Strategic Delivery Plan Monitoring – Analysis Report –

Strategic Outcome 3

Quarter 2: July – September 2019

Report version: ASCH Cabinet Committee – 27 November 2019

Kent County Council
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Introduction

The Strategic Delivery Plan sets out, and seeks to drive delivery of, the most significant change activity for the Council.

The Strategic Delivery Plan includes 79 pieces of significant activity identified by services across the Council which align to the outcomes in KCC's Strategic Statement. Corporate Directors are responsible for delivering the activity in the Strategic Delivery Plan and the Operating Plans within their Directorate.

The Strategic Delivery Plan monitoring arrangements aim to support the delivery of activity and the role of the Corporate Management Team (CMT) in providing a leadership role for management action to deliver activity effectively and at pace. This includes ensuring appropriate resources and capacity is available to support delivery and that proportionate corporate assurance and risk management arrangements are in place. Activity that has high risk, complexity and financial value within the Strategic Delivery Plan will also be considered by Corporate Board, providing collective ownership of organisational issues to identify constructive action and building momentum to deliver better outcomes.

Lead Officers, named within the Strategic Delivery Plan, are responsible for providing a quarterly update on progress through the Strategic Delivery Plan monitoring arrangements. Information collated focuses on exceptions where there are issues to successful delivery and will be utilised to build both individual activity information and whole council trends over time.

This report presents an overview of monitoring information collated for those activities that relate to Strategic Outcome 3 in Quarter 2 (July to September 2019) and detailed analysis. The analysis indicates the emerging issues for the County Council's significant activity, based on the 17 responses for Strategic Outcome 3 in Quarter 2 2019/2020. Individual activity scorecards for Strategic Outcome 3 are available as a background document on request.

The report summarises key themes for Corporate Management Team and Corporate Board consideration, in order to:

- Understand the activities which have identified issues for successful delivery;
- Consider what actions may be required to address issues (if appropriate);
- Consider wider trends and address cross-activity implications (where required);
- Consider trends from time series data;
- Ensure appropriate and timely governance and assurance arrangements for activities;

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Monitoring Quarter 2 (July – September 2019) overview

100% (17) of activities submitted a response

82% (14) of activities are on track for successful delivery

12% (2) of activities require remedial action

6% (1) of activities are unlikely to be achieved

64% (7) of activities that are due to complete in 19/20 are not on track or are on track but with a revised end date

67% (2) of activities not on track are **People Commissioning** type activities

76% (13) of activities were able to identify key milestones

100% (3) of activities not on track have identified **dependency** issues

100% (3) of activities not on track have identified **stakeholder/relationship** issues

67% (2) of activities not on track have identified **complexity** issues

67% (2) of activities that are not on track have **delivery environment** issues

67% (2) of activities with issues have mitigating actions or escalations in place

59% (10) of activities are expecting to report to **Informal Governance Boards** (Service Commissioning Board, Infrastructure Commissioning Board, Budget Delivery Group)

53% (9) of activities are expecting to report to Cabinet Committees

67% (2) of activities not on track are recorded in **Project/Programme risk registers**

67% (2) of activities not on track are recorded in **Service / Divisional risk registers**

33% (1) of activities not on track are recorded in **Directorate risk registers**

0% (0) of activities not on track are recorded in **Corporate risk registers**

Monitoring Quarter 2 (July – September 2019) summary

Each activity response for Quarter 2 2019/20 has been developed into a 'scorecard' providing an overview of the activity. Below is a summary for each activity:

Outcome 3: Older and vulnerable residents are safe and supported with choices to live independently

