Things to bear in mind

- 9. Any communication is capable of being misinterpreted. While the use of social media should not be more susceptible to this problem than any other form of communication, something about the immediacy of social media seems to magnify the problem.
- 10. By the nature of such media, misinterpretation or misrepresentation, particularly with regard to something that is perceived as being more controversial than it was expected to be, is likely to lead to rapid and wide broadcasting of that apparently "controversial' item.
- 11. Keep your communications clear, positive, polite and professional; avoid being ironic or sarcastic, it can be misinterpreted.
- 12. There are no special, additional legal or ethical burdens relating to the use of social media. The same rules apply here that govern the rest of your behaviour as a councillor you just need to think about them in this new context their immediacy and ease of dissemination.
- 13. Although the best use of social media is conversational in tone, publishing to the web is still publishing. What you have said on the web is recorded and it is permanent. Most pitfalls will be avoided if your online content is accurate, informative and thought through. Think of it as speaking in public. Think before you commit each word.
- 14. This doesn't mean that Members cannot, in the appropriate context, communicate politically. This is expected of a councillor, but you should be careful not to say anything that you would not be comfortable repeating or justifying, for example, at a public meeting.
- 15. On Facebook, you will need to monitor, and if necessary, censor the contributions that other people make to your site; delete them if they do not match your required standards of behaviour or language. Defamatory and offensive language will be attributed to the publisher as well as the original author and could incur financial liability. It is up to you to decide if you want to remove posts that disagree with your political position, however if you do remove them you may be accused or censoring contributions on political grounds.

16. On Twitter, you can block people who are habitually offensive or vexatious. Remember however, blocking them only stops them engaging directly with you, their tweets will continue to be public to all of their followers.

Some legal issues

- 17. You are personally responsible for any content that you publish on social media.
- 18. Abusive, bullying or racist posts may amount to a criminal offence.
- 17. Libel. If you publish an untrue statement about a person which is damaging to their reputation, they may consider it as defamatory and consider legal action. The same thing may happen if, for example, someone publishes something defamatory on your website and you know about it and do not take swift action to remove it. A successful legal claim could result in the award of damages against you.
- 18. Copyright Placing images or text on your site from a copyright source (for example, extracts from publications or photos), without obtaining permission, is likely to breach copyright laws. Therefore, do not publish anything you are unsure about, or obtain prior permission. Again, a successful claim for breach of copyright would be likely to lead to an award of damages against you.
- 19. Data Protection Do not publish the personal data of individuals unless you have their express permission (which may also include photographs). Personal information in an email or personal exchange should not be presumed to imply any consent to pass it on to others. If you place personal information on a public forum you should expect it to be published by others.
- 20. Bias and Predetermination If you are involved in making planning, licensing or other quasi-judicial decisions, do not say anything through social media (or indeed anywhere) that suggests you have made your mind up on an issue that is due to be formally decided. While your likely view on a particular application may be well known, you need to be able to show that you attended the committee or hearing prepared to take on board and weigh all the evidence in reaching your view otherwise the decision may be later challenged as invalid. Predisposition is permitted, pre-determination is not. If a person has suffered some sort of detriment as a result of such an invalid decision, they may have a claim against the Council for damages and the Council's decision is put at risk of challenge by way of judicial review.

Social Media and the Members' Code of Conduct generally

- 21. Aspects of the Members' Code of conduct will apply to your online activity in the same way as they do to any other communication you may use. The key to whether your online activity is subject to the Code is whether you are, or appear to be, acting in your capacity as a councillor rather than a private individual.
- 22. If you are acting in a private capacity then the Code of Conduct does not apply. The opposite occurs of course when you are acting as a councillor. If you sign off as 'councillor', or are commenting on mattres directly pertinent to the council and its business it is highly likely you will be regarded as acting in your official capacity.
- 23. One way of avoiding this, and avoiding potential problems related to the Members' Code of Conduct, may be to consider keeping your online accounts as a councillor separate from those where you communicate in personal capacity.
- 24. Where possible, a Councillor should make clear who they are in the profile of any account. In any biography where the Councillor is identified as a Councillor, the account should state that the views are those of the Councillor in question and may not represent the views of the Council.

Staying out of Trouble – Some Do's and Don'ts

Do's

- 25. Be mindful of the Code of Conduct for Members. It applies to your social media presence.
- 25. Set appropriate privacy settings for your blog or networking site especially if you have a private, non-political blog.
- 26. Think before you tweet or post or blog. Do not say anything that you would not be prepared to discuss face to face with the person you are speaking about or write on a placard and carry down your high street and discuss and defend with anyone who sees it.
- 27. Keep an eye out for defamatory, obscene or inappropriate posts from others on your social media and remove them as soon as possible to avoid the perception that you condone such views. Be aware that the higher your profile as an elected member, the more likely it is you will be seen as acting in your official capacity when you use social media.

- 28. Consider keeping your personal and elected member profiles on social networking sites separate and maintain appropriate professional boundaries.
- 29. Ensure you use Council facilities appropriately; if you use a Council provided blog site or social networking area, any posts you make will be viewed as made in your official capacity.
- 30. Be aware that you will be seen as acting in your official capacity if you publish information that you could only have accessed by being an elected member.

Don'ts

- 31. Blog, post or tweet in haste, particularly in circumstances where your judgement might be impaired; for example, if you are tired or have consumed alcohol.
- 32. Use Council facilities for personal or political blogs.
- 33. Request or accept a Council employee or contractor providing services to the Council as a "friend" on a social networking site where this suggests close personal association.
- 34. Use social media in any way to attack, insult, abuse, defame or otherwise make negative, offensive or discriminatory comments about council staff, service organisations, other Members, or the Council.
- 35. Publish confidential information that you may have learned or had access to as part of your role as an elected member. This includes personal information about service users, their families or friends or others e.g. contractors, council staff as well as related information.
- 36. Represent your personal views, or those of any political party or interest group you belong to, as being those of the Council on any social medium.
- 37. Browse, download, upload or distribute any material that could be considered inappropriate, offensive, defamatory, illegal or discriminatory. Do not share, like, retweet or repost such material.
- 38. Make conspicuous or excessive use of social media technology during the course of a Council or committee meeting so that you give the impression to the public of not being respectful of the proceedings and, more seriously, taking decisions that are not based on full engagement with the facts and arguments.

- 39. Use social media to promote personal financial interests. This includes the promotion of particular commercial activities that Council representatives may have an interest in.
- 40. Think that a disclaimer in our bio will save you from potential legal action. It won't.

Staying safe:

- 40. Councillors, just like anyone else, should be careful about internet security. If you lose control of a Social Media account to a hacker, you could suddenly find all sorts of inappropriate comments being published to the world in your name!
- 41. Use secure passwords (generally over eight characters long and using a mix of letters, numbers and symbols) and never share your password with anyone. If you are using shared IT equipment, don't store your password on the computer.
- 42. Councillors must be aware of their own safety when placing information on the internet and should not publish anything that could leave them vulnerable.
- 43. Any Councillor receiving threats, abuse or harassment via their use of social media should report it to their political group leader, Members' services and /or the Police.

Concluding Remarks

- 44. The Council wishes to encourage Members' use of new technology. This guidance is intended to help Members use social media in a way that avoids legal and reputational risk.
- 45. If you have any doubt at all about whether content is appropriate, it probably isn't! If you are still in any doubt, you should contact the Council's Monitoring Officer before posting.
- 46. If you need any assistance with the technical or IT issues mentioned in this protocol please contact the IT Service Desk on 01708 432515

Agenda Item 14



COUNCIL, 24 JULY 2024

REPORT OF THE CHIEF EXECUTIVE

SUBJECT: OVERVIEW AND SCRUTINY RULES – EXCEPTION TO THE CALL-IN (REQUISITION) PROCEDURE

SUMMARY

Under paragraph 18e of the Overview and Scrutiny Procedure Rules, the Leader of the Council is required to submit reports to Council on decisions taken by himself, Cabinet or individual Cabinet members, or key decisions made by a member of staff in the circumstances set out in Rule 18 (exemption to the call-in (requisition) procedure) within the previous 3 months.

This report details Key Decisions that have been taken in the circumstances set out in Rule 18 (exemption to the call-in (requisition) procedure) for the six month period covering 1st November 2023 to 31st May 2024.

- 1) Tithe Barn National Highways Company Funding Application
- 2) Delivering Better Value (DBV) Programme Grant acceptance and Delivery Approval
- To enter into the Mayor's Care & Support Fund Contract with the Greater London Authority to support the development of the Mawney Close and Mowbrays Close developments

This represents a significant decrease in the number of decisions taken under Urgency Provisions in comparison with the period from 1st November 2022 – 31st May 2023, when there were nine matters exempted from call-in.

RECOMMENDATIONS

That the report be noted.

REPORT DETAIL

- 1. Rule 18 of the Overview and Scrutiny Committee Procedure Rules provides that:
 - (b) The call-in procedure shall not apply where a decision being taken by Cabinet or an individual Cabinet member, or a key decision made by a member of staff is urgent. A decision will be urgent if any delay likely to be caused by the call-in process would seriously prejudice the Council's or the public interests. The record of the decision and notice by which it is made shall state whether in the opinion of the decision making person or body, the decision is an urgent one, and therefore not subject to call-in.
 - (c) The decision making person or body can only take an urgent decision under (a) above and avoid the call-in procedures after obtaining agreement from the Chairman of the Board that the decision be treated as urgent.
- 2. On behalf of Cabinet, the Strategic Director of Place, sought agreement from the Chairman of the Board to exempt from call-in a key decision by the Leader of the Council concerning an application for £650,000 grant funding.
- 2.1 The Chairman of the Overview & Scrutiny Board, Councillor Gerry O' Sullivan, gave his agreement to the exemption from call-in for the following reason:
- 2.2 The National Highways Company offered the Council a grant for remedial works on the Tithe Barn in Upminster, a Scheduled Ancient Monument that is at high risk of deterioration. The terms of the grant required essential improvements to be complete by March 2025. In order to meet the tight work schedule and avoid further damage to the fabric of the building, call-in was waived so that spending could take place straightaway.
- On behalf of Cabinet, the Assistant Director of Education, sought agreement from the Chairman of the Board to exempt from call-in a key

- decision by the S151 Officer concerning the acceptance of £1million grant funding from the Department for Education.
- 3.1 The Chairman of the Overview & Scrutiny Board, Councillor Gerry O' Sullivan, gave his agreement to the exemption from call-in for the following reason:
- 3.2 The Department for Education confirmed the award of grant funding by letter on the 24th November, with the requirement to accept and confirm the Memorandum of Understanding by the 30th November. As the decision to proceed contributed positively to the Council's financial position and presented a way to mitigate increasing costs on the SEND budget, call-in was waived in order to meet the deadline of 30th November.
- 4. On behalf of Cabinet, the Strategic Director of Place, sought agreement from the Chairman of the Board to exempt from call-in a key decision by the S151 Officer concerning the acceptance of £2.03million supported housing grant funding from the Greater London Assembly.
- 4.1 The Chairman of the Overview & Scrutiny Board, Councillor Gerry O' Sullivan, gave his agreement to the exemption from call-in for the following reason:
- 4.2 The Council was advised by The GLA on 13th March that the funding agreement must be accepted, and first grant claim made by 28th March, which was the last working day of the financial year 2023/24. Failure to meet this deadline would result in the withdrawal of funding. Under normal governance arrangements, the decision was due to be made on 18th April. Since accepting the funding was in the Council's best interests, call-in was waived in order that the report could be expedited and meet the 28th March deadline.

Financial Implications and Risks:

While there were financial implications around the decisions described in this report, there are none directly associated with this report.

Legal Implications and Risks:

There are no immediate legal implications directly associated with this report.

Human Resource Implications and Risks:

There are none directly associated with this report.

Equalities and Social Inclusion Implications and Risks:

There are none directly associated with this report.

Staff Contact: Gavin Milnthorpe
Designation Monitoring Officer

Email: <u>Gavin.milnthorpe@havering.gov.uk</u>

Background paper List

None

ANNUAL REPORT ON THE

WORK OF THE AUDIT COMMITTEE

2023/24 FINANCIAL YEAR

1. Introduction

This reports covers the period July 2023 to May 2024 and outlines:-

- Information relating to the Audit Committee;
- The coverage of work undertaken by the Audit Committee;
- Actions taking during the year, including training, to ensure the effectiveness of the Audit Committee; and
- Future planned work and challenges.

2. Background

2.1 The Audit Committee has been in place for a number of years. The Committee's terms of reference list the responsibilities and authorities delegated in the Council's Constitution, which comprise:

Internal control

 To consider and monitor the adequacy and effectiveness of the authority's risk management and internal control environment and to make recommendations to full Council where necessary.

External audit

 To monitor the adequacy and effectiveness of the External Audit Service and respond to its findings.

Internal audit

- To support the Officers with their delegated responsibility of ensuring arrangements for the provision of an adequate and effective internal audit.
- To monitor the adequacy and effectiveness of the internal audit service and to receive and monitor an annual internal audit plan from the audit manager.
- To approve the Annual Statement of Accounts, including the Annual Governance Statement, and to recommend as necessary to the Governance Committee regarding the committee's responsibilities to monitor corporate governance matters generally.
- To monitor proactive fraud and corruption arrangements.

The Audit Structure (April 2023 – May 2024):

Audit Committee: Councillor Jukie Wilkes (Chairman)

Councillor Jacqueline Williams (Vice Chairman from April)

Councillor David Taylor Councillor Keith Prince Councillor Damian White Councillor Sarah Edwards Councillor Jane Keane Councillor Darren Wise

Councillor David Godwin (Vice Chairman till April 2024)

Internal Auditors: oneSource External Auditors: Ernst & Young

During the year under review, the Committee met on five occasions and dealt with the following issues:

3. Audit Committee coverage

3.1 The Audit Committee has received the reports as set out in Appendix A. The coverage can broadly be categorised as regular and specific. More information on both is set out below.

3.2 Regular work

The Committee has regularly reviewed:

- Progress against the audit plan and performance;
- Key findings/issues arising from each audit undertaken;
- Progress against implementation of the recommendations;
- Anti-fraud and corruption activity, including frauds investigated and outcomes;
- Treasury Management activity; and
- The Accounts closedown timetable and progress reports.

3.3 Specific Reviews / Reports

There were several during the year including a review and approval of:

- the Statement of Accounts;
- the Annual Governance Statement; and
- the Annual Audit Plan.

The Committee also received assurances via:

- Annual Report from Internal Audit that includes the Annual Assurance Statement; and
- The work of the Council's External Auditors (Ernst & Young).

Priorities and work plan for the forthcoming year

- 3.1 The Audit Committee is currently scheduled to meet on four occasions over the next municipal year. There are specific reports planned throughout the year, running through a mix of progress reports and annual reviews of specific strategies and policies within the remit of the Committee, together with progress reports from the Council's External Auditor.
- 3.2 Officers will continue to ensure all members on the Committee, and their nominated substitutes, are adequately trained.
- 3.3 The Committee will continue to oversee the effectiveness of the audit team and wider fraud resources in accordance with the Public Sector Audit Standards Audit and Accounts Regulations 2015.
- 3.4 The Committee will continue to receive updates on the Corporate Risk Register and specific input from risk owners where required.
- 3.5 Fraud prevention and detection will continue to be high on the Audit Committee's agenda going forward.
- 3.6 The Committee will continue to focus on ensuring Value for Money and challenging control issues and high risk areas that have been highlighted by the work of Internal Audit.

AUDIT COMMITTEE AGENDA ITEMS - FROM JULY 2022 TO MAY 2023

July 2023

Annual Treasury Mamnagent Report 2022/23
The Committee received a report on the Annual Treasury Management for 2022/23 that the council is required by regulations issued under the Local Government Act 2003 to produce. It was noted that the report meets the requirements of both the Chartered Institute of Public Finance and Accountancy (CIPFA) Code of Practice on Treasury Management, ("the CIPFA TM code") and the CIPFA Prudential Code for Capital Finance in Local Authorities, ("the Prudential Code").

Members sought clarification from the following areas of the presentation:

It was noted that the Council holds a £7 million (Lender Option, Borrowing Option) LOBO loan that has the option to propose an increase in the interest rate at set dates. It was clarified to Members that the Council has the option to either accept the new rate or to repay the loan at no additional cost. The Treasury Manager stated there was a possibility that the lender may propose an increased rate in the foreseeable future. Officers would continue to monitor and liaise with the lender going forward.

Members enquired if the funding for the SLM/Everyone's Active were funded by the Council. It was asked if the programme of work was planned for in the Council's MTFS budget. Member sought clarification on how the investment in Everyone Active impacted on the Council's finances.

The Committee asked to received further breakdown of the debt figures in the report along the line of Housing Revenue Account and GF split.

Members enquired about the Capital Investment programme and asked for a prediction of the extra cost to the Joint Venture programme following the requirement that every new development over 11 storeys should be fitted with two staircases.

Members sought clarification on the impact of the changes e.g. 2 staircases on the housing development may have on the council's finances. It was asked if the slippage will be covered in the capital programme. It was suggested to Members that a response was better addressed by the Regeneration Services.

Following discussion, it was agreed that Members would receive the list of the council's current borrowing.

Head of Assurance Annual Report and 2022/23 Internal Audit Plan Outturn

The Committee was presented a report that brought together all the aspects of audit, assurance and counter fraud work undertaken in the 2022/23 financial year. These included actions taken by management in response to audit and counter fraud activity which supported the governance framework of the authority.

The Accounts and Audit Regulations require the Council to undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account the Public Sector Internal Auditing Standards (PSIAS) and other guidance.

Questions were raised about the CCTV charges, Members sought clarification whether all refunds have been processed. It was agreed that the CCTV report be recirculated to Members of the Committee.

