

City Chambers  
DUNDEE  
DD1 3BY

10th August, 2010

**Membership**

Councillor Kevin Keenan  
Councillor Richard McCready  
Bailie Derek Scott  
Councillor Fraser Macpherson  
Councillor Bob Duncan  
Bailie Willie Sawers  
Councillor Craig Melville  
Councillor Stewart Hunter

**All other Members**

Agenda and papers for information

Dear Sir or Madam

**SCRUTINY COMMITTEE**

Please attend the **SCRUTINY COMMITTEE** to be held in the main Council Chamber, City Chambers, Dundee on Wednesday, 18th August at 2.00 pm. Substitute members are allowed.

Yours faithfully

DAVID K DORWARD

Chief Executive

Members are reminded that, in terms of The Councillors Code, it is their responsibility to make decisions about whether to declare an interest in any item on this agenda and whether to take part in any discussions or voting.

This will include all interests, whether or not entered on your Register of Interests, which might be perceived as influencing your opinion/vote on any matter.

**EDUCATION**

**1 ACTION POINTS**

(i) DISCLOSURE PRACTICES IN EDUCATION AND SOCIAL WORK DEPARTMENTS - **page 5**

(Report No 432-2010 by Chief Executive, enclosed).

(ii) **ST MARY'S PRIMARY SCHOOL NURSERY CLASS - ERECTION OF A FENCE - page 11**

(Report No 390-2010 by Director of Education enclosed).

(iii) **ADOPTION SERVICE AND FOSTERING SERVICE - UPDATE ON ENGAGEMENT STRATEGY (AN106-2010)**

At a meeting of the Scrutiny Committee on 10th June, 2010, members considered Report No 259-2010 by the Director of Social Work reporting on the findings of the Care Commission inspection of the Council's Adoption Service. Members remitted to the Director of Social Work to report back on the actions relating to the service engagement strategy which also includes the Fostering Service.

In relation to the strategy, the service has ensured that all staff are now fully aware of the Social Work Department's "User Involvement Strategy", and are aware of the expectations of staff within this strategy. Additionally, staff have been reminded about how the service already currently implements the strategy ie:-

- the development of questionnaires for adopters and fosterers at various stages of the adoption and fostering process;
- an adopter/fosterer being a member of the Adoption/Fostering Panel;
- Adopters'/fosterers' involvement in the delivery of training;
- children of an appropriate age expressing their views about adoption/fostering through their involvement in the completion of the "Form E" Permanence report about them;
- children and birth families being given the opportunity to attend the Adoption/Fostering and Permanence Panel;
- the development of an Adopters'/Fosterers' support group;
- the Adopters'/Fosterers' newsletter;

In general, staff have additionally been encouraged to ensure that all service users' views are communicated, to ensure that their views can contribute to the positive development of the service.

The Committee is asked to note the above.

**2 THE ELMS - SECURE UNIT - page 13**

(Report No 255-2010 by Director of Social Work and Director of Education, enclosed).

**3 WHITFIELD COMMUNITY EARLY YEARS' CENTRE - page 29**

(Report No 388-2010 by Director of Education, enclosed).

**4 BALDRAGON ACADEMY - page 37**

(Report No 425-2010 by Director of Education, enclosed).

**5 LEARNING COMMUNITY SURROUNDING BALDRAGON ACADEMY - page 45**

(Report No 323-2010 by Head of Community Learning and Development, enclosed).

**6 SUMMARY OF EXTERNAL INSPECTION REPORTS FOR WHICH GRADES ARE GOOD OR BETTER - page 53**

(Report No 394-2010 by Chief Executive, enclosed).

**7 BEST VALUE REVIEW PROGRAMME - page 63**

(Report No 387-2010 by Assistant Chief Executive, enclosed).

**8 COMPLAINTS STATISTICS 2009/2010 - page 87**

(Report No 409-2010 by Assistant Chief Executive, enclosed).

**9 2009/2010 INTERNAL AUDIT ANNUAL REPORT - page 91**

(Report No 438-2010 by Chief Internal Auditor, enclosed).

**10 INTERNAL AUDIT REPORTS (PUBLIC) - page 99**

(Report No 439-2010 by Chief Internal Auditor (enclosed).

**The Committee may resolve under Section 50(A)(4) of the Local Government (Scotland) Act 1973 that the press and public be excluded from the meeting for the undernoted item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraph 8 of Part I of Schedule 7A of the Act.**

**11 INTERNAL AUDIT REPORTS (PRIVATE)**

**REPORT TO: SCRUTINY COMMITTEE - 18TH AUGUST 2010**  
**REPORT ON: DISCLOSURE PRACTICES**  
**REPORT BY: DEPUTE CHIEF EXECUTIVE (SUPPORT SERVICES)**  
**REPORT NO: 432-2010**

## **1.0 PURPOSE OF REPORT**

1.1 This Report reviews the Council's Disclosure practices.

## **2.0 RECOMMENDATION**

2.1 The Committee is asked to note the contents of the Report.

## **3.0 FINANCIAL IMPLICATIONS**

3.1 There are no financial implications arising directly out of the Report.

## **4.0 MAIN TEXT**

4.1 At their meeting on 19th May 2010 the Scrutiny Committee remitted to the Chief Executive to reconsider the Corporate Guidance and submit a report to the Scrutiny Committee (Article I (ii) refers). The Report fulfils that remit.

4.2 Disclosure Scotland was introduced to increase protection for children and vulnerable adults by the then Scottish Executive in 2002. It was designed to enhance public safety by helping organisations make safer recruitment decisions and give parents and relatives increased peace of mind. The City Council registered with Disclosure Scotland.

4.3 Registered organisations are expected to have policies on the Secure Handling, Use, Storage and Retention of Disclosure Information and on the Recruitment of Ex-Offenders. The Council adopted policies based on Disclosure Scotland's model policies adapted for use by the City Council (Policy and Resources Committee 21st October 2002, Article VII refers) and adopted updated policies when Disclosure Scotland updated their model policies (Policy and Resources Committee 14th January 2008, Article II refers) (See the Appendix to this Report).

4.4 The Committee queried what the Council's policy on the retention of disclosure information is. As can be seen from Paragraph 4 of the Policy on the Secure Handling, Use, Storage and Retention of Disclosure Information such information should be kept for no longer than is required after a recruitment (or any other relevant) decision has been taken. In general this is no longer than 90 days. Disclosure information should only be retained in exceptional circumstances which necessitates retention for a longer period.

4.5 I have confirmed with all relevant Departments that they adhere to this procedure.

4.6 The Committee also queried what the Council's policy on re-checks is. For checks and also for re-checks the general principle is that a Disclosure is only requested where this is considered proportionate and relevant to the particular position based on a thorough risk assessment of the position and having considered the relevant legislation which details whether or not a Standard or Enhanced Disclosure is available to the position in question. (See Paragraph 5 of the Policy on the Recruitment of Ex-Offenders).

4.7 Checks are carried out regardless of whether the "preferred candidate" is currently an employee of the Council or is an external candidate. Checks are undertaken for new starts, and upon promotion (or acting up), transfer or redeployment. In Education or Social Work checks may be undertaken where a work location is changed.

4.8 I am satisfied that this procedure is in accordance with the relevant legislation and the Council's policy.

- 4.9 Legislation on the Protection of Vulnerable Groups has recently been passed by the Scottish Parliament and a new Vetting and Barring Scheme is to be introduced later this year. Should this necessitate reconsideration of the Council's current policies and practices on the retention of Disclosure information , on re-checks or on any other issues, I shall report the matter to the Policy and Resources Committee for consideration of any appropriate changes. At the same time all Departmental practices will be reviewed to ensure consistency where possible.

## **5.0 POLICY IMPLICATIONS**

- 5.1 The Report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-poverty, Equality Impact Assessment and Risk Management. There are no major issues so far as Equalities are concerned. The Policy on Recruitment of Ex-Offenders commits the City Council to treat all applicants for positions fairly and not to discriminate unfairly against the subject of a Disclosure on the basis of conviction or other information received.

## **6.0 CONSULTATIONS**

- 6.1 The Depute Chief Executive (Support Services), the Head of Personnel, Head of Environmental Health and Trading Standards, Director of Education, Director of Finance, Director of Housing and Director of Social Work have been consulted in the preparation of the Report.

## **8.0 BACKGROUND PAPERS**

- 8.1 None.

David K Dorward  
Chief Executive

23rd July 2010

## DUNDEE CITY COUNCIL

### POLICY ON THE SECURE HANDLING, USE, STORAGE AND RETENTION OF DISCLOSURE INFORMATION

#### General Principles

1. Dundee City Council complies fully with the Code of Practice, issued by Scottish Ministers, regarding the correct handling, holding and destroying of Disclosure information provided by Disclosure Scotland under Part V of the Police Act 1997 ("the 1997 Act"), for the purposes of assessing applicants' suitability for employment purposes, voluntary positions, licensing and other relevant purposes. It also complies fully with the Data Protection Act 1998 and other relevant legislation pertaining to the safe handling, use, storage, retention and disposal of Disclosure information and has a written policy on these matters. This policy is available to anyone who wishes to see it on request.

#### Usage

2. We use Disclosure information only for the purpose for which it has been provided. The information provided by an individual for a position within the Council is not used or disclosed in a manner incompatible with the purpose. We process personal data only with the express consent of the individual. We notify the individual of any non-obvious use of the data, including further disclosure to a third party, identifying the Data Controller, the purpose for the processing, and any further relevant information.

#### Handling

3. The Council recognises that, under section 124<sup>1</sup> of the 1997 Act, it is a criminal offence to disclose Disclosure information to any unauthorised person. We, therefore, only pass Disclosure information to those who are authorised to see it in the course of their duties. The Council will not disclose information provided under subsection 113(B)(5)<sup>2</sup> of the 1997 Act, namely information which is not included in the Disclosure, to the applicant.

#### Access and Storage

4. We do not keep Disclosure information on an individual's personnel file. It is kept securely, in lockable, non-portable storage containers. Access to storage units is strictly controlled to authorised and named individuals, who are entitled to see such information in the course of their duties.

#### Retention

5. We do not keep Disclosures or Disclosure information for any longer than is required after a recruitment (or any other relevant) decision has been taken. In general, this is no longer than 90 days. This is to allow for the resolution of any disputes or complaints. Disclosure information will only be retained for longer than this period in exceptional circumstances which justify retention for a longer period. The same conditions relating to secure storage and access will apply during any such period.

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<sup>1</sup> The Serious Organised Crime and Police Act 2005 ("the 2005 Act") Schedule 14, Paragraph 12 amended section 124

<sup>2</sup> Subsection 163(2) of the 2005 Act inserted subsection 113B into the 1997 Act. Subsection 113B(5) of the 2005 Act replaces subsection 115(8) of the 1997 Act.

**Disposal**

6. Once the retention period has elapsed, we will ensure that Disclosure information is immediately destroyed in a secure manner i.e. by shredding, pulping or burning. The Council will ensure that Disclosure information which is awaiting destruction will not be kept in any insecure receptacle (e.g. a waste bin or confidential waste sack). We will not retain any image or photocopy or any other form of the Disclosure information. We will, however, keep a record of the date of issue of the Disclosure, the name of the subject, the Disclosure type, the position for which the Disclosure was requested, the unique reference number of the Disclosure and details of the recruitment decision taken.

**Umbrella Bodies**

7. Before acting as an Umbrella Body (i.e. a body which countersigns applications for Standard or Enhanced Disclosures on behalf of another organisation), Dundee City Council will take all reasonable steps to ensure that the organisation on whose behalf we are acting will comply with the Code of Practice, and in full accordance with this policy. We will also take all reasonable steps to satisfy ourselves that they will handle, use, store, retain and dispose of Disclosure information in full compliance with the Code of Practice, and in full accordance with this policy. We will also ensure that any body or individual at whose request applications for Disclosures are countersigned, has such a written policy and, if necessary, will provide a model policy for that body or individual to use or adapt for this purpose.

## DUNDEE CITY COUNCIL

### POLICY ON THE RECRUITMENT OF EX-OFFENDERS

1. Dundee City Council complies fully with the Code of Practice, issued by Scottish Ministers, in connection with the use of information provided to registered persons, their nominees and other recipients of information by Disclosure Scotland under Part V of the Police Act 1997, for the purposes of assessing applicants' suitability for employment purposes, voluntary positions, licensing and other relevant purposes. We undertake to treat all applicants for positions fairly and not to discriminate unfairly against the subject of a Disclosure on the basis of conviction or other information revealed.
2. This policy is made available to all Disclosure applicants at the outset of the recruitment process.
3. We are committed to equality of opportunity, to following practices, and to providing a service which is free from unfair and unlawful discrimination. We ensure that no applicant or member of staff is subject to less favourable treatment on the grounds of gender, marital status, race colour, nationality, ethnic or national origins, age, sexual orientation, responsibilities for dependants, physical or mental disability, or offending background, or is disadvantaged by any condition which cannot be shown to be relevant to performance.
4. Dundee City Council actively promotes equality of opportunity for all with the right mix of talent, skills and potential, and welcomes applications from a wide range of candidates, including those with criminal records. The selection of candidates for interview will be based on skills, qualifications and experience.
5. We will request a Disclosure only where this is considered proportionate and relevant to the particular position. This will be based on a thorough risk assessment of that position and having considered the relevant legislation which determines whether or not a Standard or Enhanced Disclosure is available to the position in question. Where a Disclosure is deemed necessary for a post or position, all applicants will be made aware at the initial recruitment stage that the position will be subject to a Disclosure and that the Council will request the individual being offered the position to undergo an appropriate Disclosure check.
6. Where a Disclosure is to form part of the recruitment process, the Council will encourage all applicants selected for interview to provide details of their criminal record at an early stage in the application process. Applicants will normally be requested to complete a criminal records self declaration form. We ask that this information be sent under separate, confidential cover, to a designated person within the Council and we guarantee that this information will only be seen by those who need to see it as part of the recruitment process.
7. In line with the Rehabilitation of Offenders Act 1974, the Council will only ask about convictions which are defined as "unspent" in terms of that Act, unless the nature of the position is such that we are entitled to ask questions about an individual's entire criminal record.
8. At interview, or under separate discussion, we undertake to ensure an open and measured discussion on the subject of any offences or other matters that might be considered relevant for the position concerned. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment.
9. We undertake to discuss any matter revealed in a Disclosure Certificate<sup>3</sup> with the subject of that Disclosure before considering withdrawing a conditional offer of employment.
10. We ensure that all those in the Council who are involved in the recruitment process have been suitably trained to identify and assess the relevance and circumstances of Disclosure information. We also ensure that they have received appropriate guidance and training in the

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<sup>3</sup> We are only able to discuss what is contained on a Disclosure Certificate and not what may have been sent under separate cover by a police force.



relevant legislation relating to employment of ex-offenders (e.g. the Rehabilitation of Offenders Act 1974).

11. We undertake to make every subject of a Disclosure aware of the existence of the Code of Practice, and to make a copy available on request.

HAVING A CRIMINAL RECORD WILL NOT NECESSARILY DEBAR YOU FROM WORKING WITH DUNDEE CITY COUNCIL. THIS WILL DEPEND ON THE NATURE OF THE POSITION, TOGETHER WITH THE CIRCUMSTANCES AND BACKGROUND OF YOUR OFFENCES OR OTHER INFORMATION CONTAINED ON A DISCLOSURE CERTIFICATE OR PROVIDED DIRECTLY TO US BY A POLICE FORCE.

**REPORT TO: SCRUTINY COMMITTEE - 18 AUGUST 2010**

**REPORT ON: ST MARY'S PRIMARY SCHOOL NURSERY CLASS  
MATTER ARISING FROM SCRUTINY COMMITTEE OF 10 JUNE  
2010 - ERECTION OF FENCE**

**REPORT BY: DIRECTOR OF EDUCATION**

**REPORT NO: 390- 2010**

## **1.0 PURPOSE OF REPORT**

1.1 The Scrutiny Committee, at their meeting on 10 June 2010 (report no. 319-2010 refers), remitted to the Director of Education to report back on a suggestion that a fence should be erected at St Mary's Primary School Nursery Class to separate the outside play area from a public footpath. The purpose of this report is to advise the Scrutiny Committee of the action taken by the Director of Education following that suggestion.

## **2.0 RECOMMENDATIONS**

2.1 It is recommended that the Scrutiny Committee notes the decision by the Director of Education that a fence is not required, since a range of other steps will be taken immediately to address the issue of members of the public passing through the school grounds.

## **3.0 FINANCIAL IMPLICATIONS**

3.1 There are no financial implications.

## **4.0 MAIN TEXT**

4.1 St Mary's PS nursery class received an unannounced inspection by the Care Commission in March 2010. A report on their findings was published in May 2010, containing grades of 'good' and 'very good'.

4.2 The Care Commission Officer had reported, in Quality Theme 1, 'Quality of Care and Support', Statement 3 (page 20 of 39), that "the outside play area is some distance from this first floor nursery facility and is not conducive to children accessing the outside area independently or spontaneously. The addition of a fence separating it from the public footpath would contribute to a safer play area for the children."

4.3 The Care Commission Officer's understanding had been that the general public can use the school grounds as a thoroughfare between Ancrum Road Primary School and Lochee Road. Assuming that this was the case, the officer felt there needed to be a barrier between the children and the public.

- 4.4 The Education Department's Health and Safety Officer visited St Mary's Nursery Class on 18th June 2010 and conducted an assessment. In addition, the possible erection of a fence was reviewed by the school's Property Officer.
- 4.5 The school grounds and pathway are not a public access route. Adjacent to the school grounds are steps for public use to allow pedestrians to access Lochee Road from the Old Muirton Road area. It is acknowledged that some members of the public have been known to pass through the school grounds instead of using the adjacent public path and steps. However, there is no need for the public to cross the school grounds.
- 4.6 In conclusion, this report recommends that a fence is not required, but that the following steps should be taken immediately to address the problem:
- The Acting Head Teacher must lock the gate at the Old Muirton Road fence at times when parents are not dropping off or picking up children from school or nursery.
  - A sign should be placed on the gate indicating that the school grounds are not a public thoroughfare.
  - The front gate on Lochee Road will remain unlocked to allow access for parents and visitors to the school. This gate has a safety 'sleeve' on top which can be released by adults.
  - Nursery children outside in the school grounds will always be accompanied by staff.

## **5.0 POLICY IMPLICATIONS**

- 5.1 This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management. There are no major issues.

## **6.0 CONSULTATION**

- 6.1 This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services) and Director of Finance.

## **7.0 BACKGROUND PAPERS**

- 7.1 The following Background Paper was relied upon in preparation of this Report:
- Scottish Commission for the Regulation of Care  
Inspection Report - Day Care of Children  
St Mary's Primary School Nursery, Dundee City Council  
08 March 2010

JIM COLLINS  
Director of Education

3 August 2010

JC/MM

(iii) ADOPTION SERVICE AND FOSTERING SERVICE - UPDATE ON ENGAGEMENT STRATEGY (AN106-2010)

At a meeting of the Scrutiny Committee on 10th June, 2010, members considered Report No 259-2010 by the Director of Social Work reporting on the findings of the Care Commission inspection of the Council's Adoption Service. Members remitted to the Director of Social Work to report back on the actions relating to the service engagement strategy which also includes the Fostering Service.

