

**Manchester City Council
Report for Information**

Report to: Audit Committee – 15 September 2016

Subject: Governance Improvement Progress for Partnerships with Medium or High Risk Assessment ratings

Report of: City Treasurer

Summary

The report provides an update on progress made to strengthen governance arrangements in the nine partnerships where a medium or high Partnership Governance Risk Assessment was recorded in the 2015 Register of Significant Partnerships, as requested by the committee in January 2016.

Recommendations

Audit Committee is requested to comment on and note the progress made to improve governance arrangements in the partnerships detailed in the report.

Wards Affected: All

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

Report to Audit Committee 21 January 2016 – Significant Partnerships Register

1. Introduction

- 1.1 In recognition of the need to ensure that all the Council's partnerships continue to perform well, delivering value for money and supporting the Council's strategic objectives, a Partnership Governance Framework is in place. This framework defines and standardises the Council's approach to managing its partnerships, in order to help strengthen accountability, manage risk and rationalise working arrangements.
- 1.2 In support of its application of this framework, the Council maintains a Register of Significant Partnerships (the Register), which has been in place since 2008. It lists all key partnership arrangements that are considered to be of the highest significance to the financial and reputational risk of the Council and to achieving the Council's objectives. These arrangements are not uniform, ranging from joint venture partnerships, statutory groups and PFIs. They reflect different governance structures depending on their legal status.
- 1.3 The Register is refreshed annually, and the latest version of the Register was taken to Audit Committee on 21 January 2016. In the updated version of the Register, five partnerships had a Risk Assessment rating of "medium", indicating that while there is a generally sound system of governance in place in these partnerships, areas for improvement have been identified. Four partnership had a rating of "high", meaning that control arrangements in these partnerships needed to be strengthened, and that the partnership's and Council's objectives were unlikely to be met.
- 1.4 To gain assurance that plans are in place to strengthen governance arrangements in these partnerships, Audit Committee requested that a report is produced which details progress made to strengthen governance arrangements in those partnerships with a medium or high risk rating. In the following section, an explanation is given for each of the partnership's ratings, and progress made to improve governance arrangements.

2. Progress made to strengthen partnership governance arrangements

Partnerships with a "high" Partnership Governance Risk Assessment

Manchester Safeguarding Children's Board (MSCB)

- 2.1 When the Partnership Register was updated in January, the risk rating remained "High" for this partnership, which was the same rating which was recorded in 2014. The rating reflected the outcome of the July 2014 Ofsted inspection which stated that the functions of the Board were inadequate; and the partnership's annual report which identified a number of significant governance improvements required.
- 2.2 Following the Ofsted inspection, an improvement plan was put in place for Manchester Safeguarding Children's Board (MSCB) with Improvement areas grouped into four themes: Vision, Leadership and Governance; Quality Assurance; Business Planning; and Board Effectiveness. The Improvement

Plan was reviewed by the new Independent Chair, who has engaged senior representatives from Board partners in further development of the Plan to support continuing improvement. The main priorities are outlined below.

Improving the capacity for scrutiny

- 2.3 A coordinated sequence of presentations to Scrutiny, Health & Wellbeing Board and all key stakeholders is being drawn up, both to demonstrate accountability of the Board, but also to present appropriate challenges from the MSCB on safeguarding risks and challenges.
- 2.4 The Section 11 self assessment audit has been carried out, with all agencies carrying out a self assessment and attending a 'conversation' meeting with the Chair and members of the MSCB Business Unit. The returns have highlighted a number of priority areas of safeguarding practice, including:
- Young people aged 15 – 19, particularly issues around care leavers, accommodation, transition services including mental health, and the rights, independence, advocacy and voice of young people;
 - Sharing examples of learning and good practice across agencies, including whistle blowing, and the voice of the child.
- 2.5 A revised Serious Case Review (SCR) screening procedure and supporting forms have been introduced to manage and record screening and decision making around SCR referrals. Further work is planned around ensuring greater consistency and timeliness in the completion and dissemination of recommendations from SCRs, and forging links to practice development and quality assurance.