The Committee sought assurance that the Taxi undertaking SEND pupil travel journey were licenced with TFL. It was stated that the services had no record to support this assurance but it was noted that DBS review checking was in progress. Officers assured Members that all licences were in place and the issue that required action was the record keeping.

Member discussed the council's approach to prosecuting corporate and housing fraud. Figures for prosecution would be provided to the Committee. There was a suggestion that the prosecution policy to be reviewed.

Officers were asked to look in to specific training for Members of the Committee.

October 2023

 Impact of impending Ultra Low Emission Zone (ULEZ) changes to the Council's fleet assets

At the request of Members, a report that detailed the financial impact of the ULEZ enforcement that came into force on the 29 August 2023 across a wide range of council vehicles and departments was was presented to the the Committee.

The report detailed a projected cost of replacing non-compliant vehicles. An appendix to the report identified the fleet and the following costs:

- The daily, monthly and yearly costs of ULEZ fines per vehicle.
- The ULEZ cost for this current year from 1St September 2023
- The estimated cost of replacing non-compliant fleet assets
- The estimated cost of replacing all vehicles including the buses with TFL community grace period application certificates.
- Identified 201 vehicles with 68 ULEZ non-compliant.

The report detailed a projected schedule that identified a worst-case scenario in the unlikely event of no further fleet replacements being achieved during the current

financial year and all non-compliant vehicles being used daily, the Council's potential exposure to ULEZ fines would be approximately £103k in 2023/4.

It was noted that about 40 vehicles would incur ULEZ charges. The Council has now put in place a ULEZ account with TFL to cover charges in order to avoid payment fines.

Members were informed that Transport Services would most likely absorb all the charges than go down the line of individual cost centres as the service was a trading service that brings in an income.

2023/24 Treasury Management - Mid-Year Report.
 The Committee received an update on the mid-year report on the treasury management activities as required by The Chartered Institute of Public Finance and Accountancy's (CIPFA) Treasury Management Code ("TM Code").

The report stated that the Authority's Treasury Management Strategy Statement (TMSS) for 2023/24 was approved at the Cabinet meeting on 8 February 2023 and at Full Council on the 1 March 2023. The TMSS aims to bring together the Council's capital programme and its Budget to ensure borrowing decisions are affordable and sustainable in line with regulation.

The report covered activity on treasury managed investments and borrowings and the associated monitoring and control of risk.

The key highlights of the mid-year report were as follows:

- At the end of August 2023 the investment portfolio yield was 5.18% this was achieved keeping investments on very short maturities thereby tracking successive increases in bank rate over the period.
- The Authority weighted average rate of return was 4.65% compared to Link's benchmarking club return of 4.38% for the last published quarter to the end of June – this was virtually risk free as all investments were placed with the Government Debt Management Office and a number of Local Authorities and NatWest Bank.
- Net interest outturn, expense is expected to be within budget.
- According to the Office for Local Government this Authority has one of the lowest debt servicing cost at 4.6% of core spending power, compared to other authorities in 2021/22.
- The Authority fully complied with the prudential and treasury indicators set out in the (TMSS) for 2023/24.

Members received responses to questions raised about the Council's approach to borrowing and lending and risk in particular.

Officers stated that there has not been a shift in terms of re-profiling debt from the capital programme to the HRA.

It was clarified to Members that the Council's fixed term investment deposit were being monitored on a day to day basis. The current position was that there is very little risk in terms of losing the authority's deposits.

Officers indicated that the Council's treasury advisers have not raised any issues on the council's risk profile.

A Member asked that auditors look at the viability of each of the housing regeneration schemes.

Assurance Progress Report

The Committee was presented with a report that informed Members on the work undertaken by the Assurance Service (internal audit and counter fraud) during the period from 1 April to 30 September 2023.

The report indicated that some of the work undertaken by internal audit does not result in an opinion such as advisory reviews and grant claims.

The Committee noted that 11 final reports/reviews were completed during the period and 4 draft reports were issued.

Two levels of assurance were applied in the overall Audit opinion on the system control environment within the areas reviewed. These are as follows:

- Reasonable Assurance The control framework is adequate to manage the risks in the areas reviewed. Controls are applied consistently or with minor lapses that do not result in significant risks to the achievement of system objectives.
- Limited Assurance There are fundamental weaknesses in the internal control environment within the areas reviewed, and further action is required to manage risks to an acceptable level.

Members noted the results of the work undertaken during quarter one and two of 2023/24 and the recommendations provided with the limited assurance summary reports.

It was noted that Internal Audit follows up all high and medium risk audit recommendations with relevant service management. There was a rolling programme of follow up work with each auditor taking responsibility for tracking the implementation of recommendations made in their audit reports. The

implementation of audit recommendations in systems where limited assurance were provided was verified through a follow up audit review.

It was stated that the work was of high importance given that the Council's risk exposure remains unchanged if management fail to implement the recommendations raised in respect of areas of control weakness. Part of the Audit Committee's role was to monitor the extent to which recommendations were implemented as agreed and within a reasonable timescale, with particular focus applied to any high risk recommendations.

All high and medium risk recommendations due as at the end of September 2023 have been followed up and confirmed with management as implemented. Any recommendations that remain outstanding and were past agreed implementation dates or where management had not responded to requests for progress updates, would be reported to Audit Committee.

The report classified recommendations under three potential categories according to the significance of the risk arising from the control weakness identified. The three categories comprise:

- High Fundamental control requirement needing implementation as soon as possible
- Medium Important control that should be implemented
- · Advisories Pertaining to best practice

Members sought and received clarification on specific questions matters raised.

January 2024

• Treasury Management Strategy Statement 2023/24 and Annual Investment Strategy 2023/24 Treasury Indicators.

The Committee were presented with the Treasury Management Strategy Statement (TMSS) report that was a part of the authority's reporting procedures as recommended by the Chartered Institute of Public Finance and Accountancy (CIPFA) Treasury Management (TM) Code and its Prudential code (The CIPFA Prudential Code) for capital finance in local authorities.

The Treasury Management Strategy Statement sets out recently introduced changes to the legislative framework which were generally designed to place restrictions on authorities' commercial activity.

It was explained that the report fulfilled the authority's legal obligation under the Local Government Act 2003 to have regard to both the CIPFA TM Code/Prudential Code and Government Guidance, and it covered the following:

- The Borrowing and Investment Strategies
- Treasury Management and Prudential Indicators.

- The Borrowing and Investment Strategies
- Treasury Management and Prudential Indicators there had been a change to the revised CIPFA TM Code and Prudential Code (2021) that would be reported upon in the 2023-24 TMSS. At the time of writing, the report on the capital programme had not been finalised and it was stated that the figures in the report may change before they are presented to Cabinet.

Officers reviewed other economic forecasts and found that there was a consensus that rates are trending down. Officers were in agreement that long term borrowing should be on shorter durations of between 2 and 5 years and then refinance on longer term durations when rates are expected to be lower. Officers were of the view that following further reductions in shorter duration of Public Works Loan Board rates since December, the balance has shifted in favour of locking in some long term debt on short durations.

For the reasons set out above the Authority needs to maintain a prudent cash balance to allow it to cover the variability of expenditure. The extent to which borrowing would be required would depend on the movement in cash reserves, working capital, strength of the capital forecast and how much slippage might occur during each financial year.

It was sensible to plan on the basis of covering the inevitable month on month fluctuations in cash balances to avoid what would in effect be an unplanned and therefore expensive, short-term overdraft. Based on analysis of the monthly cash variations then £40m has been established has an appropriate cash balance or liquidity allowance.

In response to Members enquiry, the Director of Resources and s151 Officer assured the Committee of the confidence in terms of what was being proposed regarding the treasury management strategy changes compared to previous strategies. It was stated that it was still very prudent in terms of the approach. The Committee noted that what was been proposed was further detail into the liability benchmark in terms of the minimum threshold of cash balances that the local authorities or councils should be maintaining Tertiary. It was stated that the team provided the Director with a weekly update that included an update in terms of lent money.

For the reasons set out in the report and its annexes Cabinet was recommended to agree:

- The Draft 2024/25 TMSS & AIS which would form part of the Budget Report to Cabinet on 7 February and Full Council on 28 February 2024.
- The revised prudential and treasury indicators set out in Appendix 2 and 3 of the report.
- The operational and authorised borrowing limits set out in tables 5 & 6 of appendix 2 of the report.

Under the Havering Scheme of Delegation Part 3 section 3.10.3 the s151 Officer functions are:

To manage the Council's loan debt, investments, and temporary investments, pension scheme and pension fund, insurance fund, act as registrar of loan instruments,

manage all banking arrangements including numbers and types of accounts and arrange insurance of property and the selecting and accepting of tenders for insurance cover and related services which are considered to offer best value for the Council promoting good risk management practices at all times.

Internal Audit Progress Report

The Committee received a report that advised on the work undertaken by the Assurance Service (internal audit and counter fraud) toward delivery of the 2023/24 audit plan as at the end of December 2023 in support of the Audit Committee's role.

The Annual Audit Plan was presented to Audit Committee in April 2023. The plan was developed in line with the three themes (People, Place and Resources) outlined in the Havering Vision and Corporate Plan. Members were reminded that the 2023/24 audit plan was presented as a flexible plan, subject to review through the year to ensure that emerging risks are covered. Adjustments to the plan were made to allow for changes in the risk and operational environment in which the Council operates. The status of the 2023/24 Internal Audit Plan was reported in section 4 of the report.

The report supported the Head of Assurance's ongoing assurance opinion on the internal control environment and highlighted key outcomes from internal audit and counter fraud work and provided information on wider issues of interest to the Council's Audit Committee.

The report detailed the following work undertaken by Internal Audit during quarter: LBH Systems, LBH Schools Audits, Counter Fraud Audit Work Housing cases, Status of Internal Audit Plan 2023/24, LBH Schools Audit Programme.

At the meeting relevant Officers were present to answer the questions of Members. In response to a Member question, the Committee received assurance that the CCTV contract was compliant.

May 2024

 Annual Statement of Accounts 2020/21 & External Audit Reports To Those Charged With Governance

Members received officers from Ernst & Young (EY) who presented the external audit report.

Members noted that the statement of accounts for 2020/21 were originally presented in July 2021 but sign off had been delayed with only 9% of national accounts signed by the deadline of September 2021. EY has undertaken additional work due to the Council's financial position which had further delayed the sign off of the accounts with a projected sign off date of June 2024.

It was explained to the Committee that the Highways assets in April 2022 had caused delays in the audit results for Audit and a resolution had not been found until late 2022 which halted the other audits. The capitalisation directive would have to be included with all work to be concluded by July 2024. Officers explained to Members that although issues in the accounting had been found, these were not material and were keen to conclude the 202/21 statements to allow more time to focus on the 2023/24 accounts with some issues remaining in the later accounts.

Members only noted one main issue within the audit for Pensions which was a disclosure error relating to LGIM investments but these did not affect the finance level.

The Committee agreed the recommendations subject to any changes being circulated to the Committee Members.

Draft Annual Governance Statement 2023/24

The Committee was presented with the annual 'look back' at governance.

It was noted there were 89 breaches with more in-depth data to be shared with members. 89% of Council staff had been trained on data breaches but the target was 95% so there was still work to be done to reach the target. Officers suggested a potential deep dive into General Data Protection Regulation (GDPR) breaches which was welcomed by the Committee. Officers were asked to review the implementation against the READI review which officers agreed they would do.

Head of Assurance Annual Report 2023/24

The Committee was presented with the Head of Assurance Annual Report for 2023/24. The report detailed a summary of the systems completed and drafted. It was noted that 4 systems had been removed from the plan with highway services showing as an error as it had been delayed until the following year. Members were presented with details of all the recommendations linked to any risks. The Data Protection Impact Asseement compliance of CCTV had been implemented. Members questioned the relationship of the Audit team with other services within the Council to which officers explained the relationships were generally positive.

The Committee gave thanks to the officers for their continued hard work to present the report in the new layout.

Draft Internal Audit Plan 2024/25 Consultation

The Committee was presented with the Draft Internal Audit Plan for 2024/25.

Members noted that the risks were fluid and the plan were a flexible document. A Member raised a number of queries to which officers would reply to outside of the meeting.

IMPLICATIONS AND RISKS

Financial implications and risks:

None – narrative report only.

Legal implications and risks:

None – narrative report only.

Human Resources implications and risks:

None – narrative report only.

Equalities implications and risks:

While the work of the Committee can impact on all members of the community, there are no implications arising from this specific report which is a narrative of the Committee's work over the past year.

BACKGROUND PAPERS

Minutes of meetings of Audit Committee



HAVERING PENSION FUND

e 175

2024/27 BUSINESS PLAN/REPORT ON THE WORK OF THE PENSIONS COMMITTEE DURING 2023/24

INTRODUCTION

This is the Business Plan for the London Borough of Havering Pension Fund (the 'Fund'). Havering Council is an Administering Authority under Local Government Pension Scheme (LGPS) Regulations and as such has delegated authority for this to the Pensions Committee.

The Business Plan sets out the work undertaken by the Committee during 2023/24 and the plan of work for the forthcoming three years. The Business Plan is reviewed and updated annually.

The Business Plan, in line with CIPFA guidance "Principles for Investment Decision Making & Disclosure in the LGPS" outlines:

- Key Targets and Methods of Measurement
- Review level of internal & external resources
- Financial Estimates
- Major milestones and issues considered and to be considered
- Appropriate provision for Training
- Any recommendations actions to put right any deficiencies.

The Fund provides benefits to Council employees (except teachers). The performance of the Fund impacts on the cost of Council services through the cost of employer contributions. It is therefore beneficial to issue a Business Plan/Annual report to all Council Members covering the work of the Pensions Committee.

KEY TARGETS & METHODS OF MEASUREMENT

The Fund invests employee and employer contributions into a Fund in order to pay pension benefits to scheme members. The Fund is financed by contributions from employees, employers and from profit, interest and dividends from investments.

The Pension Fund consists of 59 employers with active members, of which the London Borough of Havering is the largest. The other employers in the Fund are made of up of 44 Scheduled bodies (Academies and Further Education bodies) and 14 Admitted bodies (13 outsourced contracts and one resolution body).

Pension Fund – Funding

The Fund's Actuary (Hymans Robertson) carried out a triennial valuation during 2022/23 based on data as at 31 March 2022. The main purpose of the valuation is to calculate the funding position within the Fund and set employer contribution rates for the following three years with the results of the 2022 valuation effecting employer contribution rates from 1 April 2023 until 31 March 2026.

The valuation is a planning exercise for the Fund, to assess the monies needed to meet the benefits owed to its members as they fall due. As part of the valuation process, the Fund reviews its funding and investment strategies to ensure that an appropriate contribution plan is in place.

The Fund also monitors the funding position at the midway point between triennial valuations, which is the 30 September 2023. The purpose of the funding update was to assess whether the funding plan is on track and take any actions where necessary. No actions are required to change the current funding plan. The updated funding position provides an illustrative funding position and not designed to meet regulatory requirements for. A comparison of funding levels can be seen below:

Table 1 - Comparison of funding levels:

| ာOngoing funding ညို basis | 31 March 2019 | 31 March 2022 | 30 September 2023 |
|-------------------------------|---------------|---------------|----------------------|
| je | £m | £m | £m |
| Assets | 733 | 920 | 891 |
| Liabilities | 1,054 | 1,149 | 842 |
| Surplus/(deficit) | (321) | (229) | 49 |
| Funding level | 70.0% | 80.0% | 106% |

Increased funding level has been driven by a fall in the liabilities. The fall in liabilities is a consequence of higher than expected real discount rate used to value the current cost of future pension obligations (accrued liabilities).

Investment Strategy Development & Performance Monitoring:

The Investment Strategy Statement (ISS) is subject to review at least every three years and it is timely to undertake a review as part of the triennial valuation process and future investment return expectations are set out within the Funding Strategy Statement (FSS).

During the valuation process and discussion of the valuation results it was acknowledged that there was a need to shift the investment strategy towards investments that will provide increased income for the Fund. This was reflected in an Investment Strategy Considerations paper that

was presented and agreed at the Pensions Committee meeting on the 21 March 2023 and subsequently incorporated within the ISS agreed at the 12 September 2023 meeting.

Agreement at the 21 March 2023 Pensions committee meeting was to proceed with a two-step approach, which consisted of:

- An initial 'Interim' investment strategy with an allocation to investment-grade credit assets of 5% and an increase in allocation to infrastructure assets from 10% to 12.5%,
- A 'Long Term' investment strategy with a migration away from investment grade credit assets and move towards the more income orientated mandates of Multi Asset Credit (MAC) and private debt over time.

