PROJECT TEAM REPORT SERVICE REVIEW - REGULATORY SERVICES PROGRESS REVIEW YEAR 1

1. PURPOSE

- 1.1 The corporate service review of Regulatory Services, approved by Council in February 2011, introduced a radical redesign of service delivery to achieve the specified budget savings. The new arrangements have been implemented although it is expected that it will take two years to fully achieve all the outcomes from the review which includes cultural changes, doing more with less, new ways of working and better management of information and workflows.
- 1.2 This report provides an update on the work undertaken to date, identifies achievements and also details proposals for taking the review forward in 2012-14.

2. RECOMMENDATIONS

- 2.1 Significant progress has been made with 93% of the implementation plan having been achieved.
- 2.2 It will take some time for the cultural changes to be fully implemented although much work has been done through our communication strategy, new roles and responsibilities, integration of teams, management and of aspects of each services work. This work will be ongoing and will focus on a range of issues including staff empowerment.
- 2.3 That the outstanding work from the service review be taken forward by a Regulatory Services Business Improvement Team. This will allow us to incorporate other service priorities into the workplan, including the development of a Balanced Score Card and the outcome of the recent Public Services Improvement Framework (PSIF) assessment of Planning and Regulatory Services. This group will comprise of a cross section of staff within the service, reporting to the Regulatory Service Management team; the Departmental Management Team and to the Planning, Protective Services and Licensing Committee. This affords a level of accountability.

3. BACKGROUND

- 3.1 The main objectives of the service review were to:
 - Redesign the service and change the staff structures across Environmental Health and Trading Standards. This included a rationalisation of management and reductions in total posts but with an objective of protecting key frontline services.
 - o Make changes to service delivery and efficiencies.
 - o Achieve budget savings of £259,172 over the period 2011-14.

- 3.2 An implementation plan was developed to deliver these changes. Given the extent of service redesign, a transitional team was formed with seconded staff from within the service led by a 3rd tier manager. The work associated with the service review was progressed by a core team supported by delivery groups which involved a cross section of staff across the whole service. These arrangements allowed the new Regulatory Services Manager to facilitate the development of the new robust and effective management arrangements and systems and to support staff in new roles.
- 3.3 The transition phase ended on the 31st August 2011 when the 3rd tier manager left the service. Subsequent work has continued through the same delivery groups managed by the Regulatory Services Manager. The project was delivered and managed using Prince II methodology.
- 3.4 The topic based delivery teams focussed on completing linked activities within the plan:
 - Service Support
 - Service Improvement
 - Alternative Service Delivery
 - Communications
 - Licensing

In the course of this work, the new Regulatory Services Management Team had the responsibility of supporting these groups and to implement the new service management arrangements to support the new delivery model.

4. OUTCOMES ACHIEVED

- 4.1 The implementation plan detailed specific priorities which were required to deliver the service review and these were reviewed by the Delivery Team (which consisted of Delivery Team leads) and managed by a Project Team. This reported to the Departmental Management Team and thereafter the Transformation Board. The original implementation plan is detailed in Appendix I of this report and provides detailed information on each priority.
- 4.2 As at May 2012, we have:
 - a. Delivered 93% of the plan exceeding the target of 92%
 - b. Achieved the total budget savings over the period 2011-13 as opposed to 2011-14.
 - c. Agreed and implemented a communications strategy which embeds a new engagement and inclusive approach with staff. This has included regular briefing newsletters to staff (see Appendix II for an example); a staff representative at Delivery and Project Team meetings; a UNISON representative on the Project Team; and a staff day where progress and issues were discussed. Staff surveys were also used in the course of the year, including one relating to

the impact of the service review one year on. This concluded that 79% of staff were of the view that communications had been good.

4.3 In considering the main outcomes of the review, the current position is as follows:

| Outcome | Achievements |
|---|---|
| Redesign the service and change staff structures across Environmental Health and Trading Standards. | We have established new management arrangements We implemented the changes to roles and responsibilities of staff, where appropriate, and have protected frontline services by redeploying displaced Regulatory Services staff into new posts and recruiting to 3 other new posts. |
| Changes to service delivery and efficiencies. | Redesigned the debt counselling service. Reaffirmed and developed joint working arrangements with Strathclyde Police in respect of antisocial noise. Guidance for members of the public has also been prepared. Enhanced the level of information on the Councils website relating to Regulatory Services. Embraced new working arrangement through workforce deployment with a flexible workforce and are reviewing mobile working software solutions. Implementing a document management and workflow system. |
| Budget savings of £259,172 over the period 2012- 14 | The full savings have been achieved within 2011- 13 budgets. Maximised income to achieve target. Of significance are retaining the shellfish biotins project for a three year period and implementing a partnership funding arrangement with other local authorities for a mobile anthrax incinerator. |

The project tracker (Appendix III) provides details the work of each Delivery Team. A summary of the achievements are:

General service delivery arrangements: this included revising statutory appointments, developing an HR strategy to support changes in the staff structure, developing a new finance model for the service and establishing mechanisms for communicating with staff.

These have all been achieved and work is ongoing to clarify roles and, responsibilities. The budget has been redesigned to reflect the new service arrangements. Communication with staff is critical to the effective delivery of a service and the staff survey in April 2012 indicated that 79% of staff felt that communications had been good. At a staff day in October, workshops were held to discuss how we could empower staff more and this will be a priority to take forward into 2012-14.

- 4.5 **Management arrangements, roles and responsibilities**: a significant amount of management time was directed to developing new job descriptions, person specifications and documentation for job evaluations in order to implement the new staff structure, to establish the new management and operational teams and to manage the transition of professional support staff to operational 4th tier managers. These measures are in place (and are shown in the staff structure at Appendix IV) although the transition of professional support staff was delayed to allow the integration of multiple teams into single teams. Work continues to clarify roles and responsibilities and to provide capacity for the rationalised management team to progress service issues.
 - (a) Opportunities for integration across Planning and Regulatory Services have been explored and several good examples are already in place e.g. cross service support for EDMS, shared training events (Disclosure training, September 2011) and agreed expansion of SharePoint resource to whole of Planning and Regulatory Services. The Regulatory Services Management Team has also agreed in principle to request support from planning enforcement officers in appropriate circumstances. This initiative could be further developed by the Planning and Regulatory Services Management Team once the outcome of the pilot integration of monitoring and field officers in the Oban office is known.
- 4.6 **Alternative service delivery arrangements**: the main elements of this topic were antisocial noise, community advice, smoking enforcement, debt counselling and maximising income.
 - (a) The partnership arrangements with Strathclyde Police will continue, supported by funding from the service. The details of an operational protocol have been confirmed and staff have received briefings on these procedures. In addition an information leaflet providing details of the partnership arrangements has been distributed to other council services and relevant external agencies.
 - (b) The Service Review option to reduce and cease financial support to local community advice services was rejected by Council and the level of funding continues The Transformation Board approved a report by the Transition Manager recommending new arrangements for funding community advice services, including a shift to contract status rather than service level agreements. The Executive Director of Development and Infrastructure has discussed this with the Executive Director of Community Services and a Project Team is to be established to develop these new corporate community advice support arrangements. This is to be taken forward into 2012-13.
 - (c) The previous arrangements for delivering smoking enforcement have now been revised to share the remit across a much wider group of enforcement officers, rather than being restricted to individual officers. Awareness briefings have now been delivered to staff, council services and external agencies and the necessary amendments made to officers authorisations. Ongoing enforcement will now be incorporated in operational work plans.

- (d) The Debt Counselling team was reduced to two officers and their remit is now confined to Debt Arrangement Scheme cases and other complex or enforcement cases. To support the transition to the new model, a temporary officer continued in post until 31st March 2012. All relevant council services and external agencies have been advised of these changes and are supported by officer participation in the Argyll and Bute Advice Network and the local Money Advice Forum.
- (e) The fees and charges applied by the service have been analysed in comparison to those of benchmarking partners. The results of this exercise indicated that Argyll and Bute's charges were significantly lower than other Councils and that income could be increased. Work is continuing to identify the real costs associated with the licensing process and this, together with the benchmarking information, will be taken forward through the budget setting process for 2013/14.
- (f) The target was to maximise income levels by £3,000. We have exceeded this target for 2011/12 and will repeat this in 2012-13. Increases have been achieved through the new shellfish biotoxin project, renegotiating contracts with Glasgow Scientific Services for analytical services and calibration and new arrangements with other local authorities where they will pay to share an animal health mobile incinerator.
- 4.7 **Service Improvement:** the key themes were systems and procedures, best practice/benchmarking, compliance with national guidelines e.g. Disclosure, service user feedback and liaison groups. The review of systems and procedures has commenced but will be carried forward to the Business Improvement Team.
 - (a) A benchmarking group has been established and we will work to agree the benchmarking indicators and expand the group where possible.
 - (b) Training has been delivered in relation to disclosure work and will be carried forward as policy to be developed by the Business Improvement Group.
 - (c) A review of liaison groups has been undertaken and principle established for attendance and feedback to staff. This will be implemented by the Business Improvement Group.
- 4.8 **Service Support:** The projects with SharePoint, Uniform and Civica have started the transformation of information and knowledge management within the service. This has supported the new flexible working arrangement adopted by the Council and mobile working platforms are still being considered by a project team.

 Achievements to date have been:
 - a) Document management system. The installation and commissioning of Civica for Environmental Health has gone live and configurations issues with Trading Standards are being actively progressed. The service will be the first local authority in Scotland to implement these systems.