Activity	Delivery	Milestones	CMM	Corporate Board	Informal Governance	Cabinet Committee
45. Development of KCC's approach to an Integrated Care System for Kent and Medway	Yes, it is on track					✓
46. Supporting Local Care Implementation	Yes, it is on track	✓				
47. Continue to build effective strategic partnerships to maximise resource and improve public health outcomes (KCHFT and District partnerships)	Yes, it is on track	✓			✓	✓
48. Refresh of the Community Support Market Position Statement to inform market shaping, oversight and sustainability	Yes, it is on track				✓	✓
49. Effective Winter Pressures Commissioning and High Impact Changes – Home to Decide and Home to Settle	Yes, it is on track	✓			✓	
50. Refresh of the Older Persons Accommodation Strategy and Delivery Plan	Yes, it is on track	✓			✓	✓
51. Analysis of Housing with Care (Extra Care) Placements	Yes, it is on track	✓			✓	
52. Review of Voluntary and Community Sector Grants across the Council	No, it is unlikely to be achieved	✓			✓	✓
53. Recommissioning Care and Support in the Home Services and delivering associated projects.	Yes, it is on track	✓	✓		✓	
54. Commissioning Disability and Mental Health Residential Care Services	Yes, it is on track				✓	✓
55. Dementia Service Redesign and commissioning - KMPT	Yes, it is on track	✓				
56. Kent & Medway Neurodevelopmental (ND) Health Service commissioning	It requires remedial action	✓			✓	
57. Delivering the Transforming Care Programme for children and young people with autism and/or learning disability	Yes, it is on track	✓			✓	✓

| Activity	Delivery	Milestones	CMM	Corporate Board	Informal Governance	Cabinet Committee
58. Delivering the Transforming Care Programme for Adults with Learning Difficulties (LD)	Yes, it is on track					
59. Recommissioning of Carers Short Breaks	It requires remedial action	✓			✓	✓
60. Deliver the Income Pathway projects and develop future policy on the contribution from Adult Social Care clients	Yes, it is on track	✓	✓			✓
61. Implementing MOSAIC Adult Social Care case management and finance system	Yes, it is on track	✓				

Monitoring Quarter 2 (July – September 2019) analysis

1. Submissions

1.1 The Quarter 2 2019-20 submission window opened on 30 August for Lead Officers to complete and submit their online form. The MS Form closed two weeks later on 13 September.

1.2 Overall, 79 pieces of activity were submitted (100% of all Strategic Delivery Plan activities), 17 of them related to Strategic Outcome 3. Overall the quality of responses received improved from Quarter 1 with greater information in the 'Progress Description' and more detailed milestones. This will also be considered with further guidance to Lead Officers in future monitoring.

2. Delivery

2.1 Lead Officers were asked whether their activity is on track to be delivered successfully (to time, budget and with the necessary approvals). This is based on whether the activity has breached tolerance levels in the professional judgement of the Lead Officer or as defined in activity documentation. Relating to Strategic Outcome 3, 14 activities are on track (12 activities in Q1) 2 require remedial action (down from 4 in Q1) and 1 is unlikely to be achieved (the same as in Q1).

Delivery
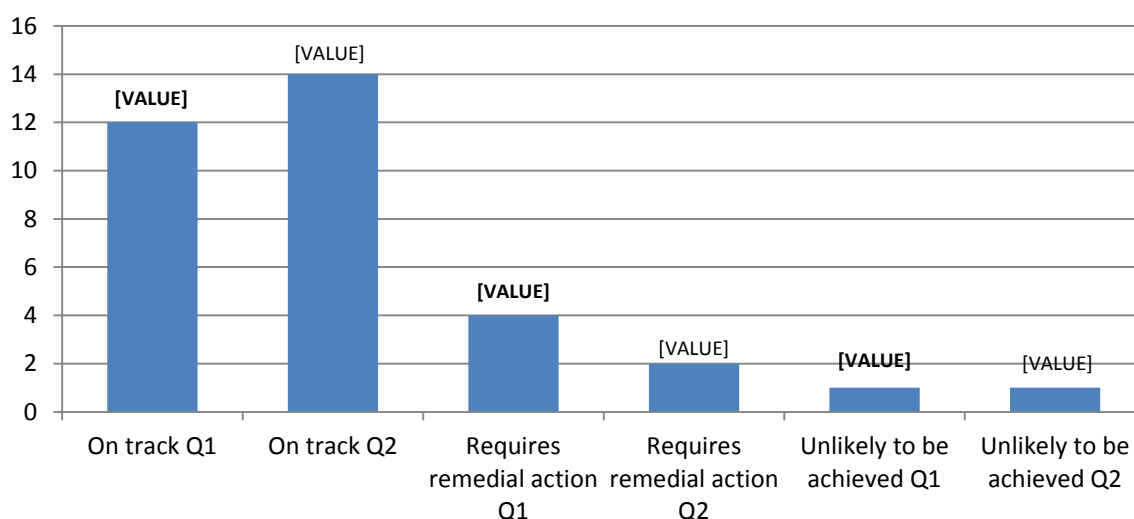
2.2 Those that are not on track for successful delivery are:

Activity	Delivery Q1	Delivery Q2	Emerging Issues	Mitigating Actions / Escalations
52. Review of Voluntary and Community Sector Grants across the Council	Yes	Unlikely to be achieved	Capacity; Complexity; Stakeholders; Delivery Environment;	✓

|			Dependencies	
56. Kent & Medway Neurodevelopmental Health Service commissioning	Requires remedial action	Requires remedial action	Financial; Governance; Stakeholders; Dependencies	✓
59. Recommissioning of Carers Short Breaks	Yes	Requires remedial action	Complexity; Stakeholders; Delivery Environment; Dependencies	✓

2.3 Based on the end dates provided in the SDP, 11 activities in Strategic Outcome 3 are due to complete in 19/20. Of these activities 8 are on track for successful delivery, 2 require remedial action, and 1 is unlikely to be achieved. Of these 11 activities, 7 have provided new end dates or a 'go live' date beyond the original SDP end date, 4 of which still reported to be 'On Track'.

3.   Milestones

3.1 The Quarter 2 Strategic Delivery Plan monitoring included additional questions on activity milestones. 13 of the 17 activities in Outcome 3 reported key milestones (up from 12 in Quarter 1). The level of detail included in submissions around key milestones has greatly increased.

Milestones	
76% (13)	of activities were able to identify key milestones

3.2 Of the 13 activities that reported key milestones, , 11 activities were able to identify milestones for approval to proceed (up from 9 in Q1), 10 for when an EQIA initial screening would be completed (up from 4 in Q1), 5 for a consultation start date (up from 2 in Q1), 7 for when a Key Decision would be taken (up from 4 in Q1), 13 for a 'Go Live' date (up from 4 in Q1), and 6 provided 'other' milestones (up from 3 in Quarter 1).
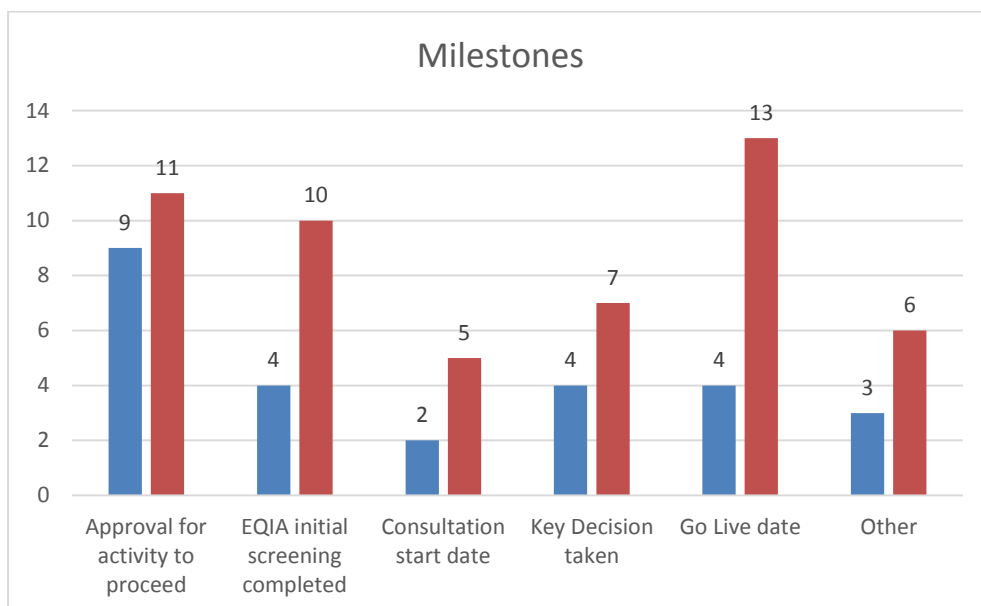
3.3 In future, activities will be monitored against the milestones they have provided and trend information over time will be reported via the quarterly report to Corporate Management Team and Corporate Board.

