

Appendix B2 - Significant changes and governance improvements by Service Area 2019/20

The following table provides a summary of the significant changes and improvements that have been made to the governance arrangements during 2019/20:

Service Area	Significant Changes and Improvements during 2019/20	Principles Addressed
Planning	<ul style="list-style-type: none"> ● Full independent audit of s106 processes completed ● Electronic practice advice and resource library established within Service and rolling as approach. ● Internal officer training programmes rolled out on procedural and policy issues within Service, including on new legislation. ● Customer care development programme scoped and underway. ● Established Agents Forum to explain changes to systems and receive feedback. ● Revisions to application validation processes implemented and underway, including Planning Advisory Service visits and ongoing joint good practice working with other local authorities. ● Amendments and updates to policies and practice, including Statement of Community Involvement published and guidelines/appraisal approaches. ● Revised approaches for Chair agreement for delegated decisions introduced. ● Revised systems for member call in of applications implemented. ● Revised approaches for handling developer contributions (s106) and viability assessments implemented. ● Changes to pre-application advice for applications and developer contributions implemented. ● Pre-decision review meeting programme implemented, including performance management. ● System changes implemented, including introduction of triple check process for decision notice serving ● Permanent structural changes to decision making management chains developed and included in new proposed departmental structure (Formal staff consultation (s188) to take place in 20/21) ● New working arrangements with NALC established to act as an advisory platform for planning decision making processes and changes. ● Parish and Town Council elected member training programme on decision making & probity delivered and ongoing. ● Elected member training programme on decision making & probity delivered and ongoing. 	A,B,C,D,E,F,G

<p>Local Services</p>	<p>Neighbourhood Services</p> <ul style="list-style-type: none"> ● Review of the operational risk register was completed in 19/20 and compliance arrangements were strengthened in Neighbourhood Services. <p>Technical Services</p> <ul style="list-style-type: none"> ● Work carried out alongside the Corporate Procurement team to improve procurement in line with the new NCC Contract Management Policy. ● Staff survey improvement plan prepared and actions taken to address issues identified in the 2018-19 staff survey. ● Asset management and data systems further strengthened ● Street Works Permit system developed and implemented. ● Workforce planning and succession planning analysis undertaken and service structures amended in identified risk areas ● Service statement KPIs and revised indicators implemented ● Proposed structures developed for enhanced management of capital projects 	<p>A,C,E,F,G</p>
<p>HR & OD</p>	<ul style="list-style-type: none"> ● Implementation of new HR/OD (temp) structure to support operational delivery, whilst also supporting talent management and knowledge transfer opportunities across the service during a period of change and transition. ● The introduction of a Volunteer network coordinator role late 2019. This role will support and develop NCC volunteers, ensuring adequate governance arrangements will be in place, whilst also supporting and encouraging staff to volunteer and give back to Northumberland. ● The continued review of all HR policies and procedures for NCC. This is achieved via the policy subgroup which was introduced during 2018/19. This has been very successful and ensured all areas of the Council feed into policy development and redesign. ● Taleo recruitment and talent acquisition service has been introduced that builds on our systems and process to attract, recruit and retain the best possible people. This work will continue to develop over the course of 2020/21. ● Continued development of apprenticeship pathways from Level 1 to Level 7 to support Talent Management for staff. ● Alternative health and wellbeing strategies to support the reduction of sickness absence across the Council have been introduced including fitness classes such as yoga and couch to 5k running clubs, lunchtime walks and weigh and go. ● Increased the engagement score and implemented our action plan for the Staff Survey. This included the production of 38 team level “you said together we have...” posters. The response rate reached 80.5% the highest response to date, an improvement from 71% last year. ● Appointment of additional capacity within the service to steer all wellbeing and engagement activities helping to address employee absence and promote opportunities for physical and mental wellbeing. NCC now has 7 staff network groups which are jointly run with Northumbria Healthcare NHS Foundation Trust. ● Continued review and improvement of our Shared Service arrangements with Northumbria Healthcare NHS Foundation Trust to ensure we provide a responsive, effective Occupational Health Service. Sickness rates during the winter period have been significantly lower than in previous years despite public health messages relating to prevalent strains of flu and norovirus. 	<p>A,C,E,F</p>