- b) Mobile solutions. We are awaiting the outcome of a pilot in Fife before committing to mobile solutions.
- c) Regulatory networks. The project was completed with the development of protocols for the attendance at, and dissemination of information from, professional networking groups in which the service participates.
- d) Safer working. We have a greater awareness of our own health and safety arrangements and have developed a Plan for 2012-13 which has been adopted across Planning and Regulatory Services.
- e) SharePoint implementation. The use of SharePoint for the Service Delivery projects has been successful, and the site developed for this purpose has been recognised to be at the cutting edge of SharePoint within the Council.
- f) UNIform development. Work to improve the quality of data held in Uniform and the consistency of use has been undertaken in parallel with the Civica project. More work is required.
- g) Website development. All information relating to the service on the Council's website has been reviewed, rewritten as necessary and is now subject to periodic review. All pages have owners who are responsible for the accuracy and relevance of the available information.
- 4.9 **Communications:** The measures undertaken have helped staff to keep up to date with the Service Review and have started a change of culture where staff engagement and participation are the norm. This is recognised in the staff survey results.

Key activities of this team have been:

- a) regular staff lead newsletter "Snippets" (requested by staff at the onset of the implementation),
- b) The development of a SharePoint site which provided a mechanism for allowing staff to access documents pertinent to Service Review Process and a recent survey shows that 91% have accessed SharePoint over the course of the Service Review. This site has been reviewed by the Councils ICT and they wish to assist in developing this further as a "pathfinder" project.
- c) A staff seminar took place on 27 October 2011.
- d) A regular reporting programme has been established to notify the communications team and members of good news from the Service. This is being further expanded through the development of an achievements diary.
- 4.10 **Licensing:** The team was tasked with modernising the Councils Licensing arrangements. This has been delayed for a variety of reasons, although the Group have met to develop new systems and procedures which better integrate the existing functions carried out by Governance and Law and Regulatory Services. Achievements to date include work to ensure that

on-line applications for licences can be made.

4.11 The reports from the delivery teams are attached in Appendix IX.

5. RISK MANAGEMENT

- 5.1 The risks associated with the implementation of the service review were clearly identified through the risk register. The main risks identified were:
 - a. Failure to deliver statutory duties relating to Animal Health, Environmental Health and Trading Standards, due to likely reduction in field officers resulting from budget savings.
 - b. Reduction in service performance due to staff being involved in the implementation of the service review.
 - c. Reductions in service performance resulting from loss of field staff due to budget savings or inability to recruit to new posts.
 - d. Failure to deliver the service review due to other work pressures.
 - e. Detrimental impact on equality and sustainability assessments.
- 5.2 These risks have been monitored and managed through redefining priorities, redeploying resources and target dates, where appropriate. It has been necessary to revise some actions into a longer timescale and an example of this would be the better integration of licensing functions, where a consensus on the way forward has taken some time to agree.

6. THE IMPACT OF THE SERVICE REVIEW AFTER YEAR 1

- 6.1 Significant progress has been made in 2011-12 to deliver our service review arrangements and to maintain service delivery. This has been problematic at times and particularly in the transitional stages, with operational staff redeployed into this team for a 5 month period. This impacted on plans we had to develop aspects of Environmental Health, Trading Standards and Animal Health although we did focus on delivering our key performance indicators.
- 6.2 We are able to measure the work undertake to deliver the service review and this has been detailed in section 4 and is evidenced through Appendices II-IX. However, in assessing the true impact of the new service arrangements, it is essential that we consider what impact this has had to service delivery of a statutory service which is accountable to the public, elected members and to other Government bodies.
- 6.3 The elements which allow us to consider the impact are: **Performance review**

In assessing the key indicators across Environmental Health, Trading Standards and Animal Health (see Appendix V), is it noted that

 We have achieved our targets for the majority of the key indicators for 2011-12. Of the 19 local indicators reported in 2011-12, 15 have met or exceeded the targets set and a further two are within a few percentage of meeting the targets set. The 2 remaining figures did

- not have a target set.
- By comparison with previous years, there are 19 indicators (statutory and local) which are comparable or have increased performance (total 24 indicators).

The focus in 2011-12 has been to deliver the service review and also to deliver on key performance indicators. There are other aspects of our service plans which we were unable to deliver on including the alternative enforcement policy and the redesign of food safety and health and safety services. Failure to deliver these aspects was due to insufficient resources because of vacancies or staff redeployed on the service review. As we move forward into 2012-13, there will be greater capacity as we have recruited new staff; established systems to support our new service and the ongoing work will be managed through the new Business Support Team.

6.4 Stakeholder feedback

Members of the PPSL Committee were positive in their feedback about the service when considering the 2012-13 workplans on the 18th April 2012.

In addition to this informal feedback, we have contacted those stakeholders who provided feedback on the service as part of the Service Review Baseline Report but received feedback from just 3 of the 17 services and organisations. Responses were received from Civil Contingencies, Illegal Money Lending Unit and Building Standards. They report:

- Being satisfied or very satisfied with the service provided;
- That the service has remained the same over the implementation period;
- Building Standards highlight that they believe staff resources have been insufficient to date (although this should be alleviated now that the vacant posts are being filled);
- Being satisfied or very satisfied with the current working arrangements;
- That working arrangements are effective for their organisation and Building Standards suggests that there could be closer working especially visiting remote communities to save duplication of work;
- Both Building Standards and Civil Contingencies highlight opportunities for joint working although it is recognised that there is already some joint working in place;
- Performance Results, Customer Results and Key Processes are all reasonable;
- Phone, face-to-face and email are the favoured methods of communication;
- They are not planning service changes which could affect Regulatory Services.

Given the low level of responses we will repeat this survey towards the end of 2012-13 to allow further comments and feedback.

6.5 Staff engagement and feedback

Staff engagement has been a key element of the implementation of the

Service Review and details are provided above in sections 4.2 and 4.9 above. Communication has been positive although there is a belief amongst some staff that we should get the review finished and focus on operational work. The success of the communications strategy can be evidenced by the Staff Information Day held on October 2011 and also the recent staff survey in April 2012 which sought views on the work to date.

The outcomes are:

Staff day

35 members of staff attended the day and were provided within an update on the Service Review. During four workshop sessions staff were offered the opportunity to provide their views on staff empowerment, lone working, administration and communications. A survey carried out following the day indicated that 93% rated the day as above average or excellent.

Staff survey

Feedback was received from 28 staff (53%). There is agreement that the structure changes have been completed and that the service operates on a risk based ethos. There is general agreement that we could work more effectively with other Services and that whilst the website has been improved further work is required in relation to the alternative enforcement strategy.

There is general support for the use of staff delivery teams with 46% indicating that they would like to be on short term groups and 39% on ongoing work based groups.

A full copy of the responses can be found at Appendix VI.

UNISON feedback

A representative from UNISON was a member fo the Project Team throughout the service review design and delivery stages. They had no comments or issues on the Year 1 review report.

6.6 Customer Feedback

Customer Satisfaction Surveys continued to be sent out during 2011/12. When asked how satisfied they were with the overall service provided only 4% on average reported that they were dissatisfied, an average of 71% were very satisfied, 18% were fairly satisfied.

The table below shows a comparison between the 2010/11 and 2011/12 figures, generally performance has been maintained at a similar level with the exception of TS Service Requests where satisfaction fell by 10% (although it is worth remembering that only 22 responses were received and therefore a small number of negative responses can quickly affect the figures). This may reflect the resource issues with trading standards.

| Survey | 2010/11 | 2011/12 | |
|---|---------|---------|---|
| Trading Standards: Consumers (Service Requests) | 88% | 78% | Œ |
| Trading Standards: Businesses (Programmed work) | 100% | 96.5% | Œ |
| Debt Counselling/Money Advice | 97% | 93% | Œ |
| Environmental Health: Consumers (Service | 82% | 88% | Ø |
| Requests) | | | |
| Environmental Health: Businesses (Programmed | 100% | 100% | Ł |
| work) | | | |
| Animal Health: Businesses (Programmed work) | 92% | 100% | Ø |
| Private Water Supplies | 100% | 97% | Œ |
| Private Landlord Registration | 91% | 100% | Ø |
| Licensing Standards | | 100% | |

Further details of the survey responses is contained at Appendix VII.

6.6 **Benchmarking**

The drive to reduce the statutory performance indicators for Environmental Health and Trading Standards and our focus on developing local indicators to measure performance has resulted in difficulties benchmarking our performance with other local authorities. As part of the service review options appraisal; process we undertook benchmarking with 6 other similar local authorities. Attempts to reinstate these arrangements have proven difficult and whilst we have agreement for the Benchmarking Club, common benchmarks are still to be developed. This is not a priority for other local authorities.

In 2012-13, we will continue to progress this matter and benchmarks will be developed.

6.7 Equality Impact Assessment

The original Equality Assessment concluded that the proposals would have little impact on equality. This was founded on the same level of service being provided to all. The assessment scored low for negative impact and for number of people affected.

Having reviewed this, we have continued to manage these risks at low.

Evidences: through the customer, stakeholder and staff surveys which have been carried out. The graphs at Appendix VIII illustrate that the results of equalities monitoring carried out during 2010-11 and 2011-12 shows there has been no significant drop in service levels.