3.4 7 Strategic Outcome 3 activities in Quarter 2 have revised their end dates beyond their original SDP end date. 4 of these are reporting as 'On Track'.

Activity	Status	Original SDP End Date	New End Date
49. Effective Winter Pressures Commissioning and High Impact Changes – Home to Decide and Home to Settle	Yes, it is on track	01/11/2019	06/04/2020
51. Analysis of Housing with Care (Extra Care) Placements	Yes, it is on track	30/06/2019	31/10/2019
52. Review of Voluntary and Community Sector Grants across the Council	No, it is unlikely to be achieved	01/01/2020	01/04/2021
55. Dementia Service Redesign and commissioning - Kent and Medway NHS and Social Care Partnership Trust	Yes, it is on track	01/08/2019	01/09/2021
56. Kent & Medway Neurodevelopmental Health Service commissioning	It requires remedial action	31/03/2020	31/10/2020
59. Recommissioning of Carers Short Breaks	It requires remedial action	01/01/2020	01/04/2021
61. Implementing MOSAIC Adult Social Care case management and finance system	Yes, it is on track	30/09/2019	31/03/2020

4.   Issues

4.1 Where activities are not on track for successful delivery, Lead Officers were asked to identify the issues impacting on their activity. 11 options, based around Delivery Environment Complexity Analytic (DECA) themes, were provided with multiple responses allowed and an 'other' option where free text could be provided if required. Lead Officers were also asked to provide further detail explaining the issues, when and why they had occurred and what impact they will have on successful delivery.

Emerging Issues
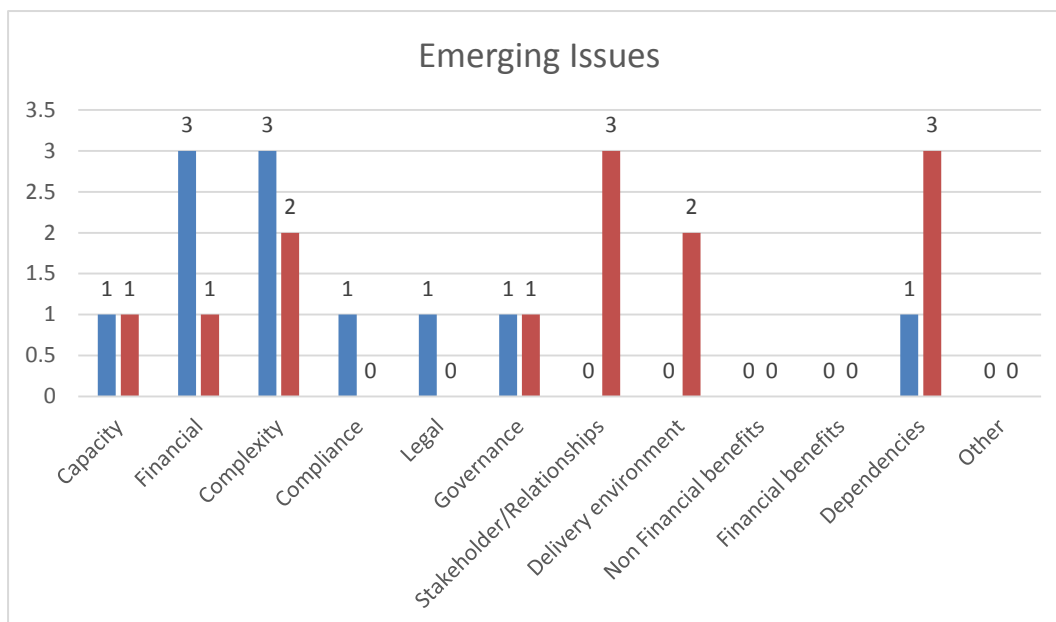
4.2 Of the 3 activities which are not on track (either 'requires remedial action' or 'is unlikely to be achieved'), all were able to identify the contributing factors against DECA themes. The table above shows the identified issues for Quarter 1 (blue) and Quarter 2 (red).

