

FLINTSHIRE COUNTY COUNCIL

REPORT TO: **CABINET**

DATE: **TUESDAY, 18 JUNE 2013**

REPORT BY: **CHIEF EXECUTIVE**

SUBJECT: **QUARTER 4/YEAR END PERFORMANCE REPORT**

1.00 PURPOSE OF REPORT

1.01 To receive the 2012/13 Quarter 4 / Year End service performance reports produced at Divisional level. The reports cover the period January to March 2013 and contain a summary of the year end position.

1.02 To note the following: -

- the levels of progress and confidence for the Council's Improvement Priorities;
- the revised risk levels for the Strategic Assessment of Risks and Challenges (SARCs);
- the progress being made against the Improvement Target Action Plans;
- the progress made against the key actions from service plans; and
- the assessment of any regulatory reports.

2.00 BACKGROUND

2.01 The quarterly performance reports seek to provide the 'narrative' explanation of the statistical quarterly performance. These reports are a review of service plans.

3.00 CONSIDERATIONS

3.01 Quarterly performance reports are prepared by the Heads of Service within the three Directorates and by the Corporate Heads of Service.

3.02 Copies of the detailed draft Quarter 4 / Year End performance reports are available in the Members' Library and on request. Members will receive respective reports when circulated with the Overview & Scrutiny Committee agendas.

3.03 Appendix 1 of the report contains an overall RAG status for each of the 10 Council Priorities and identifies the RAG status for the 66

secondary priorities for both 'progress' and 'outcome'. A full assessment of the Council Priorities is available in the Member's Library or on the website.

3.04 The secondary priorities have high level actions, milestones and targets which can be monitored over time. 'Progress' monitors progress against scheduled activity and has been categorised as follows: -

- RED: Limited Progress – delay in scheduled activity; not on track
- AMBER: Satisfactory Progress – some delay in scheduled activity, but broadly on track
- GREEN: Good Progress – activities completed on schedule, on track

A RAG status is also given as an assessment of our level of confidence at this point in time in achieving the 'outcome(s)' for each secondary priority. Outcome has been categorised as: -

- RED: Low – lower level of confidence in the achievement of the outcome(s)
- AMBER: Medium – uncertain level of confidence in the achievement of the outcome(s)
- GREEN: High – full confidence in the achievement of the outcome(s)

3.05 In summary our overall assessment against the 66 reported secondary priorities is: -

PROGRESS

- We are making good (green) progress in 37 (56%) of the priorities.
- We are making satisfactory (amber) progress in 29 (44%) of the priorities.
- We are making limited progress (red) in 0 (0%) of the priorities.

OUTCOME

- We have a high (green) level of confidence in the achievement of 48 (73%) of our priority outcomes.
- We have a medium (amber) level of confidence in the achievement of 18 (27%) of our priority outcomes.
- We have a low (red) level of confidence in the achievement of 0 (0%) of our priority outcomes.

3.06 **Improvement Targets**

Appendix 2 of the report contains a schedule of all the Improvement Targets.

3.07 Reporting against the Improvement Target Action Plans is included within the performance reports.

3.08 Analysis of performance against the Improvement Targets is undertaken using the RAG (Red, Amber, Green) status. This is defined as follows: -

- RED equates to a position or forecast position of under-performance, downward trend, non-achievement of target, non-achievement of action milestones.
- AMBER equates to a mid position where improvement may have been made (i.e. improved trend) but the target for the year is unlikely to be reached, or where action milestones have been deferred or narrowly missed.
- GREEN equates to a position or forecast position of positive trend on performance, meeting target and achieving action milestones.

3.09 Analysis was undertaken for 41 of the 42 Improvement Targets reported for 2012/13, which showed the following: -

- 25 (61%) achieved a green RAG status
- 9 (22%) achieved an amber RAG status
- 7 (17%) achieved a red RAG status

Analysis could not be undertaken for average days taken to complete low cost adaptations (PSR/006L) where the disabled facilities grant (DFG) process was not used as a target has not been set.