Developing Partner Engagement and Streamlining Structure

- 2.6 Progress against this element of governance improvement is evidenced by the following:
- Attendance at Board meetings continues to be good;
 - Attendance and engagement at two MSCB Workshops on SCRs and Neglect was positive and well received. The findings from the Neglect workshop will inform a new MSCB Neglect Strategy;
 - Implementation of the revised MSCB structure is underway and terms of reference are now being finalised. A new Leadership Group represented by senior leaders in their own agencies has been established to ensure the pace of improvement continues.

Accountability and Reporting

- 2.7 Following the resignation of the Independent Chair in June, the Chair of the Adult's Safeguarding Board has agreed to take on this role.
- 2.8 The MSCB Annual Report was presented to the Board in August 2016. The report draws on the Section 11 audits, the multi-agency 'single case' audits,

lessons from Serious Case Reviews and provides an evaluation of how well safeguarding arrangements are working across the city.

- 2.9 The Leadership sub group of the Board has the remit to drive a relentless focus on improvement and challenge through the implementation of the MSCB Business Plan, and to support and challenge the Independent Chair in leading the work of the Board. At its meeting in July, it was agreed that the membership should be broadened to include the Chairs of all the subgroups. Terms of reference for all subgroups were agreed and sub group reports will in future be considered at this forum. It was also agreed that the Integrated Safeguarding subgroup should more properly sit under the MASH Board, although updates will still be available to the Leadership Group through the MASH Board Chair, who is a member.

Training

- 2.10 The new Training Strategy was considered at June MSCB. Training arrangements using e-learning through the Virtual College has been identified as a national example of good practice.

Support Arrangements

- 2.11 Following a three month appointment of an experienced Interim Board Manager, the new, permanent Board Manager has come into post from the beginning of August.

Manchester Mental Health and Social Care Trust (MMHSCT)

- 2.9 When the Partnership Register was updated in January, the risk rating remained “High” for this partnership, which was the same rating which was recorded in 2014. At a strategic level, the Trust Development Authority (TDA) had agreed, following due process and through the Sustainability Steering Group, to lead a procurement process to facilitate the acquisition of the Trust by one of the two other existing Mental Health Trusts in Greater Manchester. The Council and the Clinical Commissioning Groups (CCGs) jointly produced the required specifications for the social care and clinical services that form the transaction. The risk rating remains at the previously set level while progress is made with the transaction process.
- 2.10 The transaction process began in March 2016 and was partially completed in July 2016 with the announcement of the name of the preferred provider – Greater Manchester West Mental Health NHS Trust. The process of due diligence began immediately with the intention being to transfer services from Manchester Mental Health and Social Care Trust.
- 2.11 The Council leads monthly performance meetings relating to the Trust’s social care contract, these meetings include Public Health commissioners, Health commissioners as well as Trust staff. There is a quarterly strategic contract monitoring meeting which is attended by senior Trust staff. This meeting is

now also attended by the Director of Public Health. Executive to Executive meetings take place monthly involving the Council, the CCGs and the Trust.

- 2.12 Arrangements that are currently in place will continue as they are whilst the transaction continue to move forward. Commissioners from CCGs, and the Council (including Public Health) are closely involved in supporting the transaction process. A Transaction Board, with senior representation from all partners, continues to have oversight and accountability for this area of work.

Partnerships with a “medium” Partnership Governance Risk Assessment

Biffa Municipal Ltd

- 2.13 The “Medium” rating for the new partnership was assigned in January while performance information was awaited which could provide assurance of acceptable contract performance. The Growth and Neighbourhoods Directorate had established a new Waste, Recycling and Street Cleansing Team, to ensure effective contract management structures and processes, including performance management and risk controls. This team was put in place to deliver effective governance through the Strategic Board and the Performance and Contract Management Group. In addition, Biffa were investing in an ICT system to enable more effective gathering and analysis of performance information. It was anticipated that these measures would result in a transparent oversight of contract performance and risk management.