The ISS set outs the target asset allocations. The following table shows the actual asset allocation position as at 31 March 2024 compared against the long- term target and includes individual Fund Manager benchmarks:

Table 2 - Asset Allocations

| Asset Class ယ ပြ | | Target Allocation | Actual Allocation 31 March 2024 | Relative | Benchmark and Target |
|---|-----------------|----------------------|---------------------------------------|----------|--|
| | | % | % | % | |
| GROWTH | | 52.5 | 52.6 | 0.1 | |
| Global Equity- Legal & General Investment Management (LGIM) - Passive | LCIV aligned | 5.0 | 4.3 | -0.7 | FTSE All World Equity Index |
| Emerging Market Equity - LGIM Emerging Markets - Passive | LCIV aligned | 5.0 | 4.0 | -1.0 | FTSE World Emerging Markets |
| Multi- Factor Equity - LGIM Future World Fund | LCIV aligned | 10.0 | 11.2 | 1.2 | FTSE AW ex CW Climate Balanced Factor Index |
| Passive Equity Progressive Paris Aligned Fund (PEPPA) - State Street | LCIV | 5.0 | 5.7 | 0.7 | S&P Developed Ex-Korea Large Mid Cap Net Zero 20250 Paris Aligned ESG Index |
| Global Alpha Paris Aligned Fund - Baillie Gifford | LCIV | 15.0 | 16.2 | 1.2 | MSCI ACWI by 2- 3 % p.a. over a rolling 5 five year period Plus have a weighted average greenhouse gas intensity that is lower than MSCI ACWI EU Paris Aligned Requirement index |

| Asset Class | | Target Allocation | Actual Allocation 31 March 2024 | Relative | Benchmark and Target |
|--|-------------|----------------------|---------------------------------------|----------|--|
| | | % | % | % | |
| Absolute Return - Ruffer | LCIV | 12.5 | 11.2 | -1.3 | Preserve and grow capital (LIBOR +4% p.a.) |
| INCOME | | 42.5 | 40.2 | -2.3 | |
| UK Property - UBS | Non LCIV | 6.0 | 5.0 | -1.0 | Match MSCI All Balanced Funds Weighted Average Index |
| Global Property - CBRE | Non LCIV | 4.0 | 3.3 | -0.7 | CPI +5%% p.a. (net of fees) |
| Global Infrastructure - Stafford II & IV | Non LCIV | 3.5 | 4.7 | 1.2 | CPI +5%% p.a. (net of fees) |
| Infrastructure - JP Morgan | Nov LCIV | 5.5 | 5.2 | -0.3 | CPI +5%% p.a. (net of fees) |
| Renewable Energy Infrastructure | LCIV | 3.5 | 1.5 | -2.0 | CPI +5%% p.a. (net of fees) |
| Multi Asset Credit - Royal London | Non LCIV | 7.5 | 6.8 | -0.7 | 50% ICE BAML, BB-B Index 50% Credit Suisse US Leveraged Loan Index GBP Hedged |
| Anvestment Grade Credit Global Bond Fund | LCIV | 5.0 | 4.9 | -0.1 | Barclays Aggregate – Credit Index Hedged (GBP) Index |
| Private Debt - Churchill II & IV | Non LCIV | 3.0 | 3.6 | 0.6 | |
| Private Debt Permira - PCS4 & PCS5 | Non LCIV | 4.5 | 5.2 | 0.7 | Outperform cash + 4% p.a |
| PROTECTION | | 5.0 | 7.2 | 2.2 | |
| Index Linked Bonds - Royal London | Non LCIV | 5.0 | 2.4 | -2.6 | 40% FTSE Index Linked over 5 Year index. |
| Currency Hedging | Russell | 0.0 | 0.4 | 0.4 | Hedge100% of EUR,USD and AUD currency (non-equity) |
| Cash | n/a | 0.0 | 4.4 | 4.4 | n/a |
| TOTAL | | 100.0 | 100.0 | 0.0 | |

Set out below is the implementation/progression of the agreed investment strategy during 2023/24:

Page

- 25 July 2023 The Pensions Committee agreed the additional 2.5% be divided between JP Morgan (1.5%) and LCIV Renewable Infrastructure Fund (1%). No additional monetary amounts will be required to be transferred to the LCIV Renewable Infrastructure Fund at this time as it expected that the current committed capital will be sufficient to achieve the target.
- 12 September 2023 –The Pensions Committee agreed to proceed with the implementation of a 5% allocation to investment grade credit assets via the LCIV Global Bond Fund.
- 1 October 2023 An additional £13m investment was paid to the JP Morgan Renewable Infrastructure Fund to reflect the 1.5% increase to the asset allocation target, funded from a divestment in the LCIV Diversified Growth Fund.
- 8 November 2023 £45m invested in the LCIV Global Bond Fund to reflect the 5% allocation to investment grade credit assets, funded from Divestment in the LCIV Diversified Growth Fund.
- 8 November 2023 Total divestment in the LCIV Diversified Growth Fund completed, residual cash of £5.6m retained to fund future capital calls and FX settlements.

capital calls and FX settlements.

Consider the capital calls and FX settlements.

Following on from the agreement of the ISS in September 2023, the ISS will be presented to the Committee for ongoing implementation

Overweight allocations to cash or asset allocations will be considered for reinvestment or settlement of capital calls.

Short-term performance of asset class and managers will result in a deviation from benchmarks from time to time.

Overweight positions in Global Infrastructure and private debt are likely to remain temporarily above the proposed target allocation whilst we await the return of capital to correct this.

Contributing to the underweight position in Renewable Infrastructure relates to the Funds commitment not fully called.

In line with the ISS, when the Fund allocation deviates by 5 percentage points or more from the strategic allocation, the assets will be rebalanced back to within 2.5 percentage points of the strategic asset allocation.

As at 31 March 2024 the total value of assets with the London CIV is £383m which represents 41% of assets under direct management (2022/23 42%). The London CIV has a business arrangement with LGIM to deliver the passive global mandate; this can be classified as being

held within the London CIV for pooling purposes so the allocation increases to £572m. Overall allocation to LCIV is 60% (2022/23 61%). Slight reduction reflects some asset allocation rebalancing.

The Fund will continue to have ongoing discussions with the London CIV to progress the transition of assets onto the London CIV platform in accordance with the Department of Levelling Up, Housing and Communities (DLUHC) timelines.

The Fund has continued to fund capital calls for the Private Debt and Infrastructure mandates during the year to 31 March 2024. Amounts paid and waiting to be called are as follows:

Table 3 - Capital Calls paid and outstanding

| Investment Manager | Mandate | Amount Paid £000 | Commitments outstanding* |
|--------------------|----------------|------------------------|--------------------------|
| Stafford II | Infrastructure | 0,608 | 1,781 |
| Stafford IV | Infrastructure | 7,557 | 2,430 |
| CIV Renewables | Infrastructure | 3,406 | 13,076 |
| Churchill II | Private Debt | 0,509 | 1,616 |
| hurchill IV | Private Debt | 2,058 | 3,675 |
| Permira PCS4 | Private Debt | nil | 4,751 |
| Permira PCS5 | Private Debt | 5,805 | 22,914 |
| JP Morgan | Infrastructure | 13,000 | nil |
| Total | | 32,943 | 50,243 |

^{*}Includes recallable income

Investment Strategy - Climate Considerations:

The Committee recognises the long-term financial risks and opportunities presented by climate change and during 2021/22 had already taken steps to address climate risk in a number of ways, mainly moving some of its equity investments to low carbon aligned portfolios and commenced investing in renewable energy infrastructure. The Committee will continue to include climate considerations as part of investment decision making.

The Committee's Business Plan for 2022/23, agreed at its Pensions Committee meeting on the 15 March 2022, included the development of a broader climate risk management action plan. The progress made in developing this plan during 2022/23 and 2023/24 is outlined as follows:

- a. 26 July 2022 Pensions Committee meeting the Committee received a presentation setting out the possible next steps in developing the Fund's plans for addressing climate risk within its portfolio. This plan will be used to establish a baseline position enabling the Fund to frame objectives and targets for change.
- b. 20 September 2022 Pension Committee meeting the Committee was presented with a baseline assessment of several carbon metrics, which identified gaps in data and set out those asset types where data is harder to collect and measure. Assessing the Fund's current position against a series of standard metrics will address ongoing reporting requirements.
- c. 13 December 2022 Pensions Committee considered the indicative plans/actions and timescales in developing the Fund's plans for embedding climate risk management into the Fund.
- d. 6 March 2023 An education session on climate metrics was delivered to the Committee, in preparation for the discussions on setting objectives and goals for inclusion in the climate risk policy.
- e. 21 March 2023 Pensions Committee discussed and agreed the draft outline of the Climate Risk Policy content and agreed to fully develop the policy. The Policy will set out the Committee's approach to addressing climate related risks, its goals and any associated actions for delivery. The Committee will then monitor exposure to climate related risks within its portfolios on an annual basis
- f. 25 July 2023 Pensions Committee agreed the Climate Policy and Action Plan, which includes the objectives set, targets to be assessed and actions that the Committee will take.
- g. 27 March 2024 Climate workshop held to discuss the climate journey so far and next steps on how to measure the progress against an ambition to reduce financial emissions to net zero by 2050.

Fund Performance

The performance of the Fund is measured against a tactical and a strategic benchmark.

Strategic Benchmark - A strategic benchmark has been adopted for the overall Fund of Index Linked Gilts + 1.8% per annum. This is the expected return in excess of the fund's liabilities over the longer term. The strategic benchmark measures the extent to which the fund is meeting its longer term objective of reducing the funds deficit.

Tactical Benchmark - Each manager has been set a specific (tactical) benchmark as well as an outperformance target against which their performance will be measured. This benchmark is determined according to the type of investments being managed. This is not directly comparable to the strategic benchmark as the majority of the mandate benchmarks are different but contributes to the overall performance.

The Fund uses the performance measurement services from Northern Trust, to provide comparative statistics on the performance of the Fund for its quarterly monitoring.

The overall net performance of the Fund as at 31 March 2024 against both benchmarks is shown below:

J

| ge 183 | 1 year to 31.03.24 % | 3 Years to 31.03.24 % | 5 years to 31.03.24 % |
|------------------------|----------------------------|-----------------------------|-----------------------------|
| Fund Return | 7.38 | 2.69 | 5.89 |
| Tactical Benchmark | 11.69 | 6.74 | 7.15 |
| Performance | (4.31) | (4.05) | (1.25) |
| Fund Return | 7.38 | 2.69 | 5.89 |
| Strategic Benchmark | (3.32) | (8.10) | (3.42) |
| Performance | 10.71 | 10.79 | 9.32 |

Source: Northern Trust

Totals may not sum due to geometric basis of calculation and rounding

Comments on Fund performance from the Fund's Investment Advisors:

The overriding investment objective for the Fund is to deliver consistent year-on-year returns to support an affordable and stable level of contributions for the longer term.

The current funding approach implies a target investment return of 3.5% p.a. (as stated in the latest actuarial valuation date as at 31 March 2022). This target investment return is a slight increase from the 3.3% p.a. stated in the previous actuarial valuation (as at 31 March 2019).

Over the 12-month period to 31 March 2024, the Fund delivered a positive return of 7.4% which was ahead of the strategic benchmark, albeit behind the Fund's tactical benchmark. Over periods of 3 years and 5 years to 31 March 2024, the Fund experienced positive asset growth, with investment returns of 2.7% p.a. and 5.9% p.a. respectively. These returns remain ahead of the Fund's strategic benchmark with the Fund therefore demonstrating long-term performance which remain sufficient to support affordable and stable levels of contributions.

The positive investment performance (in absolute terms) over the 12-month period was primarily driven by the Fund's equity allocation, particularly the Fund's active equity allocation. Improved economic activity, declining inflation and AI enthusiasm positively impacted these glocations, leading them to perform strongly. The primary contributor to the Fund's underperformance relative to the tactical benchmark over the 12-month period was its 'absolute return' multi-asset allocation. The allocation is defensively positioned, with a large exposure to government bonds, and over a period of strong equity and credit performance and rising government bond yields, this led the allocation to employee.

Implementation of previously agreed changes in the investment strategy continued over the year. To improve the efficiency of the strategy and capture investment opportunities, the Fund's allocation to the LCIV Diversified Growth Fund was redeemed in full and, as an interim step, 2.5% of the proceeds were invested in infrastructure and the remaining 5.0% invested in a new investment grade credit allocation, managed by the LCIV. As a further evolution of strategy, Committee has agreed that this 5.0% credit allocation be transferred to the multi-asset credit and private debt allocations over the longer-term.

Finally, during the year, the Committee took further steps to develop the Fund's Climate Risk Policy and Action Plan. This included setting a target Net Zero date of 2050, setting targets for specific climate metrics and associated actions to take over time to achieve these and framing how the Fund wishes to approach its journey towards Net Zero. As part of this work, the Committee completed a baseline assessment of climate metrics for the Fund's existing investments, received training on Task Force on Climate-related Financial Disclosures, and completed a Climate Workshop to discuss and decide actions to be taken over 2024 and beyond.

Due to a change in guidance, the Committee reviewed the reporting arrangements back in June 2017 and agreed that only one fund manager will attend each Committee meeting, unless performance concerns override this. Managers in the London CIV sub funds are now monitored by them and the London CIV produce quarterly monitoring reports, which are distributed to the Committee.

Cyclical coverage of manager monitoring is set out in **Annex B.**

INTERNAL & EXTERNAL RESOURCES

Investment strategy and performance monitoring of the Fund is a matter for the Committee which obtains and considers advice from the Authority and oneSource officers, and as necessary from the Fund's appointed professional adviser, actuary and performance measurers who attend meetings as and when required.

The structure of the Committee, which reflects the political balance of the Council, and who were responsible for decision making during the year to 31 March 2024, follows:

Labour Group

Cllr Mandy Anderson (Chair)

Conservative Group:

Cllr Robert Benham (until March 2023 – position vacant until July 2023)

Cllr Dilip Patel

Qllr Joshua chapman (from July 2023 – replaced Cllr Benham)

Havering Residents' Group

2023) Alr Philip Ruck (Vice-Chair) – (until December 2023)

Cllr Julie Wilkes - (until March 23 – position vacant until September 2023))

Cllr Jacqueline Williams (from September 2023 – replaced Cllr Wilkes)

Cllr James Glass

Other

Union Members (Non-voting) x 2 - Derek Scott (Unison) and Vacant (GMB) Admitted/Scheduled Body Representative (voting) (currently vacant)

Day to day management of the Fund is delegated to the authority's statutory section 151 Officer/Strategic Director of Resources and the Director of Exchequer & Transactional Services, delivered via oneSource (shared service arrangement between London Borough of Havering and Newham).

The managerial arrangement for the Pensions Finance Team under oneSource ceased on the 1 December 2023 and service management has been returned to Havering. Managerial arrangements for Pensions Administration still remain part of the oneSource arrangement.

The Pensions Committee is also supported by Committee Services.

Administrative costs are reimbursed to the Administrating Authority by the Fund.

From 1 November 2017, the London Borough of Havering delegated the pension administration service to Lancashire County Council (LCC) who has engaged the Local Pension Partnership Administration (LPPA) to undertake their pension's administration.

Estimated costs for the forthcoming three years for Administration, Investment Management expenses and Governance & Oversight follow in this report.

Pensions Administration - The LPPA is responsible for all aspects of the Fund administration including calculating benefits, processing joiners and leavers, record amendments, end of year returns, monitoring and administration of the Authority's Additional Voluntary Contributions (AVC) scheme. LPPA engagement team is responsible for communications and training for Scheme employers and pension scheme members.

At a Pensions Committee meeting held on the 21 March 2023, members reviewed and agreed the 2023/24 budget for the LPPA Pensions Administration contract. The 2024/25 budget will be presented to the Pensions committee at the 25 June 2024 meeting.

the oneSource Pensions Administration section consists of 3 full time equivalent posts, which includes a post for the Projects and Contracts Manager who monitors the LPPA pension's administration contract and ad hoc projects.

The financial information can be seen in Financial Estimates section.

Accountancy and Investment support - The Pensions Finance team consists of 2.4 full time equivalent posts (3 officers). This is currently being reviewed following a retirement and an officer's reduction in hours. They ensure that members of the committee receive advice on investment strategy and monitoring of the fund managers. The team also maintains compliance with the Pension Fund statutory obligations, as well as accounting for the activities of the Fund.

As part of the succession planning, graduates on a six monthly rotation are being placed within various finance teams. During 2023/24 the Pensions Finance team continued with a graduate placement until this ceased in June 2023 and is due two further placements commencing Aug 2024 until July 2025.

FINANCIAL ESTIMATES

The financial accounts of the Havering Pension Fund for 2022/23 is included in the formal Annual Report of the Fund itself and not included here. The Annual Report is prepared later in the year when the pension fund accounts have been finalised.

In line with the Chartered Institute of Public Finance & Accountancy (CIPFA) LGPS Management Costs guidance, Management costs are shown split between three cost categories as follows:

1. Administrative Expenses

Includes all staff costs associated with Pensions Administration, including Payroll.

| | 2022/23 Actual £000 | 2023/24 Estimate £000 | 2023/24 Actual £000 | 2024/25 Estimate £000 | 2025/26 Estimate £000 | 2026/27 Estimate £000 |
|------------------------------|---------------------------|-----------------------------|---------------------------|-----------------------------|-----------------------------|-----------------------------|
| -ddministration & Processing | 728 | 735 | 806 | 908 | 908 | 908 |
| ther Fees (Levies) | 8 | 10 | 15 | 16 | 16 | 16 |
| ther Costs (Interest) | 70 | 30 | 125 | 75 | 75 | 75 |
| Come Come | (79) | 0 | 0 | 0 | 0 | 0 |
| TOTAL | 727 | 775 | 946 | 999 | 999 | 999 |

Please note the following regarding the above figures:

- Administration & processing costs include the Pension Administration Contract LPPA, Project & Contract manager, payroll & legal charges and ad hoc project costs. Increase in costs relates to unexpected Fusion Licensing costs (£68k)
- Increase in interest payments reflects the volume of late processing of pension payments and an increase in interest rates
- 2022/23 Income relates to a one-off exercise to clear down income held in the balance sheet in relation to pension recoveries. Future income will offset payments to pension benefits.
- Assumed inflation at 5% where applicable or average over three years No further allowance for inflation after 2024/25

2. Investment Management expenses

These costs will include any expenses incurred in relation to the management of Fund assets.