In relation to the strategy, the service has ensured that all staff are now fully aware of the Social Work Department's "User Involvement Strategy", and are aware of the expectations of staff within this strategy. Additionally, staff have been reminded about how the service already currently implements the strategy ie:-

- the development of questionnaires for adopters and fosterers at various stages of the adoption and fostering process;
- an adopter/fosterer being a member of the Adoption/Fostering Panel;
- Adopters'/fosterers' involvement in the delivery of training;
- children of an appropriate age expressing their views about adoption/fostering through their involvement in the completion of the "Form E" Permanence report about them;
- children and birth families being given the opportunity to attend the Adoption/Fostering and Permanence Panel;
- the development of an Adopters'/Fosterers' support group;
- the Adopters'/Fosterers' newsletter;

In general, staff have additionally been encouraged to ensure that all service users' views are communicated, to ensure that their views can contribute to the positive development of the service.

The Committee is asked to note the above.

## **DUNDEE CITY COUNCIL**

**REPORT TO: SCRUTINY COMMITTEE - 18TH AUGUST 2010**

**REPORT ON: ANNOUNCED INSPECTION OF DUNDEE CITY COUNCIL - The Elms Secure Unit by the HM Inspectorate of Education and the Care Commission.**

**REPORT BY: DIRECTOR OF SOCIAL WORK & DIRECTOR OF EDUCATION**

**REPORT NO: 255- 2010**

### **1.0 PURPOSE OF REPORT**

1.1 The purpose of this report is to summarise the findings and the evaluation of the inspection of the Elms Secure Unit by the HM Inspectorate and the Care Commission finalised on 27th March 2010.

### **2.0 RECOMMENDATIONS**

2.1 It is recommended that the Scrutiny Committee:

- i note the contents of this report
- ii requests that the Director of Social Work and Director of Education monitor the continued progress towards improving this service.

### **3.0 FINANCIAL IMPLICATIONS**

3.1 None

### **4.0 MAIN TEXT**

4.1 The Secure Unit was inspected by HM Inspectorate of Education and the Care Commission. The report outlining the findings of this visit was published on 16 March 2010. The Secure Unit provides secure care and education for a maximum of four young people.

4.2 The focus of the inspection was on:

- How well do children and young people learn and achieve
- How well do staff work with others to support the learning of children and young people
- Are staff, children, and young people actively involved in improving their school community?
- Does the school have high expectations of all children and young people?
- Does the school have a clear sense of direction?

4.3 HM Inspectorate and the Care Commission identified the particular strengths of the school as:

- Caring and nurturing environment provided by staff who are very responsive to individual needs
- Solution focused and supportive attitudes of staff
- The motivating leadership of the recently appointed principal teacher and her drive to integrate care and education practices.

- Successful partnerships with a range of external providers both in care and education settings.

4.4 How well do children and young people learn and achieve.

- It was noted that young people respond well to the caring and nurturing environment in which they live and learn
- Young people are treated with dignity and respect and feel very safe in the unit
- Almost all young people show improved behaviour
- All young people have a sense of pride through weekly celebrations of achievements and recording of successes in their personal learning plan

4.5 Curriculum, and meeting learning needs

- The curriculum is highly personalised and based on young people's prior learning and potential future placement.
- Care staff are working with young people in innovative ways.
- The unit is developing a 'happy to help' homework club to consolidate class work in the evening.

4.6 How well do staff work with others to support the learning of children and young people.

- The unit has formed very effective partnerships with external providers to enhance learners experiences
- Parents are encouraged to attend planning meetings.
- Teaching staff link effectively with young people's previous educational placements.
- Care staff are making good use of the wider community to develop life skills beyond the school day.

4.7 Are staff children and young people actively involved in improving their school community

- The newly appointed teacher is very visible in both care and education settings.
- Young people are asked about their views through a range of effective evaluation sheets.

4.8 Does the school have high expectations of all children and young people

- The unit has successfully developed a nurturing and highly supportive ethos.
- All staff share high expectations of behaviour with young people who are given clear guidelines on these expectations.
- There is a strong drive to raise young peoples' desire to learn and achieve and make more informed choices for the future
- The accommodation is exceptionally well cleaned and maintained.

4.9 Does the school have a clear sense of direction

- The recently appointed principal teacher has a clear sense of direction for the school and is motivating both care and education staff by building on a culture of improvement across the unit.

#### 4:10 Areas for improvement identified

- Improve approaches to self-evaluation and planning for improvement across education and care.
- Further develop and broaden the curriculum in line with curriculum for Excellence principles.
- Improve accommodation to ensure it is fit for the purpose of education and caring of young people in the 21st century.
- Assess and co-ordinate planning more effectively to meet the complex emotional and learning needs of young people.
- Address staffing issues in care in order to ensure that the needs of young people are being consistently met.

#### 4.11 Requirements and Recommendations

There is one requirement;

- The service must carry out and record a risk assessment on any occasion when the agreed staffing schedule is not met for any reason.

#### 4.12 Evaluations

This report uses the following word scale to make clear judgements made by inspectors:

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement.
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

The Evaluations for the Elms School following inspection:

<b>Quality Theme</b>	<b>Overall Grade</b>
Improvements in performance	satisfactory
Learners' experiences	good
Meeting learning needs	good

The following aspects of the work of the school were also evaluated

The curriculum	satisfactory
Improvement through self-evaluation	weak

## 5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management.

The inclusion of a recorded risk assessment, in the event of the agreed staffing schedule not being met, complies with the Council's corporate policy statement on Risk Management in that it involves the identification and evaluation of risks to create practical and cost effective means of loss control and avoidance.

**6.0 CONSULTATION**

6.1 The Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Head of Finance have been consulted in preparation of this report.

**7.0 BACKGROUND PAPERS**

7.1 The following Background Papers were relied upon in preparation of this Report:

HM Inspectorate of Education and the Care Commission Inspection Report - The Elms, completed 27th March 2010

Alan Baird  
**Director of Social Work**

29 April 2010





**The Elms  
Dundee City Council  
16 March 2010**

This report tells you about the quality of care and education at the school. We describe the approaches taken to ensure learning, care and protection for children and young people. It tells you about the quality of education at the school<sup>1</sup>. We describe how children and young people benefit from learning there. We explain how well they are doing and how good the school is at helping them to learn. Then we look at the ways in which the school does this. We describe how well the school works with other groups in the community, including parents<sup>2</sup> and services which support children and young people. We also comment on how well staff, children and young people work together and how they go about improving the school.

Our report describes the ‘ethos’ of the school. By ‘ethos’ we mean the relationships in the school, how well children and young people are cared for and treated and how much is expected of them in all aspects of school life. Finally, we comment on the school’s aims. In particular, we focus on how well the aims help staff to deliver high quality learning, and the impact of leadership on the school’s success in achieving these aims.

If you would like to learn more about our inspection of the school, please visit [www.hmie.gov.uk](http://www.hmie.gov.uk). Here you can find analyses of questionnaire returns and details about young people’s examination performance. Where applicable, you will also be able to find descriptions of good practice in the school.

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<sup>1</sup> The term ‘school’ is used to include the work of the nursery class and residences, where relevant.

<sup>2</sup> Throughout this report, the term ‘parents’ should be taken to include foster carers, and carers who are relatives or friends.

## **Contents**

1. The school
2. Particular strengths of the school
3. How well do children and young people learn and achieve?
4. How well do staff work with others to support the learning of children and young people?
5. Are staff, children and young people actively involved in improving their school community?
6. Does the school have high expectations of all children and young people?
7. Does the school have a clear sense of direction?
8. What happens next?

### **1. The school**

The Elms Secure Unit is situated in Dundee and provides secure care and education for a maximum of four secondary aged young people. The service is managed by Dundee City Council. At the initial time of inspection there were no young people in the unit. The inspection was extended to ensure the team were able to observe and interact with young people. When the inspection team returned the roll was two. Inspectors were also able to speak with former pupils. No young people had a co-ordinated support plan.

## **2. Particular strengths of the school**

- Caring and nurturing environment provided by staff who are very responsive to individual needs.
- Solution focused and supportive attitudes of staff.
- The motivating leadership of the recently appointed principal teacher and her drive to integrate care and education practices.
- Successful partnerships with a range of external providers both in care and education settings.

## **3. How well do children and young people learn and achieve?**

### **Learning and achievement**

Through positive encouragement from staff young people are re-engaging with learning. They respond well to the caring and nurturing environment in which they live and learn. Young people are treated with dignity and respect and feel very safe in the unit. They are relaxed and comfortable in their relationships with staff. Most young people develop trust in key workers over short spells of time. Young people are motivated by most of the activities offered. They start to focus on task completion. Young people are encouraged to work with each other through games, art work, meal-times and accessing leisure activities.

All young people are encouraged to have a sense of pride through weekly celebrations of achievement and recording successes in their personal learning plans. They are proud of their sporting, art, swimming, cookery and musical achievements. Young people have also enjoyed physical activities through Dundee City Council's 'Kick it, Kick off' programme. Young people are becoming more confident through these sessions. They also work hard to retain the privilege of supervised access to the community and most achieve this.

Almost all young people have achieved some success in their learning during the very short time they reside in the unit. A few young people in 2008/09 achieved Access 3 passes in Maths. Young people are writing extensively for personal interest topics and are expressing their views enthusiastically through short plays. Numeracy skills are practised in home economics and through budgeting for outings and leisure activities. Literacy skills are extended through the use of health education games where young people are encouraged to listen to others and form opinions. Most young people who recently left the unit have progressed to other supported learning environments. Almost all young people show improved behaviour. In the last six months all young people attended all education classes.

### **Curriculum and meeting learning needs**

The curriculum is highly personalised and based on young people's prior learning and potential future placements. There is a focus on numeracy, literacy and health and well-being. Care staff are working with young people in innovative ways. They have recently become involved in community projects including a history topic based on visits to 'The Discovery.' Staff try hard to provide continuity in learning but face challenges associated with staff skills, small numbers of young people and short spells of attendance. The school day is shorter than recommended for secondary aged pupils. Young people could achieve more by being able to attend classes for longer. Staff have started to develop thematic approaches to delivering the curriculum. This allows for a broader range of subjects to be taught. For example, young people have enjoyed topics related to sporting icons which involved working on mathematics, English language, art, history and information communication technology (ICT). The curriculum on offer is restricted to a few subjects and could be broadened through further development work on *Curriculum for Excellence* across education and care. Staff have started to develop programmes of work for specific subject areas and should continue these developments across both education and care environments. All subjects require carefully planned programmes to support progression in learning.

Young people would benefit from further development of the ways in which they gain qualifications.

Young people follow personal learning programmes related to their specific needs. They are very well involved in setting both long and short term targets for themselves. There is a need for more challenge for a few young people. Staff across care and education have a very good understanding of the needs of young people and are able to effectively use de-escalation techniques and positive relationships to resolve difficult situations. Classroom assistants are experienced and able to provide effective support to young people. Care staff complete useful behaviour plans for individuals and they should share these with education staff. This would assist in developing consistent approaches across both environments. Young people would benefit further from more detailed assessment and co-ordinated planning to meet their often very specific and complex emotional health needs. Risk assessments completed on admission need to be more clearly recorded. The unit is developing a 'Happy to Help' homework club to consolidate classwork in the evening.

#### **4. How well do staff work with others to support the learning of children and young people?**

Parents are encouraged to attend planning meetings but there is limited involvement of parents in the educational work of the secure unit. Teaching staff link effectively with young people's previous educational placements. The unit works very well with a range of external agencies including the looked after and accommodated nursing team who provide highly valued individualised support related to substance abuse and general emotional support. Staff and young people would benefit from more direct involvement from mental health teams and psychological services. The unit has formed very effective partnerships with external providers to enhance learners' experiences. For example, young people enjoy therapeutic art sessions with a visiting artist and another provider gives well-received advice on sexual health issues. Care staff are making good use of the wider

community to develop life skills beyond the school day. They are responsive to the interests of young people and have taught them a range of useful life and leisure skills. This includes swimming, drumming, attending football matches and cooking.

## **5. Are staff, children and young people actively involved in improving their school community?**

Staff reflect informally on their work as individuals and together through staff meetings. They now need to develop more systematic approaches to evaluating the work of the unit. Young people are asked about their views through a range of effective evaluation sheets. The comments from young people on leaving the unit are very helpful for staff and have led to improvements in approaches to setting targets with young people. Partner providers evaluate their projects very well with young people. For example, they use pupil friendly feedback sheets to indicate levels of challenge and enjoyment within topics being covered. The newly appointed principal teacher is very visible in both care and education settings. She has correctly identified the need to monitor teaching more formally and to encourage staff to share good practice across the unit more effectively. Teaching staff need to reflect more regularly on their teaching approaches.

## **6. Does the school have high expectations of all children and young people?**

The unit has successfully developed a nurturing and highly supportive ethos. Young people feel very safe when they reside within the unit. All staff share high expectations of behaviour with young people who are given clear guidelines on these expectations. There is a strong drive to raise young people's desire to learn, achieve and make more informed choices for the future. Staff encourage young people to respect others through a health and well-being programme covering issues related to racism and other aspects of diversity. The accommodation is exceptionally well cleaned and maintained. Staff

make the best use they can of the available accommodation but the current environment for learning impacts negatively on learners' experiences due to a lack of appropriate space and rooms which are not fit for purpose. For example, teaching areas are very small and there is no suitable space for home economics, physical education or outdoor activities. Plans to improve the accommodation have been drawn up, but have not yet received confirmation of funding. Some aspects of security in the building should be further improved.

## **7. Does the school have a clear sense of direction?**

The recently appointed principal teacher has a clear sense of direction for the school. She is experienced and knowledgeable about the emotional needs of young people in this type of provision. She is motivating both care and education staff by building on previous practice and developing a culture of improvement across the unit. The capacity for care and education managers and staff to work together should be further developed. Managers should work with all staff to create a joint vision for the future of the unit.

## **8. What happens next?**

We are confident that with support from the local authority the unit will be able to make the necessary improvements in light of the inspection findings. As a result, we will make no more visits in connection with this inspection. The unit and the education authority will inform parents about the unit's progress in improving the quality of education. The District Inspector will maintain contact with the local authority to monitor improvements



We have agreed the following areas for improvement with the unit and local authority.

- Improve approaches to self-evaluation and planning for improvement across education and care.
- Further develop and broaden the curriculum in line with Curriculum for Excellence principles.
- Improve accommodation to ensure it is fit for the purpose of educating and caring for young people in the 21<sup>st</sup> century.
- Assess and co-ordinate planning more effectively to meet the complex emotional and learning needs of young people.
- Address staffing issues in care in order to ensure that the needs of young people are being consistently met.

Outstanding issues from previous regulatory activity undertaken by the Care Commission are carried forward in this report (see requirement 1).

**Requirement 1:** The service must carry out and record a risk assessment on any occasion when the agreed staffing schedule is not met for any reason. This is in order to comply with SSI/2002/Regulation 114 (4) (1) (a) - a requirement to make proper provision for the health and welfare of service users. Timescale for implementation: by 31 January 2010

**Recommendation :** The service provider should take prompt action to address the current staffing issues to ensure that at all times there are sufficient staff, including senior staff, to meet young people's care and support needs - National Care Standards for School Care Accommodation Services – Standard 7 – Management and staffing

**Recommendation:** The service should continue to improve the quality of the environment by reviewing security arrangements and addressing the limitations of the educational accommodation in line with recommendations made during this inspection – Standard 5 – Comfort, safety and security.

Quality indicators help schools, education authorities and inspectors to judge what is good and what needs to be improved in the work of the school. You can find these quality indicators in the HMIE publication *How good is our school?*. Following the inspection of each school, the Scottish Government gathers evaluations of three important quality indicators to keep track of how well all Scottish schools are doing.

Here are the evaluations for The Elms School

<b>Improvements in performance</b>	<b>satisfactory</b>
<b>Learners' experiences</b>	<b>good</b>
<b>Meeting learning needs</b>	<b>good</b>

We also evaluated the following aspects of the work of the school

<b>The curriculum</b>	<b>satisfactory</b>
<b>Improvement through self-evaluation</b>	<b>weak</b>

**Angela Edwards**  
**HM Inspector**

**Linda Paterson**  
**Care Commission Officer**

16th February 2010

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This report uses the following word scale to make clear judgements made by inspectors.

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

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**REPORT TO: SCRUTINY COMMITTEE - 18 AUGUST 2010**

**REPORT ON: WHITFIELD COMMUNITY EARLY YEARS CENTRE  
HMIE FOLLOW- THROUGH INSPECTION**

**REPORT BY: DIRECTOR OF EDUCATION**

**REPORT NO: 388- 2010**

## **1.0 PURPOSE OF REPORT**

- 1.1 The purpose of this paper is to report on the findings of Her Majesty's Inspectorate of Education (HMIE) and the Care Commission from a follow through inspection at Whitfield Community Early Years Centre in March 2010. The report was published in May 2010.
- 1.2 This report was deferred to this meeting of the Scrutiny Committee to allow all Committee members time to read the report and relevant papers.

## **2.0 RECOMMENDATIONS**

- 2.1 It is recommended that the Scrutiny Committee:
- i. notes the contents of this report; and
  - ii. instructs the Director of Education to monitor progress towards meeting the areas for continuing improvement contained in the report.

## **3.0 FINANCIAL IMPLICATIONS**

- 3.1 There are no financial implications arising from this report.

## **4.0 MAIN TEXT**

- 4.1 Whitfield Community Early Years Centre had originally received an announced integrated inspection conducted by HMIE and the Care Commission in February 2009, and had published their findings in April 2009. The report was placed before the Scrutiny Committee on 29 July 2009 (report no. 380-2009 refers).
- 4.2 The findings from the 2009 integrated inspection report indicated that a follow through inspection should be undertaken within one year. This would allow the regulators an opportunity to see how the nursery addressed those areas for improvement which had been identified.
- 4.3 The follow through inspection was undertaken by an inspector from HMIE in March 2010. At the time of the follow through inspection 59 children aged between two and five years were being offered a service on both a part-time and full day basis.
- 4.4 **Quality Indicators**

4.4.1 HMle uses a six-point scale for reporting performance:

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

#### 4.5 The 2009 inspection

4.5.1 The 2009 inspection had identified the following strengths of the nursery:

- happy children who are enthusiastic about their learning
- the effective teamwork of staff in creating a very caring, friendly and welcoming ethos for children and parents
- transition arrangements at all stages
- partnership with parents

4.5.2 The following areas for improvement had been agreed with the nursery school and education authority:

- improve the quality of learning experiences for all children to provide a greater level of challenge
- provide opportunities for children to develop early skills in literacy and numeracy in appropriate play situations
- make better use of observations and recording of children's learning to plan what children learn next
- introduce a rigorous and systematic programme of self-evaluation involving all staff to improve the work of the centre

4.5.3 The following quality evaluations were given at the 2009 integrated inspection:

Quality Indicator	Grade
<b>Improvements in performance</b>	Weak
<b>Children's experiences</b>	satisfactory
<b>Meeting learning needs</b>	Satisfactory
<b>The curriculum</b>	Weak
<b>Improvement through self-evaluation</b>	Weak

4.5.4 Following the inspection in 2009 staff in the centre and the centre manager worked collaboratively with local authority personnel to make appropriate changes which ensured that all children in the centre would receive an improved level of educational experience at Whitfield Community Early Years Centre.