6.8 Sustainability Assessment

The original Sustainability Assessment concluded that there was little impact as a result of the Service Review. The negative aspects related to loss of service due to a depleted resource across all areas but specifically debt counselling, service requests; grant assistance for private water supplies. Under the corporate assessment scheme score 3 was most prevalent and there was no need to improve our approach to be more sustainable.

Having reviewed each of the guiding principles, the most prevalent score is still 3 and there is no need for any amendments to be made. The risks have been managed through our focus on key indicators and also through the recruitment to new posts.

Evidence: performance monitoring and customer surveys confirm that there has been no significant reduction in service delivery in 2011-12 although trading standards customer enquiries and debt counselling customer satisfaction has dropped to 78% and 93% respectively (previously 88% and 97%).

Customer satisfaction levels are generally above 88% and are improving although there has been a dip in Trading Standards consumer requests (-10%) and Debt Counselling (-4%).

Proposed actions

We have taken action to address the Trading Standards issue through the appointment of staff as the service has been depleted due to staff absence this year. The Debt Counselling arrangement will be reviewed in 2012-13.

6.9 Other Non-Service review achievements from 2011-12

The service review and service plans provide details of the planned priorities but do not have regard to the reactive work undertaken in the course of the year. This reactive work impacts on the ability to complete the planned work as it utilises the same resource.

In 2011-12, as well as implementing the service review there have been a number of other key achievements :

- Positive formal audit reports were received relating to the food safety remit from the Food Standards Agency which demonstrates the level of service provided
- The Animal Health service was found to meet the new Framework standard.
- We have supported business in accessing the new export market in China. Through audits, certification and issuing of export certificate, we have assisted a salmon business in realising in excess of \$6 million of business:
- We have exceeded the £1 million mark for supporting improvements to private water supplies in Argyll and Bute through the grant scheme.
- We have participated in the Public Service Improvement Framework review for Planning and Regulatory Services.

7. OUTCOMES

7.1 Outcomes are more difficult to measure after one year and we will undertake further work next year to measure whether we have achieved the planned outcomes particularly in relation to increased productivity, changes to culture, efficiencies and a service which manages risk (failure to deliver statutory duties).

7.2 **Productivity**

Productivity has remained high in the last year and this can be supported by the following factors:

- We have met or exceeded the majority of our key targets as well as implementing the service review and associated service support work including installation of a document management system and preparing for the customer management centre.
- We have introduce a new management structure and removed conflicts which resulted in managing operational teams at 4th tier and also having an operational workload (100% and 76% respectively in staff survey).
- We have protected frontline service delivery (90% of staff confirm that we have achieved this).
- There has been no significant impact on our customer satisfaction levels.
- The review of the new debt counselling arrangements indicates a reduction in performance from 2010/11, back to 09/10 levels. This reflects the impact of embedding down the new arrangements and also the reduced resource. A review in March indicates that the measure reflects the number of complex enquiries which resulted in a Personal Debt Arrangement scheme and is dependent upon the number of enquiries received. This is outwith our control and the hope is that through the general advice network, we reduce the number requiring this approach. As a result of the review in March of the impact of these changes, a new measure is being developed which will more effectively measure the delivered service to customers.

We currently do not have specific productivity measures outwith the service planning process and it is our aim to develop such measures in the forthcoming year.

7.3 **Culture**

Cultural change takes some time and we have focussed on supporting staff where they have new roles, developing new teams (at management and operational levels) and clarifying roles and responsibilities. We have continued to build upon staff engagement through a regular newsletter (which has now expanded to cover service and staff news as well as Service Review updates) and staff service day. We will build on this **to foster staff engagement and participation.** We are on the "right track" as a recent staff survey has identified that 79% believe that the levels of communication are good; with 89% wishing delivery teams to continue with 61% willing to participate.

We need to **empower officers** more and have implemented arrangements where professional operational officers have responsibility for a "district" supported by other field and service support staff. Only 43% of staff feel more empowered as a result of the review and this is an area we will be developing in 2012-14.

7.4 Efficiencies

We have achieved the efficiency savings which were identified through the service review.

7.5 Risk Management

We have continued to priorities work on the basis of risk. The staff survey showed that 93% of staff agree that we operate on a risk based ethos with proportional enforcement activities.

7.6 Work still to do

There are aspects of the implementation plan still to be delivered in the course of this year. Of significance are:

- a) To ensure that the work undertaken on roles and responsibilities, management and support arrangements across the service are kept under review.
- b) Confirm that the funding of Argyll and Bute Citizens Advice (ABCAB) is consolidated within one department who will provide 3rd sector funding and support as proposed.
- c) Developing common benchmarks indicators with the Benchmarking Club to allow comparison with other authorities. The intention is that this would develop into productivity measures. In addition, a review will be undertaken of service measures with a view of developing more outcome-focussed measures of performance.
- d) Monitor an equalities risk related to the provision of a debt counselling service as the new arrangements are more reliant on other agencies providing low-level advice and the Council dealing with complex cases. Year 1 arrangements have worked well although there is a drop in performance, which is to be expected with a reduction in 33% of staff whilst establishing new arrangements with other providers. The risk is that the vulnerable in the community do not have access to appropriate services for debt advice. We will keep this under review
- e) Alternative enforcement through the provision of advice and assistance to the wider community was delayed as the staff member went on maternity leave and we are currently advertising for cover during this period of absence, to allow us to undertake this work, which is critical to the new service design.
- f) Cultural changes arising from our new working arrangement will take some time to embed into service delivery. We will undertake further work to measure how we are achieving changes to culture through empowerment, communications, customer engagement and valuing our staff.
- g) The implications of protecting front-line staff are clear and enable us to undertake our core activities. However, the rationalisation of management has created workload and capacity issues in the transitional year and this requires further consideration to utilise the service support arrangements more effectively
- h) Delivering improvements to the licensing regime as these were delayed. The remit has now been agreed and this work will

proceed in 2012-13 working with Governance and Law.

i) Delivering a Balanced Scorecard for Regulatory Services.

8. CONCLUSIONS

- 8.1 One year into the service review, we have implemented 93% of the service review and work will continue to deliver these in 2012-14.
- 8.2 The outcomes identified by the implementation plan have largely been achieved, with the notable exception of the integration of licensing.
- 8.3 Work to date has been very positive and we have implemented the new arrangements within Regulatory Services; maintained key performance indicators; increased the level of engagement with consumers, stakeholders and staff; and enhanced the profile of the service through better information on the Councils website. This work bodes well for the future. We will take the outstanding issues from the service review together with other service improvement issues into a Business Improvement Team.
- 8.4 The last year has been difficult with completing pressures from operational workload; the service review and staff coping with new roles and increased remits. In addition, a considerable amount of resource was spent configuring an electronic document management system which will support us as we develop. It is important that we recognise the work and commitment of staff as their participation has been critical in delivering these achievements.
- 8.5 In 2011-12, the service plans and management focus was on delivering key priorities from our service plan and implementing the service review. It is my considered opinion that we have delivered much of these although there is still some work to do.
- 8.6 The service review is only one improvement strand and there are issues which have been identified through implementation of the review, new statutory requirements, the work of the delivery groups, management priorities, staff and consumer feedback, delivery of the Balanced Scorecard and the Public Services Improvement Framework which all require to be progress through our *Business Improvement Team*.
- 8.7 The Business Improvement Team will comprise of a range of staff across the service and the delivery team model which has been successful in the review stages will be adopted in the new team. The works required to complete the review, together with the issues identified in section 7.6 will be progressed by the new Team.

Alan Morrison
Regulatory Services Manager

APPENDIX I - Implementation Plan

| OPTION ELEMENT / ACTION | Completed by end of - | Staff Resources | Other Resources | Approvals Required |
|---|-----------------------|---|--|--------------------------|
| General Service Delivery Arrangements | | | | |
| Review functions of Chief Protective Services Officer, | Feb 2011 | Regulatory Services Manager | | Head of Service (HS) |
| allocate to posts in new structure | | (RSM), Transition Manager (TM) | | |
| Prepare Job Descriptions, including transition team | Feb 2011 | RSM, TM | Trade union, as relevant | HS |
| Identify transitional arrangements and objectives, allocate transitional roles / responsibilities | Mar 2011 | RSM, TM | | HS |
| Complete Job Evaluation process for all new roles | Feb 2011 | HS, HR, RSM, TM | Job Evaluation team Trade union, as relevant | HS |
| Design governance arrangements for the implementation | Mar 2011 | TM, RSM | Other relevant staff. Finance, trade union, | Director, HS, |
| of the new service delivery model, using Prince 2 methodology as appropriate. | | | Human Resources (HR) Manager | Transformation Board |
| Compile Project Initiation Document, project plan, risk register etc, including arrangements for monitoring + | Mar 2011 | TM | RSM, transition team, admin | HS |
| review | | | | |
| Develop Human Resources Strategy (retirement / redundancy / recruitment) | Mar 2011 | RSM, TM | HR, Trade Union | HS, Director, Head of HR |
| Develop Financial Management Plan addressing transitional arrangements + final service model | Mar 2011 | RSM, TM, Finance Manager | Service budget supplemented by Earmarked Reserves | HS, Director |
| Training & support for management team, as required | April 2011 | RSM, TM | External trainer, Employee Counselling, | HS |
| Training & support for management team, as required | April 2011 | KSW, TW | Mentoring, job shadowing, coaching | 113 |
| Consultation with Staff on implementation | April 2011 | HS, RSM, TM | Management team, HR, Trade union, as relevant | HS |
| Implementing The New Management Structure | | | | |
| Define line management and reporting structures | Feb 2011 | RSM, TM | Unions, staff consultation | HS |
| Recruit to the posts, in line with agreed HR Strategy | May 2011 | HS; HR | Unions | Chief Executive, |
| | | | | Transformational Board, |
| | | | | Director |
| Allocate specific functions to nominated officers, in line with agreed HR Strategy | May 2011 | TM, RSM, 4 th tier managers, lead officers | Link to Job Descriptions above | HS |
| Prepare officers for new roles & responsibilities, in line | June 2011 | TM, RSM | HR, external trainer as required, peer | HS |