Fees are calculated based on market values under management and therefore increase or reduce as the value of investments change.

| | 2022/23 Actual £000 | 2023/24 Estimate £000 | 2023/24 Actual £000 | 2024/25 Estimate £000 | 2025/26 Estimate £000 | 2026/27 Estimate £000 |
|----------------------------------|---------------------------|-----------------------------|---------------------------|-----------------------------|-----------------------------|-----------------------------|
| Fund Manager Fees | 4,109 | 4,000 | 3,995 | 4,000 | 4,000 | 4,000 |
| Performance Related Fees | 121 | 120 | 200 | 160 | 160 | 160 |
| Transaction costs | 310 | 300 | 361 | 335 | 335 | 335 |
| Custodian Fees | 42 | 40 | 28 | 35 | 35 | 35 |
| Performance Measurement services | 36 | 35 | 38 | 45 | 45 | 45 |
| ther Investment Fees | 10 | 15 | 0 | 0 | 0 | 0 |
| 역OTAL | 4,628 | 4,520 | 4,622 | 4,575 | 4,575 | 4,575 |

ease note the following regarding the above figures:

Fund Manager/Performance Fees & Transaction costs are charged according to the fund value; therefore, an average figure from the last three years has been applied for estimates 2024/25 onwards

3. Governance and Oversight

This category captures all costs that fall outside the above two categories and include legal, advisory, actuarial and training costs. Staff costs associated with the financial reporting and support services to the Committee is included here.

| | 2022/23 | 2023/24 | 2023/24 | 2024/25 | 2025/26 | 2026/27 |
|----------------------------|---------|----------|---------|----------|----------|----------|
| | Actual | Estimate | Actual | Estimate | Estimate | Estimate |
| | £000 | £000 | £000 | £000 | £000 | £000 |
| Financial Services | 210 | 220 | 229 | 240 | 240 | 240 |
| Actuarial Fees | 130 | 25 | 125 | 60 | 60 | 60 |
| Audit Fees | (14) | 60 | 90 | 90 | 90 | 90 |
| Member Training (inc. LPB) | 3 | 10 | 2 | 10 | 10 | 10 |
| Advisor Fees | 86 | 75 | 80 | 80 | 80 | 80 |
| London CIV | 118 | 120 | 101 | 100 | 100 | 100 |
| ∔ocal Pension Board | 4 | 5 | 7 | 10 | 10 | 10 |
| ensions Committee | 33 | 35 | 38 | 40 | 40 | 40 |
| Other Fees TOTAL | 1 | 5 | 15 | 16 | 16 | 16 |
| ĬOTAL | 585 | 555 | 687 | 646 | 646 | 646 |

ease note the following regarding the above figures:

- Actuarial Fees shown are shown gross £65k was recharged to other employers in the fund. Estimated costs excluded unforeseen IDRP's/policy updates & TPR compliance checker tool totalling £40k.
- LCIV reflects lower fee Development Fund charges
- 2022/23 credit on audit fees relates to a prior year accrual not offset by invoice due in following year. Incompletion of prior year audits causing delays for accurately predicating audit fees. Estimates for audit fees are based on 23/24 agreed fees and uplifted for 5% inflation. Audit fees subject to approval by Public Sector Audit Appointments (PSAA).
- Assumed inflation at 5% where applicable or average over 3 years No further allowance for inflation after 2024/25

| | 2022/23 | 2023/24 | 2023/24 | 2024/25 | 2025/26 | 2026/27 |
|--------------------------|---------|----------|---------|----------|----------|----------|
| | Actual | Estimate | Actual | Estimate | Estimate | Estimate |
| | £000 | £000 | £000 | £000 | £000 | £000 |
| OVERALL MANAGEMENT TOTAL | 5,940 | 5,840 | 6,255 | 6,220 | 6,220 | 6,220 |

MAJOR MILESTONES & ISSUES CONSIDERED/TO BE CONSIDERED

Pension Committee meetings 2023/24

The Committee met a number of times during 2023/24 and **Annex A** sets out the coverage of matters considered and members in attendance.

Timetables are indicative and some reports may be rescheduled to an alternative date to avoid overloading content at meetings.

Annex A has been compared against the indicative work plan set for 2023/24 to demonstrate what was achieved and is set out below:

| Cyclical Planned Work | Achieved | Comments |
|--|----------|---|
| 25 July 2023 | | |
| Overall Monitoring Report on Pension Fund to end of Mar 22 (LCIV - pooling manager in attendance) | Yes | |
| Business Plan/Report on the work of the Pensions Committee 2022/23 | Yes | |
| Pension fund Accounts 2022/23 | Yes | |
| Investment Strategy Statement Update | Yes | Presented at 12 September 2023 meeting |
| Climate Risk Policy | Yes | |
| Non-Cyclical Planned Work | Achieved | Comments |
| mplementation of interim and long-term strategy | Yes | Included in the work plan but with no specified date |
| Agreed Admission to the fund: Urbaser Limited – Recycling, Waste Collection & Cleansing contract | Yes | Not possible to predict when new employers will join so won't be scheduled as part of the business plan |
| 12 September 2023 | | |
| Overall Monitoring Report on Pension Fund to end of Jun 23 (Churchill Private Debt Manager to attend) Currency | Yes | |
| Pension Fund Annual Report 2022/23 | Yes | Presented at 7 November 2023 meeting |
| Climate Risk policy – implementation Plan | Yes | Presented at 25 July 2023 meeting in conjunction with Climate Policy |
| Non-Cyclical Planned Work | Achieved | Comments |
| Implementation of interim and long-term strategy | Yes | Included in the work plan but with no specified date |

| Cyclical Planned Work | Achieved | Comments |
|---|----------|--|
| 7 November 2023 | | |
| Annual review of Custodian | Yes | Presented at 24 January 2024 meeting |
| Annual review of Adviser | Yes | |
| Annual review of Actuary | Yes | |
| Review of Governance Policy | Yes | |
| Whistleblowing Annual Assessment | Yes | |
| Risk Register Review | Yes | |
| Overpayment policy following Death | Yes | |
| Funding Strategy Statement Update | Yes | |
| Cash Policy Review | Yes | Presented at 19 March 2024 meeting |
| 12 December 23 (deferred to 24 Jan 2025) | | |
| Overall Monitoring Report on Pension Fund to end of Sep | Yes | |
| 23: (CBRE – Global Property Manager to attend) | | |
| Annual review of Fund Managers Voting & Engagement | Yes | Presented at 19 March 2024 meeting |
| CTCFD report 2022/23 | Yes | Presented at 12 September 2024 meeting |
| Triennial mid-point valuation | Yes | Presented at 7 November 2023 meeting |
| cal Pension Board Annual Report 31 March 2023 | Yes | Presented at 7 November 2023 meeting |
| ₹39 March 24 | | |
| Overall Monitoring Report on Pension Fund to end of Dec | Yes | |
| 23: Permira (Private Debt) | | |
| Pensions administration Budget 2024/25 | No | Going to Pension Committee 25 June 2024 |
| Non-Cyclical Planned Work | Achieved | Comments |
| Agreed Admission to the fund: | Yes | Not possible to predict when new employers will join so won't be |
| Caterlink – St Edwards Schools | | scheduled as part of the business plan |

| | PENSION COMMITTEE MEETINGS 2023/24 | | | | | | | | |
|--------------|-------------------------------------|---|--|---|----------------------|--|--|--|--|
| Data | 0 - 10 | | | Attorn to 1 Do | ANNEX A | | | | |
| Date | Good Governance Framework category | | Topic | Attended By | Duration of meeting | | | | |
| 25 Jul 23 | Investment | Monitoring of Investments | Noted the Pension Fund Performance Monitoring Report for quarter ending March 2023: received presentations from the Fund's pooling manager London CIV | Cllr Mandy Anderson (Chair) Cllr Philip Ruck (Vice-Chair) Cllr Viddy Persaud Cllr James Glass | 2 hours 30 minutes | | | | |
| | Accounting Annual Report & Accounts | Noted Pension Fund Accounts 2022/23 | Cllr Dilip Patel Cllr Joshua Chapman Derek Scott (Trade Union | | | | | | |
| | Investment | Responsible Investment | Agreed the Climate Policy and Action plan and agreed to attend a workshop to determine progress against objectives and further development of action plan | Rep) | | | | | |
| Pa | Investment | Strategy Review | Agreed the fund manager split of a 2.5% increase to infrastructure allocation | | | | | | |
| Page 193 | Funding | New Employer | Agreed Admission to the fund: Urbaser Limited – Recycling, Waste Collection & Cleansing contract | | | | | | |
| | Governance | Service Delivery - Business Planning | Agreed the rolling 2023/24 – 2025/26 Business Plan/ Annual Report on the work of the Pensions Committee for 2022/23 | | | | | | |
| 12 Sep 23 | Investment | Monitoring of Investments | Noted the Pension Fund Performance Monitoring Report for quarter ending 30 June 2023: received presentations from the Fund's Private Debt Manager Churchill | Cllr Mandy Anderson (Chair) Cllr Viddy Persaud Cllr James Glass Cllr Dilip Patel | 1 hour 45 minutes | | | | |
| | Investment | Strategy Review | Agreed the Investment Strategy Statement and noted compliance against Myner's investment principles | | | | | | |

| | | | PENSION COMMITTEE MEETINGS 2023/2 | 4 | |
|----------|---------------------------------------|--------------------------------|--|---|---------------------|
| | | | | | ANNEX A |
| Date | Good Governance Framework category | | Topic | Attended By | Duration of meeting |
| | Investment Responsible Investment | | Agreed Taskforce for Climate, related Financial Disclosures (TCFD) report for 31 March 2023 | | |
| | Investment | Strategy Review | Agreed to implement the 5% allocation to investment grade credit assets via the LCIV Global Bond Fund | | |
| 7 Nov 23 | Governance | Review of Effectiveness | Noted Annual review of Actuary for the year ending 30 Sept 2023 | Cllr Mandy Anderson (Chair) Cllr Philip Ruck (Vice-Chair) | 1 hour |
| | Governance | Review of Effectiveness | Noted Annual review of Investment Consultant & agreed contract extension to 31 March 2026 | Cllr Viddy Persaud Cllr Dilip Patel Cllr Joshua Chapman | |
| Page 194 | Governance | Policy Review | Agreed Governance Policy & Compliance Statement following review | Cllr Jacqueline Williams Derek Scott (Trade Union | |
| 194 | - Nopoli c | Annual Report & Accounts | Agreed the Pension Fund Annual Report 31 March 2023 and noted compliance against CIPFA checklist | Rep) | |
| | Governance | Breaches | Noted the results of Whistleblowing Annual Assessment for 30 Sept 2023 and noted no possible breaches reported | | |
| | Funding | Policy | Agreed the Updated Funding Strategy Statement 2023 to reflect legislation changes on DfE guarantee & Pass through policy | | |
| | Investment | Risk Management | Pension Fund Risk Register – updated as of Sept 2023 | | |
| | Pension Administratio n | Processes | Agreed the continuation of the overpayment policy following death of a pensioner | | |
| | Accounting | Annual Report & Accounts | Noted Local Pension Board Annual Report 31 March 2023 | | |

| | PENSION COMMITTEE MEETINGS 2023/24 | | | | | | | |
|--|------------------------------------|---------------------------|---|--|------------------------------|--|--|--|
| Date | Good Govern Framework ca | | Topic | Attended By | ANNEX A Duration of meeting | | | |
| 12 Dec 23 (deferred to 24 Jan | Investment | Monitoring of Investments | Noted the Pension Fund Performance Monitoring Report for quarter ending 30 September 2023: received presentations from the Fund's Global Property Manager CBRE | Cllr Dilip Patel (Chair) Cllr Philip Ruck (Vice-Chair) (via Zoom) Cllr Viddy Persaud | 1 hour 50 minutes | | | |
| 24) | Governance | Review of Effectiveness | Noted Service review of the Pension Fund Custodian for the year to September 2023 | Cllr James Glass Cllr Joshua Chapman | | | | |
| | Funding | Actuarial Valuations | Noted Pension fund interim Funding position – midpoint of triennial valuation at 30 Sept 2023. | Cllr Jacqueline Williams | | | | |
| 19 Mar 24 ປ ວ ວ ດ | Investment | Monitoring of Investments | Noted the Pension Fund Performance Monitoring Report for quarter ending 31 December 2023: received presentations from the Fund's Private Debt Manager Permira | Cllr Mandy Anderson (Chair) Cllr Viddy Persaud Cllr James Glass Cllr Dilip Patel | 2 hours 10 minutes | | | |
| _ | Investment | Monitoring of Investments | Agreed the updated Cash Management policy | Cllr Joshua Chapman Cllr Jacqueline Williams | | | | |
| 95 | Investment | Responsible Investment | Noted the Review of Voting & Engagement Activity for the year to June 23 | Cllr Stephanie Nunn (virtual attendance) | | | | |
| | Funding | New Employer | Agreed Admission to the fund: Caterlink – Catering Services at St Edwards Academy | | | | | |

Three members constitute a quorum.

Target dates for issuing agendas were met.

Pension Committee meetings 2024/25 and onwards

To assist members to make effective decisions, the Business Plan sets out an indicative timetable for reports to be submitted to the committee which will cover cyclical reports, as shown in **Annex B**.

In addition to the annual cyclical work programme there are a number of key issues that are likely to be considered by the Pensions Committee in the coming year and beyond and will be added to the meeting cycle as appropriate and are set out below:

- Continued development/monitoring of Climate Risk Policy
- Develop and implement approach for climate related engagement
- Task Force on Climate Related Financial Disclosures (TCFD) reporting compliance/gap analysis (subject to regulatory publications)
- Implementation of the interim and long-term Investment
- Consider Local investment & Levelling Up agenda (ongoing considerations at present)
- Potential consideration of Private Equity investment (consider alongside local investment)
- London CIV Pooling progression/Continued consideration of transfer of assets to the London CIV (particularly Multi Asset Credit, Index linked assets)
- ▲ Equity portfolio review including review of emerging market allocation and reflecting net-zero related commitments
- Review of RLAM mandate & Index linked gilts objectives
- Consideration of reallocating into Private Debt/Infrastructure close ended funds
- Governance review of London CIV
- Planning for SAB Good Governance guidance compliance once guidance is issued
- TPR New Code of Practice compliance check develop action plan
- New training policy to reflect Good Governance and TPR compliance
- Risk Register –independent oversight of scoring
- Cost transparency analysis
- New contract Actuary (current contract expires 15 July 2025)
- New contract Investment Advisor (current contract expires 31 March 2026)
- New contract Custodial Services (current contract expires 30 September 2026)
- Administration issues i.e. ongoing work associated with the McCloud ruling readiness for Pensions Dashboard
- New Employer admissions
- Covenant Risk Review
- SAB developments
- Consideration of LGPS Regulation changes and consequential policy, as applicable

- Topical issues discussed as appropriate
 Continued training and development (include training programme following Local Elections May 2026)

KEY REPORTING DATES / INDICATIVE WORK PLAN 2024/25

ANNEX B

| | 25 JUNE 2024 | 1 OCTOBER 2024 | 5 NOVEMBER 2024 | 10 DECEMBER 2024 | 18 MARCH 2025 |
|--------------------------------|---|---|---|---|---|
| Formal Committees with Members | Overall Monitoring Report on Pension Fund to end of Mar 24: Royal London (Bonds) Pension Fund Accounts 2023/24 Business Plan/Report on the work of the Pensions Committee 2023/24 Pensions Administration Budget 24/25 | Overall Monitoring Report on Pension Fund to end of Jun 24: LGIM Passive Equities) Pension Fund Annual Report for 2023/24 TPR code of Practice – compliance / Action Plan GAD Section 13 results | Annual review of Custodian Annual review of Adviser Annual review of Actuary + contract renewal options Review of Governance Policy Whistleblowing Annual Assessment Risk Register Review Overpayment policy following Death Communications Strategy 2024 – 2027 Pension Fund charging Policy Review Pensions Administration Strategy Review | Overall Monitoring Report on Pension Fund to end of Sep 24: UBS (Property). TCFD report 2023/24 Local Pension Board Annual Report 31 March 24 | Overall Monitoring Report on Pension Fund to end of Dec 24: Stafford (Infrastructure) Annual review of Fund Managers Voting & Engagement Pensions Administration Budget 25/26 |
| Training | Associated Training | Associated Training | Associated Training | Associated Training | Associated Training |

ANNEX B (continued)

KEY REPORTING DATES / WORK PLAN 2025/26

| | JUNE 2025 | SEPTEMBER 2025 | NOVEMBER 2025 | DECEMBER 2025 | MARCH 2026 |
|--|---|--|--|--|---|
| Formal Committees with Members Page 199 | Overall Monitoring Report on Pension Fund to end of March 25: Russell (FX hedging) Business Plan/Report on the work of the Pensions Committee 2024/25 Pension Fund Accounts 2024/25 | Overall Monitoring Report on Pension Fund to end of June 25 –JP Morgan (Infrastructure) Pension Fund Annual Report for 2024/25 Annual review of Adviser + Contract renewal options | Annual review of Custodian + contract renewal options Annual review of Actuary Review of Governance Policy Whistleblowing Annual Assessment Risk Register Review Overpayment policy following Death | Overall Monitoring Report on Pension Fund to end of September 25 Churchill (Private Debt) TCFD report 2024/25 Local Pension Board Annual Report 31 March 25 2025 Valuation results FSS statement review ISS Strategy review | Overall Monitoring Report on Pension Fund to end of December 25: LCIV (Pooling) Annual review of Fund Managers Voting & Engagement Pensions Administration Budget 26/27 |
| Training | Associated Training | Associated Training | Associated Training | Associated Training | Associated Training |

ANNEX B (continued)

KEY REPORTING DATES / WORK PLAN 2026/27

| | JUNE 2026 | SEPTEMBER 2026 | NOVEMBER 2026 | DECEMBER 2026 | MARCH 2027 |
|--------------------------------|--|--|---|---|--|
| Formal Committees with Members | Overall Monitoring Report on Pension Fund to end of March 26: CBRE (Property) Business Plan/Report on the work of the Pensions Committee 2025/26 Pension Fund Accounts 2025/26 | Overall Monitoring Report on Pension Fund to end of June 26 – Royal London (Bonds) Pension Fund Annual Report for 2025/26 | Annual review of Custodian Annual review of Adviser Annual review of Actuary Review of Governance Policy Whistleblowing Annual Assessment Risk Register Review Overpayment policy following Death Cash Policy Review | Overall Monitoring Report on Pension Fund to end of September 26 Permira (Private Debt) Annual review of Fund Managers Voting & Engagement TCFD report 2025/26 Local Pension Board Annual Report 31 March 26 | Overall Monitoring Report on Pension Fund to end of December 26: Stafford (Infrastructure) Pensions Administration Budget 27/28 |
| Training | Associated Training | Associated Training | Associated Training | Associated Training | Associated Training |

PROVISION OF TRAINING

The Pensions Regulator (TPR) Code of Practice No.14 (April 2015) and its replacement, the new single Code of Practice came into force on 28 March 2024 and includes a requirement for members of the Pension Committee (PC)/Local Pension Board (LPB) to demonstrate that they have an appropriate degree of knowledge and understanding to enable them to properly exercise their functions as a member of the Committee/LPB.