#### **4.6 The 2010 follow through inspection**

4.6.1 The March 2010 follow through inspection found that the centre had the following key strengths:

- children who are happy and enjoying their learning
- improved environment for learning
- improved arrangements for evaluating the work of the centre

4.6.2 HMIE do not report their findings using the six-point scale at follow through inspections. However, key text in the report demonstrates improvements achieved by the centre since the 2009 integrated inspection. These include:

- The children now have more suitably challenging play activities in the well organised playrooms.
- The children are making a more appropriate rate of progress in developing early literacy and numeracy skills.
- Children are now more confident and keen to plan their own learning.
- Staff have improved the curriculum and provide children with more relevant learning experiences.
- The staff team now monitor learning and teaching in a planned, positive and constructive way.
- The head of centre has successfully improved approaches for evaluating the quality of the centre's work.

#### **5.0 POLICY IMPLICATIONS**

5.1 This report has been screened for any implications in respect of sustainability, strategic environment assessment, anti-poverty and equality impact assessment and risk management. There are no major issues.

#### **6.0 CONSULTATION**

6.1 This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services) and the Director of Finance.

#### **7.0 BACKGROUND PAPERS**

7.1 The following Background Paper was relied upon in preparation of this report:

- A Report by Her Majesty's Inspectorate of Education and The Care Commission
- (Inspection of Pre-School Provision - Follow Through)
- Whitfield Community Early Years Centre, Dundee City Council
- 19 May 2010

Jim Collins  
Director of Education

9 JULY 2010

## **Whitfield Community Early Years Centre Dundee City Council**

**19 May 2010**

We published a report on Whitfield Community Early Years Centre in April 2009. That report set out key strengths of the school and main points for action.

This follow-through report is based on an inspection visit which was carried out in March 2010. It tells you about improvements since the original inspection in the quality of education which the school provides. It also comments on how the school is getting on with the main points for action. First we focus on changes in the core work of the school. We explain how the school has got better at helping children to learn and benefit from being at the school. Next we look at the key processes which enable this to happen, including the involvement of parents<sup>1</sup>. Our report also describes developments in the 'ethos' of the school, by which we mean how well children are cared for and how much is expected of them in all aspects of school life. Finally we comment on improvements in leadership to help the school achieve its aims.

A copy of this report has been placed on the HMIE website [www.hmie.gov.uk](http://www.hmie.gov.uk). Where applicable, you will also find analyses of questionnaire returns.

### **Contents**

1. [The centre](#)
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3. [How well do children learn and achieve?](#)
4. [How well do staff work with others to support children's learning?](#)
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6. [Does the centre have high expectations of all children?](#)
7. [Does the centre have a clear sense of direction?](#)
8. [What happens next?](#)

### **1. The school**

Whitfield Community Early Years Centre serves the Whitfield area of Dundee. There have been some changes to staffing since the original inspection.

## **2. Particular strengths of the centre**

- Children who are happy and enjoying their learning.
- Improved environment for learning.
- Improved arrangements for evaluating the work of the centre.

## **3. How well do children learn and achieve?**

Children are happy and enjoy learning. They benefit from the improvements to the learning environment. They now have more suitably challenging play activities in the well organised playrooms. Children are able to make better choices about their play and to develop their interests. They are making a more appropriate rate of progress in developing early literacy and numeracy skills. They are getting better at working together in play activities. Children are now more confident and keen to plan their own learning. They regularly use their 'profile folder' to talk about what they have learned and what they want to learn next.

Staff now involve children in thinking about how they learn best. Staff and children are making better use of information and communications technology (ICT) to enrich and support learning. Staff have improved the curriculum. They are taking good account of the experiences and outcomes in *Curriculum for Excellence* when planning activities for children. Staff provide children with more relevant learning experiences. They are now more focused on developing children's literacy and numeracy skills across the curriculum. There is scope to make better use of the outdoor area for learning.

## **4. How well do staff work with others to support children's learning?**

The centre has strengthened further its partnership working with parents. Parents continue to provide strong support for the work of the centre. The centre communicates regularly with parents and provides them with a range of information. Staff make very effective use of parents' skills to lead learning in the playroom. A very successful science project extended children's knowledge of floating and sinking.

## **5. Are staff and children actively involved in improving their school community?**

The head of centre has focused well on involving children and staff in identifying and bringing about improvements to centre life. Children have helped to improve the arrangements for serving snack. The head of centre has successfully improved approaches for evaluating the quality of the centre's work. She has involved children, staff, parents and others in evaluating the work of the centre. Staff now reflect on their own practice. They are keen to improve their practice and have benefited from visiting other centres. The head of centre observes learning in the playrooms and involves staff in discussing children's progress. The staff team now monitor learning



and teaching in a planned, positive and constructive way. Staff are making good use of the information gathered to make positive changes to children's learning.

## **6. Does the centre have high expectations of all children?**

The centre now has a much stronger sense of community. Relationships between staff and children are very positive. Staff now make effective use of praise to motivate children. They have higher and more appropriate expectations of children's achievements. Most children are confident about what they can do. This is contributing to their positive attitudes and motivation for learning. They participate eagerly in play activities. Children are very well behaved. They show kindness to each other during play sessions. Staff promote children's personal and social development very well across all aspects of the centre's work.

## **7. Does the school have a clear sense of direction?**

The head of centre has provided effective leadership to bring about noticeable improvements to the quality of children's experience. The recently appointed nursery teacher and the depute use their wide range of skills well to motivate and support staff. Staff have responded positively to opportunities to take on responsibility for leading developments. The centre is now well placed to improve further.

## **8. What happens next?**

With support from the education authority, the centre has made good progress overall since the original inspection in March 2009. The centre has the capacity to continue to improve. As a result, HMIE will make no further visits in connection with this inspection.

**HM Inspector:** Marion Burns

19 May 2010

When we write reports, we use the following word scale so that our readers can see clearly what our judgments mean.

excellent	means	outstanding, sector leading
very good	means	major strengths
good	means	important strengths with some areas for improvement
satisfactory	means	strengths just outweigh weaknesses
weak	means	important weaknesses
unsatisfactory	means	major weaknesses

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## **Footnotes**

1. Throughout this report, the term ‘parents’ should be taken to include foster carers and carers who are relatives or friends

**REPORT TO:** SCRUTINY COMMITTEE - 18 AUGUST 2010  
**REPORT ON:** HMIE INSPECTION OF BALDRAGON ACADEMY  
**REPORT BY:** DIRECTOR OF EDUCATION  
**REPORT NO:** 425-2010

## **1.0 PURPOSE OF REPORT**

**1.1** The purpose of this report is to report on the findings of the HMIE Inspection of Baldragon Academy.

## **2.0 RECOMMENDATIONS**

**2.1** It is recommended that the Scrutiny Committee:

- i) notes the contents of this report; and
- ii) instructs the Director of Education to monitor progress towards meeting the areas for improvement contained in the report.

## **3.0 FINANCIAL IMPLICATIONS**

**3.1** None

## **4.0 MAIN TEXT**

**4.1** Baldragon Academy was inspected by Her Majesty's Inspectorate of Education (HMIE) in March 2010. They published a report on their findings on 1 June 2010. At the time of the inspection the roll was 615.

**4.2** HMIE identified the following key strengths of the school:

- increasingly confident young people who take pride in their school
- the benefits to young people of well-planned initiatives which help them live safer, healthier lives
- staff commitment to improving the school and the effective partnerships with other agencies to support and extend learning
- staff's teamwork and positive relationships across the school which create a welcoming environment for learning
- the work of the extended pupil support team to meet the needs of vulnerable young people and their families

**4.3** The following areas for improvement were agreed with the school and education authority:

- raise attainment and achievement
- ensure self-evaluation leads to consistently high-quality learning and teaching, building on young people's prior experiences
- further extend the curriculum to ensure appropriate progression and skills development for all young people

#### 4.4 Quality Indicators

4.4.1 HMIE reports use a six-point scale for reporting performance:

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

4.4.2 The following quality indicators from *"How Good Is Our School 3"* (HGIOS 3) were evaluated:

Quality Indicator	
Improvements in performance	Satisfactory
Learners' experiences	Good
Meeting learning needs	Good
The curriculum	Satisfactory
Improvement through self-evaluation	Satisfactory

4.5 The Baldragon Academy Improvement Plan (2009-2012) will be reviewed in order to maintain a focus on the areas for improvement identified by HMIE. These will be regularly monitored and evaluated in line with both the school and authority quality improvement calendar.

4.6 HMIE have indicated that they are confident that the school will be able to make the necessary improvements in light of the inspection findings. As a consequence, they will make no more visits to Baldragon Academy following this inspection. The school and education authority will inform parents about the progress in improving the quality of education. HMIE's District Inspector will maintain contact with the education authority to monitor improvements in learners' achievement.

#### 5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any implications in respect of sustainability, strategic environment assessment, anti-poverty and equality impact assessment and risk management.

5.2 There are no major issues.

#### 6.0 CONSULTATION

6.1 This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services) and the Director of Finance.

#### 7.0 BACKGROUND PAPERS

7.1 None.

JIM COLLINS  
Director of Education  
28 July 2010

## ***Baldragon Academy Dundee City Council***

**1 June 2010**

HM Inspectorate of Education (HMIE) inspects schools in order to let parents<sup>1</sup>, young people and the local community know whether their school provides a good education. Inspectors also discuss with school staff how they can improve the quality of education.

At the beginning of the inspection, we ask the headteacher and staff about the strengths of the school, what needs to improve, and how they know. We use the information they give us to help us plan what we are going to look at. During the inspection, we go into classes and join other activities which young people are involved in. We also gather the views of young people, parents, staff and members of the local community. We find their views very helpful and use them together with the other information we have collected to arrive at our view of the quality of education.

This report tells you what we found during the inspection and the quality of education in the school. We describe how well young people are doing, how good the school is at helping them to learn and how well it cares for them. We comment on how well staff, parents and young people work together and how they go about improving the school. We also comment on how well the school works with other groups in the community, including services which support young people. Finally, we focus on how well the school is led and how staff help the school achieve its aims.

If you would like to learn more about our inspection of the school, please visit [www.hmie.gov.uk](http://www.hmie.gov.uk). Here you can find analyses of questionnaire returns from young people, parents and staff, and details about young people's examination performance. We will not provide questionnaire analyses where the numbers of returns are so small that they could identify individuals. Where applicable there will also be a report on the learning community surrounding the school.

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7. [Does the school have a clear sense of direction?](#)

## 8. [What happens next?](#)

### 1. The school

Baldragon Academy is a non-denominational school which serves Kirkton, Downfield, St Mary's, Ardler and the surrounding areas of Dundee. The roll was 615 when the inspection was carried out in March 2010. Young people's attendance had improved slightly and was in line with the national average in 2008/2009.

### 2. Particular strengths of the school

- Increasingly confident young people who take pride in their school.
- The benefits to young people of well-planned initiatives which help them live safer, healthier lives.
- Staff commitment to improving the school and the effective partnerships with other agencies to support and extend learning.
- Staff's teamwork and positive relationships across the school which create a welcoming environment for learning.
- The work of the extended pupil support team to meet the needs of vulnerable young people and their families.

### 3. How well do young people learn and achieve?

#### Learning and achievement

Most young people are attentive, well-motivated learners. They enjoy school and feel safe and well cared for. The school is helping them to grow in confidence. Young people are respectful to each other and to staff. In most lessons, they are encouraged to share their ideas and have begun to assess their own and each other's work. Young people show enthusiasm and take responsibility for completing challenging tasks when they work together. They use computers and other technology confidently to research and present ideas well. They need to be more fully engaged in activities that encourage them to think for themselves and reach solutions. In a few departments, individual young people benefit from detailed feedback on their learning. The school should continue to extend this practice so that all young people are better informed about their strengths and development needs.

Young people experience a wide range of opportunities to achieve new skills, raise self esteem and contribute effectively to the school and community. Many are developing creative skills and achieving awards through performances and musical events. Through the *Baldragon Broadcasting Group*, a number of young people gain skills in radio production, presentation and creative digital media. Senior young people take on responsibilities and leadership as peer supporters, prefects and school captains. A few young people are increasing their understanding of environmental issues through the John Muir Award and working in the school garden. The school promotes citizenship skills well. Young people demonstrate this in their successful fundraising to support a school in Malawi and many other

charities. The school is aware of the need to ensure all young people benefit from these opportunities and achieve appropriate awards in recognition of their efforts.

By the end of S2, around half of young people achieve national levels in reading and mathematics. Less than half achieve these levels in writing. The school needs to address this. Too many young people are not making enough progress between P7 and the end of S2. By the end of S4, the school's results at all levels of Standard Grade, or equivalent, have shown improvement recently. Girls achievements at General level have improved significantly. As yet, there is no clear trend of steady improvement at S3/S4. At S4 and S5, the school's results are not as good as those in schools where young people have similar needs and backgrounds. Although results overall remain below the national average, there are promising signs of improvement. At S6, the number of young people achieving one or more awards at Higher or Advanced Higher level has increased recently. Overall, young people's attainment by the end of S6 has steadily improved in recent years. The proportion of young people who move on to Higher or further education has risen over the last three years. The proportion of school leavers entering employment is consistently high.

### **Curriculum and meeting learning needs**

The school is currently reviewing the curriculum to take account of *Curriculum for Excellence*. Staff aim to increase opportunities which maximise the potential of all young people. Recent priorities include courses in creative digital media, hospitality, business dynamics events and horticulture activities which promote important skills for work, learning and life. A few young people at S3 and S4 develop these skills through part-time placements at Dundee College. The school is currently seeking ways to extend these aspects so that more young people can benefit. However, too many young people currently follow courses which do not interest them or at levels not matched to their ability. Staff have created a range of activities which link learning across the curriculum. The S1 *Rapid Response* project, and a range of challenging, enjoyable activities for all year groups which increased learning about Africa, are good examples of this. There is a need to ensure the curriculum in S1 and S2 ensures continuity and progression in learning for all young people. Support for learning staff ensure that young people with additional support needs follow a suitably varied and stimulating curriculum. Young people's learning is enhanced through frequent educational excursions, visiting speakers and opportunities to work in teams to develop enterprise skills.

Across the school staff know young people well. They are sensitive to their social and emotional needs. Most teachers select appropriate resources and adapt lessons to meet young people's varying learning needs. The extended pupil support team works very well together in carrying out their specialist roles. They provide high-quality support which meets the needs of young people very effectively.

## **4. How well do staff work with others to support young people's learning?**

The school provides a welcoming environment for parents to engage with staff and to learn more about the school's work. Staff are helping a few parents to increase their literacy and numeracy skills. This is helping parents support their children better. Senior staff respond quickly to resolve complaints. Staff do not hesitate to involve other professionals if it helps young people. Most parents are happy with the school. A minority think the school could keep them better informed about their child's progress. A significant number of local business people and community partners support young people's learning. Hospitality students have benefitted from the expertise of a local chef in the classroom. Volunteers from *The Shore*, a

beauty therapist and local youth workers are examples of partners who contribute to young people's learning experiences. These strong partnerships ensure young people are supported to make well-informed decisions about health and wellbeing.

### **5. Are staff and young people actively involved in improving their school community?**

Staff have made a good start to improving literacy, numeracy and health and wellbeing within the context of *Curriculum for Excellence*. They are working with parents and young people to review the school's aims and values. Working in teams, staff are increasingly involved in decisions about school improvement. Most departments gather young people's views about courses. Staff need to take more account of what young people say when seeking to improve learning. The pupil council is taking the lead in working to become a "Rights Respecting School". Using a range of effective approaches, senior staff have involved all staff in identifying the school's strengths and development priorities. Agreed policies on learning and teaching and behaviour are not consistently applied by all staff. Many staff share good practice both formally and informally but more need to do so. Current approaches to monitoring and tracking young people's progress are not effective. The school has taken some steps towards improving this.

### **6. Does the school have high expectations of all young people?**

Staff are fully aware of their responsibilities for safeguarding young people. The majority of young people feel that staff deal with their bullying concerns effectively. The school continues to address this issue as part of personal and social education. Staff should continue to raise young people's aspirations by setting consistently high standards for classroom learning and homework. Some staff need to raise their expectations of what young people can do and achieve. The school has achieved an Eco-Schools Scotland silver award and a Health Promoting Schools silver award. With support from local chaplains, the school is using religious observance to celebrate and reflect on shared values and personal beliefs. Young people are increasing their understanding of issues relating to race, gender, social inequalities and global citizenship.

### **7. Does the school have a clear sense of direction?**

The headteacher has set a positive tone for the life and work of the school. Working with the deputy headteachers, he has significantly improved school relationships and established effective teamwork across staff. Staff, young people, parents and partners value his leadership. He now needs to share his strategic vision for improving the school more widely. He needs to ensure a continued shared focus on attainment and achievement and a positive, inclusive experience for all young people. Deputy headteachers need to develop consistently stronger links with principal teachers to develop a shared approach to leadership for learning. Young people would like more responsibility for school improvement. From S1, many are capable of achieving this. Across the school, there are clear indications that the school is improving and a growing sense of pride within the school community. With further involvement of parents, partners and young people, the school has the capacity to continue moving forward positively.



## 8. What happens next?

We are confident that, with support from the education authority, the school will be able to make the necessary improvements in light of the inspection findings. As a result, we will make no more visits in connection with this inspection. The school and the education authority will inform parents about the school's progress in improving the quality of education. Our District Inspector will maintain contact with the education authority to monitor improvements in learners' achievement.

We have agreed the following areas for improvement with the school and education authority.

- Raise attainment and achievement.
- Ensure self-evaluation leads to consistently high-quality learning and teaching, building on young people's prior experiences.
- Further extend the curriculum to ensure appropriate progression and skills development for all young people.

Quality indicators help schools, education authorities and inspectors to judge what is good and what needs to be improved in the work of the school. You can find these quality indicators in the HMIE publication *How good is our school?*. Following the inspection of each school, the Scottish Government gathers evaluations of three important quality indicators to keep track of how well all Scottish schools are doing.

Here are the evaluations for Baldragon Academy.

<b>Improvements in performance</b>	<b>satisfactory</b>
<b>Learners' experiences</b>	<b>good</b>
<b>Meeting learning needs</b>	<b>good</b>

We also evaluated the following aspects of the work of the school.

<b>The curriculum</b>	<b>satisfactory</b>
<b>Improvement through self-evaluation</b>	<b>satisfactory</b>

**HM Inspector:** Patricia Watson  
1 June 2010

When we write reports, we use the following word scale so that our readers can see clearly what our judgments mean.

excellent	means	outstanding, sector leading
very good	means	major strengths

good	means	important strengths with some areas for improvement
satisfactory	means	strengths just outweigh weaknesses
weak	means	important weaknesses
unsatisfactory	means	major weaknesses

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## Footnotes

1. Throughout this report, the term 'parents' should be taken to include foster carers, residential care staff and carers who are relatives or friends.

**REPORT TO:** SCRUTINY COMMITTEE - 18 AUGUST 2010

**REPORT ON:** HMle INSPECTION OF THE LEARNING COMMUNITY SURROUNDING  
BALDRAGON ACADEMY

**REPORT BY:** HEAD OF COMMUNITY LEARNING AND DEVELOPMENT, LEISURE  
AND COMMUNITIES DEPARTMENT

**REPORT NO:** 323-2010

## **1.0 PURPOSE OF REPORT**

1.1 The purpose of this report is to report the findings of the HMle Inspection of the learning community surrounding Baldragon Academy.