Governance structure

- 2.14 A governance structure has been put in place to ensure performance issues can be analysed and addressed. This structure is designed to have effective two way communication channels for escalation and dissemination. The three main elements of the structure are as follows;
- Partnership Board – responsible for strategy
 - Performance and Contract Management Group (PCMG) – responsible for performance
 - Neighbourhood Liaison Meeting (NLM) – responsible for local governance

Reporting and Responsibilities

- 2.15 The Partnership Board is the senior governance meeting, and is attended by the Executive Member, Deputy Chief Executive, Director of Neighbourhoods, Biffa Managing Director and Biffa Regional Manager. The board has responsibility for;
- Strategic decisions and identifying future priorities
 - Escalations from the PCMG
 - Approval of variations to the contract
 - Approval of any new services
 - Approval of proposals for income generation
 - Approval of changes to the service delivery plan
 - Approval of policy changes
 - Escalation of contract performance issues

- 2.16 The PCMG's primary role is to deal with the day to day performance of the Biffa contract. The full range of services are assessed and corrective action applied and monitored using a standard data set drawn from a variety of sources including Customer Relationship Management (CRM) software, Customer Complaints, Cleanliness Inspections and Biffa "Powersuite" software. Responsibilities include;
- Performance management, including Price Performance
 - Management of city wide policy
 - Escalation of local performance issues
 - Contact Centre and CRM improvement
 - Financial Reporting and management
 - Health and Safety verification of processes and systems
 - Maintenance of a Risk Register
- 2.17 The NLM's primary role is to ensure that area based Council teams are fully linked in to the governance process and Biffa's performance. These meetings allow city wide performance, as analysed at PCMG, to be considered on a neighbourhood basis. Neighbourhood specific data (North, Central and South) and issues are discussed and addressed, with any that cannot be resolved escalated to PCMG. The group also has responsibility for management of any local service and compliance issues.

Performance data

- 2.18 The process of producing data that is relevant, clear and can be used to inform operational activity upon is crucial to underpinning governance and performance management of the contract. Intensive work has been needed to create a consistent data set that can be used to compare performance trends against the contract requirements.
- 2.19 Integration of Biffa and Council ICT systems took place for waste and recycling services in April 2016 and for street cleansing activity in July 2016, with service requests now being passed directly through to Biffa "Powersuite" software. ICT integration has speeded up operational responsiveness and the ability to now analyse the Biffa performance through a common ICT system will allow officers to interrogate performance more effectively and identify service improvements.
- 2.20 In addition to the electronic data capture that is used to performance manage the contract, the Street Cleansing element of the service in particular requires an on-site inspection regime to ensure that the quality of work being carried out meets the requirements of the contract.
- 2.21 Biffa undertake self-monitoring through random street inspections and report back on the quality, using an industry and government standard (N195) which grades "A-D". In order to quality assure this self-monitoring, the Waste Recycling and Street Cleansing team also undertake a daily check of an area that has been cleansed and report back, and where necessary challenge Biffa as appropriate. The inspections undertaken by the Council have shown an increase in the standards of cleansing in recent weeks following Biffa making changes to how they clean the streets. In addition to overseeing the quality of

cleansing taking place, these inspections review cleanliness deterioration rates across the city and enable interim cleans to be more effectively planned. A number of locations have been identified where additional cleansing is required and Biffa have been asked to respond. Over time, a pattern of the cleanliness standards achieved will be identified that will enable a more strategic view of where resources need to be deployed.

Children's Improvement Board

- 2.22 This partnership was established as required by the Department for Education following on from the Ofsted report which was published in September 2014, where an "inadequate" judgement was given. As the Board is responsible for driving forward the Improvement Plan to address the challenges which led to the judgement, a "Medium" risk rating was assigned while the improvements take place. When the rating was assigned to the partnership in January, although improvements had been on-going for a year, the Service acknowledged there was still significant work to be delivered. At the time of the latest Department for Education progress review, in February 2016, the Department advised that it was concerned with the pace of improvement within the Service. Subsequent reports have indicated that the pace of improvement has increased. A new senior management team is in place, providing stability to the service and working to drive forward the required improvements over the subsequent months.
- 2.23 The Improvement Board is chaired by an independent chair and attended by partners and a representative from the Department for Education. It monitors progress against agreed objectives and provides a challenge and scrutiny forum for all partners involved in the Ofsted journey.
- 2.24 The governance arrangements supporting the improvement programme have been implemented and running since January 2015. As outlined in last year's Governance Statement, this includes an Improvement Board Executive, arrangements for reporting to Executive Members, and the Improvement Board itself.
- 2.25 The Board has strong links to the wider Children's governance and accountability structure and is attended by the Executive Member for Children's Services, the Independent Chair of the Manchester Safeguarding Children's Board (MSCB) and the Chair of the Children's Board, the Strategic Director for Children's Services.
- 2.26 The Ofsted Improvement Board cycle has provided independent scrutiny of the progress against the Ofsted Improvement Plan for the last year. As good practice becomes embedded within the service, the independent, multi-agency scrutiny of the service will shift from being the responsibility of the Improvement Board to being the responsibility of the MSCB. A strong and influential Local Children's Safeguarding Board will provide the governance to support the future development and scrutiny of safeguarding policy and practice, both in the service and across the city. Accountability for children's outcomes has and continues to sit with the Children's Board.