3.10 The indicators which showed a red RAG status were: -

3.10.1 **CHR/002 – Sickness Absence**

The 2012/13 year end performance outturn is 11.03%, a reduction in performance compared to last year (10.54%) and missing the target of 9.8%. There is a continued programme of attendance management reporting and action planning across each Directorate. Absence reporting, containing trigger reports, produced on a monthly basis are issued to managers. With the support of the HR team focus is made on frequent, short term absences, long term absences and return to work interviews, with employees, to understand any underlying issues affecting attendance at work. Where necessary, capability measures are taken to address poor attendance. This

includes first stage disciplinary through to dismissal. Further work is being undertaken in partnership with the Occupational Health service to proactively reduce levels of sickness absence with the introduction of physiotherapy service pilots within key services such as Streetscene.

3.10.2 CFH/006 - Undisputed invoices paid on time (30 days)

There was a downturn in performance for 2012/13 (85.8%) compared to 87.93% last year. The target for this indicator was 95%. The processing of invoices is a devolved function that is reported by the central Accounts Payable team who continue to work with directorates to improve performance. However, Quarter 4 shows a disappointing result compared to that of Quarter 3. P2P is now being rolled out throughout all directorates (except Lifelong Learning) and therefore it is hoped that improvements will be seen during 2013/14.

3.10.3 PLA/004b - Minor applications determined within 8 weeks

The annual outturn (47.4%) falls well short of the target (65%) and is also below the 2011/12 return (53.27%). The Q4 return (50.49%) is above the annual figure and in the last month of the quarter, March, 89.19% (33 out of 37 minor applications) were determined within the 8 weeks. This reflects the increased monitoring and scrutiny on an individual officer basis which is now being applied in addition to providing the Cabinet Member with regular reports on the reasons why applications go beyond their decision time. Some of these reasons (e.g. long term sickness absence which began in Quarter 2 requiring re-allocation of work) are difficult to address, but other reasons are being addressed (e.g. establishment of a regular liaison meeting with Legal Officers to establish the position on each Section 106 Obligation where instructions have been sent. Work is also being undertaken which seeks to streamline the procedures involved with legal agreements, again to reduce any delays currently involved with these).

Recent changes to Head of Planning's the scheme of delegation, were agreed in Quarter 4 and will result in fewer delays whilst cases await a relevant Planning and Development Control Committee or Chairman's meeting.

Apart from the increased emphasis on negotiating quality which is difficult to quantify (but is being addressed), there are a number of reasons why decisions on minor applications go beyond 8 weeks. These include the number of applications needing to be reported to Committee for reasons which include the need for Section 106 Agreements to cover affordability of housing (under Policies HSG 3 and HSG 5).

This Improvement target remains critical as long as performance is measured against speed of decision and this will continue to be monitored, on a case by case basis, to ensure that negotiations on

development proposals are carried out in accordance with procedures set out in the Procedure Manual, and to challenge with local members the need for committee determination of applications, where appropriate.

3.10.4 PLA/005 – Enforcement cases resolved within 12 weeks

The annual outturn for 2012/13 (63.33%) is below the target (73%) and below the outturn for 2011/12 (73.12%). However, the Q4 outturn (72.48%) shows an improvement over Q3 (58.20%) which pulled down the annual performance. Poor performance in Q3 reflected the large number of cases closed (189 cases closed in Q3 as opposed to 109 in Q4), including many with long standing issues. For cases subject to formal enforcement action, a liaison group has been established with Legal Officers and a shared database of these cases is regularly updated to ensure that cases are brought to a conclusion as expeditiously as possible.

