

## **FLINTSHIRE COUNTY COUNCIL**

**REPORT TO:**           **CABINET**

**DATE:**               **TUESDAY, 19 MARCH 2013**

**REPORT BY:**       **CHIEF EXECUTIVE**

**SUBJECT:**           **QUARTER 3 PERFORMANCE REPORT**

### **1.00 PURPOSE OF REPORT**

1.01 To receive the 2012/13 Quarter 3 service performance reports produced at Divisional level for the period October to December 2012.

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 Quarter 3 (October – December 2012) performance reports are available in the Member's Library and on request. Members will receive respective reports when circulated with Overview and 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'.

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 41 (62%) of the priorities.
- We are making satisfactory (amber) progress in 23 (35%) of the priorities.
- We are making limited progress (red) in 2 (3%) 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 17 (26%) of our priority outcomes.
- We have a low (red) level of confidence in the achievement of 1 (2%) of our priority outcomes.

- 3.06 Improvement Priorities which showed a red RAG status for progress or outcome are as follows: -
- 3.06.1 Improvement Priority 7.8 (Complete the Inclusion Services Review and implement new arrangements to support children with Additional Learning Needs) has been assessed as limited progress (red). Cabinet (Dec 2012) received a report which outlined the work completed to date. The second phase of the review has been initiated (January 2013), with initial consultation meetings being held with service managers and Headteacher representatives and specific projects groups identified to take this phase of the review through to completion. Given the extent of the areas covered within this phase of the review, the process will not be completed by March 2013 and a comprehensive timeline is being generated.
- 3.06.2 Improvement Priority 8.4 (Extend the range of options in private sector housing) has been assessed as limited progress (red). Work to address this priority has been rescheduled for Q1 of 2013/14, as it is to be informed by the WLGA Private Rented Sector Improvement Project.
- 3.06.3 Improvement Priority 9.7 (Implement the priorities of the Libraries, Arts and Play Strategies) has been assessed as low (red) over the level of confidence in achievement of the outcome, this is also reflected in the high (red) risk level for SARC CD10c (Delivery of the Flintshire Play Strategy). The replacement of *Cymorth* funding with the new Welsh Government *Families First* grant has resulted in a reduction in grant.
- 3.06.4 The Task and Finish Group set up by this committee at its meeting on 10 January 2013, to consider the arrangements for the Summer Play Scheme met three times and reported on its work at the meeting held on 25 January 2013.
- 3.07 **Improvement Targets**  
Appendix 2 of the report contains a schedule of all the Improvement Targets which are reported on a quarterly basis.
- 3.08 Reporting against the Improvement Target Action Plans is also included within the performance reports.
- 3.09 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.

3.10 Analysis was undertaken for 21 of the 23 Improvement Targets reported quarterly, which showed the following: -

- 13 (62%) had achieved a green RAG status
- 4 (19%) had an amber RAG status
- 4 (19%) had 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.

Analysis could not be undertaken for the average number of days taken to complete a DFG for children (PSR/009a) as none had been completed during the quarter.

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

3.11.1 **CHR/002 – Sickness Absence**

The downturn in performance (3.3 days/shifts in quarter 3 compared with 2.3 in quarter 2, missing the target of 2.5 days/shifts) is explained in greater detail including Directorate breakdown and the actions being taken to improve performance in the HR & OD Performance Report.

There is a continued programme of attendance management reporting and action planning across each Directorate. Absences 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.

There has been agreement with Community Services for the development of a pathway to enable employees to return to the workplace as soon as possible. Similar approaches are being considered with other service areas.

Where necessary, capability measures are taken to address poor attendance (including 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.

### 3.11.2 **PLA/004b - Minor applications determined within 8 weeks**

The outturn for quarter 3 (40.45%) is slightly reduced compared with quarter 2 (48.08%), which is also short of the target (65%). There has been a conscious move to increased negotiation on minor planning applications where the initial proposal is unsatisfactory. Whilst this has resulted in more positive customer feedback it has impacted negatively on the achievement of the 8 week timescale. The Service recognises the importance of carefully controlling negotiation so that it should only happen once in the process.

Other reasons for minor applications missing their target for determination 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). The Cabinet Member now receives regular reports on the reasons why applications go beyond their decision time. Some of these reasons (e.g. long term sickness absence requiring re-allocation of work) are difficult to address, but others 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 are being addressed. Work is also on-going to streamline the procedures involved with legal agreements to reduce delays.

Performance will continue to be monitored, on a case by case basis where necessary, to ensure that negotiations on development proposals are carried out in accordance with the Procedure Manual and to challenge Local Members on the need for committee determination of applications, where appropriate. The Chair of Planning and Development Control committee has agreed to take a stronger line in his challenge of such applications coming forward to Committee.

An analysis of all applications that have missed their target date has recently been completed and this provides reasons why that has occurred. Work is on-going to address the common reasons e.g. requesting additional information, for targets being missed and will require processes to be changed.