## **2.0 RECOMMENDATIONS**

It is recommended that the Scrutiny Committee:

2.1 notes the contents of this report.

2.2 instructs the Head of Community Learning and Development to monitor progress towards meeting the areas of improvement contained in the report.

## **3.0 FINANCIAL IMPLICATIONS**

3.1 None.

## **4.0 MAIN TEXT**

4.1 The learning community surrounding Baldragon Academy, including the areas of St Mary's, Ardler, Kirkton, Downfield, the Dales and Brackens was inspected by Her Majesty's Inspectorate of Education (HMle) in March 2010. They published a report on their findings on 1 June 2010.

4.2 HMle identified the following key strengths of the learning community:

- Skilled, active and influential community groups
- Effective partnership working
- The commitment and skills of local volunteers
- Effective use of national and local awards for groups

4.3 The following areas for improvement were agreed with the education authority and partners:

- Further develop accreditation to recognise achievements for young people and adults.
- Involve young people in local decision-making and community organisations.
- Develop individual learning plans for young people involved in appropriate aspects of youth work.
- Draw on the skills and knowledge of existing volunteers to develop the involvement of others.

## **4.4 Quality Indicators**

4.4.1 HMle reports use a six point scale for reporting performance:

Excellent	Outstanding, sector leading
Very Good	Major strengths
Good	Important strengths with some areas for improvement
Satisfactory	Strengths just outweigh weaknesses
Weak	Important weaknesses
Unsatisfactory	Major weaknesses

4.4.2 The following quality indicators from "How Good is our Community Learning and Development 2" were evaluated:

Improvements in Performance	Good
Impact on Young People	Good
Impact on Adults	Very Good
Impact of Capacity Building on Communities	Very Good
Improving Services	Good

4.5 The Community Learning and Development Service Improvement Plan 2010-2012 includes a focus on the areas for improvement. These will be regularly reviewed, monitored and evaluated on an ongoing basis.

4.6 HMLE have indicated that CLD providers have a good understanding of their strengths and areas for improvement and that communities are achieving very well. As a result there will be no follow up by the HMLE and the inspection process has ended at this stage.

**5.0 POLICY IMPLICATIONS**

5.1 This report has been screened for any implications in respect of sustainability, strategic environment assessment, anti-poverty and equality impact assessment and risk management.

There are no major issues.

**6.0 CONSULTATION**

6.1 This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services) and the Director of Finance.

**7.0 BACKGROUND PAPERS**

7.1 None

**NEIL GUNN  
HEAD OF COMMUNITY LEARNING & DEVELOPMENT  
LEISURE AND COMMUNITIES DEPARTMENT  
DATE**

**Learning Community Inspection  
Inspection of the Learning Community Surrounding Baldragon Academy**

**Dundee City Council**

**1 June 2010**

**A report by HM Inspectorate of Education**

We inspect learning communities in order to let those who use services and the local community know whether learning communities provide appropriate learning opportunities and help learners in their development. We are also interested in how community and voluntary groups are helped to contribute to making communities better places to live and work. At the end of inspections, we agree ways in which staff and volunteers can improve the quality of learning for young people and adults and how the impact of community and voluntary groups can be further developed.

At the beginning of the inspection, we ask managers and staff about the strengths of the learning community, what needs to improve, and how they know. We use the information they give us to help us plan what we are going to look at. During the inspection, we join other activities which young people, adults and community groups are involved in. We also gather the views of learners, active community members and staff. We find their views very helpful and use them together with the other information we have collected to arrive at our view of the quality of provision locally.

This report tells you what we found during the inspection and the quality of learning and development provided. We describe how well learners are doing and how good the learning community is at helping them to learn. We comment on how well staff, learners and groups work together and the difference they are making in the learning community. Finally, we focus on how well the learning community is led and how leaders help the learning community achieve its aims.

If you would like to learn more about our inspection of the learning community, please visit [www.hmie.gov.uk](http://www.hmie.gov.uk).

## **Contents**

1. [The learning community](#)
2. [Particular strengths of the learning community](#)
3. [How well do participants learn and achieve?](#)
4. [How well are communities developing and achieving?](#)
5. [How effective are providers in improving the quality of services?](#)
6. [Does the learning community have a clear sense of direction?](#)
7. [What happens next?](#)

### **1. The learning community**

The learning community surrounding Baldragon Academy includes the areas of St. Mary's, Ardler, Kirkton, Downfield, The Dales and Brackens. The areas of St. Mary's, Ardler and Kirkton are designated community regeneration areas. The area has a population of 18,641, with the number of workless people higher than the Scottish average but marginally lower than that for Dundee City.

## 2. Particular strengths of the learning community

- Skilled, active and influential community groups.
- Effective partnership working.
- The commitment and skills of local volunteers.
- Effective use of national and local awards for local groups.

## 3. How well do participants learn and achieve?

The quality of provision is high and almost all learners benefit. Externally funded projects have accreditation opportunities built into programmes with high numbers of young people having received accreditation through Youth Achievement Awards and Dynamic Youth Awards. Young people are involved in achievement awards in local settings but these opportunities need to be extended. Local community groups have been successful in gaining national and local awards including Scotland in Bloom and volunteering awards. The community learning and development (CLD) service, and partners in community planning, are collating a range of performance information and are using it to inform and drive improvement. The number of adult learners is exceeding targets set in most services. The CLD service is increasingly making use of data to systematically identify and address need. They are establishing baseline information to measure improvement and inform future planning. Community Planning Partnerships access a range of performance information including the Community Intelligence Gathering system which is demonstrating trends over time for their work.

### Young people

Young people benefit from a good range of learning opportunities and facilities in the learning community including sports, arts, intensive support and drop-in. Effective communication between partners enables early identification and targeting of young people to access services. Externally funded youth work provision supports vulnerable and disengaged young people to set goals and achieve, maintaining their participation in education or accessing skills for work. As a result, young people successfully remain in school, maintain relationships with peers, parents and partner agencies and modify their behaviour choices.

High numbers of young people are learning and achieving through Youth Achievement Awards, Dynamic Youth Awards, and Millennium Volunteer Awards. They are particularly effective in *Xplore* and the Peer Mentoring Training. Young people are better able to communicate with teachers and parents, and to identify their needs and feelings as a result of this experience. The use of accreditation needs to be promoted more consistently within community based youth work. Access to locally based youth literacies provision and the use of individual learning plans also needs to be improved.

Youth information is effectively promoted and distributed through partnership working, themed drop-ins and consultation with young people. *The Corner* and outreach work are raising young peoples' awareness of sensitive issues to inform choices and support healthy lifestyles. Web-based information on projects and events are available in almost all youth settings, improving access to information for young people.

The voice of young people is listened to well through consultations. The Local Community Planning Partnership (LCPP) regularly consults young people on local issues including the St Mary's Play Park, the site of the Cox Street benches and the Youth Alcohol Consultation.

However, young people have few opportunities for active participation locally in youth forums or youth action groups. Young people who have gained skills through projects, including leadership skills and peer mentoring have limited opportunities to further develop or share their knowledge locally. CLD staff and partners now need to work with young people to support them to effectively contribute to their local community.

## Adults

A broad adult learning programme supports adults to achieve a range of goals and is expanding their interests and skills. Adult literacy and numeracy (ALN) and English for speakers of other languages (ESOL) are offered through a one door service provided by *The Adult Learning Gateway*. *Job Choices* is supporting adults in the learning community to pursue positive routes to employment and programmes including *Speak Easy*, offered through the *Community Family Support Project*. Parents are gaining the information and confidence to discuss sexual health issues with their children. Participants in Dundee's *Healthy Living Initiative* Ardler Ladies Jogging Group are improving their physical and mental wellbeing. They are learning skills that support employment and community activity. Ten participants have completed training to become jog leaders and are actively expanding participation in the group.

Learners value the support of staff and appreciate the opportunities provided. Participants across programmes are demonstrating the improvements being made in their personal, family and working lives. A growth in confidence, reduction in social isolation and increase in skills development is experienced by learners across all programmes. Guidance is available to all participants and effective partnership working provides a range of entry points and progression routes. A few learners have progressed to college, university or employment. Learners are successfully involved in the planning of provision and can see the difference their views have made across most programmes.

A quarterly adult learning newsletter 'Discover Learning in the Community', reports learner achievements and other news. Learners report that this helps them to get involved in learning. It is increasing the range of programmes available and the involvement of learners referred by other agencies. Learners are becoming more active in their community and there is scope to strengthen the links between adult learning and capacity building. There is a need to better target provision to increase the range and take up of learning opportunities.

### 4. How well are communities developing and achieving?

Community members are active, informed and influential within their learning community. Confident, knowledgeable local people are effectively engaged in decision making at local and city level. The Regeneration Forum has 15 local representatives participating in the allocation and monitoring of devolved funding for the environment, young people and a small projects fund. On the LCPP, community representation has doubled as a result of the first year review. Representatives are informed, enthusiastic and clear about the impacts of their work. These include the site of waste recycling bins, regular housing walkabouts with local people. The LCPP accesses a wide range of information from partners, including police and housing, to support decision making. Although the LCPP regularly consults local young people there are insufficient local structures in place to enable them to contribute well and actively participate. Partners, including young people, now need to enhance their skills and knowledge to ensure effective involvement.

Skilled, confident and very active community group members are well supported by community learning partners to deliver a variety of services through community managed groups. St Mary's Community Facility Management Group successfully campaigned for a local community facility which was opened in November 2008. The centre is managed and run by volunteers who are confident in their roles and clear about their responsibilities. All volunteers have completed training including food hygiene and child protection. The group recently won a Volunteer Friendly Award. The centre provides local people with access to a range of services within their community. The programme, delivered through a range of partners includes adult learning, health focused activities and anti-poverty services including money and legal advice. The Credit Union also has a base in the centre. Ardler Environmental Group was established by local people to improve the environment beyond their gardens. All members have gained important skills, including team working, and extended their knowledge of environmental issues. The group was part of *Demonstrating the Links* in 2006 looking at the quality of green space in Ardler. They regularly report progress to the LCPP. They share expertise within the group and regularly meet with similar groups in the city and across Scotland. They have received awards including Beautiful Scotland in Bloom silver award 2009 and the Queen's Silver Jubilee Award for voluntary service.

## 5. How effective are providers in improving the quality of services?

The CLD service has planning processes in place with clear outcomes linked to the Dundee City Plan and the local community planning framework. Through the LCPP, partners plan and regularly monitor the progress and impact of their work. Partners in the area are committed to providing high quality services. They use a wide range of evaluative tools, some of which focus on outcomes and impact of services. The use of tools like 'Catching Confidence' and 'Light Bulb Moments' are supporting learners' to recognise their progression in creative ways. External research such as the evaluation of the *Peer Education Project* is used well to establish impact.

The CLD service undertakes self-evaluation across all provision, but there is a need to ensure that understanding and implementation is consistent with all staff. Partners need to continue to work together to further develop their capacity to evaluate their combined impact.

Partners make use of a range of effective reporting mechanisms to report progress and community projects and groups regularly report on progress through newsletters.

## 6. Does the learning community have a clear sense of direction?

Partners are purposeful, committed and work effectively together. Across the learning community, there is a shared vision. Confident, knowledgeable local people effectively engage in decision making at local and city level. There is a commitment locally to share knowledge and intelligence more effectively in order to improve services. CLD and local schools recognise the need to work more closely together to ensure the highest impacts for young people and communities. Consideration needs to be given to the creative, collective use of community resources, such as the radio studio, to continue to meet the needs of the learning community.

## 7. What happens next?

The inspection team was able to rely on the high quality self-evaluation provided in the learning community. As a result, inspectors were able to change their focus during the inspection to support further improvements within the learning community.

CLD providers have a good understanding of their strengths and areas for improvement and communities are achieving very well. As a result we have ended the inspection process at this stage.

We have agreed the following areas for improvement with the education authority and its partners.

- Further develop accreditation to recognise achievements for young people and adults.
- Involve young people in local decision making and community organisations.
- Develop Individual Learning Plans for young people involved in appropriate aspects of youth work.
- Draw on the skills and knowledge of existing volunteers to develop involvement of others.

Quality indicators help CLD providers and inspectors to judge what is good and what needs to be improved in the work of the learning community. You can find these quality indicators in the HMIE publication "*How good is our community learning and development? 2*".

HMIE checks five important quality indicators to keep track of how well all Scottish CLD provision is doing. Here are the results for the learning community surrounding Baldrigon Academy.



<b>Improvements in performance</b>	<b>good</b>
<b>Impact on young people</b>	<b>good</b>
<b>Impact on adults</b>	<b>very good</b>
<b>Impact of capacity building on communities</b>	<b>very good</b>
<b>Improving services</b>	<b>good</b>

**Managing Inspector:** Ros Sutherland  
1 June 2010

This report uses the following word scale to make clear judgements made by inspectors.

excellent	means	outstanding, sector leading
very good	means	major strengths
good	means	important strengths with some areas for improvement
satisfactory	means	strengths just outweigh weaknesses
weak	means	important weaknesses
unsatisfactory	means	major weaknesses

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**REPORT TO:** SCRUTINY COMMITTEE - 18 AUGUST 2010

**REPORT ON:** SUMMARY OF EXTERNAL INSPECTION REPORTS FOR WHICH GRADES ARE GOOD OR BETTER

**REPORT BY:** CHIEF EXECUTIVE

**REPORT NO:** 394-2010

**1. PURPOSE OF REPORT**

To provide a summary of recent inspection reports by the Care Commission which do not require in-depth scrutiny.

**2. RECOMMENDATIONS**

It is recommended that members:

- (i) note the attached summaries of recent external inspection reports, all of which received grades of good or better in all areas covered by the inspection
- (ii) remit the Director of Social Work to ensure that the Areas for Improvement and Recommendations included in each report are acted upon, both in relation to the service inspected and as guidance on good practice for other services

**3. FINANCIAL IMPLICATIONS**

None

**4. MAIN TEXT**

- 4.1 The remit of the Scrutiny Committee states that, where the grades awarded in external inspection reports from the Care Commission or HMIE are all good or better, and the reports would not benefit from in-depth scrutiny, summary scores from the inspections will be reported together with any best practice to improve performance.
- 4.2 Summaries of recent inspection reports by the Care Commission which fall into this category are attached, and the Committee is asked to note these and to remit the Director of Social Work to ensure that the Areas for Improvement and Recommendations in each report are acted upon.
- 4.3 Copies of the inspection reports have been passed to group leaders, the Lord Provost and Depute Lord Provost.

**5. POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

**6. CONSULTATIONS**

The Depute Chief Executive (Support Services), Assistant Chief Executive and Directors of Finance and Social Work were consulted on this report.

7. **BACKGROUND PAPERS**

David Dorward  
Chief Executive

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12/08/2010

Inspection of: **THE JUNCTION  
CARE HOME SERVICE CHILDREN AND YOUNG PEOPLE**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		July 2009	March 2009	August 2008
Quality of Care and Support	VERY GOOD	VERY GOOD	NOT ASSESSED	GOOD
Quality of Environment	NOT ASSESSED	VERY GOOD	GOOD	GOOD
Quality of Staffing	VERY GOOD	VERY GOOD	GOOD	GOOD
Quality of Management and Leadership	NOT ASSESSED	GOOD	NOT ASSESSED	GOOD

Areas for Improvement:

- **Continue to develop and evaluate the effectiveness of the ways that young people are involved in assessing and improving the quality of care and support**

Specific Recommendations

- **Develop a system to evaluate the impact of training and staff development on the quality of staff practice and outcomes for young people - Social Work confirm that the system will include monitoring and reviewing by the Manager through regular supervision sessions and wider staff group supervision. Records of Achievement will also be kept in young peoples' files, evidencing impact on their social and emotional development. Regular case file audits will take place, allowing the Manager to scrutinise files to evaluate the quality of recordings and assessments from a child development perspective.**

Inspection of: **CRAIGIE HOUSE  
CARE HOME SERVICE ADULTS**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		August 2009	January 2009	September 2008
Quality of Care and Support	GOOD	GOOD	NOT ASSESSED	VERY GOOD
Quality of Environment	NOT ASSESSED	VERY GOOD	NOT ASSESSED	VERY GOOD
Quality of Staffing	GOOD	GOOD	NOT ASSESSED	VERY GOOD
Quality of Management and Leadership	NOT ASSESSED	VERY GOOD	VERY GOOD	GOOD

Areas for Improvement:

- **Aim to improve on very good practice**
- **Improve practice in recording restraint - always record whether intervention provides a benefit that cannot otherwise be achieved and is the least restrictive to achieve this desired benefit, and record the past and present wishes of residents and views of relevant others**
- **Use best practice guidance to develop falls prevention procedures and falls risk assessments**
- **Link the use of social services values to evaluation of staff practice at induction**

Specific Recommendations

**None**

Inspection of: **OAKLAND CENTRE  
SUPPORT SERVICE WITHOUT CARE AT HOME**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History
		October 2008
Quality of Care and Support	EXCELLENT	EXCELLENT
Quality of Environment	NOT ASSESSED	EXCELLENT
Quality of Staffing	VERY GOOD	VERY GOOD
Quality of Management and Leadership	NOT ASSESSED	VERY GOOD

Areas for Improvement:

- **Appeared to be less involvement of service users than last year in the self assessment process - Manager felt this was possibly due to increased dependency of current client group**
- **Survey questionnaires should detail the date on which views were gathered, to ensure information is current and valid**
- **Opportunities for service users and carers to be more involved in the recruitment process should be further explored**
- **Consider obtaining enhanced disclosure checks for ancillary staff**
- **Improve consistency in evidencing staff skills**
- **Identification information such as utility bills and passport information had been unnecessarily retained in staff files**

Specific Recommendations

- **Follow formal application process for each period of employment - Social Work say they will keep copies of all records of recruitment process on site in individual's files. Overall procedure is being reviewed at a corporate level.**
- **Audit procedures for recording of staff skills and qualifications - Social Work say they will evidence that they have looked at staff skills when staff are transferred within the organisation, and that the overall procedure is being reviewed at a corporate level**

Inspection of: **MACKINNON CENTRE  
CARE HOME SERVICE ADULTS**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		September 2009	December 2008	May 2008
Quality of Care and Support	VERY GOOD	GOOD	VERY GOOD	VERY GOOD
Quality of Environment	NOT ASSESSED	VERY GOOD	VERY GOOD	VERY GOOD
Quality of Staffing	VERY GOOD	GOOD	VERY GOOD	VERY GOOD
Quality of Management and Leadership	NOT ASSESSED	VERY GOOD	VERY GOOD	VERY GOOD

Areas for Improvement:

- **Continue to build on very good practice.**
- **Keep a brief minute of reviews to record the views of service users about the quality of the service and any changes to their personal plan as a result of their review meeting**
- **Evidence more examples of improvement to staffing made in response to feedback from service users and carers**

Specific Recommendations

- **Induction and ongoing assessment of staff competence should evidence and evaluate all essential core practice and use of social services values - Social Work advise that, to complement the service's two-day induction, and completion of individual's mandatory training, the individual has units of induction to study locally. Each unit then has questions the individual must complete. Added to this is the core care training. All staff also have training reviewed at supervision meeting with line manager. Any other training is authorised at this time and documented in training record/staff file.**