4.3 Key Emerging Issues:

4.3.1 **Dependencies** – Activities identified dependencies with other projects for example activity 59. Recommissioning of Carers Short Breaks reported being impacted by the revised project plan for the Community Wellbeing Services offer.

4.3.2 **Delivery Environment** – Activities identified issues where they are significantly dependent on partnerships with health, the voluntary and community sector or wider markets. Activity 52. Review of Voluntary and Community Sector Grants across the Council highlighted the revised service model and procurement plan south to ensue less of a destabilising impact on the Kent Voluntary and Community Sector. Activity 56. Kent & Medway Neurodevelopmental Health Service commissioning identified the complexities of the changing landscape of the CCGs Integrated Care Partnerships.

4.4 The level of complexity of activities is highlighted by the fact that all 3 activities identified more than one emerging issue. Of the 3 activities that identified issues, 1 identified 5 issues and 2 identified 4 issues.

Activities that reported multiple issues
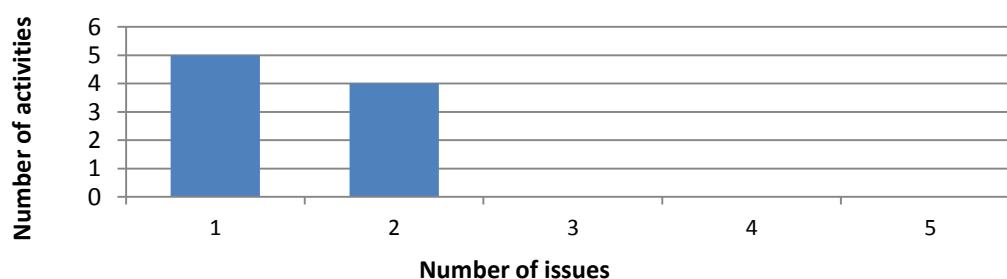
5. Mitigating Actions or Escalations

5.1 Of the 3 activities which are not on track for successful delivery, 2 have identified mitigating actions or escalations.

5.2 Key themes from mitigating actions or escalations:

5.2.1 **Change of Approach** – A number of activities have taken a change in approach to address issues including no. 52 Review of Voluntary and Community Sector Grants across the Council which has reviewed the service model and developed a revised procurement. A significant number of activities revised the end date or go live date in response to issues.

5.2.2 **Specific Action** – A number of activities are taking specific actions to resolve their issues. This includes developing greater strategic leadership involvement to address whole system issues (no. 56. Kent & Medway Neurodevelopmental Health Service commissioning).

5.2.3 **Resource arrangements** – 56. Kent & Medway Neurodevelopmental Health Service commissioning has progressed funding arrangements with CCGs.

5.3 The activity that did not identify mitigating actions or escalations is:

- **52: Review of Voluntary and Community Sector Grants across the Council**. No mitigating actions have been identified, however the activity has reviewed the service model and revised the procurement plan to address issues.

6. Governance

6.1 Lead Officers were asked to identify if they had reported on their piece of activity to a number of boards during Quarter 2. Of the 17 Strategic Outcome 3 activities in the Strategic Delivery Plan, 1 has reported to Cabinet Members Meeting, 2 have reported to Cabinet Committees, and 3 have reported to an informal governance board (Service Commissioning Board, Infrastructure Commissioning Board or Budget Delivery Group).