3.10.5 PSR/009a – Disabled Facilities Grants (DFG) for children

Three DFGs for children were completed in Quarter 4 in an average of 245 days. However, in the data validation process at the end of the year a number of completions were identified that had not previously been reported. This included 3 particularly long and complex cases, which took the overall average for the year to 482 days, (significantly above the 350 day target). There were a relatively small number of children's adaptations (18 in the year) but these tend to take far longer than adaptations for adults as they are more likely to require extensions.

3.10.6 EEF/002a - Carbon dioxide emissions

The outturn for 2012/13 is an increase of 5.57% compared with a reduction of 7.19% achieved in 2011/12. The targeted 5% reduction was not achieved. It should be noted that the decrease of 12.68% originally reported for 2011/12 was incorrect due to inaccurate utility invoicing. The figures reported for this indicator are not weather corrected to take account of particularly cold years and therefore do not allow for a more accurate comparison. Whilst the absolute increase for 2012/13 is 5.57%, weather corrected the outturn would be a 2.66% reduction.

Early indications for some of the other North Wales Councils estimate absolute increases of 10%+ on 2011/12, which indicates that the Council's interventions have had a positive effect in reducing emissions. Ongoing activities are taking place to improve performance and include the installation of energy efficient equipment and systems, Maintain Energy 'Be Responsible' campaign, rollout e-learning module to staff, and bridge link and energy Champion events.

3.10.7 SCC/037 – Average external qualifications point score for looked after children (LAC)

Through Learning Coaches, the service ensures that early identification of underachievement is reported to the Looked After Children Co-ordinator. Schools are encouraged to seek support for those LAC who it is felt may not achieve an average or above points score when they leave school. The School Effectiveness Grant is used to support LAC to achieve their full potential. On-going support is also provided for after school one to one tuition, using in county home tutors working closely with the child's school.

3.11 A further analysis of the Improvement Targets has been undertaken which examines the number of indicators for which performance had improved when compared to the previous year and the number that achieved target: -

- 21 (51%) improved on the previous year's performance (74% improved in 2011/12)
- 2 (5%) maintained the same level of performance, at the best achievable level (2% maintained in 2011/12)
- 25 (61%) achieved or exceeded target (56% achieved or exceeded target in 2011/12)

3.12 **Strategic Assessment of Risks & Challenges (Appendix 3)**
Each quarterly performance report contains an update of the relevant strategic risk and challenges.

3.13 Analysis of the Quarter 4 / Year End 2012/13 SARC's shows: -

- 5 (10%) are high (red)
- 33 (69%) are medium (amber)
- 9 (19%) are low (green)
- 1 (2%) work in progress

Comparator analysis for Quarter 4 / Year End 2011/12 SARC's showed :-

- 4 (8%) were high (red)
- 39 (76%) were medium (amber)
- 8 (16%) were low (green)

3.14 The 5 high (red) risks are: -

- CL07 - Relationship with the Local Health Board and Public and Primary Health
- CD08 – Connah's Quay, Shotton & Deeside Housing Renewal Area

- CD10a – Leisure Revenue Funding
- CD20 – School Buildings / School Modernisation
- CD38 – Welfare Reform

3.14.1 **CL07 – Relationship with the Local Health Board and Public and Primary Health**

This risk remains high due to the significance to the people of Flintshire of the BCUHB changes proposed to community health services. The predictive “green” date is red due to the complex decision making processes within BCUHB which do not lend themselves to joint working for shared outcomes.

3.14.2 **CD08 – Connah’s Quay, Shotton & Deeside Housing Renewal Area**

The housing renewal service continues to prepare for the delivery of Phase 2 of the group repair scheme. The phasing of the work is being reviewed in light of reductions to both the specific capital grant and the Council’s match funding. The expectation is that the scheme will now be delivered over the period 2013/15, as opposed to being completed within 2013/14, as previously proposed.

3.14.3 **CD10a – Leisure Revenue Funding**

Leisure Services ended 2012/13 with an in-year deficit of £1,054,000. Work has been commissioned by Cabinet and Corporate Resources Overview and Scrutiny Committee which is ongoing to address the deficit; focusing on income maximisation, the control of employee and other operating costs and asset management.