Inspection of: **JANET BROUGHAM HOUSE  
CARE HOME SERVICE ADULTS**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		September 2009	March 2009	June 2008
Quality of Care and Support	VERY GOOD	VERY GOOD	VERY GOOD	GOOD
Quality of Environment	NOT ASSESSED	VERY GOOD	VERY GOOD	GOOD
Quality of Staffing	GOOD	GOOD	GOOD	GOOD
Quality of Management and Leadership	NOT ASSESSED	GOOD	GOOD	GOOD

Areas for Improvement:

- **Aim to improve on very good practice**
- **Use best practice guidance to develop falls prevention procedures and falls risk assessments**

Specific Recommendations

**None**



Inspection of: **GILLBURN ROAD RESIDENTIAL RESPITE UNIT  
CARE HOME SERVICE CHILDREN AND YOUNG PEOPLE**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		June 2009	January 2009	September 2008
Quality of Care and Support	VERY GOOD	VERY GOOD	NOT ASSESSED	GOOD
Quality of Environment	NOT ASSESSED	VERY GOOD	GOOD	GOOD
Quality of Staffing	VERY GOOD	VERY GOOD	NOT ASSESSED	GOOD
Quality of Management and Leadership	NOT ASSESSED	VERY GOOD	GOOD	GOOD

Areas for Improvement:

- **Continue to review and develop the way in which children and their parents and carers are involved in assessing and improving the quality of the service**
- **One person had only just completed training on safe food handling after more than a year in the job**

Specific Recommendations

- **Review timing of core training to ensure that staff receive essential training at an appropriate point in their employment - Social Work aim to provide core training at the appropriate point in each member of the team's employment but acknowledge it is more difficult to achieve within the target timescale in relation to part-time workers. Work by the Manager is ongoing.**

Inspection of: **FAIRBAIRN STREET YOUNG PEOPLE'S UNIT  
CARE HOME SERVICE CHILDREN AND YOUNG PEOPLE**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		June 2009	January 2009	July 2008
Quality of Care and Support	VERY GOOD	VERY GOOD	NOT ASSESSED	VERY GOOD
Quality of Environment	NOT ASSESSED	VERY GOOD	NOT ASSESSED	VERY GOOD
Quality of Staffing	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD
Quality of Management and Leadership	NOT ASSESSED	VERY GOOD	GOOD	GOOD

Areas for Improvement:

- **Continue to develop the use of evaluation forms to gather views of the service over time**

Specific Recommendations

- **None**

Inspection of: **ELMGROVE HOUSE  
CARE HOME SERVICE ADULTS**

Inspection by: **CARE COMMISSION**

Grades:

Theme	Latest Grade Awarded	Grading History		
		September 2009	March 2009	September 2008
Quality of Care and Support	VERY GOOD	VERY GOOD	GOOD	GOOD
Quality of Environment	NOT ASSESSED	GOOD	GOOD	ADEQUATE
Quality of Staffing	GOOD	GOOD	GOOD	GOOD
Quality of Management and Leadership	NOT ASSESSED	GOOD	GOOD	GOOD

Areas for Improvement:

- **Aim to improve on very good practice**
- **Evidence improvements or changes made to quality of staffing as a result of relatives' and representatives' feedback**
- **Show relatives and representatives how the service met its staffing schedule each day**

Specific Recommendations

- **Induction and ongoing assessment of staff competence should be evidence-based and evaluate a wider range of day-to-day practice - Social Work confirm that an evidence-based process which covers a wider range of activities will be developed.**

**REPORT TO: SCRUTINY COMMITTEE - 18 AUGUST 2010**

**REPORT ON: BEST VALUE REVIEW PROGRAMME**

**REPORT BY: ASSISTANT CHIEF EXECUTIVE**

**REPORT NO: 387-2010**

## **1. PURPOSE OF REPORT**

To report on progress with the programme of best value reviews and to provide information on the wide range of additional officer-led review activity which was included in the Council Plan and departmental Service Plans 2007-11.

## **2. RECOMMENDATIONS**

It is recommended that members:

- (i) note progress on the various elements of the best value review programme as set out in sections 4.2 to 4.6 below
- (ii) note progress on the officer-led review activity included in the Council Plan and departmental Service Plans 2007-2011, which is summarised in section 4.7 below and detailed in Appendix 1
- (iii) remit chief officers to ensure that any review activity not yet completed will be taken forward into new plans
- (iv) note that the Policy and Resources Committee, in April 2010, approved a Corporate Improvement Programme which includes the programme of best value reviews for 2010/11 to 2013/14, progress on which will be reported to this Committee in due course

## **3. FINANCIAL IMPLICATIONS**

None.

## **4. MAIN TEXT**

### **4.1 Best Value Review Programme**

This report provides an update on the following elements of the Council's Best Value Review programme:

- the final review from the programme agreed by the Policy and Resources Committee in October 2007, which had still to be completed at the time of last year's progress report:
  - Car Parking in Residential Areas
- reviews identified through the Efficiency Diagnostic Study, and agreed by the Policy and Resources Committee in December 2008, on the following topics:-
  - Fleet Maintenance
  - Mobile and Flexible Working
- best value reviews agreed since June 2009 on the following topics:

- Child Protection
  - Educational Attainment
  - Housing
- lean service reviews, agreed by the Policy and Resources Committee in December 2008, on the following topics:
    - Environmental Health Food Hygiene
    - Libraries
    - School Admin Functions
    - Procurement Processing
    - Leisure and Communities Administration Team
    - Environmental Health Pest Control
  - additional lean service reviews which have been undertaken in response to issues identified by departments as officers are trained in the lean service approach:
    - Car Parking Appeals
    - Housing Relets
    - Payroll
    - Architects
    - Revenues
    - Housing Advice and Information
    - Customer Services
    - Welfare Rights Duty Advice Line
  - review activity included in the Council Plan and departmental Service Plans 2007-2011 (also including new reviews added when the Service Plans were updated in 2009)

## 4.2 Reviews from the 2007/08 Programme

4.2.1 Car Parking in Residential Areas - this review considered the issues affecting car parking in housing estates, where increased car ownership means that demand for parking spaces exceeds supply and cars are parked on pavements, grass verges etc. The review group concluded that there were possible solutions to the provision of additional parking in these areas, but that a pilot was required to establish viability, and it is anticipated that a report will be submitted to Policy and Resources Committee in August seeking approval for such a pilot scheme.

## 4.3 Reviews Identified Through the Efficiency Diagnostic Study

4.3.1 Fleet Maintenance - the report on this review was approved by the Improvement and Efficiency Sub-Committee in March 2010. It was agreed that the Council should introduce a corporate approach to the management and maintenance of its fleet of vehicles; that a working group should plan and oversee its implementation, including the rationalisation of workshop facilities; that suitable control software should be installed; that procedures should be established for dispersion of fuel purchased by the Council; that a detailed review of transportation requirements should be undertaken to optimise vehicle utilisation; and that the Council should participate in a joint review of fleet management arrangements with neighbouring local authorities.

4.3.2 Mobile and Flexible Working - the report on this review was approved by the Improvement and Efficiency Sub-Committee in March 2010. The report recommended work-style change as an efficiency opportunity for the Council, and included detailed proposals for taking this forward. Scope for mobile and flexible working is being taken into account in planning the number and type of workstations required at Dundee House, and the wider issue is being taken forward as part of the Corporate Improvement Programme approved by the Policy and Resources Committee in April 2010.

#### 4.4 Best Value Reviews Agreed Since June 2009

- 4.4.1 Child Protection - a review to consider the future development, delivery, evaluation and monitoring of child protection services in Dundee was established following the outcome of the Joint Inspection of Services to Protect Children and Young People by HMle. The review group will continue to meet during 2010.
- 4.4.2 Educational Attainment - Education Committee agreed in May 2010 that the Best Value Review Group on Educational Attainment should be re-established as the Education Review Group, with new terms of reference and a revised membership. The group will provide an opportunity for members to comment on progress in a range of areas of the Education Department's work; receive presentations on educational developments; influence departmental thinking; and take part in discussion on areas of common interest.
- 4.4.3 Housing - following the report on the Housing Department's inspection by the Scottish Housing Regulator, a Best Value Review Group was established to oversee the development and implementation of an Improvement Plan to address the Regulator's recommendations. The Review Group meets every 2 months and, in addition to reviewing progress on the Improvement Plan, has a programme of presentations and discussions on key service areas. Topics scheduled for the next few meetings include lettings, estate supervision, repairs and homelessness. A report on progress with the Improvement Plan was approved by the Housing, DCS and Environment Services Committee in June 2010.

#### 4.5 First Phase of Lean Service Reviews

- 4.5.1 Environmental Health: Food Hygiene - the impact of this review has been to move more resources to the fundamental purpose of reducing non-compliant premises, by making the process of routine inspection of all premises more efficient and more proportionate to risk. The number of category A premises (non compliant) has reduced by 21% and the number of hygiene improvement notices has increased by 20%. An instant tear-off report provided in the premises being inspected has been introduced, saving process steps and speeding up the servicing of improvement notices from an average of 8.1 days to less than an hour. Copy hygiene reports to corporate clients are now transferred electronically, saving paper and time. Service requests are being resolved more quickly, with average completion time improved from 10.3 days to 3.4 days.
- 4.5.2 Libraries - a high level demand was from members of the public who required staff to log them on to PCs. A system of self log-ins is being introduced which will save staff time and provide a quicker service. Arrangements for purchase of books have been reviewed. Changing the supply method has reduced order-to-delivery time by about 2 weeks, and purchase costs have been reduced on average by £2.60 per book. Arrangements for cataloguing books have eliminated duplication. Self-issue terminals for booking out books are being piloted in two branch libraries. A plan to change opening hours to reflect footfall patterns has been devised.
- 4.5.3 School Admin Functions - the focus of this review was to identify opportunities to transfer non-teaching duties away from teaching staff. Concentrating on Craigie High, where a Business Manager had recently been appointed, a number of initiatives to remove non-value activities from the Admin Team meant that about 10% of the capacity of team was released to take up other duties. Services to pupils and their parents/guardians have been improved, delivering a better image of the school. For example, the group call arrangement for non attendance has been speeded up and become more accurate, reducing follow up queries by 75%. As the admin team now have the capacity to become involved in other activities, they are taking work from teaching staff, mainly principal teachers, such as the administration of "late detentions" and dealing with queries which would previously have been referred to teaching staff, taking up their time and disrupting classes. There has also

been a significant reduction in referrals to the Schools Community Support Service arising from improvements made in handling and resolving absences.

- 4.5.4 Procurement Processing - there have been a number of improvements in practices, some of which result from e-procurement and the corporate procurement strategy, while others result from the Lean Service Review. The fact that these have been going on at the same time, and have been complementary, has enhanced the benefits. The process from realising that something is needed, to having it in stock and paid for, would typically have involved 35 steps and is being reduced to 13 steps. In one department, the timeframe from knowing something is needed to placing the order was typically 11 days, but could be as much as 23 days, and this has now been reduced to less than one day. There have been dramatic reductions in order time, reduced process time, reduced direct cost, access to collaborative contracts, and enhanced management controls with more accurate monitoring data. A roll-out programme has been agreed.
- 4.5.5 Leisure and Communities Administration Team - the review resulted in a restructuring of the Central Administration Team, a reduction in numbers by 2, a transfer of post to the Finance Department to undertake payroll and a new post of Staffing Officer. This post will work very closely with the Personnel Department to undertake staffing issues within Leisure and Communities. There has been a series of briefings undertaken regarding the filling of forms required for Resourcelink and other functions of the Central Administration Team, to improve the amount of miscoding etc that results in wasted time.
- 4.5.6 Environmental Health: Pest Control - measures taken reduced failure demand on the service from 17% to 5% and reduced the recording of incomplete/incorrect information about jobs from 60% to 25%. Incorporating the Corporate Address Gazateer will eliminate this completely. Attendance at wrong addresses has been eliminated. Closure time on informal Public Health Nuisance Complaints has been reduced from an average of 24.5 days to 5.9 days. Changes to collection methods, made in co-operation with Waste Management in problem areas of the city, have significantly improved the compliance by the customer in waste presentation, enhancing the appearance of these areas and improving the health and wellbeing of citizens.
- 4.6 Additional Lean Service Reviews in response to issues raised by departments
- 4.6.1 Car Parking Appeals - the backlog in handling appeals against parking tickets which was causing a 14 week (and growing) delay has been completely eliminated, reducing significantly the amount of progress chasing by customers. There is a 70% reduction in cases for the Appeals Panel, which now has a 50% reduction in the number of meetings required. Further experiments planned are evaluating the impact of equipment purchased in-house to repair quickly small areas of signs and lines damaged; scanning of mail to make electronic transfer and access to information faster; introducing cash receipting and telephone automatic payment line; and training for staff on conflict management. An option appraisal is being carried out on the best value between using the Sheriff Officers or the in-house debt management team. Plain English is being applied to customer information on parking charge notices. A planned request for additional staff has now been considered unnecessary.
- 4.6.2 Housing Relets - the relet process took too long and a factor was the poor standard of accommodation offered. There were 3.7 offers per let. The aims were to reduce the time taken to let the house, improve the quality of the house offered and reduce the number of offers per house. A series of experiments have taken place over the past year and are being evaluated. These include more accurate information about the prospective tenant at the first point of contact, reducing the time taken to repair houses and experimenting with the Council redecorating the house to a higher standard instead of relying on redecoration allowances to tenants. Movement of keys took up a significant amount of time and a new system is being introduced to install locks on houses as they become vacant that can be operated by a master key available to the relevant staff. It is hoped that, over the long

term, the decoration programme will improve the quality of homes being offered and the next phase of the review will look at how this will reduce the number of offers per let. Further work will involve getting a closer match between the top ten tenants in the allocation system to the house that has become available. Outcomes of all the experiments will be reported to the Best Value Review Group.

- 4.6.3 Payroll - the Payroll Section processes pay and employment details of over 4,000 employees (excluding Education). Problems included consistently missing the deadlines for processing pay set by the IT system and a staff turnover of 60% caused by the high stress environment. It was noted that the failure demand was caused in the main by an error rate in data submitted by departments. 12% of staff time is spent chasing errors at a critical stage in the process and this is replicated in departmental payroll teams. Two experiments are proposed to make departments responsible for the quality of data (to be measured by clean data received centrally) and piloting local input by departmental staff. The main principle being pursued is that the quality of the data should be owned by departmental managers, and should be right first time. Further innovations are being pursued that will reduce the paperwork and steps in the process. These include an electronic signing off process for noting absence and return to work, e-payslips instead of paper and self-service by employees on maintaining data in the resourcelink system such as next of kin, change of address etc.
- 4.6.4 Architects - this review focussed on two issues. Firstly, an increase of 550 hours travel time by using the bus to travel to site compared to taxis. Secondly, that 70% of the Division's work comes through the GVA process and this required 24 more steps than the standard process used when clients contact Architectural Services directly. The project is concentrating on exploring cost-effective means of getting staff to sites apart from re-introducing contract taxis, and how Architectural Services engage with customers and other departments to find ways to streamline the GVA system.
- 4.6.5 Revenues - in the year prior to the review, there were 74,209 contacts at the enquiry office. Revenues noted 22% failure demand at the reception point which deals with 25,000 of the total enquiries to the office. Immediate action was taken to deal with the issuing of unnecessary tickets for customers to queue and this had the immediate effect of reducing failure demand to 14%. It is anticipated that this will reduce further by increasing the skills available at the reception over lunchtime and by converting the mail member of staff to a skilled member. It was noted that the remaining 10% of failure demand is a result of customers seeking other Council services not available at City Square. A number of experiments are being devised to streamline processes.
- 4.6.6 Housing Advice and Information - in year prior to the review, they had 14,099 contacts and this service has now transferred to the customer services team in Tayside House. It deals with four housing services: letting/homeless, rent recovery, housing repairs and anti social complaints. 70% of the contacts are related to rent recovery and lettings/ homelessness and the level of failure demand was 84% and 41% respectively. The main reason for this is that staff can give information and advice about the application forms but cannot actually process them, as this can only be done at the lettings/Lily Walker centre. The staff do not have access to the relevant information to verify medical/homeless status. To reduce this failure demand, a genuine 'first point of contact' service needs to be designed. The team will investigate the feasibility of inputting data at the first point of contact and providing front line staff with access to more and relevant information. With respect to rent recovery, the main issue concerned customers being confused about the contact details for dealing with rent arrears. The team will work with the Rent Recovery Section to clarify and improve customer communications.
- 4.6.7 Customer Services - the annual number of contacts to customer services on Floor 2 was 529,168. This included 439,779 to the switchboard and 53,599 face to face contacts. Investigation revealed 39% failure demand in the contacts made by the public. One of the main causes is that the majority of services at the contact centre are still not 'first contact' in



design and frequently require the customer to make repeat visits, having completed a form or brought in 'proof of entitlement' documentation. In services looked at in detail, the length of time for service provision was a key factor and resulted in 75% of the repeat visits for customers. By far the biggest cause is disabled bus pass applications. The average time elapsed for new applicants and renewals is respectively 52 days and 44 days. More than half of this time is the gap between the customer requesting an application form and receipt of application form from the customer. Therefore, from the customers' perspective, eliminating the need to complete the application form and make a second visit would be a significant improvement. The next step is to investigate and analyse the full end-to-end process with other departments (Social Work, City Development, Education) with a view to making the entitlement verification process a one stop service.

4.6.8 Welfare Rights Duty Advice Line - the average number of inward telephone calls per week is 607. The demand analysis estimated that 52% is failure demand. Analysing staff activity identified that a number were calls to the DWP, Revenues and HMRC to establish benefit status. This involved welfare rights staff calling back the customer relaying the same information already previously provided by the Revenues Division. The next step is to conduct an experiment to eliminate the impact on customer time and experience through enabling welfare rights staff to access the documents issued by the Revenues Division that a welfare rights customer may be calling about it. An additional line of enquiry was to look at the approximately 397 'notice of potential eviction' cases per annum. It was noted that the actual number of eviction cases last year was 72. When eviction proceedings are started by the Housing Department, an intensive amount of casework has to be carried out with a combination of welfare rights and staff from a variety of departments. It is proposed to establish a project in conjunction with the Rent Recovery Section, Housing Support Team, Lily Walker Centre, Legal Section and Homelessness Strategy Team, to test new preventative measures and early intervention support services for tenants.

#### 4.7 Review Activity from Council Plan and Service Plans

4.7.1 A considerable amount of review activity was included in the Council Plan and departmental Service Plans for 2007-2011, progress on which was monitored through the Online Plan Monitoring database.