| with agreed HR Strategy | | | support, 4 th tier and frontline staff | |
|--|-----------------|---|--|--------------------|
| Merge 2x 3rd tier posts to 1xRSM | | | · | |
| Identify additional functions of Operations Manager | Feb 2011 | TM, RSM | Link to Statutory authorisations, Job Descriptions, Service Plans, enforcement functions | |
| Allocate specific functions to RSM, in line with agreed HR Strategy | Mar 2012 | HS, RSM | HR, link to Job Descriptions, Statutory authorisations | |
| Phased transition to new strategic & statutory roles, in line with agreed HR Strategy | Mar 2012 | TM, RSM, Divisional officers | Transition team, 4 th tier and frontline staff, Peer support, skills development, mentoring, formal training | - |
| Transfer of technical awareness of whole discipline | Mar 2012 | TM | Coaching, mentoring, training. Link to Statutory authorisations, Job Descriptions, Service Plans, enforcement functions | |
| Realign 4th tier management posts - shift from 6 area | | • | • | |
| Identify additional functions / remits of 4 th tier managers, in line with agreed HR Strategy | Feb 2011 | TM, RSM | 4 th tier managers, Job Descriptions, Service Plans, Enforcement functions | - |
| Allocate specific functions / remits to Divisional Environmental Health Officer's and Trading Standards Officer, in line with agreed HR Strategy | Mar 2012 | TM, RSM, 4 th tier managers | 4 th tier managers, Skills development, remit / experience, formal training | |
| Phased transition to new strategic & statutory roles, in line with agreed HR Strategy | Mar 2012 | TM, RSM, 4 th tier managers | Transition team, frontline staff, Peer support, skills development, mentoring, formal training | |
| Review current arrangements and ensure that statutory appointments and in place | Mar 2012 | RSM, TM, lead officers | Previous committee reports & Scheme of Delegation | Committee Approval |
| Realign frontline teams - match specialist and area st | aff to new 2x 4 | th tier managers | · | |
| Identify new /additional functions / remits of lead officers, in line with agreed HR Strategy | Feb 2011 | TM, RSM, 4 th tier managers | Specialist Officers, frontline staff, Job Descriptions, Service Plans, Enforcement functions | |
| Allocate specific functions / remits to lead, in line with agreed HR Strategy | Mar 2012 | TM, RSM, 4 th tier managers, | Specialist Officers, frontline staff, Skills development, Experience, formal training | |
| Phased implementation of new arrangements for all frontline staff, in line with agreed HR Strategy | Mar 2012 | RSM / 4th tier managers, peer support | Front-line staff, Specialist officers. Skills development, mentoring, Experience, formal training | - |
| Alternative Service Delivery Arrangements Unacceptable Neighbourhood Noise | | | | |

| Confirm funding for Strathclyde Police | Mar 2011 | RSM | Co-operation of Police | HS |
|---|-----------|-------------------------------|--|----------|
| Confirm Memorandum of Understanding for shared | Mar 2011 | RSM | Co-operation of Police | HS |
| service model | | | · | |
| Confirm service delivery model | Apr 2011 | RSM, TM | Co-operation of Police | |
| Cascade training to relevant staff on enforcement | Jun 2011 | TM | Transition team, in house staff training | |
| approach | | | | |
| Deliver awareness briefings / bulletins to relevant | Jul 2011 | TM | Transition Team, Communications Team | |
| agencies & public on enforcement approach | | | | |
| Monitor & Review service model | Mar 2012 | TM, RSM | Staff, stakeholder feedback | |
| Community Advice services | | | | |
| Confirm level of residual funding available to external | Year 2 of | TM | Co-operation of CAB, Finance Manager | Director |
| agencies (e.g. CAB) | Service | | | 1 |
| | Review | | | |
| Benchmark with Scottish Local Authorities with CAB, | Year 2 of | TM | Other Scottish councils with CAB | |
| develop alternative delivery model | Service | | | |
| | Review | | | |
| Agree joint plan to reduce / withdraw service, engage | Year 2 of | TM | Co-operation of CAB | |
| with CAB to identify alternative funding | Service | | | |
| | Review | | | |
| Confirm referral arrangements with relevant external | Year 2 of | TM | Cooperation of external providers | |
| agencies (e.g. Citizens Advice Direct, National Debt Line, | Service | | | |
| etc) | Review | | | |
| Deliver awareness briefings / bulletins to relevant Council | Year 2 of | TM | Transition Team, Communications team | |
| services, community agencies & public on alternative | Service | | | |
| service access | Review | | | |
| Monitor & Review service model | | TM, RSM | Staff, stakeholder feedback | |
| Smoking Enforcement | | | | |
| Assess residual workload | Jun 2011 | RSM, Divisional Environmental | | |
| | | Health | | |
| Prepare transitional plan | Jul 2011 | TM | | |
| Provide training for wider staff team | Jul 2011 | RSM, TM | Transition team | |
| Amend enforcement authorisations as required | Aug 2011 | RSM | | Director |
| Deliver awareness briefings / bulletins to relevant Council | Aug 2011 | TM | Transition Team | |
| services, enforcement agencies & public | | | | |
| Monitor & Review service model | Mar 2012 | TM, RSM | Staff, stakeholder feedback | |
| Debt Counselling | | | | |

| Assess residual workload | Mar 2011 | TM, Lead Officer | | |
|---|------------|--------------------------|---|--------------------------------|
| Prepare transitional plan | Apr 2011 | TM, Lead Officer | | |
| Deliver awareness briefings to relevant Council services, | May 2011 | Lead Officer | Communications team, Transition Team | |
| external agencies & public | | | | |
| Monitor & Review service model | Mar 2012 | RSM, TM, Lead Officer | Staff, stakeholder feedback | |
| Maximising Income | | | | |
| Benchmark other services re fees + charges | June 2011 | TM | Transition team | |
| Analyse results + draft proposals to meet target income | Aug 2011 | TM, RSM | Finance team | HS |
| Consult service users re proposals | Sep 2011 | TM | Transition team | |
| Prepare committee report | Oct 2011 | TM, RSM | | Committee |
| Publicise new fees + charges, as approved | Nov 2011 | TM | Communications Team | |
| Transitional Arrangements | | | | |
| Identify key objectives and workplans for the transitional team, in accordance with agreed HR Strategy | Feb 2011 | RSM, TM, HS | None | - |
| Allocating transitional roles and responsibilities and resourcing the transitional arrangements, in accordance with agreed HR Strategy | Mar 2011 | RSM, TM | Other relevant staff, Human Resources (HR) Manager | HS |
| Compile detailed project plan, including monitoring + review | Apr 2011 | RSM, TM | Project / Management Team, Admin support | - |
| Develop project plan for implementation of joint service licensing | April 2011 | RSM, TM | RSM, TM, Licensing project team | HS, Head of Governance and Law |
| Consult other services undertaking / undertaken similar restructuring | May 2011 | TM | Admin support | |
| Consultation with relevant agencies on alternative service delivery; community advice, noise, smoking, debt | May 2011 | RSM, TM | Admin support | - |
| Develop Communication strategy for staff, stakeholders etc | May 2011 | TM | HR, Trade Union, Communications Team | HS |
| Redesign service management measures including benchmarking, productivity, monitoring and reporting arrangements, targets setting, risk management and evidencing continual improvement | Sep 2011 | TM, RSM | D&I Performances and Business Support Manager | HS, Director |
| Develop policy, strategy + procedures for quality system for new service | Sep 2011 | TM, RSM, transition team | Lead officers, IT | |
| Identify + implement IT developments to improve service delivery e.g. technical application of IT developments | Dec 2011 | TM | RSM, IT support within Planning and Regulatory Services; Council IT services; | |

| (including mobile working), document management system etc providing efficiencies + improved productivity of the service | | | IDOX | |
|---|----------|---------|---|--------------------------------------|
| Identifying opportunities for integration within Planning and Regulatory Services, Development and Infrastructure and other relevant Council services | Dec 2011 | ТМ | Transition Team, RSM | Director, HS across D and I Services |
| Delivering equalities, sustainability, social and 3 rd sector impact assessments | Mar 2012 | ТМ | Customer Focus Delivery Team, Admin support | - |
| Develop &, implement systems for review of all aspects of new service model implementation, monitor progress, taking remedial action as required | Mar 2012 | TM, RSM | Staff, stakeholder feedback, trade union as appropriate | HS |

Notes

- 1. Key. HS- Head of Planning and Regulatory Services; RSM Regulatory Services Manager; TM- Transition Manager, HR Human Resources
- 2. Activities prior to the 31/03/11 will be undertaken by The current Operations Managers and an Implementation Project Team until the formal appointments are made

APPENDIX II – Example of Snippets



SERVICE UPDATE

21 MARCH 2012

Service Briefing



The Project Team met last week to consider the progress made in relation to the Service Review which is now 90% complete and ahead of target. Over the next couple of months we will focus on reviewing the changes implemented before holding a final meeting in May. Our activities will then be reported to the Audit Committee who have been carefully following our progress.