3.14.4 **CD20 – School Buildings / School Modernisation**

Significant backlogs of repair and maintenance will be a feature for the foreseeable future. Pressure on the repair and maintenance budget will increase with the reduction in Council spending. Actions to mitigate the backlog include the reduction whenever possible of the capital asset base and the upgrading or replacement of old and deteriorating buildings. Consultation on the progress of the 21st Century Schools Programme has been completed for the areas of Holywell, Connah’s Quay, Queensferry and Buckley. The major investment of £64.2m in the Deeside and Holywell areas will reduce the overall backlog. Future tranches of 21st Century grants are yet to be announced by Welsh Government. However, any bids that are successful have to be match-funded by the Council. Closure of a small rural school has also contributed to the reduction of the backlog. Future rationalisation will also need to be used in order to further reduce backlogs.

3.14.5 **CD38 – Welfare Reform**

Whilst work is progressing on the Welfare Reform Strategy and against the mitigating actions detailed within the SARC, the certainty and forecasted severity of its impact dictates that this will continue to

be shown as red (high) risk for the foreseeable future.

Board meetings have continued to take place which involve elected members and representatives from a wide range of partner organisations to ensure that there is a collaborative approach locally to this work. The Advice Management Board (AMB) continues to underpin key areas such as the development of Flintshire Money, Advice & Financial Capability Strategy, and the development and roll out of a county wide case management system. The AMB is critical to partnership and collaborative working operationally. The SARC has been revised to reflect emerging risks in the project.

There is an aim to recruit 3 officers whose roles will involve making contact with individuals affected by the changes in the benefit system. There have been 2 successful appointments and WG has provided continued S180 funding from April for an additional post; recruitment for this is taking place. This will greatly assist the proactive and reactive work needed to support those residents who will be affected by the changes introduced by Welfare Reform.

The social security benefits and tax credits income generated for residents by successful welfare rights interventions totalled £816,000. Customer feedback received from residents who have been assisted by the Welfare Rights Unit shows that 89% view the service received as excellent and 96% said they would recommend the service to someone else.

4.00 RECOMMENDATIONS

4.01 That Cabinet consider the 2012/13 Quarter 4 / Year End performance reports and recommend any specific issues which may require management action and / or referral to the appropriate Overview and Scrutiny Committees for consideration.

4.02 To note the following within the performance reports: -

- the level of confidence that the outcomes of the Council's Improvement Priorities will be achieved and the progress being made towards them;
- the update of the Strategic Assessment of Risks and Challenges (SARC) contained within the performance reports;
- the progress being made against the Improvement Target Action Plans contained within the performance reports';
- the progress made against the service plans; and
- the assessment of any regulatory reports in relation to the work of the services.

5.00 FINANCIAL IMPLICATIONS

5.01 All financial implications are identified within the individual performance reports.

6.00 ANTI POVERTY IMPACT

6.01 There are no specific anti-poverty implications within this report.

7.00 ENVIRONMENTAL IMPACT

7.01 There are no specific environmental implications within this report.

8.00 EQUALITIES IMPACT

8.01 There are no specific equality implications within this report.

9.00 PERSONNEL IMPLICATIONS

9.01 There are no specific personnel implications within this report.

10.00 CONSULTATION REQUIRED

10.01 Overview & Scrutiny committees receive their relevant quarterly reports as part of their regular considerations.

11.00 CONSULTATION UNDERTAKEN

11.01 All Directorates have been consulted with regarding the reporting of relevant information.

12.00 APPENDICES

Appendix 1 – Overall Summary Assessment of the Improvement Priorities

Appendix 2 – Schedule of Improvement Target Performance Data

Appendix 3 – Strategic Assessment of Risks & Challenges Summary

**LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985
BACKGROUND DOCUMENTS**

None.

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