4.7.2 The assessments by lead officers show that, of the 149 reviews included in the Council and departmental Service Plans:

63.76% have been assessed as completed  
 32.89% have been assessed as on schedule  
 2.68% have been assessed as behind schedule  
 0.67% have been assessed as abandoned

4.7.3 60 of the reviews have previously been reported to Committee as completed in last year's progress report. The latest assessments of progress on the remaining 89 are set out in Appendix 1, grouped under the three strategic priorities in the Council Plan:

- Creating and Delivering a Vision for Dundee (which includes lifelong learning, work and enterprise, health and care, building stronger communities, community safety and Dundee's sustainable environment)
- Modernising and Improving Services to the Public (which includes efficient public service, modern customer services, involving communities and equality and diversity)
- Making the Best Use of Public Resources in the City (which includes people, assets management, health and safety, information strategy, information and communication technology and finance)

4.7.4 Chief Officers will be asked to ensure that any review items not yet completed are carried forward into new plans.

#### 4.8 Future Reviews

At its meeting on 26 April 2010, Policy and Resources Committee approved a report headed 'Corporate Improvement Programme, Training and Self Evaluation', which includes the programme of best value reviews for the period 2010/11 to 2013/14. As well as continuing to implement the recommendations of the best value review of mobile, flexible and home working, the programme includes Best Value Reviews of:

- Procurement
- Fleet Management
- Asset Management
- Property-Related staff
- Car Parking services
- Ground Maintenance services

Future reports to this Committee will focus on progress with this programme of reviews.

#### 5. **POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues. Any such policy implications are identified as part of the process of each review and reported on at that stage.

#### 6. **CONSULTATIONS**

The Chief Executive, Depute Chief Executive (Support Services), Director of Finance and all chief officers were consulted on this report.

#### 7. **BACKGROUND PAPERS**

None.

Chris Ward  
Assistant Chief Executive

12/08/2010

**Strategic Priority 1 - Creating and delivering a vision for Dundee**

<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Review levels of support and respite for children, adults and carers	Alan Baird/Jane Martin	18/05/2010	Levels of respite delivered to children and families and adults are recorded through K2 and reported annually to the Scottish Government. An exercise has been undertaken to establish target respite and support figures. Joint target figures for Children's Services and Adult services have been submitted to COSLA	On Schedule
Undertake a full review of Family Support Services	Alan Baird/Heather Gunn	18/05/2010	Review Report underway. Proposals to be brought forward June 2010	Behind Schedule
Undertake with Housing Department (as part of SHIP) the feasibility of a parent and baby accommodation and assessment service	Alan Baird/Jane Martin	18/05/2010	Further meetings to be held with voluntary sector to determine direction.	On Schedule
Review the level and range of respite care	Alan Baird/Diane McCulloch	30/09/2009	The first phase of the review has been completed in relation to controlling the provision of residential respite care in Craigie House. Scoping of costs to develop nursing respite care model now in final stages.	On Schedule
Review CMHTs (Adults) with Health partners and move to integrated teams (currently co-located)	Alan Baird/Laura Bannerman	18/12/2009	The Mental Health Review process has an agreed workstream to progress this issue. Progressing satisfactorily.	Completed
Review the deployment of community learning and development (youth work) staffing and resources according to service plan priorities and budget allocation	Stewart Murdoch/Kenny Lindsay	26/05/2010	This has largely been achieved with the creation of one integrated Youth Work Team in central Dundee. More restructuring may be required but this target is achieved.	Completed
Review allocation and priorities for youth information services	Stewart Murdoch/Kenny Lindsay	26/05/2010	This is a work in progress.	On Schedule

Description	Owner/Officer	Assessment Date	Assessment	Status
Review the Scheme for the Operation of Community Councils	Stewart Murdoch/John Hosie	04/06/2010	First phase of consultation on the Review of Community Council boundaries has taken place. On 24th May, Council Committee approved plans to undertake a second phase of consultation focusing on the proposals for boundaries, Scheme of Operation and Code of Conduct for Community Councillors. This will take place over a 12 week period from mid-June until mid-September 2010.	On Schedule
Undertake a Strategic Review of outdoor play areas in Dundee	Stewart Murdoch/Peter Sandwell	04/02/2010	Policy agreed by Leisure, Arts and Communities Committee December 2009	On Schedule
Review the current pitch strategy and identify action plan with key tasks to be taken forward	Stewart Murdoch/Merrill Smith	19/05/2010	Consultation with the clubs and specific sports officers as well as Fields in Trust has been undertaken and the final draft of the new pitch strategy is now being completed.	On Schedule
Review the Camperdown Masterplan and update both the Plan and key tasks	Stewart Murdoch/Gary Robertson	19/05/2010	Camperdown Master Plan is currently being evaluated with objective of completing the review by April 2010 and goes to Committee in June 2010.	On Schedule
Undertake a major strategy review of Caird Park and identify outline costs and proposals for future implementation and engage with user groups for the future including the development of the velodrome and athletic track as regional facilities	Stewart Murdoch/Gary Robertson	19/05/2010	The Department continue to liaise with Scottish Cycling and a draft lease is being developed together with a bid to SportScotland to upgrade the track and safety fencing during 2010.	On Schedule
Evaluate the current needs for swimming in the City and, in particular, review the options for a replacement of the Olympia Leisure Centre including outline plans and costs	Stewart Murdoch/Gary Robertson	19/05/2010	The replacement for the existing building is on track to be complete by 2012 with work due to commence in 2010.	On Schedule
Review Parks Masterplan and update accordingly with the overall objective of identifying an improvement strategy and action plan with focus on enhancement	Stewart Murdoch/Gary Robertson	19/05/2010	Complete	Completed

Description	Owner/Officer	Assessment Date	Assessment	Status
Complete review of and take forward both new and agreed actions from the Open Space Strategy	Stewart Murdoch/Peter Sandwell	04/02/2010	Open space strategy prepared and published	Completed
Review and formulate a Sport and Physical Activity Strategy for the city and agree and implement Action Plan	Stewart Murdoch/Audrey White	03/06/2010	The Strategy has been approved at Committee. Implementation Group are currently creating the annual action plan.	On Schedule
Review and redevelop advocacy provision with full involvement of advocacy providers	Alan Baird/Arlene Mitchell	10/09/2009	Advocacy review is complete and has been discussed and agreed with the various providers	Completed
Review input into issues on migration identified by the regional meetings between Scottish Government and Scottish authorities.	Chris Ward/Rod Crawford	12/04/2010	The progress paper produced by Steven Szymoszkowskyj from the Fresh Talent section of Scottish Government was reported to the October Co-ordinating Group. There have been no further developments and no contact with Scottish Government since.	On Schedule
Review the balance of new house building in relation to entry-level affordable homes.	Mike Galloway/Gregor Hamilton	19/05/2010	Report on Housing Need, Demand and Affordability Study approved by City Development and Housing Committees in October 2009. Implications will be considered in review of Development Plan and Local Housing Strategy.	On Schedule
Review and develop civil contingency arrangements.	Patricia McIlquham/John Handling	07/06/2010	Arrangements developing in line with the principles of integrated emergency management (IEM). Tayside Strategic Co-ordinating Group Strategic Plan 2010-2012 published in April 2010. This takes IEM to the multi-agency level. Dundee City Council are responsible for the Community Support and Recovery Portfolio which integrates our strategy with our partner agencies. Currently developing a multi-agency Strategic and Tactical co-ordinating plan to set out planning arrangements for the next two years and beyond and to detail arrangements for multi-agency community support and recovery during an emergency.	On Schedule

Description	Owner/Officer	Assessment Date	Assessment	Status
Review the delivery of the employability programme.	Mike Galloway/Allan Millar	12/05/2010	The development of the specification was delayed due to other work priorities. This was discussed with the evaluator and the timescale for the draft specification being circulated to the Employability Core Group was revised to 20 May 2010	On Schedule
Explore opportunities to expand the profile of best bar none accreditation scheme.	Mike Galloway/Morag Douglas	22/03/2010	This year's launch will take place on Tuesday 4 May with award ceremony booked for Sunday 26 September. The Evening Telegraph are going to run an article pre-launch to assist in promoting BBN. A first mailshot to approx. 180 licensed premises has already been circulated. Promotional poster will follow shortly as will another letter to a shortlist of licensed premises. For the first time social/members' clubs will be invited to participate which will hopefully help to increase numbers this year. All of this year's applicants will be put forward for the chance to represent Dundee in the very first national awards which will be hosted in Dundee in March 2011.	On Schedule
Assess the value and impact of employability services and explore the sustainability of effective activities.	Mike Galloway/Michelle Gautier	05/04/2010	The specification for the evaluation of the Employability Programme is currently being drawn up for approval of the Core Group and discussion with Glasgow University. Further update will be provided at the next report	On Schedule
Best Value Review on Attainment	Jim Collins/Paul Clancy	04/03/2010	Main aspects of the best value review are now incorporated into the Education Service Plan 2008-2011.	Completed
Review Tenant Participation Strategy	Elaine Zwirlein/John Wolstencroft	04/05/2009	Housing Committee approved the revised tenant participation strategy in 2009	Completed
Review the balance of new house building in relation to entry-level affordable homes	Elaine Zwirlein/John Wolstencroft	05/03/2010	Study Complete and agreed by Housing Committee in December 2009	Completed

Description	Owner/Officer	Assessment Date	Assessment	Status
Root and branch review for Scottish Housing Quality Standard Delivery Plan.	Elaine Zwirlein/Roger Seaman	19/05/2010	Root and Branch review due for completion by April 2009. Remit now agreed with DFTA July 2008. Stock condition database now received, analysis of this will be complete Autumn . Initial results of Stock condition survey show that SHQS is achievable by 2015. Project Plan and Consultation methods agreed with DFTA. Liaison Group with DFTA underway and focus groups with interested tenants are being held on the Key themes of the review. A Tenants conference is planned for the 22nd February to discuss the key findings of the review before submission in Spring/Summer .Guidance on resubmissions not yet received from the Scottish Government. Submission date to Scottish Government now amended to June 2010. Financial scenarios regarding levels of core stock are currently being discussed with the Focus Group and as a result of this the Root and Branch review may not be fully complete before guidance on resubmission is received from the Scottish Government, this is expected at the end of the calendar year. As at beginning of Feb 2010 new deadlines established by the Scottish Government of a partial submission in Sept 2010 with a full resubmission during 2011. Consultative Guidance is to be issued Spring 2010. It is however still the intention to report the results of DCCs review to Housing Committee this summer. The financial plan to 2015 is now drafted. This plan has been discussed with the SHQS focus group and will be presented to a Tenants conference prior to submission to Housing Committee.	On Schedule
Open Plan Maintenance Review.	Elaine Zwirlein/Duncan McDonald	03/05/2010	Project is with IT Dept. Development work is underway. Presentation of outline system made to the DFTA in April.	On Schedule

Description	Owner/Officer	Assessment Date	Assessment	Status
Monitor the effectiveness of the Development Quality Charter 2005 and review prior to 2010 to incorporate the implications of the new Planning Act.	Mike Galloway/Charlie Walker	03/05/2010	The Development Management Charter has now been reviewed and a new Charter, incorporating the implications of the new Planning Act, was approved by the Development Quality Committee at its April 2010 Meeting.	Completed
Conduct a review of national best practice against current practice in recycling relating techniques to Roads Maintenance and prepare a report recommending future actions.	Mike Galloway/Ron Mackenzie	19/05/2010	Working in Partnership with Tayside Contracts on the use of recycled materials on Structural maintenance of carriageways, footways and footpaths as part of the annual Road Maintenance Programme. Development and monitoring performance of new methods including Cold Mix Trial using recycled material.	On Schedule



**Strategic Priority 2 - Modernising and Improving Services to the Public**

<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Undertake a feasibility study by the Transitions Group on the roll out of the lead professional model	Alan Baird/Michael Holligan	28/05/2010	The Transition Forum have discussed the progress report. Proposals regarding future implementation of this model will be prepared by the Transition Pilot task group.	On Schedule
Review the suitability of the current referral forms across the children's service, department and other agencies	Alan Baird/Lynne Cameron	19/05/2010	An implementation plan has been undertaken. The tool is to be used by various services between April and June 2010. The tool will require to be used initially as a paper version and once IT have approved this work it will be undertaken electronically. More staff have asked to pilot the tool and it may be that the time to pilot will be extended	On Schedule
Review existing approaches to involving foster carers by producing, implementing and evaluating an involvement strategy	Alan Baird/Derek Aitken	05/03/2010	Proposals for regular post-placement feedback forms have been developed by service staff in consultation with foster carers, with new system to be implemented in April 2010.	Completed
Complete an options appraisal on reducing use of external fostering placements	Alan Baird/Derek Aitken	05/03/2010	Committee report now submitted for consideration at March Social Work Committee	Completed
Complete a Best Value Review of the Out of Hours Services and implement the outcomes	Alan Baird/Kathryn Lindsay	01/04/2010	Review completed and Implementation Group established to take forward required changes. Timescale for implementation June 2010.	Behind Schedule
Complete a process improvement review on access for users in Ninewells Hospital and implement the recommendations	Alan Baird/Diane McCulloch	03/09/2009	Testing is now complete. Final paper being completed and will be submitted to management. Status complete	Completed
Conclude a programme of supporting people service reviews	Alan Baird/Laura Bannerman	22/03/2010	Service reviews prioritised. Concluded.	Completed
Review management cost centres and responsibility centres in line with departmental efficiency saving requirements.	Alan Baird/Laura Bannerman	22/03/2010	Review undertaken revised responsibility centres agreed by Social Work Directorate.	Completed

Description	Owner/Officer	Assessment Date	Assessment	Status
Sponsor a review of community care procedures and systems for the development of more individualised and personalised methods of service delivery.	Alan Baird/Laura Bannerman	21/06/2010	Report on progress. Prepared for Health and Social Work Committee in June.	On Schedule
Review MHO service ensuring LA statutory functions met.	Alan Baird/Laura Bannerman	21/06/2010	Review in progress.	On Schedule
During lifetime of Social Work Service Plan review vision, values and aims to ensure still fit for purpose	Alan Baird/Jenni Tocher	24/05/2010	New departmental service plan to be completed in 2010. Work well underway and includes revisiting of vision. This task is therefore completed as 'life' of current service plan has reached an end.	Completed
Review plan for Registration priorities and Continuous Professional Development.	Alan Baird/Frances Greig	21/06/2010	A working group is being set up with Personnel and Staff Development to review registration priorities.	On Schedule
Review admin systems in Staff Development Service.	Alan Baird/Frances Greig	21/06/2010	Currently being reviewed and action plan being developed.	On Schedule
Review the provision of areas of bedding, tubs and plantings in conjunction with Leisure and Communities, Planning and Transportation and Housing to maximise impact	Ken Laing/Rod Houston	03/12/2009	Review complete	Completed
In conjunction with clients, undertake a review of the partnership process to ensure Best Value continues to be delivered	Ken Laing/Ken Laing	06/07/2009	This action is now complete following report to Policy and Resources Committee on 1 July 2009 on Construction Procurement Policy. Annual report to P&R on all construction partnership projects to be prepared to review VFM/Best Value on outcomes achieved.	Completed
Identify whether the Charter Mark initiative would help to meet the Department's aspirations in relation to customer service	Ken Laing/Bruce Patrick	02/12/2009	Contract Services Management Board agreed in November 2009 that the Cabinet Office Self-assessment tool will be used to develop an action plan based on the Customer Service Excellence Standard. A decision on external verification will be deferred.	Completed

<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Conduct a review of the Housing Repairs Partnership Agreement.	Ken Laing/Bruce Patrick	10/07/2009	The revised and updated Housing Repairs Partnership Agreement was approved by committee on 1st July 2009	Completed
Conduct a review of the operation of the Joiners Workshop	Ken Laing/Peter Wilson	02/06/2009	A new project has been established to review the use of all of the Department's buildings	Abandoned
Review, redesign and modernise working practices associated with incentive bonus driven operations in light of the Single Status Agreement.	Ken Laing/Mark Ross	11/01/2010	A review of all trades targets and allowances is complete and revised targets and narratives have been developed and issued. In consultation with the Trades Unions a number of changes have been implemented. All revisions have been agreed in principle for all trades except joiners.	On Schedule
Review and update the corporate customer services strategy (Customer First)	Chris Ward/Paul Carroll	07/06/2010	The review and updating of the corporate customer service strategy was approved by the Management Team in April 2009. This covers the website, contact centre, National Entitlement Card and one stop shop. This is consistent with the Council's policies and continues to be implemented. A report will be prepared for Committee after the recess on customer service standards.	Behind Schedule
Explore opportunities to align strategic partner funding for employability services.	Mike Galloway/Allan Millar	22/06/2010	A partnership assessment panel made recommendations on Disadvantaged Areas Funding to the Employability Core Group which were approved, Funding Agreements are being finalised.	On Schedule
Best Value Review on Residential Schools (led by Social Work)	Jim Collins/Paul Clancy	19/05/2009	This review was completed on schedule.	Completed
Review existing customer surveys and develop improved methods.	Albert Oswald/Frank Feechan	01/03/2010	Pilot completed and Improvement Service are producing a report on the pilot outcome	On Schedule
Review Business Processes of Payroll Section	Marjory Stewart/Sandy Flight	10/05/2010	IT looking at system of absence reporting recording.	On Schedule
Review Business Processes of Pension Admin Section	Marjory Stewart/Sandy Flight	10/05/2010	Altair test system ready to be trialled once IT hardware (server) in place. Meetings with employers continuing on a regular basis	On Schedule

<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Review CIPFA FM Model - measure level of customer satisfaction when contacting the Finance (General) Department.	Marjory Stewart/Rod McKay	05/05/2010	To be replaced by EFQM in the coming year	Completed
Pension Fund Forum - ensure administration and investment information more readily available.	Marjory Stewart/Sandy Flight	10/05/2010	Next forum will be organised in second half of year. Increased information now available on website	On Schedule
Review statutory PIs performance in Finance Revenues.	Marjory Stewart/Ian Gillanders	03/05/2010	Statutory PIs are reviewed on a continuous basis with a view to improving performance.	On Schedule
Lean service review of customer contact.	Marjory Stewart/Ian Gillanders	22/06/2009	Review has taken place and presentation made to the Efficiencies Board on 10 June 2009. Now moving forward with experiments to improve service.	Completed
The Repairs Partnership Agreement is currently the subject of a comprehensive review, drawing on the experience of the Housing Department, Dundee Contract Services and tenants, with a view to developing further our measures for Value for Money and Efficiency.	Elaine Zwirlein/Duncan McDonald	18/12/2009	The new Repairs Service Partnership Agreement 2009-2014 has been implemented.	Completed
Review the resource management and collections policy.	Stewart Murdoch/Judy Dobbie	01/03/2010	The first stages of the review of the policy have commenced.	On Schedule
Review XPT recruitment advertising and management system in the light of the development of a portal website for Scottish Councils which will have an alternative back office system	Iain Martin/Gaynor Myles	18/05/2010	All vacancies are now on the portal and the contract with Hr Director has ended.	Completed
Review further potential services including parking for transfer to the Contact Centre	Mike Galloway/Ron Tinley	10/06/2010	Discussions ongoing with Corporate Customer Services.	On Schedule
Review Departmental Organisation and structures due to TACTRAN; Modernisation Programmes; Management Change; and Succession Profile	Mike Galloway/Ron Tinley	20/08/2009	Staff Structure implemented	Completed