Updates are being reported to the Departmental Management Team on a regular basis and they are also generally happy with the progress to date.

There will of course be some elements of the Service Review which will not be completed by May e.g. the licensing improvements and these will be taken forward by a Business Improvement Group who will be developing and implementing the Service Improvement Plan. Membership for this group will be determined shortly, if you are interested in being involved please speak to your line manager. As they say the only constant is change.

Delivery Team Update

We have now implemented 90% of the Service Review. See the <u>project tracker</u> on <u>SharePoint</u> for more detailed information. Key outcomes from the meeting were:-

- J **Communications.** John Scott will take over as the lead officer for communications.
- J **Review Process**. Please contribute to the review process by completing the <u>staff</u> survey on SharePoint.
- Alternative enforcement The Project Team agreed that, subject to budget constraints, additional resources should be secured to undertake the alternative enforcement work whilst Dawn is on Maternity Leave. If you have any projects which you think should be included within scope of alternative enforcement please outline these to your manager. We expect to be able to issue the noise leaflet shortly subject to receiving confirmation of updates to be made to the website. The enforcement of smoking legislation by Trading Standards staff will be carried forward into the Service Improvement Plan which is being developed.
- J **Licensing.** We have finally received confirmation that Governance and Law will be participating in a working group to make improvements to how we deal with licences. A meeting is planned for 26 March with an Action Plan and recommendations likely to be available in the summer.

- Service Improvement. We are still awaiting confirmation from the benchmarking club as to which measures will be used. Our policies are being reviewed and it is intended that current procedures will be sited on SharePoint once the site is redesigned (target 31/03/12). A programme will be developed identifying those procedures which need to be reviewed and this will be carried out post Service Review.
- J Service Support. Work in relation to the review of how we use Uniform has been delayed because of the work required to get Civica up and running, the review of Uniform will be taken forward by the service improvement group once the Service Review has been completed. Work is progressing in relation to Civica.
- J Roles and Remits. Work is ongoing to clarify working relationships, roles etc within the new arrangements and will be influenced by the <u>staff survey</u>.

To discuss specific issues please contact any member of the Delivery Team.

Good News

We have developed a means by which good news across the service is highlighted to our elected Spokesperson and Chair of the PPSL Committee, and our communications team.

Key messages of late have been:

- J High level of customer satisfaction for environmental health 87% of service request customers were satisfied with the overall level of service provided to them. This is an increase of 3% from a previous survey in 2011.
- Tackling antisocial behaviour in the communities The environmental health service, working with the police, are targeting specific areas to address concerns of antisocial noise, dog fouling, littering, and bogus callers/door step sellers. As part of this initiative, the transport of scrap metal and smoking within commercial vehicles will also be targeted.
- J **Growing our own -** Combating the difficulties of recruiting professional staff to Argyll and Bute, we have undertaken a training programme to support existing staff attain professional qualifications. Kathleen Munro has successfully undergone a training programme and has qualified as a Trading Standards Officer. Congratulations to Kathleen.

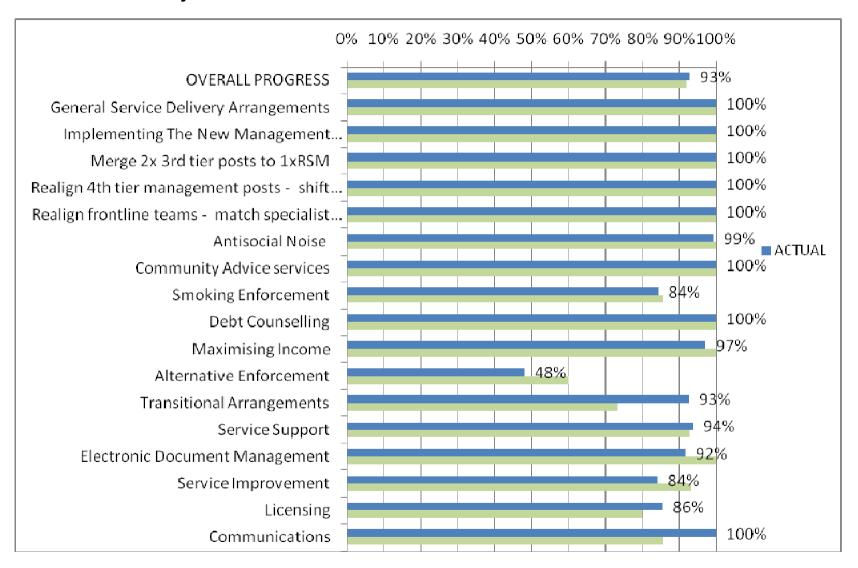


Staffing issues

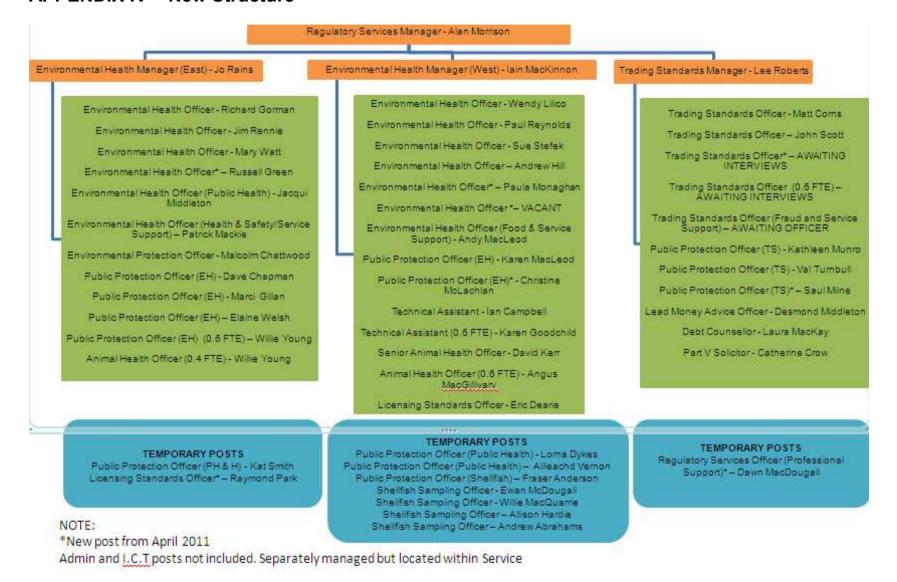
- J Interviews for the replacement Trading Standards Officer (Fraud and Service Support) are being held this week as are the Public Protection Officer (Shellfish).
- J Adverts are out for replacement of the 0.6FTE Trading Standards post in Helensburgh/Dunoon as well as a new Trading Standards Officer post to be based in Lochgilphead.

Any questions relating to this edition of Snippets, to Alan or Delivery Team leads

APPENDIX III – Project Tracker



APPENDIX IV - New Structure



APPENDIX V – Performance Review

The following Statutory Performance Indicators were identified during the Service Review Process, updated figures are provided.

| | 2007/08 | Scot. Av. | 2008/09 | Scot. Av. | 2009/10 | Scot. Av. | 2010/11 | Scot Av. | 2011/12 | Trend since implementation | | | | |
|---|-------------------|--------------|----------|--------------|--------------------------------|--------------|----------|-------------|-------------|----------------------------|--|--|--|--|
| | Trading Standards | | | | | | | | | | | | | |
| High Risk - % of inspections undertaken within time | 77.3% | 93.3% | 67.4% | 92.1% | 78% | | 73.9% | | 88.4% | Ø | | | | |
| Medium Risk - % of inspections undertaken within time. | 68.7% | 86.8% | 36.7% | 86.2% | 43% | | 67% | | 84.3% | Ø | | | | |
| Consumer Complaints - % dealt with in 14 days. | 72.6% | 72.8% | 79.5% | 74.2% | 87.8% | 77.3% | 85.9% | 77.7% | 87.5% | Ø | | | | |
| Business Advice Requests - % dealt with in 14 days. | 93.1% | 96.3% | 81.0% | 96.5% | 90% | 96.8% | 78.8% | 96.6% | 71.8% | Œ | | | | |
| | | Er | vironmen | tal Health | • | | • | | | | | | | |
| Food safety hygiene inspections: Approved Premises - % of inspections undertaken within time. | 95.8% | 89.2% | 76.0% | 94.0% | | | SPI Disc | ontinued a | fter 2008/0 | 9 | | | | |
| Domestic noise complaints requiring attendance on site, the average time (in hours) between the time of complaint and attendance on site. | 54 | 91.8 | 51 | 47.9 | 28 | 47.2 | 10.7 | 46.2 | | Not yet available | | | | |
| Part V domestic noise complaints, the average time (in hours) between the time of complaint and attendance on site. | 25 | 2.7 | 23 | 1.6 | 24 | 1.5 | 1 | 0.6 | | Not yet available | | | | |
| For non-domestic noise complaints requiring action, the average time (calendar days) to institute formal action. | 32 | 26 | 46 | 31.5 | SPI Discontinued after 2008/09 | | | | | | | | | |

Of the 4 Statutory Performance Indicators currently available to report for 2011/12, 75% have improved during implementation of the Service Review.