A joint training strategy for the PC/LPB was agreed by the Pensions Committee on the 24 November 2015 and presented to the Local Pension Board at its meeting on the 6 January 2016. A Training Strategy review had been deferred pending issuance of guidance/regulations for the anticipated Good Governance Review and TPR New Code of Practice. The Code of Practice has now been issued and officers will review compliance against the new code and commence with a Training Strategy review during 2024/25.

The PC of the London Borough of Havering Pension Fund fully supports the intentions behind CIPFA's Knowledge and Skills Code of Practice and has agreed to formally adopt its principles. The updated June 2021 Knowledge and Skills framework for committee members was adopted as part of the training programme following the Local Borough elections in May 2022.

As set out in the Council's constitution, committee procedure rules, a member appointed to the PC shall have received, or shall within six months of appointment receive, training appropriate to its membership. If a member does not undertake the required training within six months of appointment, then that member shall not partake in the decision making of the Committee until their training has been completed. Long membership of the committee is encouraged in order to ensure that expertise is developed and maintained within. The Council recommend that the membership of the Pension Committee remain static for the life of the term in Council, unless exceptional circumstances require a change.

Maintaining expertise, experience and knowledge is a key focus for the committee in order to meet the "qualitative test" under Markets in Financial Instrument Directive (MiFID 11). Firms will undertake an assessment of the expertise, experience and knowledge of the local authority and its pension fund committee in order to be reasonably assured that they are capable of making their own investment decisions and have an understanding of the risks involved before a firm will permit election to professional status. All requests for election have been granted for existing investment service providers.

A training budget has been agreed for the provision of training for £10,000 but this will be re-evaluated as appropriate. Training costs will be met from the Pension Fund.

The majority of training and development is cyclical in nature, spanning the four-year membership of the PC. Associated training and development will be given when required and linked to the Pension Fund meeting cyclical coverage as shown in **Annex B.**

In addition to the cyclical training and development that the PC will have over the lifetime of their membership, training will be provided in the areas where it has been specifically requested or has been identified as required. Special PC meetings will be arranged from time to time to discuss matters as appropriate

Members receive briefings and advice from the Fund's Investment adviser at each Committee meeting.

Members and Officers also attend seminars arranged by Fund Managers or other third parties who specialise in public sector pensions.

The Fund is a member of the CIPFA Pensions network, which gives access to an extensive programme of events, training/workshops, newsletters and documentation, including briefing notes on the latest topical issues.

The Head of Pensions and Treasury, Projects and Contracts Manager, Pension Fund Manager (Finance) and /or Accountant also attends regular forum meetings with peers from other London Boroughs; this gives access to extensive opportunities of knowledge sharing and benchmarking data.

Officers within oneSource Pensions teams also benefited from sharing of best practice

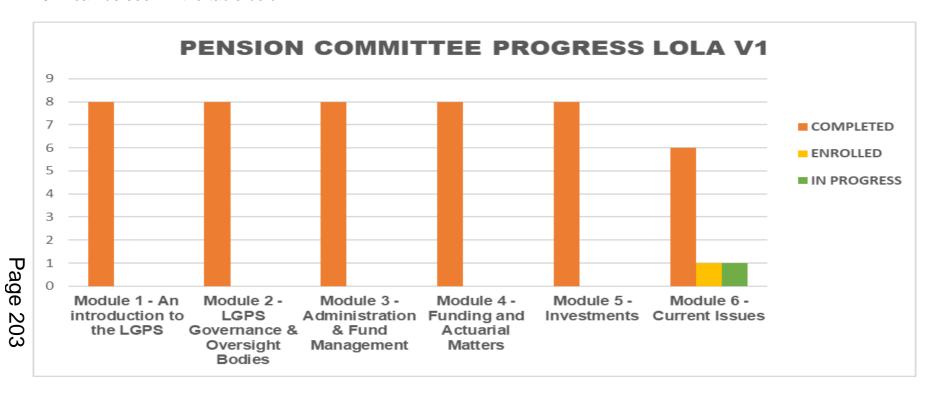
The London CIV runs periodic seminars to aid Officer and Committee member development.

The Pensions Regulator has launched an e-learning programme and this is available for members of the PC and LPB to use.

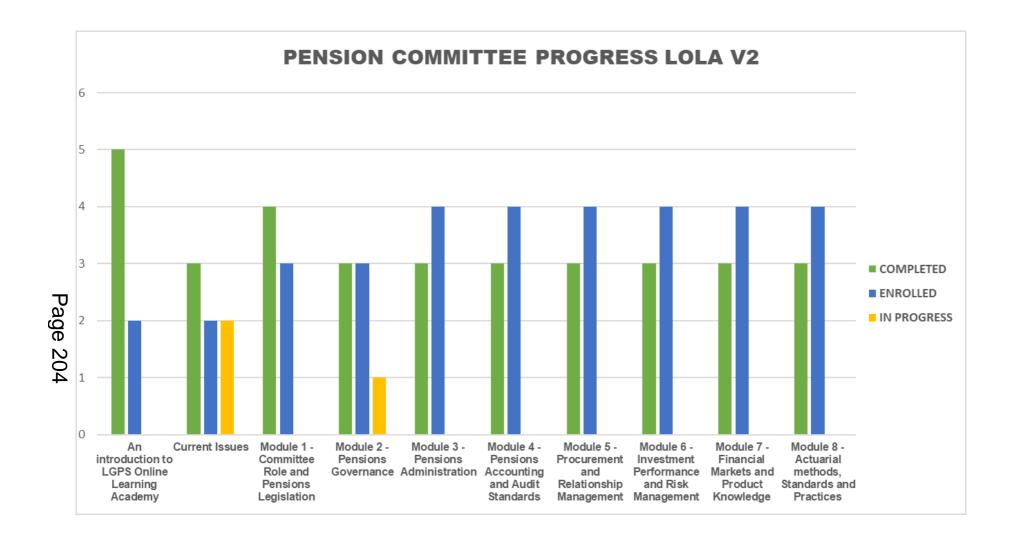
Training and development took place during 2023/24 to ensure that Members of the Committee were fully briefed in the decisions they were taking. Training logs are maintained and attendance and coverage can be found in **Annex C**. Training will be recorded following the May 2022 elections to demonstrate continuous development and training during their full term of elected office on the PC.

The Fund has also subscribed to the LGPS Online Learning Academy (LOLA) Launched by our Actuaries (Hymans). There were issuances of learning modules under version 1 (v1) and version 2 (v2). This is an online platform designed to support the training needs of PC, LPB and Officers. The training is split into a number of modules covering the CIPFA Knowledge & Skills Framework and TPR's Code of Practices. Each module contains short 'videos on demand' presentations of 20 minutes or less with supplemental learning materials and quizzes. PC members were requested to complete LOLA v1 modules to meet the Council's constitution, committee procedure rules.

The Fund receives regular progress reports, allowing it to easily evidence member's development and progress as at 31 March 2024 can be seen in the table below:



The fund transitioned to the LOLA v2 module in October 2023 and the PC are encouraged to refresh their learning by completing the modules under version 2. Progress made as at 31 March 2024 can be seen in the following table:



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| | Р | ENSION COMMIT | TEE TRAINING (May 2022 Election | - 31 March 2024 | Annex C | |
|------------------|--------------------------|--|--|---|-------------------|--|
| Date | Good Govern Framework | nance/CIPFA category | Topic | Attended By | Duration | |
| 23 Jun 2022 | ALL | ALL | Introduction to Pensions | Cllr Mandy Anderson (Chair) | 1 hour | |
| 11 Jul 2022 | ALL | Financial/ Investment Strategy, pooling & Financial Mkts & products | LCIV Induction for new Pension Committee Chairs | Cllr Mandy Anderson (Chair) | 1 hour | |
| 19 Jul 2022 | ALL | ALL | New Pension Committee induction | Cllr Mandy Anderson (Chair) Cllr Dilip Patel Cllr Viddy Persaud Cllr Julie Wilkes Cllr Philip Ruck Cllr Matthew Stanton | 1 hour 30 minutes | |
| 5/6 Sept 2022 | Investment | Strategy Implementation – Asset pooling | LCIV Annual Strategy Conference | Cllr Mandy Anderson (Chair) Derek Scott (Union Rep) | 12 hours | |
| 20 Oct 2022 | Governance | Governance | LGA Fundamentals Day 1 | Cllr Mandy Anderson (Chair) | 7 hours | |
| 10 Nov 2022 | Governance | Strategy Implementation – Asset pooling | LGA Fundamentals Day 2 | Cllr Mandy Anderson (Chair) | 7 Hours | |
| 5 Dec 2022 | Funding | Funding Strategy & Actuarial Methods | 2022 Valuation results | Cllr Julie Wilkes Cllr Viddy Persaud Derek Scott (Union Rep) | 2 hours | |
| 15 Dec 2022 | ALL | ALL | New member induction | Cllr James Glass | 1 hour | |

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| | Р | ENSION COMMIT | TEE TRAINING (May 2022 Election | - 31 March 2024 | | |
|-------------------|--|---|--|---|---------------------|--|
| Date | Good Governance/CIPFA Framework category | | Topic | Attended By | Annex C Duration | |
| 19/20 Jan 2023 | Governance | ALL | Local Government Conference 2023 | Cllr Mandy Anderson (Chair) Derek Scott (Union Rep) | 12 hours | |
| 6 Mar 2023 | Investment | Strategy Implementation, Risk management | Education session on Climate Metrics | Cllr Mandy Anderson (Chair) Cllr Philip Ruck Cllr Viddy Persaud Cllr Stephanie Nunn Derek Scott (Union Rep) | 1 hour | |
| 17 Jul 2023 | ALL | ALL | New member induction | Cllr Joshua Chapman | 1 hour | |
| 18 Jul 2023 | Governance | Investment Strategy, Pooling | LCIV AGM | Cllr Mandy Anderson Cllr Viddy Persaud | 2 hours | |
| 25 Jul 23 | Governance | Management accounting | Havering Pension Fund Accounts | Cllr Mandy Anderson (Chair) Cllr Philip Ruck Cllr Viddy Persaud Cllr Dilip Patel Cllr James Glass Cllr Joshua Chapman Derek Scott (Union Rep) | 30 minutes | |
| 4/5 Sep 23 | Governance / Investment | Strategy Implementation – Asset pooling | LCIV Conference | Cllr Mandy Anderson (Chair) Cllr James Glass | 12 hours | |
| 12 Sep 23 | Investment | Financial markets and Products | Corporate Bonds/LCIV Global Bond Fund | Cllr Mandy Anderson (Chair) Cllr Viddy Persaud Cllr James Glass | 50 minutes | |
| 17 Oct 2023 | ALL | ALL | New member induction | Cllr Jacqueline Williams | 1 hour | |

| | F | PENSION COMMIT | TEE TRAINING (May 2022 Elect | tion - 31 March 2024 | |
|-------------------------------|-------------------------|---|------------------------------|---|-----------------------|
| | | | | | Annex C |
| Date | Good Gover Framework | nance/CIPFA category | Topic | Attended By | Duration |
| 27 Mar 24 | Investment | Strategy Implementation, Risk management | Climate Policy workshop | Cllr Mandy Anderson (Chair) Cllr Jacqueline Williams | 2 hours 45 minutes |
| Annex A Committee dates | ALL | ALL | Various – refer to Annex A | Pensions Committee | 9 hours 15 minutes |

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Overview and Scrutiny Board Annual Report 2023/2024

CHAIRMAN'S FOREWORD

I am pleased to give this short introduction to the summary of the Board's work during the 2023-2024 municipal year. Details are given below of elements of the Board's work this year including call-ins and budget scrutiny.

I would like to place on record my thanks to the other members of the Board and all the Council officers who have supported the Board's work this year. The annual reports of the respective Overview and Scrutiny Sub-Committees are attached to this report for information.

I commend this annual report and am pleased to submit it to full Council.

REMIT AND MEMBERSHIP OF THE COMMITTEE

The Board has responsibility for hearing all requisitions ('call-ins') of Council decisions. The Board also leads on the pre-decision scrutiny of forthcoming Council plans and decisions.

The Overview and Scrutiny Board is also responsible for scrutiny of the following areas:

- Strategy and commissioning
- Partnerships with Business
- Customer access
- E-government and ICT
- Finance
- Human resources
- Asset Management
- Property resources
- Facilities Management
- Communications
- Democratic Services
- Social inclusion
- Councillor Call for Action

The Members who served on the Overview and Scrutiny Board during the year were:

Councillor Gerry O'Sullivan (Chairman)

Councillor Laurance Garrard (Chairman)

Councillor Phil Ruck (Vice-Chairman)

Councillor Mandy Anderson

Councillor Martin Goode

Councillor Dilip Patel

Councillor Keith Prince

Councillor Tim Ryan

Councillor Matt Stanton

Councillor Natasha Summers

Councillor David Taylor

Councillor Katharine Tumilty

Councillor Bryan Vincent

Councillor Damian White

<u>OVERVIEW AND SCRUTINY BOARD – REVIEW OF ACTIVITY, 2023/24</u> MUNICIPAL YEAR

1. Council Risk Registers

At its July 2023 meeting, the Board scrutinised the risk registers available across Council departments. This focussed on potential areas of risk in housing such as recruitment and retention of staff, IT systems failure and adult safeguarding issues. Risks in the regeneration area included costs of climate change, lower potential sales values of properties and the need to maintain levels of private rented income.

The Board scrutinised how levels of risk were assessed and recorded and mitigations put in place.

2. Requisitions (Call-Ins) of Executive Decision

In November, the Board considered a call-in concerning proposed loans to Mercury Land Holdings (MLH) for development at re the former St Bernard's Day Centre, Peel Way. Although the call-in was not upheld, the Board did ask

Cabinet to consider several issues including the viability of the Council taking on the project itself, adding social housing development and the possibility of involving Group Leaders when discussing future investment strategy decisions.

At its May meeting, the Board discussed two further call-ins relating to the development by MLH of sites including several car parks. Discussions centred on the rationale for these decisions and if the business case as presented was robust enough. Members of the Board felt that there remained a number of areas of concern about the proposals and therefore upheld both requisitions. The Board made a number of comments about its concerns over the proposals that were considered at a subsequent Cabinet meeting.

3. Exemptions from Call-In

The Board reviewed those occasions where the Chairman had granted an exemption from the call-in process where decisions were particularly urgent. Many of the 11 exemptions granted in the municipal year at the point of review related to the need to claim grant funding which was often released at short notice. The Board made several recommendations in this area including that more robust planning be introduced to reduce the number of exemptions requested and that the exemptions to call-in report also be presented to full Council.

4. Finance Issues including the Council's Budget

The Board has sought, given the financial challenges facing the Council, to scrutinise as closely as possible the Council's budget and progress with projected cost savings. In November, Members met with senior Council officers and the Cabinet portfolio holder to scrutinise progress in containing the Council's projected overspend. Areas discussed included the level of parking revenue collected and the cost of social care provision. The Board made a number of recommendations including that the Strategic Director meet on a monthly basis with the directors of overspending departments and that targets be set for reducing the cost of agency staff.

In January, the Board undertook pre-decision scrutiny of the Council's budget proposals for the new financial year. A number of recommendations were made to Cabinet regarding the Bridge Close Regeneration LLP and Housing Revenue Account Business Plans. These covered areas including the potential costs of telecare around the digital switchover and that an update be given on work undertaken to increase the number of bedrooms in homes.

As regards the budget itself, the Board scrutinised the likely impact of the Council's capitalisation order and noted the difficult circumstances in which

officers were operating. Proposed savings such as stopping the Christmas lights programme and increasing the cost of visitor parking permits were also discussed. Concern was also raised over the proposed introduction of parking charges in parks.

The Board made a number of recommendations including that more emphasis be placed on the future cost of capitalisation requests and that details of progress with meeting savings targets be brought to the Board on a regular basis. The Board was pleased to note that its recommendation that the introduction of parking charges in parks not be proceeded with was accepted by Cabinet.

5. IT Service Repatriation

The Board also scrutinised progress with repatriating the Council's IT service back to Havering. It was hoped that this would result in a safer, more robust and legally compliant IT service. Members discussed future proofing of the IT plans and arrangements for business continuity. The Board made recommendations that future Cabinet reports should include more detail of costings and allocated budgets as well as fuller reasoning for decisions.

6. <u>Customer Relationship Management Digital Programme</u>

In May, the Board scrutinised work on the Customer Relationship Management (CRM) programme. This covered the delivery of services to residents both digitally and via the Council's contact centre. Members discussed issues such as how reports of flytipping were dealt with and security issues relating to the systems. The Board was pleased that services now using the new system such as registrars and green waste collection had received good feedback from the public.

7. Parking Enforcement Task and Finish Group

Throughout much of the period under review, members of the Board were engaged in a review of the operation of parking enforcement in Havering. Members undertook a number of activities including observing daily staff briefings and having a valuable opportunity to join Civil Enforcement Officers on their daily rounds.