<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Review Planning and Transportation Support Services Division	Mike Galloway/Ron Tinley	20/08/2009	New Support Services Structure approved and up and running. Further check/review in 6 months (April - June 2010)	Completed
Review and Implement Online Training Database within Planning and Transportation	Mike Galloway/Ron Tinley	10/06/2010	Training database now implemented across Department. However this is not yet available as an online tool for staff. To be reviewed in the next Service Plan.	On Schedule
Finalise the review of current procedures against the Well Maintained Highways Code of Practice. Obtain Council approval of documented policies as appropriate.	Mike Galloway/Bill White	24/05/2010	To be prioritised for completion within time frame of plan.	On Schedule
Review effectiveness of workflow and associated QA system and recommend improvements to electronic system and QA procedures.	Patricia McIlquham/Mike Keddie	05/04/2010	H&S changes in legislation introduced into processes. External audit November 2009. Various amendments carried out to suit changes in ISO Standards. Revised templates are presently being prepared for smaller scale projects.	Completed
Investigate the feasibility of zonal working for collection of residual waste and recyclates.	Jim Laing/Eddie Ogg	21/06/2010	Investigate the feasibility of zonal working for all refuse collection routes 10% complete.	On Schedule

**Strategic Priority 3 - Making best use of public resources**

<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Review Children's Services database needs and contribute a further development of K2	Alan Baird/Margo Dymock	03/03/2010	Action plan drafted for this year and K2 group continuing to make progress in areas of child protection and intake services	On Schedule
Explore options on the different roles and responsibilities of Social Workers and paraprofessional staff	Alan Baird/Ray Wilson	15/02/2010	Currently in operation in some parts of social work services	Completed
Evaluate the impact of staff support and development systems in Criminal Justice to ensure we are providing effective support	Alan Baird/Mike Hendry	28/06/2010	Pathway to Improvement self evaluation completed and currently with Organisational Development. Staff representation on evaluation team. Findings to be reported to staff group, actions identified. Department wide self evaluation now developing with plan for staff focus groups on impact on staff. How Good is our Team approach to be re-introduced to inform and progress ongoing self evaluation. Staff Survey results will inform.	On Schedule
Review and develop Social Work charging policies and procedures for equality, cost effectiveness and consistency of application	Alan Baird/Dave Berry	01/07/2010	Charging group set up to explore specific areas of inconsistency across client groups.	On Schedule
Review and update Social Work Human Resource Strategy	Alan Baird/Gillian Milne	03/06/2010	Work on-going	On Schedule
Review and update safe systems of work for Social work staff undertaking lone working	Alan Baird/Gillian Milne	30/12/2009	Lone working procedure complete and implemented. Working group no longer meeting. Responsibility for monitoring the procedure has been passed to SWD Health and Safety Steering Group.	Completed
Review and update Social Work Department Health and Safety Policy	Alan Baird/Bruce Davidson	19/03/2010	Department has been notified of changes to corporate H&S Policy which requires department to review own policy.	On Schedule

Description	Owner/Officer	Assessment Date	Assessment	Status
Review Employee Development Process.	Alan Baird/Frances Greig	21/06/2010	Corporate Performance and Development Review Process to be incorporated into employee handbook.	On Schedule
Review Staff Development Strategy (Will be called learning and development strategy)	Alan Baird/Frances Greig	21/06/2010	Approved by Directorate to seek Committee approval 28/06/2010	On Schedule
Assess the risks associated with the Single Status Agreement and equal pay legislation.	Ken Laing/Ken Laing	02/07/2010	Review complete and discussions with trade unions initiated	Completed
Consider the options for using the intranet for knowledge sharing	Chris Ward/Paul Carroll	15/02/2010	Some work has been undertaken by priority projects to create intranet sites for staff involved in the corporate projects. This project has now been included in an internal communications review agreed by the BVPE Sub Committee May 2009 and now as part of the corporate employee communication strategy under the BV2 implementation plan and is being developed by the internal communications team.	Completed
Review elected members training and development plan	Chris Ward/Bill Findlay	03/05/2010	Papers were produced for the Council's Corporate Governance Group, setting out the training and development activities which have taken place to date, and recommending the development of personal development plans with members. The intention had been to wait for the national launch of the member development framework being piloted in 7 local authorities by the Improvement Service. However, when it became apparent that this would not be available soon, it was agreed to develop an in-house approach to ensure members had personal development plans in time to comply with the recommendations of the Remuneration Committee that these should be in place by March 2009, although achievement of this target was delayed slightly by a by-election and subsequent change in Administration. To develop the plans,	On Schedule

			members were asked to complete self-assessment questionnaires identifying any areas in which they would benefit from training, development or support, and the Corporate Planning Officer met all members individually to discuss the process and ensure that plans were agreed. 28 plans have been agreed and 1 has still to be completed. Good progress has been made in delivering on all the individual development requests, and a programme of training events aimed at all councillors is also continuing.	
Review staff survey	Marjory Stewart/Rod McKay	05/05/2010	New staff survey due in 2010	Completed
Review Accounts and Benefits business processes - impact of home working.	Marjory Stewart/Ian Gillanders	03/05/2010	Impact of homeworking has been mainly positive although other considerations have to be taken into account within the office environment. Situation is reviewed on a regular basis.	On Schedule
Review Liaison Section business processes - impact of homeworking and corporate visiting system.	Marjory Stewart/Ian Gillanders	03/05/2010	The trial with the Netbook has now been completed. Several technical issues were encountered and these have been passed to I.T. to deal with. Once these have been resolved, homeworking for Liaison staff can proceed and the impact assessed.	Behind Schedule
Review and update the data security and business continuity strategy to maximise availability of information systems and data	Ged Bell/Tim Simpson	02/02/2010	This is now complete. Data is replicated between both data centres	Completed
Review consolidation/standardisation across all areas or service of service delivery	Ged Bell/Jim Walker	03/03/2010	Virtualisation of windows boxes is now gathering pace and, where appropriate is becoming the norm. Departmental Printers have been replaced with large Multifunction devices in preparation for the move to Dundee House.	On Schedule
Review effectiveness of absence policy	Iain Martin/Val Ridley	12/05/2010	Revised Procedure for Managing Sickness Absence was approved by P&R Committee in June 2010	Completed
Review range and content of training courses	Iain Martin/Jim Duffy	02/06/2010	As part of the corporate improvement programme agreed in May 2010, a review of the training and development programme will be carried out to meet the Council's future needs.	On Schedule



<b>Description</b>	<b>Owner/Officer</b>	<b>Assessment Date</b>	<b>Assessment</b>	<b>Status</b>
Review recruitment advertising and management system in light of participation in Scottish Portal - myjobscotland.gov.uk	Iain Martin/Val Ridley	25/11/2009	Council vacancies advertised on the National Portal from September 2009.	Completed

**REPORT TO: SCRUTINY COMMITTEE - 18 AUGUST 2010**  
**REPORT ON: COMPLAINTS STATISTICS 2009/2010**  
**REPORT BY: ASSISTANT CHIEF EXECUTIVE**  
**REPORT NO: 409-2010**

**1. PURPOSE OF REPORT**

To provide Committee with an analysis of complaints processed through the Council's electronic recording system during 2009/10.

**2. RECOMMENDATIONS**

It is recommended that Committee:

- i) note the attached analysis of complaints processed through the electronic system between April 2009 and March 2010, with a comparison to the figures for 2008/09
- ii) remit chief officers to ensure that complaints are logged on the system, to analyse their own complaints and to aim to use complaints to drive service improvements
- iii) note that changes made by departments to processes, training etc as a result of complaints will be summarised as part of the annual report to Committee in December on how the Council uses feedback from customers and service users to improve its services

**3. FINANCIAL IMPLICATIONS**

None

**4. BACKGROUND**

- 4.1 An electronic system to log, monitor and report on formal complaints was introduced on a phased basis during 2007 and 2008. This report analyses the complaints processed by the system between April 2009 and March 2010, and includes breakdowns of complaints by department, nature and channel of complaint, as well as information on time taken to resolve complaints, repeat complainants and the outcome of complaints. Comparisons are shown with the figures for 2008/09.
- 4.2 The attached tables show that 186 complaints were processed through the system in 2009/2010. This is less than the figure of 326 in 2008/09 and considerably less than the average of around 700 recorded on the previous Helpline system over recent years. However, the previous system recorded as complaints a large number of contacts from customers which would be more accurately categorised as service requests or enquiries. Training on the new system emphasised that complaints are defined as:

'..... an expression of dissatisfaction with something the Council or its staff have done or failed to do, or with how a person has been treated, which requires us to respond'

The drop in recorded complaints reflects the fact that staff have been instructed that initial requests for information, explanations or a service, including seeking the Council's assistance with complaints about others, should be logged and monitored outwith the formal complaints system. However, the fall from 2008/09 to 2009/10 may also suggest that all complaints are not being logged on the electronic system.

- 4.3 The complaints recording system was developed in-house and has been commented on favourably by external inspectors. The auditor for the Leisure and Communities Department's ISO Quality Management System Certification described it as 'an excellent development, a true example of continuous improvement, with cogent, well-laid out guidelines for use'. Departments have been asked to ensure that complaints are logged on the system and that analysis of complaints statistics and the details of individual complaints are used to drive service improvements.
- 4.4 The attached statistics also reflect the fact that the majority of complaints to Social Work and Education were dealt with outwith the corporate recording system, but steps have been taken to ensure the corporate system also meets their needs, so a more comprehensive picture can be given in next year's report.
- 4.5 As well as ensuring that individual complaints are investigated and responded to, a key aim of the complaints system should be to help us learn from complaints, seeing them as valuable feedback on service performance. Depending on whether or not complaints are justified, and on their root cause, there may be a need to change policies or procedures, provide training for staff or consider service improvements. The statistics on Complaints Outcomes in Table 6 suggest that departments have been identifying the root cause of complaints. It is proposed that Corporate Planning continue to collate information on how this has worked in practice as part of a wider exercise to demonstrate the impact of customer feedback on service delivery. The report on Improving Services Through Listening to Customers and Service Users, which was submitted to Committee in December 2009, will now be an annual report and will include any changes made as a result of complaints.

## 5. **POLICY IMPLICATIONS**

- 5.1 This report has been screened for any policy implications in respect of sustainability, strategic environmental assessment, anti-poverty, equality impact assessment and risk management.
- 5.2 The complaints logging system incorporates a feature which asks officers to identify, when closing complaints, whether the complaint related to an equalities issue - age, disability, gender, LGBT, race or religion. Two complaints in 2009/2010 were identified as relating to an equalities issue - one to disability and one to race - compared to none in 2008/2009.

## 6. **CONSULTATIONS**

The Chief Executive, Depute Chief Executive, Director of Finance and all Chief Officers have been consulted on this report.

Chris Ward  
Assistant Chief Executive ..... 12/08/2010

**Table 1: Complaints each month by department**

Department	Apr 09	May 09	Jun 09	Jul 09	Aug 09	Sep 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10	Total 09/10	Total 08/09
Chief Executive & Corporate Planning	1					2							3	2
City Development	3	1	2	3	3	2	1		1	2			18	50
Contract Services	3			2	2	1	1				1	2	12	23
Education		1		1									2	6
Environmental Health and Trading Standards														2
Finance (revenues)	7	8	8	5	6	5	8	5	3	4	5	5	69	87
Finance (general)														1
Housing	6	6	8	9	3	4		10	1	1	5	2	55	114
Information Technology														
Leisure and Communities	6	1	1	1	2	1		1				2	15	26
Personnel	1												1	
Public Relations														
Social Work	1	1		1									3	8
Support Services		1									2		3	1
Waste Management	2		1	1						1			5	6
Totals	30	19	20	23	16	15	10	16	5	8	13	11	186	326

**Table 2: Nature of complaints**

Nature of Complaint	2008/09	2009/10
Service not to the standard expected	46.9%	33.7%
Delay or failure to respond to a query or request for service	16.7%	14.2%
Failure to follow the Council's agreed policies or procedures	1.6%	3.2%
An employee's attitude or behaviour	11.2%	15.3%
Failure to take account of relevant matters	5.4%	13.1%
Malice, bias or unfair discrimination	2.2%	4.2%
Other	16.0%	16.3%

**Table 3: Complaints by Channel**

Channel	2008/9	2009/10
Email	23.1%	19.0%
Letter	29.7%	34.7%
Telephone	28.4%	20.0%
Contact Centre	4.1%	11.6%
In Person	0.9%	4.7%
Website	9.7%	6.3%
Complaint form	4.1%	3.7%

**Table 4: Complaints by days taken to resolve**

Number of Days Taken to Resolve	2008/09	2009/10
Less than 3 days	32.2%	23.6%
3 or more, but less than 6 days	39.2%	31.9%
6 or more, but less than 9 days	14.3%	23.1%
9 days or more	14.3%	21.4%

**Table 5: Repeat Complainants**

Number of complaints made by same person	2008/09	2009/10
2	20	4
3	1	2
5	1	

44% of complaints were resolved outwith the published target of 5 days. However, the complaints procedure acknowledges that some complaints are complicated and take longer than 5 days to investigate. This is mentioned in acknowledgement letters to complainants. The electronic system will continue to remind officers that a response is due unless they amend the target date, at which point they should also keep complainants informed.

**Table 6: Complaints outcomes**

40.1% of complaints were assessed as being 'upheld' compared to 39.3% in 2008/09. Of these, the 'root cause' was identified as follows:

Root cause	Definition	% of upheld complaints	
		2008/09	2009/10
System fault	Staff followed the correct procedure according to the process documented or training provided, but there is a fault in the procedure or process which requires to be corrected.	11.8%	8.1%
Process error	Staff did not follow the correct procedure according to the process documented or training they have been given.	60.6%	71.6%
Training required	Staff did not have the skills/knowledge to deliver the service effectively, and training is required.	6.3%	6.8%
Other	(If none of the above apply, officers closing complaints are asked to provide a brief explanation of the 'root cause' of the complaint and any action required to prevent recurrence)	21.3%	13.5%

**REPORT TO: SCRUTINY COMMITTEE - 18 AUGUST 2010**  
**REPORT ON: 2009/10 INTERNAL AUDIT ANNUAL REPORT**  
**REPORT BY: CHIEF INTERNAL AUDITOR**  
**REPORT NO: 438-2010**

## **1.0 PURPOSE OF REPORT**

To submit to Members of the Scrutiny Committee the Internal Audit Annual Report for 2009/10 which summarises the activities of the Council's Internal Audit Service for this period and provides an opinion on the overall adequacy and effectiveness of the Council's control environment.

## **2.0 RECOMMENDATIONS**

Members of the Committee are asked to note the information contained within this report.

## **3.0 FINANCIAL IMPLICATIONS**

None

## **4.0 MAIN TEXT**

**4.1.** The remit of the Scrutiny Committee, as laid down in Report No 370-2010, includes consideration of the strategy, plan and performance of the Council's Internal Audit Service. This Committee should also consider internal audit reports and seek assurance that appropriate action has been taken, monitor the implementation of internal audit recommendations agreed with management and receive the annual report of the Chief Internal Auditor. Attached at Appendix A is the Internal Audit Annual Report for the 2009/10 financial year.

**4.2.** On an annual basis the Chief Internal Auditor is also required, to prepare a statement on the adequacy and effectiveness of the internal control system of the Council. This statement forms part of the assurance gathering process which feeds into the Annual Governance Statement included within Dundee City Council's Annual Statement of Accounts. A copy of the statement prepared by the Chief Internal Auditor for the 2009/10 financial year is attached at Appendix B.

## **5.0 POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

## **6.0 CONSULTATIONS**

The Chief Executive, Depute Chief Executive and Director of Finance have been consulted on the content of this report.

## **7.0 BACKGROUND PAPERS**

None

Sallie Dailly, Chief Internal Auditor

DATE: 27 July 2010

## 2009/10 INTERNAL AUDIT ANNUAL REPORT

### 1. PURPOSE OF REPORT

- To summarise the key areas of activity of the Council's Internal Audit Service during the 2009/10 financial year.

### 2. INTERNAL CONTROLS

- Each local authority is accountable for the way in which it has discharged its stewardship of public funds. Stewardship is a function of management and, therefore, a responsibility placed upon elected members and officers of the authority.
- Such responsibility is discharged by the establishment of sound arrangements and systems for the planning, appraisal, authorisation and control over the use of resources, and by the preparation, maintenance and reporting of accurate and informative accounts.
- There are a number of aspects of corporate governance which are essential prerequisites to the traditional public sector values of impartiality, openness and transparency and the highest standards of probity and propriety appropriate to the handling of public funds. These include a sound control environment, security of key financial systems and an adequate and effective internal audit function.

### 3. ROLE OF INTERNAL AUDIT

- Internal audit is an independent appraisal and review function which has been set up within Dundee City Council as a service to the Scrutiny Committee (and the former Audit and Risk Management Sub-Committee), Chief Executive, Director of Finance and all levels of management. The remit of the Internal Audit Service is to provide an independent and objective opinion on the control environment by evaluating its effectiveness in achieving the Council's objectives. The Service objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources throughout the Council's activities.
- The existence of internal audit does not diminish the responsibility of management to establish and maintain appropriate risk management processes, control systems, accounting records and governance arrangements and management should not depend on internal audit as a substitute for effective controls.
- The role of internal audit is to understand the key risks faced by the Council and to examine and evaluate the adequacy and effectiveness of risk management processes, control systems, accounting records and governance arrangements as operated by the Council.
- Internal Audit has unrestricted access to all activities undertaken within the organisation in order to be able to effectively discharge its remit. The primary thrust of internal audit work is to review, appraise and report on a wide range of areas. Various types of review work are undertaken which includes systems work, computer audit work, location audits, contract audit, specific investigations and advice on systems, controls and risk.
- The Internal Audit Service is independent of the activities which it audits. This is essential to ensure that the service provides unbiased judgements and impartial advice to management.

### 4. AUDIT PLANNING

- A vital element in the effective management of internal audit is planning audit work to ensure that objectives are met, priorities are established, resources are targeted and used effectively, and best value is achieved.
- The Internal Audit Annual Plan provides a summary of the areas where it is planned that work will be carried out during the forthcoming year. The Internal Audit Annual Plan for the 2009/10 financial year was approved by the former Audit and Risk Management Sub-Committee in

April 2009 (Report No. 73-2009). This was prepared on the best information available at that time.

- The performance of internal audit is also reviewed by the Council's External Auditor, currently Audit Scotland, on an annual basis. This allows, where appropriate, reliance to be placed on the work of internal audit and for both parties to plan their reviews without duplication of effort and unnecessary disruption to services.

## **5. AUDIT REPORTS**

- Each audit assignment results in an internal audit report which includes an executive summary and also details the audit findings, recommendations and management responses, if appropriate. The audit report essentially provides management with an action plan which assigns responsibility and details the timetable for the implementation of audit recommendations.
- Within all audit reports an opinion is given on the importance of each audit finding namely critical, significant or routine. On the basis of this an overall audit opinion on the level of assurance assigned to the area reviewed is given in the report's executive summary. Broadly there are four levels of assurance namely full, reduced, limited and no assurance.
- The findings and recommendations arising from the audit reviews reported upon in 2009/10 have been discussed with appropriate officers of the Council and agreed action plans have been put in place to address areas for improvement. The executive summary of all reports finalised have also been submitted to the former Audit and Risk Management Sub-Committee for consideration.
- Internal Audit also undertakes follow-up work and progress reviews to confirm that management has discharged its responsibility for implementing audit recommendations within the agreed timescale. Such work is also formally reported upon.

## **6. KEY EVENTS DURING 2009/10**

- Information technology is an ever expanding area and the Council is heavily reliant on various computerised systems and software packages in achieving its objectives. The audit of this area demands a specialist knowledge base. This is an area that has not been particularly well developed as the Internal Audit Service does not have staff with specialism in this area. To overcome this, the services of external specialists were procured to assist internal audit staff in reviewing the adequacy of the Council's intrusion prevention and detection systems and also the arrangements in place to meet the requirements of the payment card industry data security standard.