The following Local Performance Indicators were also identified and are updated.

| | 2007/ 08 | 2008/ 09 | 2009/ 10 | 2010/ 11 | 2011/ 12 | Trend since implementation | Target |
|--|-------------|-------------|-------------|-------------|-------------|----------------------------|--------|
| Trading Standard | s | | • | • | | | • |
| % of Major Trading Standards investigations completed | 100% | 50% | 76% | 100% | 100% | Ł | 100% |
| Trading Standards - Underage sales - % of traders assessed against target | n/a | n/a | 80.6% | 53.2% | 136.2% | Ø | 100% |
| Debt Counselling | ļ | | | | | | |
| Trading Standards -% of Clients Provided with a Personal Debt Recovery Action Plan | 58% | 38% | 85% | 103% | 84.5% | Œ | 80% |
| Money Manageme | nt | • | | | | | • |
| Number of Clients seen | 105 | 107 | N/A | N/A | N/A | Ceased | |
| Home Safety | • | • | | | | | • |
| Trading Standards - Number of Home Safety Audits | 605 | 627 | 587 | 636 | N/A | Ceased | |
| Environmental Hea | lth | | • | • | | | • |
| % of Env Health Service Requests Resolved within 20 Working Days | 64% | 76% | 83% | 92% | 95% | Ø | 90% |
| Smoking compliance - % of Inspections where Smoking Compliance work was Undertaken | 100% | 98% | 100% | 100% | 100% | Ł | 95% |
| Food Safety - % of food Premises which are Broadly Compliant | 89% | 86% | 94% | 88% | 91% | Ø | 75% |
| Health and Safety - % of High Risk Programmed Inspections Undertaken within Due Date | 74% | 94% | 95% | 88% | 98% | Ø | 100% |
| Health and Safety % of Medium Risk Programmed Inspections Undertaken within Due Date | 69% | 88% | 69% | 75% | 96% | Ø | 70% |
| Food Hygiene % High Risk Programmed inspection and audit of premises completed within due date | 96% | 97% | 98% | 100% | 100% | Ł | 100% |
| Food Hygiene - Medium Risk Programmed inspection and audit of premises completed within due date | 95% | 91% | 78% | 90% | 96% | Ø | 70% |
| Food Standards - % High Risk Programmed Inspections Undertaken within Due Date | 0% | 50% | 70% | 98% | 100% | Ø | 100% |
| Contaminated Lan | d | | | | | | |
| % of High Priority Contaminated Land assessments | 100% | 95% | 100% | 98% | 89% | Œ | 90% |
| Private Water Suppl | ies | | | | | | |
| No of category A supplies to be improved to EC standards | 392 | 410 | 427 | 370 | 368 | Ł | N/A |
| No of Risk Assessments for Type A Supplies to be completed & achieved | 100 | 120 | 172 | 470 | | | |
| % Risk Assessments of Type A Private Water Supplies undertaken | 100% | 74% | 134% | 102% | 100% | Œ | 100% |

| Landlord Registration | | | | | | | | | | |
|--|-----|-----|------|------|------|---|------|--|--|--|
| % Private Landlord Applications Determined | 70% | 84% | 89% | 97% | 98% | Ø | 92% | | | |
| Animal Health | | | | | | | | | | |
| % of Animal Health High Risk Inspections Undertaken within Due Date | | 95% | 100% | 100% | 100% | Ł | 100% | | | |
| % of Animal Health Medium Risk Programmed Inspections Undertaken within Due Date | | 90% | 92% | 75% | 90% | Ø | 70% | | | |
| % of Animal Health Service Requests Resolved within 20 Working Days | | 97% | 99% | 92% | 95% | Ø | 90% | | | |

Of the 18 Local Performance Indicators reported during 2011/12, 56% have improved since implementation of the Service Review began, 28% have remained the same and performance has reduced in 16% of the Indicators.

APPENDIX VI – Staff Survey

| Please consider the following statements and indicate whether you agree or disagree | 1 Agree | 2 | 3 | 4 Disagree | N/A | Agree | Disagree | Overall |
|---|------------|------------|------------|---------------|------|------------|------------|---------------------------|
| At least 75% more staff agree than disagree | | | | | | | | |
| The service has rationalised it management arrangements | 89% | 7% | 0% | 0% | 4% | 96% | 0% | Agree (+96%) |
| to a core team of 4 managers (RS Manager, 2 x EH | 93% | 7% | 0% | 0% | | | | _ |
| Manager, TS Manager) from the previous arrangements of 9 | | | | | | 100% | 0% | Agree (+100%) |
| As part of the restructure frontline resources have been | 68% | 18% | 7% | 4% | 4% | 86% | 11% | Agree (+75%) |
| protected and in some cases have increased in number (please see current structure) | 71% | 19% | 7% | 4% | | 90% | 11% | Agree (+78%) |
| At a frontline level, we could work more effectively with each | 43% | 43% | 4% | 7% | 4% | 86% | 11% | Agree (+75%) |
| other TS and EH | 45% | 45% | 4% | 7% | | 90% | 11% | Agree (+78%) |
| The service implements the ethos of risk-based, | 57% | 36% | 4% | 0% | 4% | 93% | 4% | Agree (+89%) |
| proportionate enforcement | 59% | 38% | 4% | 0% | 4% | 97% | 4% | Agree (+93%) |
| At a frontline level, we could work more effectively with other professionals within Governance and Law (licensing) | 39% 44% | 36% 40% | 11% 12% | 4% 4% | 11% | 75% 84% | 15% 17% | Agree (+60%) Agree (+67%) |
| Regulatory Services has benefited from Corporate initiatives | 46% | 25% | 11% | 4% | 14% | 71% | 15% | Agree (+56%) |
| to date (e.g. remote and flexible working, use of VPNs, wireless networks etc.) | 53% | 29% | 13% | 5% | 1470 | 83% | 17% | Agree (+65%) |
| We have made significant improvements in the quality and | 43% | 36% | 11% | 0% | 11% | 79% | 11% | Agree (+68%) |
| relevance of service information on the website | 48% | 40% | 12% | 0% | | 89% | 12% | Agree (+76%) |
| Sufficient work is still required to deliver the alternative | 32% | 36% | 7% | 0% | 25% | 68% | 7% | Agree (61%) |
| enforcement strategy in support to frontline operational teams | 43% | 48% | 9% | 0% | | 91% | 9% | Agree (+81%) |
| The level of communication with staff in the implementation | 43% | 36% | 14% | 4% | 4% | 79% | 18% | Agree (+61%) |
| of the service review has been good | 45% | 38% | 15% | 4% | | 82% | 19% | Agree (+64%) |
| Between 25% and 49% more staff agree than disagree | | | | | | | | |
| There is less conflict between management at 3 rd tier | 32% | 21% | 4% | 4% | 39% | 53% | 8% | Agree (+45%) |

| | 52% | 34% | 7% | 7% | |
|--|-----|-----|-----|-----|-----|
| There is less conflict between management and operational | 29% | 25% | 11% | 7% | 29% |
| work at 4 th tier | 41% | 35% | 15% | 10% | |
| We have integrated teams across EH (now East and West) | 43% | 18% | 25% | 7% | 7% |
| | 46% | 19% | 27% | 8% | |
| Integration across EH has been beneficial | 32% | 21% | 11% | 7% | 29% |
| | 45% | 30% | 15% | 10% | |
| We have integrated teams across TS (now 1 team) | 46% | 11% | 4% | 7% | 32% |
| | 68% | 16% | 6% | 10% | |
| Integration across TS has been beneficial | 25% | 11% | 4% | 4% | 57% |
| | 58% | 26% | 9% | 9% | |
| At a frontline level, we could work more effectively with | 32% | 39% | 18% | 4% | 7% |
| other professionals within Planning and Regulatory Services (planning services and building standards) | 34% | 42% | 19% | 4% | |
| We have started our alternative enforcement strategy | 32% | 29% | 14% | 4% | 21% |
| | 41% | 37% | 18% | 5% | |
| I would like to see Snippets retained | 21% | 39% | 21% | 7% | 11% |
| | 24% | 44% | 24% | 8% | |

| .= | | |
|-----|-----|--------------|
| 87% | 13% | Agree (+74%) |
| 54% | 18% | Agree (+36%) |
| 76% | 25% | Agree (+51%) |
| 61% | 32% | Agree (+29%) |
| 66% | 34% | Agree (+31%) |
| 53% | 18% | Agree (+35%) |
| 75% | 25% | Agree (+49%) |
| 57% | 11% | Agree (+46%) |
| 84% | 16% | Agree (+68%) |
| 36% | 8% | Agree (+28%) |
| 84% | 19% | Agree (+65%) |
| 71% | 22% | Agree (+49%) |
| | | |
| 76% | 24% | Agree (+53%) |
| 61% | 18% | Agree (+43%) |
| 77% | 23% | Agree (+54%) |
| 60% | 28% | Agree (+32%) |
| 67% | 31% | Agree (+36%) |
| • | - | |

Up to 24% more staff agree than disagree

| Regulatory Services is utilising joint working effectively | 21% | 25% | 25% | 7% | 21% |
|--|-----|-----|-----|----|-----|
| | 27% | 32% | 32% | 9% | |

| 46% | 32% | Agree (+14%) |
|-----|-----|--------------|
| 58% | 41% | Agree (+18%) |

More staff disagree than agree

| I feel more empowered to make decision in the new | 14% | 18% | 36% | 7% | 25% |
|---|-----|-----|-----|----|-----|
| arrangements than in the previous service structure | | | | | |
| | 19% | 24% | 48% | 9% | |
| | | | | | |

| 32% | 43% | Disagree (- 11%) |
|-----|-----|---------------------|
| 43% | 57% | Disagree (- 15%) |