The Task and Finish Group formulated a total of 22 recommendations which were due to be considered by Cabinet in June 2024.

IMPLICATIONS AND RISKS

| Financial implications and risks: |
|--|
| None – narrative report only. |
| Legal implications and risks: |
| None – narrative report only. |
| Human Resources implications and risks: |
| None – narrative report only. |
| Equalities implications and risks: |
| While the work of the Board can impact on all members of the community, there are no implications arising from this specific report which is a narrative of the Board's work over the past year. |
| Environmental and Climate Change Implications and Risks |
| None – narrative report only. |
| None. |
| |





Places Overview and Scrutiny Sub-Committee Annual Report 2023/2024

INTRODUCTION

This report is the annual report of the Sub-Committee, summarising the Sub-Committee's activities during its year of operation ended May 2024.

It is planned for this report to stand as a public record of achievement for the year and enable Members and others to have a record of the Committee's activities and performance.

TERMS OF REFERENCE

The areas scrutinised by the Committee are:

- Housing & Accommodation Services
- Land & Property Services
- Planning
- Building Control
- Business Services
- Inward Investment
- Asset Management
- Property Services
- Facilities Management
- Sports
- Leisure
- Arts
- Music
- Libraries
- Heritage
- Parks & Open Space
- Highways
- Parking & Traffic
- Waste & Recycling
- Climate Change
- Transport & Infrastructure
- Public Protection & Licensing
- Emergency Planning
- Technical Services

SUB-COMMITTEE MEMBERSHIP

Councillor David Taylor (Chairman)
Councillor Katherine Tumilty (Vice-Chair)
Councillor Osman Dervish
Councillor Ray Best
Councillor Jason Frost
Councillor David Godwin
Councillor Gerry O'Sullivan
Councillor Natasha Summers
Councillor Bryan Vincent
Councillor Susan Ospreay
Councillor Matt Stanton
Councillor Brian Eagling

REVIEW OF ACTIVITY

During the year under review, the Sub-Committee met on four occasions and dealt with the following issues:

UPDATE ON TREE SERVICES IN HAVERING

At the request of Members, a report that outlined the key activities, statistics, challenges and aspirations of Havering Council's Tree Services was presented to the sub-committee.

Members noted that there were an estimated 20,000 street trees, 250,000 trees in parks and open spaces and 4,000 trees on Council housing sites. These trees play an integral part in both managing the ecological footprint of Havering as well as the Borough's aesthetics.

Members commended the service on the number of new trees planted but were of the opinion that the current maintenance and pruning of trees needed a review. It was also noted that at present there was no contractor working for the council to undertake this exercise.

The Sub-Committee noted that Havering has never formally adopted a specific tree policy. It was stated that a new policy and accompanying strategy has been drafted, and was currently under review by business partners. The Strategy's vision is:

To preserve, improve and secure a net gain of the Council's tree stock for current and future generations, adhering to the "right tree, right place" principle.

The aims, objectives and outcomes of the draft Tree Policy are subject to change and the team was considering looking to include reference to climate change mitigation. The draft policy currently contains the following:

- To manage the Council's tree stock in accordance with good arboriculture and streetscape practice to BS standard 3998.
- To maintain the Council's tree stock on a regular cyclical basis.
- To increase the stock of trees in an appropriate manner by seeking both grant funding and private sponsorship.
- To inform and educate residents and businesses about the value of trees, and explore ways for greater involvement, consultation and protection from residents and businesses.
- To promote and secure high quality tree planting and landscaping within new developments in order to maintain and enhance the Borough's local landscapes.

Members suggested that the service should proactively liaise with Planning Officers during the drafting stage of the policy in order to influence the choice of trees, planning and planting in future developments.

Members asked for the draft policy to be presented to the sub-committee once it was ready for adoption.

Members requested that the sub-committee receive a breakdown of previous complaints relating to tree issues.

It was also suggested that information relating to the current regime of tree maintenance in cemeteries be presented to Members at a later date.

The sub-committee noted that assuming funding is granted the service would commence the purchase of new tree stock in August 2023. It was stated that between November 2023 – Feb 2024, the next round of tree planting will take place along with the commencement of the new tree maintenance contract

The Sub-Committee was informed of the following future plans:

- School programme: The team would like to become more involved in community engagement and education of youngsters in the borough to fuel their enthusiasm for the natural environment.
- 2. Sponsorship scheme: Officers hope to relaunch this scheme in the next 12-18 months, as a way to encourage more tree planting on the public highway and enable residents to take more ownership of their surroundings.
- 3. The Team will continue to explore further opportunities across the service.

ULEZ ASSET REPORT

At the request of Members, a report that detailed the financial impact of the ULEZ enforcement that came into force on the 29 August 2023, impacting across a wide range of council vehicles and departments, was presented to the Sub-Committee.

The Sub-Committee was informed that the council operates a fleet of c. 200 vehicles across its various functions and the report detailed the ULEZ compliance status by service.

Members noted that all noncompliant vehicles would be subject to the ULEZ charge of £12.50 per day.

The report detailed a projected cost of replacing non-compliant vehicles. An appendix to the report identified the fleet and the following costs:

- The daily, monthly and yearly costs of ULEZ fines per vehicle.
- The ULEZ cost for this current year from 1st September 2023
- The estimated cost of replacing non-compliant fleet assets
- The estimated cost of replacing all vehicles including the buses with TFL community grace period application certificates.

The Sub-Committee noted that the projected schedule identified a worst-case scenario, that in the unlikely event of no further fleet replacements being achieved during the current financial year and all non-compliant vehicles being used daily, the Council's potential exposure to ULEZ fines would be approximately £103k in 2023/24.

Members asked that the service produce a year on year breakdown of reduction of the ULEZ fines in order to determine cost to the council.

HOUSING REPAIRS AND VOIDS UPDATE

The Sub-Committee was presented with a report on Housing repairs and voids.

Officers explained that the performance of the service was at the correct level to meet the contractual targets however small and large voids had not met their targets due to the condition of the properties. Members noted the Council took on over 100 voids at the start of the contract and this had been reduced to just over 50.

Officers discussed the challenges surrounding the housing stock as many houses were built in the early 1940s which are now difficult to manage, however, the Council was insulating external walls to prevent mould whilst aiming for net zero carbon emissions. It was explained to Members that a large problem faced with voids is the financial impact on the council of hiring skips to clear out possessions that have been left at the property. In total, the council had 738 void properties across all types within the last year but assurances were made by officers than target would still be aimed for regardless of the amount of voids the Council had.

Officers explained to members that properties were 100% gas compliant which was better than neighbouring boroughs but gas heating was to be slowly phased out for electric heaters for futureproofing reasons.

GREEN FLAG AWARD - HAVERING'S PARKS

The Sub-Committee was presented with a report on the Green Flag awards for Havering's parks.

Members received an oral representation from a member of the Friends of Raphael & Lodge Farm Parks group as agreed by the Chairman prior to the meeting.

Officers explained to Members that the green flag awards process was done annually. However, the awards could not judge all 16 parks every year so 10 parks were judged one year and the remaining 6 the year after. It was explained that the judging takes place in the summer months and the parks were judged on 24 different criteria across 7 areas. It was also explained that a 'mystery shop' exercise could be carried out which is an unannounced visit however there would be fewer criteria and comments as opposed to formal judging.

Members were delighted to note the Council had never failed an assessment since 2007, they noted however the concerns raised by the Friends of Parks group representative regarding the irregularity of the grass cutting and the poor sewage and drainage when there are severe weather storms. Officers responded to the concerns raised and assured members that working groups between the Council and volunteer groups were being developed.

Members requested information on the criteria for smaller parks and green spaces to receive the Green Pennant and London in Bloom awards.

STATE OF CHILDREN'S AREAS - HAVERING PARKS

At the request of Members, the Sub-Committee received a report that provided an overview of the Council's Parks specifically the State of the Children's Areas within Havering Parks.

Officers explained the process of assessing the risk of play areas which involved 3 checks; a basic visual, an operational and an annual independent check. Members noted only skate parks were assessed as high risk due to the nature of the activities within those specific areas. Members also noted that play areas are subject to damage and vandalism, of which some damage can be repaired by in-house Council teams however some damage requires specialist contractors but officers were looking at the feasibility of having the specialist work done in-house. It was highlighted to Members that there was a dedicated phone number, text number and website that the public could contact if they wished to report damage or vandalism including graffiti.

Officers explained that there had been a significant increase in the use of play areas across Havering but acknowledged that there was little new equipment and little improvement to the existing equipment. Members recognised the need of the Council

to provide play equipment that was manufactured from more sustainable and natural materials to meet the net zero carbon targets. Council officers described to Members that contractors were challenged to design new, innovative and inclusive play equipment with the basket swings given as a good example of inclusive play. Members noted the lack of communication between the Council and Disabled groups within the Borough and asked for officers to look into bridging that gap.

TACKLING DAMP AND MOULD

The Sub-Committee was presented with a report on the current position issues relating to damp and mould including some of the measures that are currently being undertaken in relation to the issue.

It was stated that the damp and mould issues within Havering were a complex matter with many contributing factors including historic building deficiencies that create surfaces areas that are more prone to condensate.

The housing stock in Havering comprised of a large number of dwellings constructed in and around the 1960's. it was stated that dwellings constructed in the period were not subject to current building regulations and therefore lack the thermal values of modern construction.

The sub-committee was informed that the amount of condensation and mould can be increased by factors such as overcrowding and furniture, clothing, and bags being placed close to external walls as airflow is restricted and moisture containing air can settle more easily.

This often resulted in resident's belongings becoming damp or spoiled and consequently complaints and frustration from residents.

The cost of living crisis is also adding additional pressure, whereby residents cannot afford to use their heating.

Many families within Havering are not legally overcrowded even though their living conditions may be very cramped. Larger families within smaller dwelling that have the building deficiencies highlighted in some of housing most common archetypes will be at a far greater risk of condensation occurring.

The table in the presentation detailed how much moisture was created by daily tasks. It was explained that in supporting residents the service have improved processes to report any damp and mould concerns. It was stated that all residents who report damp and mould issues will be offered a surveyor's inspection within a target time of 3 weeks.

Officers explained that surveyors undertake a detailed property inspection identifying any building defects, raising works orders to remedy any defects identified. The service will look at measures designed to help, such as installing better mechanical ventilation where appropriate. Officers will fully explain the cause of the mould to the

resident and offer advice on moisture reduction and management, explaining the underlying issue that makes the dwelling more prone to condensation and how adjustments to lifestyle can dramatically improve conditions and reduce condensation and subsequently mould.

It was stated that the repairs and capital teams liaise with each other on a regular basis to identify any problem blocks and look at developing its future capital programmes to alleviate some of the current issues through the service retrofit agenda.

The service indicated that it was exploring further external grant funding options such as Wave Three Decarbonisation Funding, that is yet to be announced by the government. Officers explained that the service was allocating £7million in 24/25 and £11million in 25/26 for energy efficiency measures on council properties which will help to address some of the current issues.

HOUSING RESIDENT SAFETY AND COMPLIANCE PERFORMANCE

The Sub-Committee received an update report on the position of the Housing Services Resident Safety and Compliance programmes against its statutory and regulatory duties under the Building Safety Act 2022.

As agreed by Cabinet, the Places Overview and Scrutiny Sub-Committee would be provided with regular reports on the Housing compliance performance as part of the internal governance approach and performance is also scrutinised monthly by both the Compliance board and the Asset Management Sub Steering Group.

The report detailed the following compliance areas regarding resident safety:

- Gas Safety all gas appliances should be inspected annually and a Landlord Gas Safety Record (LGSR) provided.
- Electrical Safety all social rented properties must have an electrical inspection (EICR) every 10 years, although recent regulation changes require private landlords to have 5 year inspections and this is considered best practice in social rented properties and the approach the Council has adopted.
- Lift Safety Monthly inspections and planned maintenance regimes and an annual certificate provided by the Council's insurer.
- Water Safety all relevant water systems must be checked for legionella risk, this is based on a risk based approach which could be a cyclical programme every 2 years. All actions flowing from the legionella inspection must be completed within prescribed timescales.
- Fire Safety All relevant properties must have a valid Fire Risk Assessment (FRA) undertaken on a risk based approach which can be on a cyclical programme between 1 and 3 years. All actions flowing from the FRA must be completed within prescribed timescales.

- Asbestos under the asbestos regulations all communal areas must have a valid management level asbestos survey which must be held on a relevant asbestos register. In addition, completing a survey programme of all domestic properties to ensure risk is managed; this is not however a statutory requirement under the asbestos regulations.
- Fire Door Checks Carrying out flat entrance door checks in all tower blocks.
 Monitoring has been ongoing since June 2023 as part of the new requirements
 under the 2022 Building Safety Act. In addition, the service was completing fire
 door checks in all blocks with communal heating to ensure risk was
 appropriately managed. These additional checks are not a statutory
 requirement under the new Building Safety Act.

It was noted that all resident safety key performance indicators (KPIs) are set at 100% as shown in Appendix 1. After a significant programme of work the service has been able to complete most programmes and ensure the relevant evidence was in place to support this position.

The sub-committee was informed that there were a number of EICRs to complete, these were hard to reach properties and work was being done to resolve these. All actions from the Building Safety Act are captured on the Action plan in appendix 2.

Officers highlighted some new legislation introduced which flowed from the Grenfell Enquiry and the Fire Safety Regulations 2022 to the sub-committee. It was stated that the service had introduced some additional monitoring regimes to ensure compliance such as communal doors checked every 3 months and flat front entrance doors checked every 12 months. These have now been included in the report.

The legislation also introduced some additional requirements around way finding signage requirements, floor plans, lifts and essential firefighting equipment which the service is working to ensure compliance with.

The sub-committee was informed that in order to achieve this requirement the service was exploring a tool which has allowed for 3D modelling of each high rise building. Officers are now able to identify all relevant equipment, isolation of services and other relevant information. The service is still populating the tool and are now sharing some sections with the London Fire Board (LFB).

It was stated that there are plans to share relevant sections with residents as part of the service engagement strategy. This will also be the core methodology for providing information to the new Building Safety Regulator as part of the building safety case file.

BRIDGE CLOSE REGENERATION LLP - IN YEAR REVIEW OF 2024/25 BUSINESS PLAN

At the request of the Sub-Committee the budget papers for the Bridge Close LLP Business Plan Refresh 2024/25 was presented under the pre-decision scrutiny arrangements.

The report fell under the auspices of the Sub-Committee and formed part of the budget papers to be considered to Cabinet at its meeting on 28 February.

Following presentation and debate the sub-committee made the following comments and recommendations that would be passed to the Overview and Scrutiny Board for consideration for inclusion in the Board's overall comments on the budget papers.

- 1. That Officers suggest a frequency for regular reporting on the project to Places OSSC.
- 2. That a metric be identified to quantify savings to the General Fund, such as a reduction in pressure on the social care budget. It was recommended that an AMAT assessment is conducted.
- 3. Recommended that the term "affordable" is broken down to identify the products on offer.

HRA BUSINESS PLAN

At the request of the Sub-Committee the budget papers for the HRA Business Plan was presented under the pre-decision scrutiny arrangements.

The report fell under the auspices of the Sub-Committee and formed part of the budget papers to be considered by Cabinet at its meeting on 28 February.

Following presentation and debate the sub-committee made the following recommendations and comments that would be passed to the Overview and Scrutiny Board for consideration for inclusion in the Board's overall comments on the budget papers.

- 1. That Members note the advice from Savills, in 7.3, in which a question on the viability of the scheme was raised.
- 2. Recommended that the council revisit the infill scheme, regarding council garages, in order to reduce anti-social behaviour and provide new homes.
- 3. That members be mindful of the potential telecare costs, relating to the digital switch over.
- 4. Note the negative EQIA assessments, on all characteristics.
- 5. Recommended that the Section 151 Officer should explain the need to borrow from the general fund, as opposed to PWLB or other external sources, also commenting on the impact that this has on the General Fund and deficit.
- 6. That Members be provided with an update on work taken to increase the number of bedrooms in homes, with a view to ensuring residents can remain in their home as opposed to being moved to a larger property.
- 7. That the sub-committee be provided with a breakdown on the charges relating to heat and water.

CLIMATE CHANGE STRATEGY

At the request of Members, the revised Havering Climate Change Action Plan (HCCAP) 2024-27 was presented under the pre-decision scrutiny arrangements.

The report came under the auspices of the Sub-Committee and formed a key decision to be considered by Cabinet at its meeting on 10 April.

The report outlined impacts and causes of climate change that have been recognised by the Council. It was stated that in the report that the Council had developed strategies and goals to address these impacts and mitigate the effects of climate change.

The sub-committee noted that the costs of annually reviewing the Havering Climate Change Action Plan that would be contained in the existing corporate financial provision. Members agreed to receive an update in 6 months time.

Following presentation and debate the sub-committee made the following comments and recommendations that would be passed to the Cabinet for consideration for inclusion in the action plan.

That the sub-committee supported the Approval and Adoption of the revised HCCAP 2024-27.

The Sub-Committee also asked that:

- Could Cabinet consider an action around promoting greywater and rainwater harvesting.
- Could Cabinet consider how the plan may incorporate green energy generation.

PLANNING ENFORCEMENT REVIEW OF RESOURCES

The Sub-Committee received a report following the recommendation of the Local Government Ombudsman (LGO) review of resources for the Enforcement function within planning which had recently been undertaken.

The report detailed that the review had been completed, setting out the current issues within Planning Enforcement and making recommendations in relation to recruitment, enforcement plans, business support, interaction with planners and performance monitoring and performance.

The report informed the sub-committee of the following issues identified:

• Significant backlog of cases: Historically, case levels have been very high, but there have been successful efforts over recent years (particularly when

fully staffed) to reduce the number of cases on hand. Despite this, the current number of cases on hand (604) exceeds the number of cases received in each of the last two years (469 22/23 and 414 23/Feb 24). At present there are over 300 cases which are over a year old, which is a significant number of the total caseload.