- 2.27 Strong governance arrangements are supported by the ongoing development of clear outcomes focussed plans and strategies agreed across the Partnership, including the Children & Young Peoples Plan, the Children and Young People's Commissioning Strategy 2016-2020 and the Joint Strategic Needs Assessment.
- 2.28 Additionally, Children and Young People Scrutiny Committee receive regular updates to closely monitor and challenge progress. These include briefings on Ofsted improvement support visits which have taken place since the full inspection in 2014, and provide valuable testing and feedback on individual areas of Children's Services.

Children's Board

- 2.29 In January, this partnership was assessed with a "Medium" risk rating, which was the same rating which was recorded on the 2014 Partnership Register. Following the Ofsted Inspection of services for children in need of help and protection, children looked after and care leavers, the Children's Board has maintained a priority focus on 'Early Help' to improve the early help offer of the Council and its statutory partner organisations (Health, Police and the Voluntary and Community Sector). The rating acknowledged that while progress had been made to improve delivery of the Early Help offer, there was further work required, for example to increase the number of early help assessments.
- 2.30 The Children's Board is the key strategic partnership to provide overall leadership for the shaping and delivery of the vision for children, young people and their families and is driving the partnership to collectively deliver on the Early Help Strategy.
- 2.31 A refresh of the Children's Board vision, terms of reference and key priorities to inform the Children and Young People's Plan has been undertaken. The refresh was lead by the Strategic Director of Children's Services and workshops were held to co-design the vision statement and to inform the developments of a refreshed Children and Young People's Plan.
- 2.32 The vision will be "Our Manchester – building a safe, happy, healthy and successful future for children and young people". The Plan will set out the key priorities and outcomes that as a City we will work towards over the next four years. Following a review of governance and accountability arrangements it was confirmed the Children's Board will report to the Health and Wellbeing Board.
- 2.33 To ensure connectivity with front line staff, an Early Help Operational Steering Group is in place. This meets bi-monthly and oversees the work of the Early Help Champions Network, plans audit activity, identifies and responds to workforce development themes and monitors performance and delivery.
- 2.34 A review of the Early Help Strategy was undertaken in April 2016. The review focussed on the progress and impact from the Early Help Strategy and the delivery arrangements for Early Help. Overall the review confirmed that the

approach to Early Help, set out with Early Help strategy was the right one, progress was noted in terms of delivering on the strategy with the establishment of Early Help hubs and development of tools to assist practitioners. The review acknowledged the intended impact from the approach was not yet being felt, and that the new approach would likely take time to embed and therefore impact would not be expected at this stage. A number of recommendations were proposed and an action plan has been developed in response to these.

- 2.35 Since the establishment of the Early Help Hubs in September 2015, the volume of enquiries to the hub has increased. In October the hubs dealt with 621 enquiries; by June 2016, this had risen to 1,898 potentially diverting enquiries from the social care front door. Over the same period, the number of overall social care contacts have reduced from 4,945 to 3,424. A number of agencies are attending the daily triage meetings in the hubs and the weekly allocation meetings where a lead professional for families requiring more intensive and co-ordinated support is identified. An Early Help dashboard has been developed to track and monitor progress, and this is reported directly to the Children's Board.
- 2.36 Good progress has been made in developing the new strengths based approach and revising assessment tools with the introduction of the new Early Help Assessment (EHA). The numbers of EHAs registered are increasing, but remain below the number expected given the level of need in the City. There is focussed work being led by the Early Help Champions Network to improve the number of EHAs, and to improve quality. An audit of 47 EHAs in June demonstrated significant improvement in the quality of the assessments compared to audit activity in January 2016.
- 2.37 There has been sustained work to strengthen partnership arrangements to deliver the Early Help Strategy; the focus for 2016/17 will be on the impact achieved by the Strategy.