Yes No 89% 11%

The delivery team model has allowed contributions from across the Service, would you like to see delivery groups (for service review e.g. Civica and operational work e.g. PWS, Health and Safety) used in the future?

| | Service review related | Short- term groups | Ongoing work groups | None |
|--|------------------------------|--------------------------|---------------------------|------|
| Would you like to be part of the following types of delivery groups? | 14% | 46% | 39% | 39% |

| | Summary |
|--|--|
| How could TS and EH work more effectively with each other? | General support for: * an information day/training to help understanding of what each does * Joint visits where appropriate (although some responses say that this already happens) * Sharing of information more |
| How could we work more effectively with planning and building standards? | General support for: * an information day/training to help understanding of what each does * Joint working where appropriate e.g. licensing, new premises (although some responses say that this already happens) * Greater communication and sharing of information between Planning/Building Standards and Regulatory Services at an officer level rather than just through management * Closer working with Marine/Coastal unit |
| How could we work more effectively with Governance and Law? | General support for: * an information day/training to help understanding of what each does * Greater communication and sharing of information about licensing applications and approvals * A regular newsletter update from G&L |
| What work is required in relation to the alternative enforcement strategy? | Suggestions include: * Questionnaires to be sent to all low risk premises * Keep website up to date * Provide further information via the website including guidance for industry * Promotion of the service * Presentations, information and briefings * Work with Business Gateway There seems to be a level of uncertainty about what alternative enforcement is and what can be included. |
| What additional actions do you feel are required to address any short comings in the above outcomes and objectives of the service review | Suggestions include: * Review of the roll-out of Civica and the impacts on admin and officers * Regular joint EH and TS meetings |

| | * Further work to ensure EH East and West are working in the same ways * Review of the resources available against the demands for the Service * Definition of roles * Review of the admin resource * Integration of Feeding Stuffs controls into 'Farm to Fork' food control * More flexibility to work from home |
|---|---|
| | * Continued consultation with staff |
| | * Provide correct and up to date information on the website |
| | * Better management of key documents i.e. policies and procedures including a formal way to |
| | suggest changes to such documents |
| | * Increasing the pace of integration |
| Do you have any other comments to make in relation to | Comments include: |
| the service review, its implementation and how we take it forward into the service improvement plan | * Encourage all staff across the Council to recognise that we are on the same team * Have a break from reviews so that teams and changes introduced can bed in before another review starts and things change all over again |
| | * 3rd tier managers should have delegated tasks to suitable people, some people have had little involvement |
| | * In future provide a clear, justifiable case for changes proposed |
| | * There is a need to clearly define concepts to all staff |
| | * Provide staff with clear advice and explanation of the proposals as early as possible |
| | * Concern that the Service Review may not have protected the frontline staff complement * Implementation of flexible/mobile working |
| | * Service review has been beneficial and there is a clearer understanding of resources and operational outcomes |

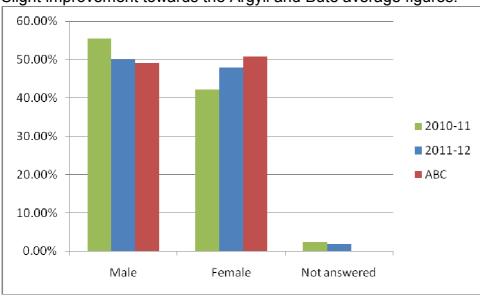
APPENDIX VII – Customer Satisfaction Surveys

| | | Quarter 1 | | | Quarter 2 | | Quarter 3 | | | | Quarter 4 | | | |
|--|---------------|--------------------------|--------------------------------|----------------------------------|-----------------------------------|-----------------------------------|----------------------------------|---------------------------------|-----------------------------------|-----------------------------|-----------------------------|-----------------------------------|-----------------------------------|---------|
| | | TS – Debt Counselling | EH – Licensing Standards | EH – Landlord Registration | TS – Programmed Inspections | EH – Programmed Inspections | EH – Landlord Registration | EH - PWS Completed Grants | AH – Programmed Inspections | EH - Service Requests | TS - Service Requests | TS – Programmed Inspections | EH – Programmed Inspections | OVERALL |
| No. Surve Issued | ys | 100 | 100 | 47 | 100 | 100 | 93 | 74 | 52 | 100 | 102 | 100 | 100 | 1068 |
| No. Surve Returned | ys | 14 | 24 | 7 | 13 | 18 | 8 | 43 | 14 | 26 | 22 | 32 | 11 | 232 |
| % Returne | ed | 14% | 24% | 15% | 13% | 18% | 9% | 58% | 27% | 26% | 22% | 32% | 11% | 22% |
| Complain | ts | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 4 | 1 | 0 | |
| % Compla from sent | | 0% | 0% | 0% | 0% | 0% | 0% | 1% | 0% | 1% | 4% | 1% | 0% | |
| % Compla from retu | | 0% | 0% | 0% | 0% | 0% | 0% | 2% | 0% | 4% | 18% | 3% | 0% | 2% |
| Did you had problems dealing w | when | 7% | 0% | 0% | 8% | 0% | 0% | 7% | 0% | 4% | 9% | 3% | 0% | 3% |
| How well did their jobsVery Satisfied | | 93% | 83% | 71% | 69% | 83% | 75% | 80% | 71% | 79% | 48% | 74% | 91% | 76% |
| Overall, how | Very Sat | 79% | 79% | 57% | 85% | 78% | 38% | 79% | 79% | 71% | 43% | 71% | 90% | 71% |
| satisfied were | Fairly Sat | 14% | 17% | 29% | 15% | 22% | 25% | 10% | 14% | 13% | 22% | 19% | 10% | 18% |
| you with the level of service? | No answer | 0% | 4% | 14% | 0% | 0% | 38% | 8% | 7% | 4% | 13% | 3% | 0% | 8% |
| Dissatisfie Survey Re | | 7% | 0% | 0% | 0% | 0% | 0% | 3% | 0% | 12% | 22% | 7% | 0% | 4% |

APPENDIX VIII – Equalities Monitoring

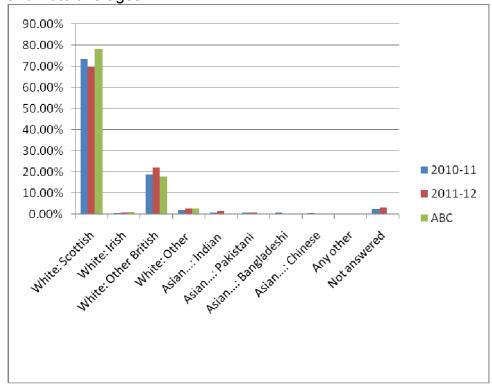
Gender

Slight improvement towards the Argyll and Bute average figures.



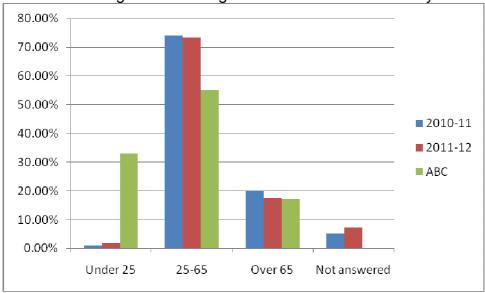
Ethnicity

Representation of the various groups remains similar to the previous year and Argyll and Bute averages.



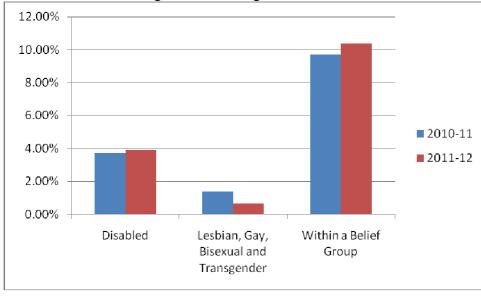
<u>Age</u>

There continues to be a bias towards the 25-65 year age group which results in an under provision to under 25 year olds although this has improved slightly since 2010-11 and is not of great concern given that children are unlikely to access the service.



Other Groups

There has been no significant change over the course of 2011-12.



APPENDIX IX - Delivery Team Reports DELIVERY GROUP - SERVICE SUPPORT - PROGRESS REPORT

1. ACHIEVEMENTS AND EVIDENCES AGAINST THE ORIGINAL PLAN

1.1. The following projects were identified for the Service Support delivery theme:

1.2. Civica Development

- 1.2.1. The installation and commissioning of Civica for Environmental Health is nearly complete. The system is live for Service Requests and is being rolled out for licensing standards inspections. A programme of implementation for all cases recorded in Uniform is in place.
- 1.2.2. All Environmental Health staff have received Civica training and are now using the system for service request cases.
- 1.2.3. Implementation of Civica for Trading Standards is significantly delayed due to problems linking the Civica application with the Trading Standards modules in Uniform. No date is available for this to be complete, and it might be later in 2012 before the TS project can move forward again.

1.3. Mobile Solutions

1.3.1. We are awaiting confirmation from a pilot in Fife before progressing with this aspect of work.

1.4. Personal and Professional Development

1.4.1. The project was completed with a review of the PDR scheme and recommendations made for the development of the scheme. This has been superseded with the corporate review of PDR and the new focus on competences.

1.5. Regulatory Networks

1.5.1. The project was completed with the development of protocols for the attendance at, and dissemination of information from, professional networking groups in which the service participates.