	<ul style="list-style-type: none"> • The Council's Workforce Committee structure has been revised to an alternating format of 'business as usual' and a more detailed focus on absence management and correlation with other data sets. • NCC's whistleblowing arrangements have been strengthened with monthly review arrangements providing greater accountability to the Council's Monitoring Officer. 	
Economy & Regeneration	<ul style="list-style-type: none"> • Significant restructure of the Service's staff structure has been undertaken to equip the Service with the required resources to deliver the Council's corporate priorities for economic growth. • Pipeline of regeneration projects put in place together with robust processes to manage the subsequent monitoring and progressive delivery of the various initiatives via a Steering Group chaired by the Executive Director. • Process of Project Initiation Documents (PIDs) put in place in collaboration with Legal and Procurement to manage the commissioning of services from the commercial part of Advance Northumberland. 	C,E,F
Housing and Public Protection	<ul style="list-style-type: none"> • Review undertaken of existing Service KPI's • Structure review undertaken within Housing Operations and new structure implemented in September 2019 	C,G
Corporate Finance	<ul style="list-style-type: none"> • Implemented the workforce plan. • Started implementation of Hyperion capital monitoring • Oracle Cloud reporting and budgeting has been fully embedded • The migration of Payroll from R12 to Fusion is well underway with 50 agency payrolls now live. There are six left to complete including the main two NCC Payrolls. It is hoped that five will be migrated by March 2020 and the remaining NCC end of month payroll by the end of August 2020. • Work is underway with the replacement of the Insurance database with the aim of going live during Q1 20/21. 	C,F
Policy	<ul style="list-style-type: none"> • A new Policy Service was established in Northumberland County Council in the third quarter of 19/20, the Service is intended to work with all services, partners and stakeholders to: <ul style="list-style-type: none"> ○ Support Members to develop effective policy for the County Council, ensuring policies are: based on sound evidence; aligned with other policies; and, set a clear direction for delivery of services, projects and investments. ○ Ensure the County Council understands and is well- positioned to contribute to and shape national and regional policy-making. ○ Maximise the opportunities for the County from Devolution, Borderlands and other key initiatives, including new funds from Government. ○ Contribute to effective decision-making by Members (e.g. Cabinet, Council and other committees and forums) through a quality assurance framework for council reporting. 	B,C,D,G

Cultural Services	<ul style="list-style-type: none"> ● The jointly commissioned review of Active Northumberland (AN) presented to Council in February 2018 identified significant failings of governance and numerous gaps in the expected level of strategic and operational capability and capacity in the organisation. It was stated that these poor oversight arrangements had severely impacted on the organisation's capacity and day to day operational capacity. A large number of the recommendations from the review were implemented during 2018/19 with an understanding of the remaining measures to be introduced in 2019/20, these are as follows: <ul style="list-style-type: none"> ○ A clear Operating Agreement was in place by 1 April 2019. ○ Active Northumberland have launched a three year strategy (2019/22) to transform their services and operating model. The strategy is based on a new vision and values with clearly specified deliverables and financial goals. ○ The senior management team has been reconfigured with a clear structure comprising an Executive Leadership Team, General management Team, Corporate Lead responsibilities and Corporate Lead support. ○ The three year strategy has been considered by the NCC Health and Wellbeing OSC - Improving Health and Fitness Working Group. ○ A Finance, Audit and Performance Sub Committee has been created within AN to strengthen governance and Board oversight. ○ The Operating Agreement includes a requirement to provide detailed quarterly performance information to NCC. ○ Following the departure of the Chief Executive Officer from Active Northumberland interim management arrangements are in place with no disruption to monitoring schedule. ● The Leisure Client function is now well established with the appointment of a dedicated 'Contracts Officer'. This role is also across all funded organisations. ● The Service is now working to incorporate the Registrars, Coroners and Archives Services into the wider Service 	A, D,C,E,F,
Revenues & Benefits	<ul style="list-style-type: none"> ● In 2019 the My Account portal went live for council tax payers which allow taxpayers to see their bills online. A push for take up will take place with the 2020 annual billing exercise. ● In January 2020, the Visiting Officer team in the Service changed management and became part of the Revenues Team. This change is designed to move them close to the areas that generate income for the Council, for example, new build properties, expansions to ensure the tax base for council tax and rating list for business rates are as accurate as possible and the opportunity for increased income are maximised. ● Staff survey improvement plan developed and actions put in place. These included Executive Director updates, Staff Workshops, Capacity Grid performance management tool, Culture Workshops for staff and managers. 	C,E
Procurement	<ul style="list-style-type: none"> ● Updated Procurement Standard Operating Procedures in a number of key areas ● Introduced a policy for Contract Management to be used across the Council, supported by a framework and e-learning module. Initial assessment of contracts across the Council has been undertaken to identify Contract Managers within Council departments 	A,C,D