### 3.11.3 **PLA/005 – Enforcement cases resolved within 12 weeks**

Performance has slipped to 58.2% in quarter 3, from 63.93% in quarter 2, both of which fall short of the target (73%). There were significantly more cases closed within quarter 3 (189 compared to 122 in quarter 2) which reflects that older more complex cases continue to be cleared. In the context of those 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 progressed as expeditiously as possible. With a smaller historical backlog to deal with, it is envisaged that performance against closing more recent cases will improve. The backfilling of the vacant enforcement / compliance officer post will assist in improving performance in Q4 and in 2013/14.

3.11.4 **SCY/001a – Change in the average number of hours of suitable education, training or employment children and young people receive, while in the youth justice system**

When a young person is initially assessed by the YJS (Youth Justice Service), and ETE (education, training or employment) needs are identified, a referral is made to the weekly ETE panel, made up of the Educational Coordinator, Careers Wales Advisor and OCN (Open College Network) advisor. An action plan is drawn up as to how best to assist the young person. This can include liaising with schools, finding college courses or vocational training, enrolling them on an OCN course as part of their order, or enrolling them into Links. The young person will be allocated a worker to specifically support them into achieving a positive learning outcome, whether that is mainstream education, further training, or employment.

This performance indicator only takes into consideration young people whose statutory order is completed in the quarter. In quarters where very few orders have been completed, any reduction in ETE hours by a single young person can have a huge effect on the final outturn figure, as has been the case in quarter 3. Of the current cohort of 3 young people, one young person reduced their number of weekly hours from 24 to 13 hours of ETE due to a move into mainstream education (part time course) from a Pupil Referral Unit. Whilst this is a positive outcome for the young person, the reduction resulted in the performance for quarter 3 showing a negative change of 12.5%.

3.12 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 quarter and the number that achieved target: -

- 13 (59%) improved on the previous period's performance
- 13 (62%) achieved or exceeded target

3.13 **Strategic Assessment of Risks & Challenges**

Each quarterly performance report contains an update of the relevant strategic risk and challenges.

3.14 Analysis of the quarter 3 SARC's shows: -

- 7 (14%) are high (red)

- 31 (63%) are medium (amber)
- 8 (16%) are low (green)

Currently there are three (6%) SARCs which are being reviewed to take account of the impacts from the Welfare Reform Act. For quarter 3 these have not been assessed and therefore are not included in the above analysis: -

- CL04 Affordable Housing
- CD12a Housing Strategy
- CD12d Homelessness

3.15 The 7 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
- CD10c – Play Strategy (identified as a red risk at quarter 2)
- CD20 – School Buildings / School Modernisation
- CD38 – Welfare Reform
- CG23 – Data Protection

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

This SARC has been assessed as ‘Red’ and the Green Predictive marked “uncertain” until the final outcomes of the Betsi Cadwaladr University service review and their impacts and impacts on community services are known. The Council will be meeting with the Board to understand these impacts, such as the resource impacts of the Home Enhanced Care Model and to mitigate the risks.

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

The specific capital grant for renewal areas is due to end in 2013/14 and the private sector Housing Renewal Capital Programme has been cut by £200,000 for 2013/14. The Housing Service continues to seek opportunities for the introduction of private finance into the scheme. A longer term aspiration is to introduce private finance from lending institutions; this will depend on using the value of the Council’s loan book as security and therefore this is unlikely to be achieved in the near future.

**3.15.3 CD10a – Leisure Revenue Funding**

There is currently a projected in-year Leisure Services’ deficit as

reported. The leisure business plan is under review to reduce both the deficit and the longer-term overhead costs to the service as reported previously.

**3.15.4 CD10c – Play Strategy**

This risk also impacts on the level of confidence for achieving Improvement Priority 9.7 (Implement the priorities of the Libraries, Arts and Play Strategies). The annual Council budget for 2013/14 made provision for a play scheme service for 2013/14 and a review of future years provision will follow.

**3.15.5 CD20 – School Buildings / School Modernisation**

Despite previous increases in the repair and maintenance budget, a significant backlog will remain for the foreseeable future. Pressure on the repair and maintenance budget will increase with the reduction of capital. Actions to mitigate the risks are a combination of prioritising repairs and maintenance and getting value for money through procurement, and a capital investment programme in the replacement of aged school buildings in partnership with Welsh Government.

**3.15.6 CD38 – Welfare Reform**

Whilst work is progressing against the SARC and the Welfare Reform Strategy the certainty of the risk and forecasted severity of its impact dictates that this will continue to be shown as red for foreseeable future. The SARC has been revised to reflect the emerging risks in the project.

**3.15.7 CG23 – Data Protection**

The risk of a breach of the Data Protection Act by the Council is identified as a red risk in SARC as with many public bodies. An action plan to improve management control through role definition and training, and support systems, is in development and the risk is reducing.

**4.00 RECOMMENDATIONS**

4.01 Cabinet Members are invited to determine if enough action has been taken to manage performance.

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 Assessment of 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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