Governance (Reporting since Quarter 1)	
1	activities have reported to Cabinet Members Meeting.
2	activities have reported to Cabinet Committees.
3	activities have reported to Informal Governance Boards.

6.2 Lead Officers were also asked if they were intending to report on their piece of activity during the rest of the monitoring year (2019/20). 2 responses indicated that they expected to report to Cabinet Members

Governance (Expected reporting in 19/20)	
2	activities expected to report to Cabinet Members Meeting.
9	activities expected to report to Cabinet Committees.
10	activities expected to report to Informal Governance Boards.

Meeting (down from 3 in Q1), 9 to Cabinet Committees (up from 4 in Q1) and 10 to an informal governance board (up from 6 in Q1). 4 activities are not expecting to report to any of the boards in 19/20 (up from 1 in Q1).

6.3 Of the 10 activities which expect to report to an informal governance board in 19/20, 6 (60%) have a scheduled item on the informal governance forward plan. Being able to confirm (if at least provisionally) an expected date to report to an Informal Governance Board or Cabinet Committee would help to manage the forward agenda planning of the Boards.

7.   Additional Oversight and Assurance

7.1 **Corporate Risk and Assurance** provides oversight of a number of the Council's most significant or complex change activities and conducts independent reviews on the associated projects and / or programmes. Corporate Risk and Assurance have reviewed the Strategic Delivery Plan monitoring information which is consistent with their understanding of activities.

7.2 I**nternal Audit** provides an evaluation of the effectiveness of the County Council's risk management, control and governance processes. In future SDP monitoring Internal Audit will be engaged to ensure their findings around specific activities feeds into the SDP monitoring report. The Internal Audit and Counter Fraud Plan 2019-20 identified a review into 'Companies in which KCC has a substantial interest / investment' (RB48 2020) for completion in Quarter 1 2019/20. This will be reviewed to ensure consistency with SDP monitoring findings once reported to Governance and Audit Committee.

7.3 The Internal Audit and Counter Fraud Plan 2019-20 can be found at: https://democracy.kent.gov.uk/documents/s90024/Item%2008%20Internal%20Audit%20and%20 0Counter%20Fraud%20Plan%202019-20.pdf

Risk Registers

8.   Risk

8.1 Where activities identified issues to successful delivery, those Lead Officers were asked whether their issues are currently recorded on a risk register. All 3 activities with issues do have risks recorded within project / programme, service / divisional, directorate or corporate risk registers.
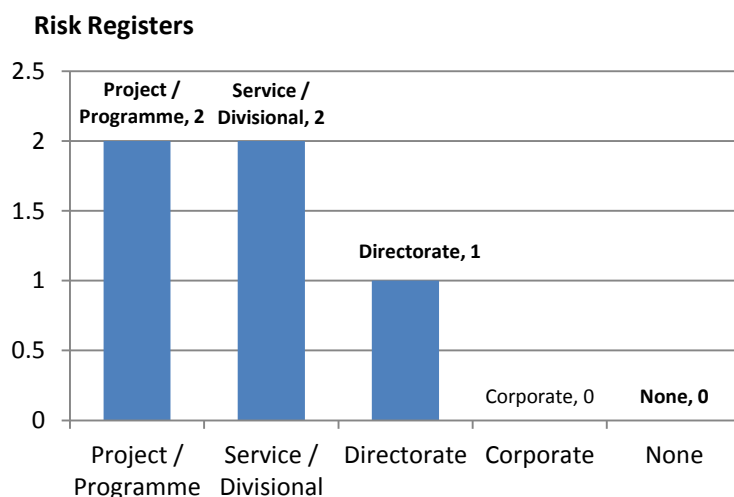
8.2 2 activities have recorded issues within their project or programme risk registers, 2 activities have issues recorded in service or divisional risk registers and 1 activity has issues recorded in the Directorate risk register.

9.   Activity Scorecards

Each activity response for Quarter 2 2019/20 has been developed into a 'scorecard' providing an overview of the activity. These are available as a background document on request.