- The number of cases per officer being very high: The number of cases per officer makes it difficult for officers to manage cases in order to respond in a timely manner to new cases received and ultimately to resolve cases (the problem identified by the LGO). Members seeking updates which itself contributes to the officer workload. The consequences of high officer workloads contributed to the backlog of cases.
- Notices served reflects staffing levels: A high number of notices served was not necessarily an indication of a good or efficient service albeit it is currently the only planning enforcement 'performance' indicator that central government monitors. Based on previous statistics, it is considered about 60 notices a year would be expected to be served and that a manageable workload per officer would be in the order of 80.

Members were informed that the specific reasons why the LGO sought a review of the service was that at present the planning enforcement team in the planning service does not have the resources to carry out its functions.

The report detailed the following action plan to address this issue:

Recruitment to vacant Establishment Posts: Recruitment would enable reduction in officer workloads and allow more timely resolution of complaints or the taking of formal action. Recruitment would be dependent on agreement of the Recruitment Panel and ensuring that sufficient budget is available. Timescale: To begin progress from April 2024.

Adoption of Enforcement Plan: An updated enforcement plan has been drafted and will form part of an overall Enforcement Policy for the Planning and Public Protection Directorate for approval this year. Timescale: Policy adopted by December 2024.

Explore Additional Business Support: Explore scope of business support needs across Place, which the Planning and Public Protection Directorate forms part of. Timescale: Ongoing as part of review

Greater Interaction between Enforcement and Planning Officers: Better interaction would result in increased learning and development for officers; prioritisation of retrospective planning applications and making better informed decisions as to whether to invite planning applications to regularise any breach. Timescale: From April 2024

Expand Reporting on Performance to Lead Member and Planning Committees: Currently, only numbers of cases received and closed and notices served is reported to the committees each quarter. It was recommended that in addition, current case load, including number of open cases per officer be included in

any reporting so issues of backlog and output can be more easily identified and reported on. Timescale: From April 2024

Following the presentation and discussion the sub-committee noted the content of the review and the actions recommended.

IMPLICATIONS AND RISKS

Financial implications and risks:

None – narrative report only.

Legal implications and risks:

None – narrative report only.

Human Resources implications and risks:

None – narrative report only.

Equalities implications and risks:

While the work of the Sub-Committee can impact on all members of the community, there are no implications arising from this specific report which is a narrative of the Sub-Committee's work over the past year.

BACKGROUND PAPERS

Minutes of meetings of Places Overview and Scrutiny Sub-Committee



People Overview and Scrutiny Sub-Committee Annual Report 2023/2024

CHAIRMAN'S FOREWORD

I am pleased to give this short introduction to the summary of the Sub-Committee's work during the 2023-2024 municipal year. Details are given below of elements of the Sub-Committee's work this year.

Before I do so, I would like to place on record my thanks to the other members of the Sub-Committee and all the Council officers who have supported work of the Sub-Committee during the course of this municipal year.

I commend this Annual Report and am pleased to submit it to Full Council.

REMIT AND MEMBERSHIP OF THE COMMITTEE

The Sub-Committee is charged with providing scrutiny for a total nineteen policy and service areas which sit within the responsibility of the local authority. Among this expansive range of policy and service areas include Social Care (Adults and Children), Public Health and the Public Protection Service.

Detailed below is a complete list of the policy and service areas for which the People Overview & Scrutiny Sub-Committee has the primary responsibility for scrutiny and oversight:

- Drug, Alcohol & sexual Services
- Health & Wellbeing
- Health Overview & Scrutiny
- Adult Care
- Learning and Physical Disabilities
- Employment & Skills
- Education
- Child Protection
- Youth Services
- Fostering & Adoption Services
- Education Traded Services
- Early Years Services
- Looked after Children
- Media
- Communications
- Advertising

- Corporate Events
- Bereavement & Registration Services
- Crime & Disorder

The Members who served on the People Overview & Scrutiny Sub-Committee during the year were:

Councillor Jason Frost (Chairman)

Councillor Jackie McArdle

Councillor Frankie Walker (Vice-Chairman)

Councillor Julie Wilkes

Councillor Christine Smith

Councillor Joshua Chapman

Councillor Laurance Garrard

Councillor Ray Best Councillor Pat Brown

REVIEW OF ACTIVTY 2022/23 MUNICIPAL YEAR

Adult and Children Services Complaints and Compliments

The Sub-Committee scrutinised the complaints lodged against, and the compliments received by Adults and Children's Social Care Services.

Members questioned officers over the number of and nature of the complaints and how they could be reduced in the next quarter and next year. This included a review of any requisite action plan to address any apparent failures of policy and/or procedure on the part of the Council or other related organisation.

Policing numbers and incidents

At the invitation of the Sub-Committee, the newly appointed Chief Superintendent for Havering was called to give a report to members on the current operational strength of the Metropolitan Police Service in the Borough, and the proportion of officers drawn from minority groups. This report was well received by members, who followed up with questions on the Met's recruitment activity and retention rates.

This was followed by a further report on the Police's strategy on Violence Against Women and Girls. Officers from the Council's own Public Protection Service also contributed to this item. This was followed by a period of insightful discussion.

Wennington Fires

One of the major items of the year was on the 2022 Wennington Fires which affected many residents. In response to this the Sub-Committee convened a special meeting dedicated solely to this issue.

Presenting to members were senior officers from the London Fire Brigade who gave an indepth report as to the cause of the fires and the preventative measures taken at the time and what could be used going forward.

Council officers then proceeded to provide details on the Council's emergency response procedures and outlined what steps were being taken by the local authority to support those residents that had been directed affected or impacted by the fires, as well as those who were now categorised as displaced.

Healthwatch Havering

The Sub-Committee was pleased to receive summary reports on the activities undertaken by Healthwatch partners during the course of the municipal year. This included surveys on the patient experience of the London Ambulance Service and the outcomes of Enter & View Visits that had taken place in a number of nursing homes following the COVID-19 pandemic.

NHS North East London & Public Health

Coming before members were a number of reports on a broad range of health-related matters. Items requested by the Sub-Committee included youth and minority group engagement in primary care provision, MMR vaccination uptake and the operational performance of local phlebotomy services.

Council Decisions

- Autism Support
 - Officers were invited to present details on the proposed end of the contract with the Sycamore Trust. This organisation was a provider of dedicated autism support across all age groups.
- Home to School Transport
 Another of the key issues raised with the Sub-Committee was relating to the Home to School Transport Policy consultation. Members noted the responses to the outcomes and received details on the proposed changes to the policy and lessons learnt following the consultation.

Topic Groups

Adult SEND Topic Group

The topic group consisted of 2 Councillors (Wise & McArdle) and 1 co-optee and met on 9 occasions. The Group set out to scrutinise key areas such as (but not limited to):

- Current access routes to education and employment
- Quality assurance progress
- Signposting for 16-25 year olds for provisions and employment opportunities

The Topic group met with various stakeholders and presented 2 key findings to the Committee at the September meeting. Those findings were; 1) There was a lack of quality assurance guidelines and frameworks in place for adult SEND provisions, however there was a working group between NEL boroughs to implement a standard across London and, 2) It was found that the majority of provisions were not aimed at adults over 25 years old with a lack of progressions for them from internships to fully paid employment. The Group suggested a specialist Supported Employment Adviser to be put in post but it was explained this would have to be costed before being agreed to.

| IMPLICATIONS AND RISKS |
|--|
| Financial implications and risks: |
| None – narrative report only. |
| Legal implications and risks: |
| None – narrative report only. |
| Human Resources implications and risks: |
| None – narrative report only. |
| Equalities implications and risks: |
| While the work of the Sub-Committee can impact on all members of the community, there are no implications arising from this specific report which is a narrative of the Board's work over the past year. |
| Environmental and Climate Change Implications and Risks |
| None – narrative report only. |
| BACKGROUND PAPERS |
| None. |

THE CORPORATE PARENTING PANEL

The Corporate Parenting Panel met on six occasions between May 2023 and May 2024. Once again the Panel had the opportunity to participate in a Children Takeover session that took place in October 2023 with many Looked After Children presenting to Members and officers.

The Panel is in place to provide a focus on the council's legal obligations and responsibilities towards children in care and young people leaving care.

The Panel is in place to ensure and monitor the corporate discharge of the Council's responsibilities as corporate parents. And to scrutinise the quality of services to Children in care and care experienced young people, monitoring adherence to the legislation that governs the work of those services.

The Panel considered the following report as part of the process:

1. The third annual report of the Adopt London East Partnership.

The report provided a summary of the work over the last year that focused on the innovations and improvements within Adopt London East and insights into challenges faced during post-pandemic with increase in demand for all areas of the service.

Members noted the following recommendation for 2022/23:

Identifying, preparing and approving adoptive parents

- 1) To further develop the Black Adoption Project to better understand the needs of Black and mixed Black ethnicity adopters, and to improve services to them for the long term.
- 2) To build Adopt London reach and engagement levels on social media.
- 3) To Re-design stage 1 of the Adoption process for adopters and review preparation training.

Planning for Children

4) To increase awareness of Early Permanence in social work teams, to increase the use of EP for adoptive children.

Placing children with adoptive parents

5) To continue to focus on the number of children placed for adoption in Adopt London East placements.

Providing support to adoptive families and others

- 6) To increase access to support resources for everyone impacted by adoption through development of the Adopt London website.
- 7) To implement regular monitoring of Adoption Support work so that changes in demand can be reported.
- 8) To launch the ALE Adoption Support Helpline

Working as part of Adopt London

9) To Strengthen arrangements through a legal partnership agreement for Adopt London.

The Panel noted the slow recovery from the Pandemic and raised the issue of court decisions with officers. It was stated that the service was looking at the process for long term fostering and special guardianship in order to improve the position for the children who are in care.

The Panel **noted** the annual report 2021/22

2. The Panel received the Corporate Parenting Panel reporting Dataset 2022/23 as at 31 March 2023.

The presentation covered the key performance indicators update, benchmarking against London and Statistical Neighbours.

It was stated that Havering's rate of Children in Care (CIC) has remained below that of both its Stat neighbours and the London average since 2016/2017. Officers explained that following the high contact and referrals into services there was a significant spike in the numbers of children in care of the service in August and September of 2022 with a total of 261 children.

It was noted that changes to the legislation regarding Semi-Independent accommodation will be taking place in 2023/24 when Ofsted will take over the regulation of these services. In Havering, there is a 10% of cohort placed in such type of accommodation.

The Panel noted that the children's services restructure work to develop corporate parenting teams will also ensure that additional oversight is placed on the health needs of our children in care.

Members acknowledged the positive trends from the performance which officers attributed to the Carers.

The Panel **noted** the performance update report.

3. The Panel received the Havering draft Children's Services Sufficiency Strategy.

The document detailed how the service proposes to deliver services, both those delivered in-house and those commissioned externally, to meet current and future needs of the children, young people and their families who are reliant on our support.

The document sets out the Services key priorities including how the authority intends to meet the statutory duties placed on it.

It was stated that the intention was to build on the Statement and to develop a more detailed strategy document and action plan. Members noted that work on the strategy was underway and the intention was for a completed Strategy and Statement by the end of May 2023.

The Panel noted that the statement was a statutory document that OFSTED would inspect during a visit to the council.

The Panel was informed that the Statement would be a strategic document and action plan which reflects local needs and demands and delivery against the action plan. It was mentioned that this would allow for regular reporting to the Corporate Parenting Panel.

The Panel **noted** the draft statement.

4. The Panel received a presentation on Comfort Cases for Children in Care. Comfort Cases UK provides children entering the care system with new, filled rucksacks and large sturdy duffel bags to carry their possessions.

It was stated that Comfort Cases have gained notoriety within the Children's Social Care sector and have support from notable Care Experienced People that are also trying to improve the futures of young people in foster care in the UK.

The Chief Executive of Comfort Cases stated that one of the key initiative of the organisation was to increase its network of Local Authorities and double its first year activities.

The Panel thanked the chief executive of Comfort Cases Uk for taking the time to join the meeting and outline the success of the organisation.

Members **noted** the presentation.

5. The Panel received the dataset for June 2023.

The number of Children in Care (CiC) had fallen from a peak of 261 in September 2022 but had begun to increase again. There were 251 CiC as at 30 June 2023. Additional unaccompanied asylum seeker children were also expected.

The proportion of CiC with friends and family carers had improved and had now reached 50%. Approximately 9% were living in semi-independent accommodation while a few children were based outside of the borough, usually due to the specific needs of the child.

Overall placement stability had improved and access had been established to a Resources Panel. Officers accepted however that the number of suitable local placements remained a challenge.

Numbers of young people not in education, employment or training had begun to improve this financial year. There also remained a high proportion of health

assessments carried out and all school age children in care continued to have personal education plans.

A recent court judgement on Kent Children in Care practice had ruled that it was unlawful to place children in hotels. The judgement meant officers expected to receive around 39 more Children in Care in Havering. It had been agreed to accept two older children from Kent. Across London, there were around 750 spaces for Children in Care and Havering had the 5th lowest number of placements in London.

6. Officers advised that it was a legal requirement under the Fostering Standards to make the Corporate Parenting Panel aware of the new Statement of Purpose. The Statement would be submitted to OFSTED at the end of August and brought back to the Panel on an annual basis. There was also a separate statement for private fostering arrangements.

There was a national shortage of foster carers but recruitment had been undertaken successfully in Havering of both new foster carers and those working in the independent sector. Benefits such as parking, leisure facility access and in particular Council Tax exemption were attracting foster carers to Havering.

The Target Operating Model would mean all staff would now be on the out of hours rota. The Havering Association of Foster Carers had a new and enthusiastic committee. The Council had used free advertising on Time FM to recruit new foster carers.

Officers were looking at ways to improve the profile of the fostering service and it was possible an advertisement for foster carers could be included with future Council Tax bills. The foster carers handbook had been updated but there was still some further work to complete and it was hoped to distribute this by January. Copies could be provided to the Panel in due course.

7. The annual Foster report was presented to the Panel. It was a legal requirement to publish the annual report which covered the period April 2022 – March 2023. The report identified areas of strong practice and areas for improvement.

It was clarified that foster carers were reviewed by the Independent Reviewing Officer and returned to the Fostering Panel every three years. This was in addition to the annual review that all foster carers undertook.

More younger children have been entering the care system. The borough's changing demographics meant that placements and foster carers were now more diverse. The Council had a target for this year of a net gain of 10-12 foster carers in Havering. 24 carers had recently been recruited and were undergoing an initial assessment of placement viability.

The new Chair of the Havering Foster Carers Association asked in the annual report for better communication from the service to foster carers. Officers aimed to finalise

the annual report by the end of August and were happy to take comments from Members on the draft.

8. Officers reported that there had been a lower number of complaints overall and that responses were now being completed more quickly. It was hoped feedback from Looked After Children and this could be done via an app.

It was hoped to see a further reduction in complaints this year. The complaints team would work with the appropriate team manager to ensure complaints were dealt with within timescales.

Officers were happy to receive comments on the complaints report by the end of August.

9. Update presentation from NELFT.

A representative from NELFT reported that mental health was a top concern of young people and yoga, relaxation and exercise were important ways of dealing with this area. It was noted that the Cocoon facility was offering yoga sessions to young people. It was also often difficult for young people to contact their GP or deal with GP receptionists etc.

These concerns would be incorporated into the NELFT strategy which would be shared with the Corporate Parenting Panel. NELFT was also undertaking work with Healthwatch in order to obtain the views of young people in more detail. The Council had also undertaken a survey of all Children in Care and there would also be surveys conducted with individual schools.

The Panel thanked the NELFT representative, who would shortly be changing roles, for her work and input.

10. The Panel received a report that set out the dataset for 2023/24 as at 30 September 2023. The report outlined the key Performance Indicators update and benchmarking against London and Statistical Neighbours.

It was noted that Havering's rate of Children in Care (CIC) had remained below that of both Statistical neighbours and the London average since 2016/2017. Following the high contact and referrals into services there was a significant spike in the numbers of children in our care in August and September of 2022 when the service had 261 children.

The number of CIC reduced significantly during the last half of 2022/23 down to 239 at 31st March 2023 but has since started to increase again during the first half of 2023/24 up to 260 at 30th September. There were a number of factors which appeared to impact on this increase and it would be important to review this and monitor the trend over the next few months - before drawing a final conclusion as to what factors were driving the change.

Members acknowledged the positive trends and the areas that required improvement.

The Panel **noted** the performance update report.

11. The Panel received the annual report of the Havering Fostering Service (HFS) from April 2022 to March 2023. HFS a regulated service and subject to inspection under the Care Standards Act 2000. The annual report forms part of the monitoring process of Havering Fostering Service as required under the Fostering Service Regulation 2011 and Fostering National Minimum Standard 2011.

The annual report outlined the performance of the Fostering Service complied with Standard 25.7 of the Fostering National Minimum Standards, which sets out the condition that the Fostering Service will monitor and report to the Corporate Parenting Members about the management and outcomes of the service.

The report informed that the Service understands that the majority of children are best looked after within their families, with their parents playing an integral role in their upbringing. It is also noted that where this is not possible the Council is committed to providing alternative high quality care to Children in care within a family environment where possible.

The Panel **noted** the annual report.

12. The Panel received the annual report of the Adopt London East April 2022 – 2023.

This was the fourth annual report for the Adopt London East Partnership and its third full year of functioning. Adopt London East has responsibility for all adoption led services, delivering these on behalf of the local authorities.

The report outlined the following recommendations for 2023/24:

Finding prospective adoptive parents.

- 1. Continue to progress the aims and objectives of the Black Adoption Project, including implementation of new pilot projects to improve services to Black prospective adopters.
- 2. Re-establish strong adopter information sessions and enquiry processes as the capacity in the assessment team increases.