	<ul style="list-style-type: none"> ● Review of NHS Standards of Procurement Level 3 to prepare for assessment ● Commenced providing Advance Ltd with a procurement service 	
Customer Services	<ul style="list-style-type: none"> ● New staff have been recruited into the Customer Services Team which has improved call handling performance ● A new management structure has been introduced which has allowed better performance management, communications, staff development and is addressing absence levels ● Workgroups have been established in the contact centre, so staff are more skilled in specific areas 	C, E,F
Property Services	<ul style="list-style-type: none"> ● New Asset Management Plan completed ● Staff Survey Action plan completed and delivered 	C, F
Public Health	<ul style="list-style-type: none"> ● Improvements have been made with a number of our providers via contract monitoring meetings, with good attainment of targets or the redevelopment of clearer KPIs. ● The Public Health Service's internal commissioning processes continue to improve with the additional internal support from the Wellbeing Commissioning Team, which ensures the Standing Financial Instructions and Procurement policy is applied to all commissioning decisions. This also ensures that timely Service Reviews and Health Needs Assessments are undertaken to ensure all information is gained ahead of a change in service delivery and/or a procurement exercise. We have taken on additional responsibilities in terms of Citizens Advice and Ageing Well services and are undertaking service evaluations. ● The Fair Funding Review has still not reported and the future of the PH ring fenced grant remains uncertain. However, there is an indication that the grant will not reduce any further and an accrued underspend has allowed the team to prioritise investment funding in areas which are going to have the biggest impact and which present the biggest risk. A 3 year agreed investment plan commences in 20/21. Pending on the future of the grant, a prioritisation process will be started in 21/22 to inform commissioning decisions in 23/24. ● We are working with Active Northumberland to remodel Exercise on Referral and introduce a weight management programme. We have undertaken a healthcare needs assessment for individuals with co-existing substance misuse and mental health problems and are working with the MH and LD sub group of the System Transformation Board to ensure the recommendations are reflected in revised pathways of care. ● We have taken on the commissioning responsibility of the Ageing Well and Citizens Advice Bureau arrangements and have instigated evaluations of each. Following quality assurance issues the drug and alcohol service are carrying out a review of their current model. ● We have developed a formula to attribute the PH grant to various RA codes. We also re-submitted the 16/17 and 17/18 return to ensure consistency. The 18/19 submission also resulted in some queries and we suspect that the NAO did not have the resubmitted returns from previous years as a point of reference. We are pursuing this with PHE. All returns have been submitted before the due date. 	A,B,C,D,F,G

<p>Democratic Services</p>	<ul style="list-style-type: none"> • The Democratic Services Manager has now assumed responsibility for overall management of the Electoral Services Team. The two teams are now co-located and there are natural synergies between the two services which make shared management arrangements a practical option. The Executive Director has a very wide portfolio. Therefore management support at a senior level in this front facing service is important to ensure high standards are maintained. This will allow for more capacity across the two teams, particularly important with the challenges that all out elections in 2021 will have across the service. • There have been developments to strengthen the scrutiny function within the team with the recruitment of a dedicated scrutiny officer. • The process implemented last year to provide a check that all committee reports are in the correct format and signed off by all Executive Directors before consideration by Cabinet Members is still bedding in, but it remains a crucial part of the decision making process to ensure that the implications of issues have been properly considered. • The Democratic Services Manager continues to manage the Executive support team which allows a more joined up approach to this process and ensures capacity is focused where needed. 	<p>B, C, G</p>
<p>Adult Social Care</p>	<ul style="list-style-type: none"> • AQPAG (Adult Quality, Performance and Governance) was set up in late 2019 and is helping to guarantee the quality of adult care services delivered by social workers and care managers, and the development of a Quality Assurance Framework for the service overall. This also brings together audits in one place for adult social care and learning disability nursing. The audit tool is currently being revised. • A succession planning review developed with L&OD was piloted for NCC staff in in-house adult provider services. This identified an ageing workforce across management and care staff. The service worked with L&OD on a publicity and recruitment campaign, named Care For Life, specifically to recruit apprentices into in-house services. 14 apprentices of varied ages and backgrounds have now started their career in care. NCC Graduate Management Trainees have also worked extensively on apprenticeship promotions and supporting future planning in Shared Lives. • A new Experience Dashboard based on relational and transactional elements of care has been created for the Community Business Unit which includes adult social care. This provides an overview of feedback taken from a number of sources - complaints, surveys, compliments - to highlight aspects that are working well and those not so well. There are plans to drill this down to service level. A survey of service users and carers attending Day Services will commence shortly. • In regards to ICT, the strategy for CSBU has been refreshed which works across services led and managed by both Northumbria and NCC e.g. Community Health, Adult Social Care, Public Health, Education, Children's Social Care. The audit of systems within Community Health and Adult Social Care has also been updated and project governance for large scale projects has been established e.g. Swift Replacement, ARCGIS Implementation for Adult Services. • In Care Management and Learning Disability Nursing, a lead has been identified to take forward promotion of NICE guidance and quality standards and link this back to CQC requirements. Monthly compliance reports are sent to the audit team and baseline assessments carried out to embed evidence-based practice. NICE guidance briefings have taken place at Social 	<p>A,B,C,D,E,F,G</p>