Manchester Equipment and Adaptations

- 2.38 A "Medium" risk rating was assigned for this partnership in January, which was the same rating that was recorded on the 2014 Partnership Register. The risk rating was initially assigned due to the partnership being in a period of transition with a service redesign taking place. New terms of reference, performance indicators and financial reporting procedures were in the process of being developed. The score remained at this level in 2015, which recognised that there were risks around the on-going continuation of the partnership without a signed Service Level Agreement. Subsequently, during the previous twelve months the partnership has continued to operate successfully, with the MEAP service exceeding its performance targets around equipment delivery times.
- 2.39 The service is undergoing a transformation programme and will be rebadged as the Manchester's Service for Independent Living. A joint Improvement Board has been established and an improvement plan commenced in June 2015.

- 2.40 A new delivery model for minor and major adaptations was agreed in principle in November 2015 with Housing providers and this became live in April 2016 and is currently being embedded. There is a new Contract Framework in place.
- 2.41 A workshop was held with Health in March 2016 around the provision of equipment to discuss new service requirements including increased opening hours of the community equipment store, and faster delivery times. These are now in the process of being developed to be included in the amended Service Level Agreement. Monthly workstream meetings are being held to agree the detail of the changes to be included in the Service Level Agreement with a view to this being signed off as soon as possible. Revised financial contributions are also under discussion.
- 2.42 Due to the substantial amount of progress that has been made in the last 12 months, it is anticipated that it will be possible to lower the risk rating at the point of the next annual partnership self-assessment in the Autumn.

AVRO Hollows Tenant Management Organisation

- 2.43 When the Partnership Register was updated in January, the risk rating remained "Medium" for this partnership, which was the same rating which was recorded in 2014. The rating reflected the fact that following an Internal Audit review of the Tenant Management Organisation's (TMO's) management and governance, a number of required improvements were identified, relating to financial record keeping and control. Several improvements had been made in the previous 12 months, leading to the development of a programme of works which were in the process of being delivered. In addition to this AVRO Hollows were looking at developing a suite of performance indicators to enable the Council to monitor performance in the future.
- 2.44 The Council is currently in the process of finalising the drafting of the Management Agreement between the Council and AVRO Hollows TMO. This will form the basis of the legal arrangements between both parties ensuring that roles and responsibilities are made clear in order for there to be better partnership working. The existence of a formal agreement will enable the Council to refer back to the original agreement if an issue or dispute arises.
- 2.45 An officer from Strategic Housing is now regularly attending Board meetings and is the first point of contact to continue to improve relationships, governance arrangements and the monitoring of performance with the TMO.
- 2.46 A number of areas of progress have been made which are equally applicable to SHOUT TMO as well as AVRO Hollows, and these are outlined below. Developments specific to SHOUT TMO only follow in the subsequent section.
- 2.47 The Council has established and held the first meeting of a TMO Liaison Committee made up of officers from the Council, Northwards Housing and the Housing Managers from both TMOs. This committee meets to discuss strategic issues and general policy concerning Tenant Management Organisations. The committee will meet every 6-8 weeks to review progress

and settle issues as they arise. This committee is being held at officer level and will report back to senior officers at both the Council and Northwards as well as to the respective boards of both TMOs.