Preparing and approving adoptive parents.

3. Through greater capacity in the assessment team, increase the number of approvals whilst maintaining high standard of assessments. There is a target of 25 approvals.

Planning for children.

4. Implement recommendations from the Early Permanence research report into barriers to Early Permanence in London.

Placing children with adoptive parents.

5. Continue to focus on the number of children who move to in-house and local

adoptive families.

Providing support to adoptive parents and others.

- 6. Implement changes to the website which make it more accessible to all those accessing support, including adult adoptees, birth parents, and families with adopted children.
- 7. Begin to use audit data for Adopt London to compare and understand different levels of demand and models of adoption support to improve services across Adopt London.

Working as part of adopt London.

8. Strengthen arrangements through a legal partnership agreement for Adopt London. The legal partnership agreement has stalled this year due to complexity and capacity in the legal department leading on this work. It is hoped this can be progressed further in 2023/24.

The Panel **noted** the annual report.

13. The Panel received a presentation on the Calendar of events and activities of the Say It Louder Club.

The newly appointed Youth Influence and Participation Coordinator was introduced to the Panel.

It was detailed that Young People were provided expertise with the following consultations:

- Havering's young people's budget consultation using Mind of My Own.
- Children's Commissioner's BIG ASK consultation.
- Meeting with OFSTED Inspectors
- In January 2024, Young People with SEND will be consulted about the care they receive.

The Panel noted that Young People in Havering will be participating in Pan London CiCC (Children in Care Council) – Pan London Residential for young people in care aged 15-17 years, planned for March 2024.

In order to provide Young People with an opportunity for personal development the club was undertaking Individual issues exploratory programme in:

- Navigating friendships
- Relationships with carers
- Caring with boundaries
- Social Workers attending visits on time
- Young person not wanting to return home

Members commended the team for their engagement with the Children and Young People.

The Panel **noted** the events and activities of the Say It Louder Club.



COUNCIL CHAMPION FOR EQUALITIES AND DIVERSITY

ANNUAL REPORT

COUNCILLOR KATHARINE TUMILTY 2023-2024

Councillor Introduction

My name is Councillor Katharine (Kathy) Tumilty. I am one of three Councillors within Gooshays Ward (Harold Hill). I was elected in May 2022. I am the vice chair of the Places Overview and Scrutiny Committee and also chair of the Standing Advisory Council for Religious Education (SACRE).

Champion for Equality and Diversity.

Equality and Diversity sits within a unique position of being paramount in all three corporate priorities of People, Places and Resources. As such, every action each council team, agency, partner and community group progresses, needs to consider the equality, diversity and inclusion element to their intervention. To understand the ask, it is helpful to have an overview of the relevant data.

The Census data, comparing Havering from 2011 to 2021, identifies a significant increase in the over 65's, young children and those not born in England over the last 10 years. According to the Office for National Statistics – between the last two censusus (2011 Census and Census 2021) the Havering population has increased by 10.5%.

The number of people aged under 18 in Havering has increased by 15.2% (from 50,827 to 58,550). A high percentage of this is the growth in children aged 0-4, which is the second highest growth of all local authorities nationally. The proportion of households with dependent children has increased by 28%.

There is an increase from 4.9% (2011) to 10.7% (2021) of residents identifying as Asian, Asian British or Asian Welsh residing in Havering. There was also an increase from 4.8% (2011) to 8.2% (2021) of Black, Black British, Black Welsh, Caribbean or African residents.

Please note that these stats are all taken from the Census 2021 and as such there might be some slight change to date. The data however remains relevant in considering the change required as a Borough to meet the diversity needs of our changing population, especially when Government funding has not increased in line with this growth.

The cost of living crisis within the UK has meant that there is an even more urgent need to ensure equality and diversity is considered in all areas by not only the council, but agencies, councillors and within the wider community groups within Havering. Support via food banks, warm banks and data poverty interventions remains being provided by partners, charities and local community groups across Havering.

As recorded in my report for 2022/23, when considering Equality and Diversity we also need to think about Inclusion and Accessibility. This is a requirement within government and local policies, as well as from the learning and actions identified within the LGA independent READI report. Equality and Diversity directives and policies have enabled a greater understanding of posed gaps associated to equality and diversity, however the increased focus on inclusion and accessibility is required to enable a plan for change and for positive intervention to occur. From the case work I complete and from examples shared with me from other councillors, residents do not always know how or where to

access support, especially when they have additional needs, are elderly, isolated, or English is not their first language.

Havering council's zero-tolerance pledge remains in place. The pledge was signed in 2022 by all councillors and includes 'to uphold a zero tolerance to racism and discrimination of any kind, calling out bad behaviours or practice that fall short of this'.

Within the cross party working of Places Overview and Scrutiny Committee, we ensure equality, diversity and inclusion is considered as part of the scrutiny. This includes how the new processes / bids / services would enhance the residents of Havering. Additional to this, I have had discussions with children social care officers regarding how we link the social value element of external services within Havering, at the stage they are bidding, to include enhanced apprenticeship options for care leavers. Examples of this could be Housing Repair services, or other sourced agencies, supporting our own Havering corporate children.

Community Engagement

In October 2023, the Equality and Diversity partnership statement was released in Havering. This coincided with Black History Month. Part of the statement included:

"The diversity of the people within our Community in Havering is one of our strengths – that's our residents, workers and visitors. In Havering, our vision is to a build and support a strong, sustainable, safe and cohesive community by ensuring our policies, processes and employment are inclusive and that we are a welcoming place to live, work, study and visit. We are clear that we must be an inclusive and welcoming Community; we know we have a long way to go but we are committed to seeking to eradicate all forms of discrimination, and we hope that those who live, work and frequent this borough will give and experience respect to and from others".

The Havering Strategic Needs Assessment 2023-2024 records that according to the Census 2021 in Havering about 12.7% (12,838) of the population aged 66 years and above are living in one-person households. In London this is the second highest proportion after Bexley in London. This therefore could increase isolation for residents. An action identified from the needs assessment was 'the local authority needs to engage with other local partners to address the issue of loneliness and social isolation as these are multi-faceted issues and effective responses should be delivered in cross authority partnerships including the voluntary and community sectors." I have worked with the over 50's champion to consider the isolation issue and to seek information of the many support/groups they can access across Havering.

Due to the current financial restraints, linked to reduced government funding provided to local authorities, it is evident that there is more pressure on local voluntary and community sectors than ever before. At the point of writing this overview, it is recorded that Taylor Swift is providing monies for food banks in areas of the UK where she is currently touring. Although it is noted that Havering will not receive any of this support, it highlights the impact of poverty across London and not just Havering. Reduced Council finances has impacted in many areas of support, putting pressures on services such as Citizens Advice Bureau (CAB) and MIND as well as the voluntary and community groups in Havering.

Voluntary and community sectors within Havering over the last year have continued to provide support to the vulnerable and enabling their voice to be heard. I have met with a Havering resident who identifies as neuro diverse and who has recently started to work for North East London NHS Foundation Trust (NELFT) as a peer mentor. He has expressed the importance of "celebrating difference". He has shared the below image with me of an example of what diversity and equality means to him.



I have witnessed real inclusivity from faith groups, for those who are vulnerable and in need. The interfaith forum remains pivotal within Havering regarding the cross religion support for residents and providing support. This has felt especially important this year due to the current crisis across the world. They continue to facilitate a toy collection for children and hold regular forums and events.

Community groups such as 'the Wombles' welcome a diverse group of residents to be involved within their local community, and other local community groups are priding themselves on supporting those within their community. Further to this, I have seen many clubs and groups for all ages providing sport, learning, art and socialisation. These have provided warm spaces for food, clothing and linking up with heath to do health checks as well as look at issues such as damp and mould. Groups such as 'Proper Blokes Club' for men meet to talk safely about mental health and provide the soft touch to interventions for residents.

I was unfortunately unable to attend London Pride 2024 but did attend in 2022 and 2023 as part of the Havering representatives. It was a joy to observe the engagement of looked after children, workers, residents and other councillors at this event.

The 2021 Census data informs us that 29,742 households in Havering had at least one person with a disability. Parts of Harold Hill and Hornchurch have the highest number of households where at least one member is disabled. The lowest area was Emerson Park. There are nearly three (2.7) times more households with a disabled person in Harold Hill East (1,605) compared to the lowest Emerson Park (596). This identifies a need to consider if additional services are needed.

Beam Park, Emerson Park, Heaton, Rush Green & Crowlands are the wards with the highest proportion of residents identifying as Non-White. Beam Park councillors have advised of the wonderful support by a network of faith groups, including 'Rainham Muslim Trust' who hold Friday prayers in the Mardyke Community Centre. The Redeemed Christian Church of God (RCCG) King of Kings Community Church, not only have a leading role in Rainham Foodbank but also offer English lessons in the local community. Housing providers, from Clarion, and Havering Officers have done great social value work around employability and community cohesion. Further to this, the Stay-and-Play at Mardyke Community Centre is attended by families of all cultural and religious backgrounds.

'Havering Changing' recently ran a fantastic project in Orchard Village called World Kiosk, where residents could listen to spoken word stories of fellow Havering residents old and new, sharing their stories from the everyday to the remarkable. 'Havering Changing' are supporting local people in Harold hill, Orchard Village, Rainham and Romford and have led numerous events.

It is sad to report that there have been incidents of racial abuse. Myself and fellow councillors have removed offensive graffiti off bus shelters and encouraged residents to report incidents. We have worked with the Police regarding this.

There are many community groups providing vital support to residents. Residents are encouraged to be involved and these include groups covering a wide scope of activities such as crochet group, sports, reflection / relaxation and faith groups. These groups can signpost, when needed, to universal services or statutory intervention if required.

Open days are held regularly across Havering, led by voluntary and community groups. On occasions, Spider Man even comes to Havering to support.



Closing Message

Over the last 12-months it is evident that there are many strengths relating to the interventions provided in Havering to address diversity, equality and inclusion. There are some actions that if considered, would be beneficial:

- The READI report and the work already completed to progress the actions has been effective. The lead officer regarding this project has recently left. It is important therefore, for the momentum to make and sustain these changes, remain.
- Consideration regarding how to enhance processes for residents to know of local events and support in their local area.

I have been the Equality and Diversity Champion since 2022. I would firstly like to thank all the residents who have shared their experiences with me. Thank you also to the numerous voluntary and community groups who are supporting Havering residents. I am handing over the Equality and Diversity Champion role to Councillor Jane Keane who I know will progress the role.

Contact Information

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FULL COUNCIL, Wednesday 24th July 2024

MEMBERS' QUESTIONS

Anti-Social Behaviour in Parks

1) <u>To the Cabinet Member for Environment (Councillor Barry Mugglestone)</u> <u>From Councillor Viddy Persaud</u>

Could the Cabinet Member please outline what steps are being taken to tackle antisocial behaviour, drug use, and littering in our parks?

Car Park Shutters at New Green

2) <u>To the Cabinet Member for Housing & Property (Councillor Paul McGeary)</u> <u>From Councillor Matt Stanton</u>

What arrangements are proposed to address the difficulties imposed on New Green Residents by the poor design and placement of 4 parking spaces in the area adjoining the shutters at the point of access and egress to the car park which impedes residents from travelling in and out of the car park when those spaces are being used?

Response time for Planning Enquiries

3) <u>To the Cabinet Member for Regeneration (Councillor Graham Williamson)</u> From Councillor Martin Goode

Could the cabinet member please explain why responses to queries raised by Ward councillors and residents, requesting an update to an application (P0685.23) that went to the planning committee in February, still remains unanswered or being addressed adequately within the 15 days SLA despite numerous chasers to the case officers?

Payment Options for PCN's

4) <u>To the Cabinet Member for Environment (Councillor Barry Mugglestone)</u> <u>From Councillor David Taylor</u>

Can the Cabinet Member for Environment please explain why the payment plan option is not extended to PCN recipients at the discounted rate if intention is made to pay within this discounted period?

Council, 24th July 2024

Air Quality Action Plan

5) <u>To the Cabinet Member for Climate Change and Housing Need (Councillor Natasha Summers)</u>

From Councillor Keith Darvill

When will the Administration publish its revised Air Quality Action Plan?

Library Consultation Meetings

6) <u>To the Cabinet Member for Digital, Transformation & Customer Services</u> (Councillor Paul Middleton)

From Councillor Martin Goode

Would the Cabinet member, please explain why this council is advising the public and Library users, that they must apply on line to book an event ticket to attend the scheduled Library Closure consultation meetings and why the number of tickets are limited to 20 in some instances (as stated in *Living in Havering, Friday 5th July*).

Highway Weed Spraying Contract

7) <u>To the Cabinet Member for Environment Councillor Barry Mugglestone</u>) From Councillor David Taylor

Will the Administration accept that the delivery of the annual weed spraying programme has proved ineffective at best, and commit to action to hold the contractor to account for their apparent failure to meet their obligations?

Flood Risk at Brookside School

8) <u>To the Cabinet Member for Children & Young People (Councillor Oscar Ford)</u>

From Councillor Keith Darvill

Will the Lead Member report on progress of the proposed flood alleviation proposals in respect of Brookside School?

Romford Market Management

9) <u>To the Cabinet Member for Regeneration (Councillor Graham Williamson)</u> From Councillor David Taylor

Would the Cabinet Member for Regeneration please explain why it is necessary to employ three market managers at a time of significant financial strain at the same time that they have chosen to reduce the operating days of Romford Market?

Council, 24th July 2024

Criminal Activity on Council Regeneration Sites

10) <u>To the Cabinet Member for Regeneration (Councillor Graham Williamson)</u> From Councillor Jane Keane

Will the Cabinet Member advise the steps that the Council is taking to prevent buildings on its regeneration sites from being used for criminal purposes?

Road Traffic Accident, junction of Wennington Road and New Road

11) <u>To the Cabinet Member for Environment (Councillor Barry Mugglestone)</u> <u>From Councillor David Taylor</u>

Following the fatal RTC at the Wennington Road/New Road junction last April, can the Administration confirm that it is now in receipt of a Met Police report on suggested traffic calming measures and outline a timeline for the implementation of the recommendations contained therein?

Car Park Shutters at New Green

12) <u>To the Cabinet Member for Housing & Property (Councillor Paul McGeary)</u> From Councillor Matt Stanton

What arrangements are proposed to address the difficulties imposed on New Green Residents by the failure of allocated Push Button Fobs and the inadequate replacement of such Fobs to residents?

Locking of Park Gates

13) <u>To the Cabinet Member for Environment (Councillor Barry Mugglestone</u> From Councillor Dilip Patel

Following the cancellation of the contract with National Enforcement Solutions, for litter enforcement and the locking of our parks, can the Cabinet Member please confirm what steps will be taken to ensure that Romford's parks are locked at night?

Parking in Park Lane, Hornchurch

14) <u>To the Cabinet Member for Environment (Councillor Barry Mugglestone)</u> <u>From Councillor Judith Holt</u>

Following an email from the relevant Director, on 22nd March, which confirmed free parking on Park Lane, can the Cabinet Member please confirm why the free parking period has now been removed?

Council, 24th July 2024

Grass Cutting in Cemeteries

15) <u>To the Cabinet Member for Digital, Transformation & Customer Services (Councillor Paul Middleton)</u>

From Councillor Judith Holt

Given that Upminster cemetery appears to have been looking neglected as of late, can the Cabinet Member confirm the mowing schedules for the public Cemeteries across Havering.

Council, 24 July 2024 - Motions

A. PAIRING SYSTEM FOR MEMBERS

Motion on behalf of the Conservative Group

This council agrees to implement a pairing system for members, to ensure that serious illness does not impact the political balance of the Chamber.

amendments to be confirmed

B. LIBRARY SERVICES

Motion on behalf of the Conservative Group

Council calls upon Cabinet to maintain the operation of all local libraries, acknowledging the critical social impact of their potential closure, and to encourage the use of financial reserves to ensure their continued funding.

 Amendment received by the Labour Party - Council calls upon Cabinet to maintain the operation of all local libraries, acknowledging the critical social impact of their potential closure, and to encourage regeneration of the library sites to facilitate wider community use"

C. FULL COUNCIL - FOLLOW UP QUESTIONS

Motion on behalf of the Conservative Group

Council agrees to amend the Constitution to allow for 2 follow-up questions during full council meetings.

Amendments to be confirmed

D. CHARTER AGAINST MODERN SLAVERY

Motion on behalf of the Labour Group

This Council adopts the Co-operative Party's Charter Against Modern Slavery as shown on the attached.

Amendments to be confirmed



CHARTER AGAINST MODERN SLAVERY

The London Borough of Havering will:

- 1. Train its corporate procurement team to understand modern slavery through the Chartered Institute of Procurement and Supply's (CIPS) online course on Ethical Procurement and Supply.
- 2. Require its contractors to comply fully with the Modern Slavery Act 2015, wherever it applies, with contract termination as a potential sanction for non-compliance.
- 3. Challenge any abnormally low-cost tenders to ensure they do not rely upon the potential contractor practising modern slavery.
- 4. Highlight to its suppliers that contracted workers are free to join a trade union and are not to be treated unfairly for belonging to one.
- 5. Publish its whistle-blowing system for staff to blow the whistle on any suspected examples of modern slavery.
- 6. Require its tendered contractors to adopt a whistle-blowing policy which enables their staff to blow the whistle on any suspected examples of modern slavery.
- 7. Review its contractual spending regularly to identify any potential issues with modern slavery.
- 8. Highlight for its suppliers any risks identified concerning modern slavery and refer them to the relevant agencies to be addressed.
- 9. Refer for investigation via the National Crime Agency's national referral mechanism any of its contractors identified as a cause for concern regarding modern slavery.
- 10. Report publicly on the implementation of this policy annually.