	<p>Work forums and this has been underpinned further by the new regulatory body Social Work England Professional standards and Employers Standards. Practice guidance has also been produced specifically around Mental Capacity and Best Interests, underpinned by NICE and evidence-based practice. This will form an integral part of a specific audit process around MCA and BI in addition to providing practitioners with a resource tool.</p>	
<p>Children's Social Care</p>	<ul style="list-style-type: none"> • The governance arrangements within children's social care have continued to develop in 2019/20. Key areas of children's social care work are subject to regular member and partnership scrutiny and stakeholders are engaged through a range of mechanisms and for which are detailed below. Developments in the responsibilities of the executive director in the last year have been subject to tests of assurance. • The service completed the annual self assessment as required by Ofsted which identified positive progress in key areas of the improvement plan and priorities going forward in 2020/21. The self assessment has been subject to external scrutiny through regional peer director challenge and by Ofsted as part of the recent ILACS inspection (see below). The service has further developed and coordinated a range of performance, quality assurance and monitoring measures to ensure that key areas of risk and for practice improvement are promptly identified and addressed. • The service has been subject to significant external challenge and scrutiny in 2019/20. In June 2019, Ofsted, the Care Quality Commission, HMI Constabulary and Fire & Rescue Services and HMI Probation carried out a joint targeted area inspection (JTAI) of the multi-agency response to children experiencing or at risk of sexual exploitation and those experiencing or at risk of criminal exploitation in Northumberland. The inspection identified 21 areas of strength and 14 areas for improvement. A multi agency action plan has been produced and approved by Ofsted in response to the findings. The LA is leading on the monitoring and challenge of this plan's progress and reporting up to the Safeguarding Children Board. • Ofsted undertook an inspection of the local authority Children's Services (ILACS) in January 2020, the findings from which will be publicly available from early March. The verbal feedback has indicated that Northumberland has made significant progress since the previous SIF inspection in 2016. In terms of governance, the verbal feedback from the inspection has indicated that political and corporate oversight of children's services has strengthened, offering effective scrutiny and challenge. Further to this, the feedback also indicated that the range of performance and quality assurance measures give managers an accurate view and oversight of strengths and areas for development in frontline practice and this supports effective practice improvement. Overall the feedback has shown improvements in most areas of social care practice, which is child centred and ensures children are protected in a timely way and that progress in meeting children's needs is made in the vast majority of cases. • Regulatory inspections of children's residential care homes have continued in 2019/20. All LA-run homes were inspected in the period and all but one have retained their rating of Outstanding or Good. Action plans are in place to reassure ourselves that areas for improvement are moved forward, and the effectiveness of how Children's Services respond to external inspections is reported to the Audit Committee every 6 months. 	<p>A,B,C,D,E,F,G</p>

	<ul style="list-style-type: none"> ● The focus on and response to children, young people and families who use the service has been further strengthened through workforce training and development. Developments such as the ASYE Academy, and Deputy Team Manager and Advanced Practitioner roles, have strengthened the ability of the workforce to provide services that meet residents' needs within an environment where the culture has improved and staff say they feel safe to work in it. The leadership pledge has been developed to underpin the ethical and practice framework across the service and its effectiveness was reflected in the feedback from the ILACS inspection. ● There has been progress in the improvement actions and areas identified in last year's AGS. Significant work has taken place to further improve our response to and learning from data breaches complaints and training has been delivered in relation to GDPR. However, there have been data breaches in year and further work to mitigate risk of further breaches is in place. An evaluation of the themes arising from data breaches has been requested. There has also been a focus on appraisals with a plan that at year end, there will be improved performance in line with targets, although current data indicates that this may not be achieved. 	
<p>Communications</p>	<ul style="list-style-type: none"> ● Implementation of new working practices, including an account management approach to support all directorates. ● Aligning communication activity to Corporate Plan objectives. ● Quarterly strategic planning sessions take place with comms leads ● Continued weekly planning and forward plan meetings to ensure communication objectives are being met. ● Weekly / regular meetings with the lead Cabinet portfolio lead for corporate communications. ● Appointment of additional capacity within the service to help address demand and support for services. 	<p>C</p>