- 2.48 The Liaison Committee is a joint working forum between the Council, Northwards Arms Length Management Organisation (ALMO) and both TMOs. Its aim is to discuss and develop strategic matters, general policy and other issues for example training, as well as providing an opportunity for the exchange of ideas and support between the TMOs. Whilst this is a joint working forum, there are provisions for each TMO to have separate discussions with the Council and Northwards Liaison Officers to discuss more detailed performance related matters and individual management issues. This is a significant step in further improving the long term relationship between the TMOs and stakeholders. This committee has the support of both the Council and Northward's senior management teams, and both boards of AVRO Hollows and SHOUT TMOs.
- 2.49 The Council has also have now developed a reporting mechanism for performance monitoring for both TMOs. The TMO will provide performance information to the Council on a monthly basis for discussion at the TMO Liaison Committee Meetings. Key Performance Indicators will include Rent Collection, Void Properties, Repairs Service, Anti Social Behaviour (ASB), Customer Services and Environmental Management. The Council and the TMO will review indicators annually and will agree where performance items are relevant, not relevant or if there is a need to include other items to reflect the nature of the TMO Service.
- 2.50 In addition to the developments above, a Tripartite Agreement is in the process of being finalised between the Council, both TMOs and Northwards Housing. The existence of this agreement will work towards solving the confusion of roles, improve communication, and provide clarity in relation to responsibilities between the ALMO, TMO and the Council. This Agreement will help all parties interpret what the Management Agreement says about their roles and responsibilities and will clearly state what areas each party has authority to act in, and the extent of that authority.

SHOUT Tenant Management Organisation

- 2.51 When the Partnership Register was updated in January, the risk rating was reduced from "High" to "Medium" for this partnership. The original "High" rating was due to the fact that there was a potential risk arising from limited availability of Council resources to monitor the performance and governance arrangements of the partnership. Auditing and monitoring of the partnership had not been prioritised previously due to the relatively low expenditure involved and the small amount of properties managed (100 out of nearly 17,000 owned by the Council). The reduction in risk rating was due to significant changes which had taken place in the previous year in the Council's relationship with SHOUT. An officer from Strategic Housing had started to attend their Board meetings and coordinate six weekly progress meetings. This has helped to drive improvements in the governance arrangements of the partnership.

- 2.52 In February 2016, the Council together with SHOUT board members brought in the services of consultants Involve 360, and asked them to work with SHOUT to assess the TMO Board's development needs in order to give further reassurance that the organisation is not high risk. In order to establish a broad picture of likely development needs for SHOUT, the consultants considered the following;
- Recommendations that Council auditors made at AVRO Hollows, in order to assess the likely key areas that would be prioritised in any audit;
 - The checklist from the NFTMO (National Federation of Tenant Management Organisations) – the Good Governance Health-check;
 - A Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis conducted with three Board Members.
- 2.53 The findings of this report were on the whole positive, but have identified training gaps and development needs. The Council is currently considering the final report from Involve 360 with a view to developing a training plan based on the findings. All of the development items identified will be reviewed during progress meetings with the Council. The SHOUT board will take decisions on how to deliver these items, with support and advice from the Council and other relevant agencies. The main development and training needs were as follows;
- Training for the Board on decision making and working together as a team.
 - Strengthening of key functions such as finance and strategy.
 - Adoption of a succession plan for the long serving housing manager, and a process for delivering improved guidance and management.
 - Adoption of a communication plan for engagement with residents and stakeholders.

The East Manchester Academy

- 2.54 In January, this partnership had a risk rating of "Medium" recorded, which was an increase from the "Low" rating given in 2014. The reason for the risk rating was that the 2015 GCSE results indicated that there were challenges in the leadership, teaching, learning and assessment at the Academy. Discussions took place between the Director of Education and Skills, the Academy Sponsor, and the Regional Schools Commissioner so that actions could be identified which could then start to address these challenges.
- 2.55 Tragically, the Principal of the Academy died suddenly earlier this year. Work has been ongoing, before and since his death, to strengthen governance: the current Academy Trust took the decision to seek a new direction for the Academy, and approached the Education and Leadership Trust. This Trust currently operates two schools in Manchester: Whalley Range High School and Levenshulme High School. This is progressing well and it is likely that the Academy will transfer to the Education and Leadership Trust soon. The Academy is recruiting for a new headteacher for the Academy.

3. Next Steps

- 3.1 The next annual partnership self assessments will commence in September 2016, as part of the process of producing the 2016 Register of Significant Partnerships. Once completed, the new register will be submitted to Audit Committee in January 2017. This will provide an opportunity to review the new Risk Assessment ratings of the partnerships in this report to confirm whether governance arrangements have continued to improve where required.