## **7. PLAN ACHIEVEMENT**

- During 2009/10 the actual number of productive days for the Internal Audit Service was 1,424 days which was broadly in line with the budgeted productive days. Of the actual productive days available, 86% were spent on direct audit activities and 14% were spent on support activities such as management, audit planning and staff training and development. The number of days spent on direct audit activities during 2009/10 was slightly higher than in 2008/09.
- In respect of Dundee City Council, the 2009/10 Internal Audit Annual Plan included 31 areas, both at a corporate and departmental level, to be reviewed. It also included allocations of audit days for follow-up reviews, progress reviews, finalisation of audit assignments which commenced in 2008/09, provision of advice being given to clients on systems, control and risk and specific investigations. In addition, the plan also contained allocations for the provision of internal audit services to external bodies namely Tay Road Bridge Joint Board, Tayside Valuation Joint Board and Dundee Leisure Limited, as detailed in the respective service level agreements.



- Whilst work on all of the planned areas for corporate and departmental reviews for Dundee City Council commenced in 2009/10 there was slippage in relation to the anticipated time required for some projects. This was due to a number of factors which included project overruns where the fieldwork proved more problematic than originally anticipated, familiarisation by staff with computer assisted audit technique software and the actual time spent on work for outside bodies exceeding the days included in the plan. Provision has been made in the 2010/11 Internal Audit Annual Plan to complete prior year projects which still required to be finalised.
- For financial year 2009/10, 36 internal audit reports were issued on the basis of the work undertaken for Dundee City Council. In addition, 20 reports were issued in relation to the internal audit services provided to outside bodies. Reports have generally been well received by clients with management agreeing to implement 98% of recommendations made.

## **8. OVERALL ASSESSMENT OF CONTROLS**

- Activity for Dundee City Council during 2009/10 covered a wide spectrum of areas including community planning and partnership, corporate governance, council strategies, policies and initiatives, debtors and debt management, disaster recovery and business continuity, information and system security, management of hardware and software, payroll and employee expenses, statutory performance indicators, housing benefit overpayments, gas safety checks, car parking income, meals service, stocks and stores year end work, grant claims and follow-up work.
- The 2009/10 audit of corporate and departmental systems identified that many of the expected controls are in place and operating satisfactorily in the areas examined. However the audit work also identified scope for improvement in systems which either lack or have weaknesses in controls.
- Analysis of the overall audit opinion for the reports issued highlighted that 19% of the areas reported upon were considered to be well controlled (full assurance), 50% were adequately controlled (reduced assurance) and 31% were requiring improvement (limited assurance). Once again none of the areas reviewed and reported upon were deemed to be so poorly controlled that no assurance could be placed upon the systems and controls being operated.
- Internal audit reports included a range of recommendations for improvement in the areas examined and action plans have been developed in consultation with management which, as they are implemented, should improve the overall control environment.
- In line with the requirements of the Code of Practice on Local Authority Accounting in the UK, the Chief Internal Auditor is required to provide an independent opinion on the adequacy and effectiveness of the Council's system of internal financial control. In compiling this statement, a copy of which is attached at Appendix B, the Chief Internal Auditor takes due recognition of the audit work carried out by the Service and other pertinent information. On the basis of the areas used to inform this process for the year to 31 March 2010 the overall audit opinion reached was that reasonable assurance could be placed on the Council's internal control system.

## **To the Members of Dundee City Council, Chief Executive and Director of Finance**

As Chief Internal Auditor of Dundee City Council, I am pleased to present my annual opinion on for the year ended 31 March 2010. It should be noted that the statement does not include assurances on group activities.

## **Respective Responsibilities of Management and Internal Audit in Relation to the Control Environment**

It is the responsibility of the Council's officers to determine, establish and maintain sound systems of internal control and to ensure that the organisation's resources are properly applied on the activities intended. This includes responsibility for the prevention and detection of fraud. Management is also charged with monitoring the continuing effectiveness of the internal control environment and taking action as appropriate. It is the responsibility of the Chief Internal Auditor to provide an annual assessment of the overall robustness of the control environment within the Council.

### **Control Environment**

This comprises the systems of governance, risk management and internal control. The key elements include:

- Establishing and monitoring the achievement of the organisation's objectives.
- Facilitation of policy and decision-making ensuring compliance with established policies, procedures, laws and regulations.
- Ensuring the economical, effective and efficient use of resources and for securing continuous improvement.
- Financial management of the organisation.
- Performance management of the organisation.

A sound control environment reduces, but cannot eliminate, the possibility of poor judgement in decision-making, human error, control processes being deliberately circumvented by employees and others, management overriding controls and the occurrence of unforeseeable circumstances. It therefore provides reasonable but not absolute assurance that control weaknesses or irregularities do not exist or that there is no risk of material errors, losses, fraud or breaches of law or regulations. Accordingly, the Council is continually seeking to improve the effectiveness of its control environment.

### **The Focus of Internal Audit Work**

Internal Audit is an assurance function that provides an independent and objective opinion to the organisation on the control environment by evaluating its effectiveness in achieving the organisation's objectives. It objectively examines, evaluates and reports on the adequacy of the control environment as a contribution to the proper, economic, efficient and effective use of resources. The Council's Internal Audit Service operates in accordance with the Code of Practice for Internal Audit in Local Government in the United Kingdom, published by the Chartered Institute of Public Finance and Accountancy (C.I.P.F.A.), and which represents best practice.

The Chief Internal Auditor prepares an annual internal audit plan which outlines the work to be undertaken. This takes cognisance of the risks associated with various activities undertaken by the Council, emerging issues and requests received from departments for specific reviews. The plan needs to be flexible to be able to reflect the changing risks and priorities of the organisation. The plan, any material changes to the plan and any significant matters that may impact upon the delivery of the plan are reported to the Audit and Risk Management Sub-Committee.

The Internal Audit Service formally reports upon the areas subject to review. Such reports, which identify system weaknesses and/or non-compliance with expected controls, are issued for the attention of departmental managers and include appropriate recommendations and agreed action

plans. It is management's responsibility to ensure that due consideration is given to internal audit reports. This includes management taking remedial action where appropriate or accepting that there may be a level of risk exposure if the weaknesses identified are not addressed for operational reasons. Internal Audit has a responsibility to confirm that agreed action plans have been implemented. Matters arising from internal audit work are also reported to the Council's Audit and Risk Management Sub-Committee, the Chief Executive and the Council's External Auditor.

### **Summary of 2009/10 Internal Audit Activity**

During 2009/10 financial year a total of 36 internal audit reports were issued. These covered a wide spectrum of areas including corporate governance, accounting and budgetary control, capital contracts, single status, statutory performance indicators, security of assets, disaster recovery and business continuity, intrusion detection and prevention, internet usage, management and security of cash, treasury management, non-domestic rates, fleet management, car parking income, attendance management, gas safety checks, service level agreements, post opening, the Fairer Scotland Fund, stocks and stores (including year end work), grant claims and follow-up reviews. The Internal Audit Service also provided advice on the control environment as required.

The 2009/10 audit of corporate and departmental systems has identified that many of the expected controls are in place and operating satisfactorily. The audit work has, however, also identified scope for improvement in some systems which either lack or have weaknesses in controls. The Internal Audit Service has put forward a range of recommendations in the areas examined and action plans have been developed in consultation with management which, as they are implemented, should result in continued improvement in the control environment.

### **Limitation of Scope**

In the financial year under review there was no limitation of scope placed upon the work undertaken by the Internal Audit Service.

### **Basis of Opinion**

My evaluation of the control environment is informed by a number of sources which include the following:

- The audit work undertaken by the Internal Audit Service during the year to 31 March 2010.
- The assessment of risk completed during the preparation of the audit plan.
- Reports issued by Audit Scotland, the Council's External Auditor, and also reports by other review agencies.
- Knowledge of the Council's governance, risk management and performance monitoring arrangements.
- Formal assurances received from the Council's Directors/Heads of Service.

### **Opinion**

It is my opinion, based on the above, that reasonable assurance can be placed upon the adequacy and effectiveness of the Council's internal control system in the year to 31 March 2010.

*Sallie M. Dailly*

**DATE 17 June 2010**

**Chief Internal Auditor  
Dundee City Council**

**REPORT TO: SCRUTINY COMMITTEE – 18 AUGUST 2010**

**REPORT ON: INTERNAL AUDIT REPORTS**

**REPORT BY: CHIEF INTERNAL AUDITOR**

**REPORT NO: 439-2010**

## **1.0 PURPOSE OF REPORT**

To submit to Members of the Scrutiny Committee a summary of the Internal Audit Reports finalised since the last Audit and Risk Management Sub-Committee.

## **2.0 RECOMMENDATIONS**

Members of the Committee are asked to note the information contained within this report.

## **3.0 FINANCIAL IMPLICATIONS**

None

## **4.0 MAIN TEXT**

**4.1.** The day-to-day activity of the Internal Audit Service is primarily driven by the reviews included within the Internal Audit Plan. Broadly, on the completion of a specific review, a report which details the audit findings and recommendations is prepared and issued to Management for a formal response and submission of Management's proposed action plan to take the recommendations forward. Any follow-up work subsequently undertaken will examine the implementation of the action plan submitted by Management.

**4.2.** Executive Summaries for the reviews which have been finalised in terms of paragraph 4.1 above are provided at Appendix A. Within each Executive Summary the prime aim is to provide both Members and Management with key information which includes the reason for undertaking the review, summary financial data and statistics, the areas encompassed within the review and specific areas which were excluded, the principal audit objectives, an audit opinion on the adequacy of the systems and control framework of the area reviewed, the key conclusions based on the audit findings and recommendations and a summary of Management's response to the audit report. The full reports are available to Members on request.

## **5.0 POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

## **6.0 CONSULTATIONS**

The Chief Executive, Depute Chief Executive and Director of Finance have been consulted on the content of this report.

## **7.0 BACKGROUND PAPERS**

None

Sallie Dailly, Chief Internal Auditor

DATE: 09 August 2010

## i) INTERNAL AUDIT REPORT 2009/14

<b>Department</b>	<b>City Development</b>
<b>Subject</b>	<b>Property Management</b>

**Introduction**

A review of property management was undertaken as part of the planned internal audit work.

The Property Division within the City Development Department comprises a multi-disciplinary team of professionals in management, maintenance and valuation, all working towards the common goal of creating and retaining as many jobs as possible in the city through ensuring sufficient provision of land and property. Strategies have been devised and implemented for increasing the amount of investment and employment opportunities in the city, with start-up businesses, inward investment and indigenous companies of every size benefiting from the Council's extensive portfolio of industrial properties. The Council can also assist businesses seeking industrial and commercial land and advance factory units.

The Property Management team has responsibility for maximising the use of all property and ensuring that good management techniques lead to the most efficient return on assets. The team's activities include acquisitions and disposals. Staff are also responsible for management of leases which includes negotiation of lettings, rent reviews, use clause and dilapidations. The Department currently manages in the region of 600 leased properties.

**Scope and Objectives**

The overall objective of this review was to examine the procedures operated in respect of property management, assess the effectiveness of the controls and formally report the findings. Audit fieldwork focussed on procedures operated in respect of properties leased by Dundee City Council and excluded arrangements for undertaking property development.

**Conclusion**

*The principal conclusion drawn from this review is that whilst there is basically a sound system of control there are some areas where it is viewed improvements can be made.*

The main areas commented upon in the report are as follows:

- In order to improve controls over property management, staff should continue to strive to ensure that leases are renewed as soon as possible after the end date and review the systems operated to assess if further process improvements can be made to enable rent increases to be applied more timeously. In addition, the process for acceptance and receipting of keys should be formalised.

**Management Response to the Audit Report**

The audit findings and recommendations were formally reported to the Director of City Development and appropriate action agreed to address the matters raised.

## ii) INTERNAL AUDIT REPORT 2009/35

<b>Department</b>	<b>Social Work</b>
<b>Subject</b>	<b>Cash Imprests</b>

**Introduction**

A review of the arrangements for the management of cash imprests within the Social Work Department was undertaken as part of the planned internal audit work.

In common with other departments of the Council, the Social Work Department uses the Council's financial system, Authority Financials, for the payment of the vast majority of goods and services it orders. It also has cash imprests which are used for a variety of purchases. These could include small incidentals which are required for the day to day running of the establishment, the purchase of clothing for children in residential units or emergency payments to clients in need.

In some cases, establishments will be re-imbursed in cash for expenditure made and which is supported by the appropriate receipts. In situations where the establishments maintain their own bank account all expenditure supported by the appropriate receipts will be re-imbursed via a payment to the establishment's bank account. The Department operated 66 cash imprests for the financial year 2009/10 with an associated total value of approximately £53,000. Cash imprests range from £40, allocated to some of the smaller establishments, to £35,000 which is managed centrally by Social Work staff in Tayside House and used to re-imburse the imprests of all other locations within the Department.

**Scope and Objectives**

The overall objective of this review was to examine procedures operated in respect of imprests within the Social Work Department. The areas to be reviewed and establishments to be visited were agreed with staff in the finance section of the Social Work Department.

**Conclusion**

*The principal conclusion drawn from this review is that whilst there is basically a sound system of control there are some areas where it is viewed improvements can be made.*

The main areas commented upon in the report are as follows:

- In order to ensure consistency across the Department and to avoid confusion, the guidance notes should be updated and consideration given to rationalising the forms in use. In addition, the necessary improvements to working practices should be discussed with the relevant establishments.

**Management Response to the Audit Report**

The audit findings and recommendations were formally reported to the Director of Social Work and appropriate action agreed to address the matters raised.

## iii) INTERNAL AUDIT REPORT 2009/37

<b>Department</b>	<b>Corporate</b>
<b>Subject</b>	<b>Sundry Payments</b>

**Introduction**

A review of the sundry payments system operated within the Council was undertaken as part of the planned internal audit work.

The Creditors module within the Council's financial system Authority Financials is used to make payments on behalf of Dundee City Council and other external parties to whom it provides financial services under Service Level Agreements. The majority of creditors are set up on a permanent basis. These are suppliers which the Council uses on a regular basis and where there are multiple payments.

Where one-off payments are required, details are recorded on a sundry payment system which then interfaces with Authority Financials. A temporary creditor is set up within Authority Financials enabling the relevant payment to be made. A sundry payment would be appropriate, for example, for council tax refunds and rent rebates or for payment of invoices where the department does not expect to use the supplier more than once. Staff check Council records for any outstanding debts prior to refunds or rebates being paid, and if these exist, they are netted off against sums due before the payment is made. Payments are made by Bankers' Automated Clearing System (BACS) wherever possible to minimise costs but it is not always possible to obtain creditors' bank details to facilitate this.

Dundee City Council makes of the order of 80,000 BACS and cheque payments with a value of £250m annually. Of these, approximately 5,000 payments with a value of £5m relate to temporary creditors.

**Scope and Objectives**

The objectives of this audit were to examine the systems operated in respect of sundry payments, assess the effectiveness of the controls and formally report the findings. Areas examined included accuracy and availability of guidance, ensuring that sundry payments are not used as a regular payment method and authorisation procedures.

**Conclusion**

*The principal conclusion drawn from this review is that whilst there is basically a sound system of control, there are some areas where it is viewed improvements can be made.*

The main areas commented upon in the report are as follows:

- To ensure that the sundry payments system operates effectively, all departments should be reminded of appropriate use of the system and of the importance of only requesting a new creditor record where they have checked extensively that a record does not already exist. In addition, guidance should be updated and made available to staff via the intranet.
- In order to reduce costs and improve efficiency, departments should be instructed that payments should be made by BACS wherever possible.

**Management Response to the Audit Report**

The audit findings and recommendations were formally reported to the Director of Finance and appropriate action agreed to address the matters raised.

## iv) INTERNAL AUDIT REPORT 2009/39

<b>Department</b>	<b>Dundee Contract Services</b>
<b>Subject</b>	<b>Major Contracts</b>

**Introduction**

A review of processes operated in respect of major projects carried out by Dundee Contract Services (DCS) was part of the planned internal audit work.

DCS is a contracting arm of Dundee City Council. The Department provides building services to its clients and covers all aspects of the building trade including joinery, electrical works, plumbing and tiling. In order to ensure delivery of a quality service to its customers, the Department has established a quality management system which meets BS EN ISO 9001:2008.

DCS staff project manage, plan and undertake major contract works of approximately £5m and around £1.5m of minor contract works per annum. Major works include projects such as installations of kitchens and bathrooms in Council housing whilst minor works will include maintenance and repair of other Council properties and Council housing.

Activity on major works usually covers a span of several months and payments are made at various points throughout the life of the project. DCS staff value the works done at regular intervals and prepare an interim certificate. They pass this information to Quantity Surveyors within Architectural Services who will confirm the accuracy of the certificated work and arrange for payment. At the end of the project a final certificate is prepared when all outstanding sums should be paid.

**Scope and Objectives**

The objective of this review was to examine the systems operated in respect of major projects within DCS and report the findings. Audit fieldwork included examination of systems operated by both DCS and Architectural Services staff.

**Conclusion**

*The principal conclusion drawn from this review is that whilst there is basically a sound system of control, there are some areas where it is viewed improvements can be made.*

The main areas highlighted in the report are as follows:

- In order to ensure that contract payments are timeous and cash flow is maximised, DCS staff should arrange a meeting with Architectural Services staff to resolve the lack of a uniform approach, formally agree procedures to be followed in future and include a mechanism for handling any complaints. To assist the process, DCS should consider the feasibility of providing actual costs with each valuation.

**Management Response to the Audit Report**

The audit findings and recommendations were formally reported to the Director of Dundee Contract Services and appropriate action agreed to address the matters raised.



## v) INTERNAL AUDIT REPORT 2010/08

<b>Department</b>	<b>Finance</b>
<b>Subject</b>	<b>Assessment of Debtors' Income and Expenditure</b>

**Introduction**

A review of housing benefits overpayments was part of the planned internal audit work. During this review the auditor was provided with departmental guidance which included income and expenditure forms. The Council's Anti-Poverty Strategy included in the Housing Benefit Overpayment Recovery Policy states that "Any repayment arrangement will be realistic". Income and expenditure forms detail a debtor's incomings and outgoings for the month in order that a realistic repayment amount can be set. The sum agreed should be set with a view to minimising the period over which the debt is repaid whilst being realistic in order that the debtor does not default on the arrangement made. As the forms provided during the review of housing benefit overpayments were different to those which had been provided for other audits which have been undertaken, an exercise was carried out to identify differences in departmental working practices.

**Scope and Objectives**

The overall objective was to compare income and expenditure procedures operated by different services within the Council.

**Conclusion**

*The principal conclusion drawn from this review is that whilst there is basically a sound system of control there is one area where it is viewed improvements can be made.*

The area commented upon in the report is as follows:

- In order to ensure consistency across the Council, a corporate income and expenditure sheet should be compiled with guidance being provided on high priority and low priority expenditure items and the level of surplus income to be requested which meets the requirements of the Council's Anti-Poverty Strategy.

**Management Response to the Audit Report**

The audit findings and recommendations were formally reported to the Head of Financial Services and appropriate action agreed to address the matters raised.