1.6. Safer Working

1.6.1. This project collated all available risk assessments and safety procedures in place within the service. The work of this project is to be carried forward.

1.7. SharePoint Implementation

1.7.1. The use of SharePoint for the Service Delivery projects has been successful, and the site developed for this purpose has been recognised to be at the cutting edge of SharePoint implementation within the Council. We have used SharePoint as a resource library for the delivery projects, for co-ordinating the oversight and management of the delivery projects, for undertaking staff surveys, as a central library of guidance and procedures and as shared workspace for documents.

1.8. UNIform Development

- 1.8.1. Work to improve the quality of data held in Uniform and the consistency of use has been undertaken in parallel with the Civica project. All EH officers and administrative staff were trained in the use of Uniform and the new data standards for Service Requests, Commercial Premises and IVAs. Additional data standards will be produced and trained for Accident Reports and Infectious Diseases as those modules are implemented in Civica.
- 1.8.2. Work has been undertaken to clean up the Service Requests and Commercial Premises modules, particularly to ensure proper links to the property database.
- 1.8.3. More standard documents are now available in Uniform as templates, and documents generated from Uniform are automatically stored to the appropriate case in Civica.
- 1.8.4. More work requires to be done on codes, standards, consistency and skills in using Uniform. This work will be carried forward to a Uniform development group.

1.9. Website Development

1.9.1. All information relating to the service on the Council's website has been reviewed, rewritten as necessary and is now subject to periodic review. All pages have owners who are responsible for the accuracy and relevance of the available information.

2. IMPACT OF MEASURES TO DATE

- 2.1. The projects with SharePoint, Uniform and Civica have started the transformation of information and knowledge management within the service. EH officers and supporting admin staff are developing skills in using Civica and a degree of fluency in working with the system is beginning to develop. All documents associated with ongoing Service Request cases are now being stored in electronic form. SharePoint has become an accepted resource and frequent requests are being made for developments which would better suit the proposed operational (Planning and Regulatory Services) site than the project-focused "delivery" site. The training offered to EH users in Uniform has been the first training many people have received in the system, with the consequence that there is now more consistency in the way data is recorded than previously. The use of process maps in Civica to direct or guide the case officer in the application of agreed procedures delivers consistency in customer experience, where previously there was wide variance between local offices.
- 2.2. The other projects in this theme relate to management practices within the service and are dependent on a continuing management focus to secure their full delivery.

3. OTHER ACHIEVEMENTS DELIVERED NOT IN THE PLAN

3.1. The implementation of Civica has required a reconfiguration of the workflows between administrative and case officers. We are in the early stages of that reconfiguration, but, as more service requests are recorded centrally, we will need to be alert to the effect of new work demands on administrative staff and the expectations of customers and case officers.

4. DETAILS OF FURTHER WORK REQUIRED

4.1. Civica Development

- 4.1.1. The Phase 1 project "to store documents associated with cases in Uniform" is underway for EH but stalled for TS. Further progress for EH is dependent on the availability of scanning resources in Bute and Cowal in the first instance, after which work can commence on premises inspection documents. Licensing is likely to be the most intractable, because there is little prospect of early progress with an integrated licensing system involving Regulatory Services and Licensing.
- 4.1.2. If the Private Water Supplies module is implemented in Uniform, then this will require to be brought within the Phase 1 project. However, it is likely that changes will have to be made to the core Civica Environmental Health application to ensure that it will integrate with the PWS module in Uniform.
- 4.1.3. Once Phase 1 has been completed, there will be the opportunity to develop Civica to store documents for cases which are not recorded in Uniform. This is currently aspirational and a plan will only begin to emerge when Phase 1 is complete.

4.2. Mobile Solutions

4.2.1. To be determined once the outcome of the Pilot is known.

4.3. Safer Working

4.3.1. New structures are now being put in place to develop the management of health and safety within Planning and Regulatory Services. This work will take the outstanding actions from this delivery project to completion.

4.4. SharePoint Implementation

- 4.4.1. SharePoint is now available to all users. We are at a very early stage of understanding how these collaborative tools will work and little information has been forthcoming from ICT about the potential for SharePoint or the acquisition of appropriate skills.
- 4.4.2. In addition to providing a resource for the delivery projects, it was intended (a) to pilot a SharePoint site for an individual function and (b) to propose a model for an intranet for the whole of Planning and Regulatory Services. The function pilot was achieved by importing food safety documents from Outlook Shared Folders and recreating the same structure in the delivery site. The design and implementation of an intranet for the whole of Planning and Regulatory Services based on SharePoint has been identified as a much more significant project requiring professional support; this is now being considered as a corporate IT project with this service as a pathfinder for the technologies.

4.5. UNIform Development

4.5.1. Uniform remains the core database for Regulatory Services, supporting the majority of Environmental Health, Animal Health, Licensing Standards and Trading Standards functions. A Uniform development group is required to co-ordinate the development of the database and work on issues such as codes, documents, reporting and training.

DELIVERY GROUP – Alternative Service Delivery – PROGRESS REPORT

1. ACHIEVEMENTS AND EVIDENCES AGAINST THE ORIGINAL PLAN

- Anti-Social Noise measures with Strathclyde Police have been formalised and guidance has been prepared for issue to the public and stakeholders.
- The Council agreed that Community Advice Services should be funded centrally within the Council and we have provided a report detailing how this should be taken forward. This is now within the remit of Community Services.
- Smoking Enforcement by Trading Standards Officers has been agreed and a workplan will be put in place. Any breaches will be reported to Environmental Health for action.
- The Debt Counselling service has been reorganised and refocused. Ongoing monitoring is occurring to minimise impacts associated with the reduction in staff numbers.
- Following benchmarking of fees it has been established that there is scope to maximise income although Committee approval is required for these changes.
- An Alternative Enforcement Strategy is being developed and is still to be implemented.

2. IMPACT OF MEASURES TO DATE

- Anti-social noise measures are working well and have allowed a co-ordinated and effective response to complaints.
- The Debt Counselling continues to operate effectively although we will continue to monitor performance and customer satisfaction.
- The positive impact of the other measures will be realised over the coming financial years.

3. OTHER ACHIEVEMENTS DELIVERED NOT IN THE PLAN

- Additional income has been achieved from the Shellfish Contract with the Food Standards Agency and amendments to funding of the Animal Health Incinerator.
- A pilot project on gas safety in catering establishments was undertaken as part of Gas Safety Week 2011.
- A safety alert warning people of the dangers of using portable barbecues and similar equipment in tents was issued.

4. DETAILS OF FURTHER WORK REQUIRED

- The Noise Leaflet and associated guidance is still to be finalised and issued. This will be undertaken by the RSO (Professional Support) following confirmation from the EH Managers.
- The Regulatory Services Manager will need to submit fees report to committee and implement changes if agreed.
- Once the Alternative Service Strategy is finalised it will need to be delivered by the RSO (Professional Support) and other officers as necessary.

DELIVERY GROUP - Communications - PROGRESS REPORT

5. ACHIEVEMENTS AND EVIDENCES AGAINST THE ORIGINAL PLAN

Following a survey of staff early in the implementation process it was established that a staff newsletter was the desired method of feedback to staff and this is delivered through Snippets.

SharePoint was set up as a mechanism for allowing staff to access documents pertinent to Service Review Process and a recent survey shows that 91% have accessed SharePoint over the course of the Service Review.

A staff seminar took place on 27 October 2011.

A regular reporting programme has been established to notify the communications team and members of good news from the Service.

6. IMPACT OF MEASURES TO DATE

The measures undertaken have helped staff to keep up to date with the Service Review and have started a change of culture where staff engagement and participation are the norm.

7. OTHER ACHIEVEMENTS DELIVERED NOT IN THE PLAN

None.

8. DETAILS OF FURTHER WORK REQUIRED

The required works have been completed and the mechanisms for communications established. The majority of staff agree that communications have been good and this should be continued through the Business Improvement Team and Regulatory Services Management Team.

DELIVERY GROUP – Service Improvement – PROGRESS REPORT

1. ACHIEVEMENTS AND EVIDENCES AGAINST THE ORIGINAL PLAN

We have started a review of systems and procedures but the volume of procedures means that it has not be possible to review those requiring review during this period. This will be taken forward through the Business Improvement Team.

We have undertaken additional benchmarking and established a benchmarking group.

Training has been delivered in relation to prosecution guidelines to all relevant staff and a procedures document will be developed.

We have maintained a programme of service user surveys, the results of which have been made available to staff via SharePoint.

We have reviewed participation with key partners and attendance at liaison groups and established a protocol for attendance and feedback to staff. This will be implemented by the Business Improvement Group.

2. IMPACT OF MEASURES TO DATE

Benchmarking has enabled us to compare fees and charges with other authorities.

Staff have been trained in relation to disclosure and preparation of evidence for court.

We have continued to monitor service user feedback and provide suggestions and improvements as a result of the comments received.

3. OTHER ACHIEVEMENTS DELIVERED NOT IN THE PLAN

None.

4. DETAILS OF FURTHER WORK REQUIRED

We will need to

- Identify timetable and mechanism for review of procedures and implement changes.
- Develop benchmarking measures and club.
- Develop guidelines following disclosure training.
- Continue issuing service user questionnaires.
- Confirm those liaison groups which will be attended and put in place the mechanism for feedback to all staff.

These areas of work will all be carried forward by this the Business Improvement Team.