

2011/12 Qtr 3 Improvement Target Outturns - Appendix 2

Reference & Title	RAG Status	Trend (on previous quarter)	Q3 Outturn	Target	Comment	Owner
FINANCE						
DWP1 - Time taken to process Housing Benefit (HB) and Council Tax Benefit (CTB) new claims	Green	Downturned	9.09	10	There have been further improvements in performance indicators during Quarter 3 . The Service is still working with the DWP Performance and Development Team to help with further and ongoing improvements in our overall Service. Improvement to date has been due to changes in procedures and protocols even through there has been an increase in workloads. There is a hope that the next quarter will see further improvement even though increased workloads are expected.	Gareth Evans
DWP2 - Time taken to process Housing Benefit (HB) and Council Tax Benefit (CTB) change events	Green	Improved	15.76	22	There have been further improvements in performance indicators during Quarter 3 . The Service is still working with the DWP Performance and Development Team to help with further and ongoing improvements in our overall Service. Improvement to date has been due to changes in procedures and protocols even through there has been an increase in workloads. There is a hope that the next quarter will see further improvement even though increased workloads are expected.	Gareth Evans
HUMAN RESOURCES						
CHR 002 - The number of working days/shifts per full-time equivalent (FTE) local authority employee lost due to sickness absence	Amber	Downturned	2.88	2.70	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 and with the support of the HR team, focus is made on frequent, short term absences, return to work interviews with employees to understand any underlying issues affecting attendance at work. Where necessary capability measures are taken including first stage disciplinary to address poor attendance	Helen Stapleton
CUSTOMER SERVICES						
CUSM1L - Efficient Complaints Handling - The percentage of initial complaints responded to within 10 working days	Amber	Downturned	76.30	80.00	Overall performance is quarter three has remained unchanged compared to the last quarter at 76%. There was a significant increase in the volume of complaints received by the Council in quarter three; more complaints were received in quarter three than in quarter one and quarter two combined. This is due to the increased volume of complaints to Environment in connection with the new managed weekly collection service for refuse and recycling. The number of complaints to Environment almost doubled when compared to the volume received in quarter one and quarter two combined.	Denise Naylor
HOMELESSNESS						
HHA 002 - The average number of working days between homeless presentation and discharge of duty for households found to be statutorily homeless	Green	Improved	115.64	220.00	During this quarter 11 households were successfully allocated secure accommodation and moved out of the local authority's temporary homeless housing stock. This figure will continue to fluctuate depending on whether a homeless household qualifies on housing need points through the local authority housing register.	Gill Conway
HHA 016 - The average number of days all homeless families with children spent in Bed & Breakfast accommodation	Amber	Improved	11.80	7.00	10 families were accommodated in B&B this quarter compared to 6 families in quarter 2. 6 of these families were accommodated for fewer than 5 days. The other 4 families were accommodated for longer as we attempted to find more suitable temporary housing for them e.g. Supported Hostel.	Gill Conway

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HHA 017b - The average number of days that all homeless households spent in: Other forms of temporary accommodation	Green	Improved	163.21	250.00	As previously reported this figure will fluctuate depending on the number of households allocated secure accommodation through effective options. In this quarter the local authority discharged its legal homeless duty to 14 households. 4 households were allocated local authority accommodation, 2 households were accommodated by Housing Associations, 2 households received a deposit bond and secure private rented property, 2 households returned to previous accommodation and 3 households were given notice to vacate.	Gill Conway
HOUSING						
HLS 010aL - The average number of of calendar days taken to complete emergency repairs	Green	Downturned	0.31	0.5	No commentary provided in Ffynnon.	
HLS 010bL - The average number of calendar days taken to complete urgent repairs	Green	Improved	8.4	9.00	No commentary provided in Ffynnon.	Clare Budden
HLS 010cL - The average number of calendar days taken to complete non-urgent repairs	Red	Improved	62.27	35.00	Whilst there has been an improvement in this category of repairs this quarter the outturn is stilled marred by the backlog of repairs. The backlog of repairs is split from the day to day repairs then new work is being done well below the target of 35 days.	Clare Budden
HLS 013L - The total amount of rent lost due to lettable units of permanent accommodation being empty as a percentage of the total rent debit for the financial year.	Amber	Improved	2.54	2.00	It is again pleasing to note that performance has improved again for Q3. It is anticipated that performance will continue to steadily improve for Q4 and the following financial year.	Brett Sadler
HLS 014L - The average number of calendar days taken to let lettable units of permanent accommodation during the financial year.	Amber	Improved	62.27	42.00	It is pleasing to see the new processes and initiatives put in place to improve turnaround time is finally showing a marked improvement this quarter. Of significant effect is the decision to move the full replacement of kitchens in empty properties to the capital works programme thus reducing the cost and turnaround time for voids works.	Clare Budden
HPMM 7L - The percentage of gas safety checks completed cumulative	Amber	Downturned	97.44	99.00	It is disappointing to see that the outturn for this indicator has missed the target for this quarter. The outturn of 97.44% represents an improvement on 96.52% from Q3 of last year. This area is under an ambitious schedule of change to condense the servicing into an 11 month programme and therefore represents an increased challenge compared with previous years. Of more importance the percentage of installations with a current CP12 (safety certificate) is 97.54%. The remaining properties are either empty and will be checked when the property is let or have been visited and are subject to the "no access" procedures.	Mike Bernard
SOCIAL CARE FOR ADULTS						
SCA 007 - The percentage of clients with a care plan at 31st March whose care plans should have been reviewed that were reviewed during the year	Green	Improved	82.26	80.00	Performance has exceeded the All Wales average for 2010/2011 of 75.5% and our 2011/2012 target of 80% with improved performance across all service areas. Documentation has been reviewed to streamline the recording process and so reduce the administrative burden on reviewing officers.	Maureen Mullaney
SCA 018a - The percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year	Green	Improved	88.00	87.00	Evidenced performance has improved steadily. More complete data is now available for carers of mental health service users.	Maureen Mullaney

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SCA 018c - The percentage of carers of adults who were assessed or re-assessed in their own right during the year who were provided with a service	Green	Improved	76.36	52.00	Only services provided directly to carers are counted in this PI. Additional services provided to service users, such as respite or day care, are not included even though they result from the carer's assessment. This is in accordance with LGDU guidance. Although the number of carers who received a service has not yet reached our end of 2010/2011 performance, in percentage terms we have exceeded both last year's performance and our 2011/2012 target.	Maureen Mullaney
IA1.1L4 - The number of adults receiving a personal budget for services via either a direct payment or Citizen Directed Support	Green	Improved	177.00	144.00	This PI no longer includes direct payments for children. Performance has exceeded the 2011/2012 target as an infrastructure is now in place to support a larger number of DP users.	Jo Taylor
PLANNING						
PLA 003biL - The percentage of these determined appeals that upheld the authority's decision in relation to planning application decisions	Green	Improved	100.00	75.00	The performance within Quarter 3 has exceeded the target.	Glyn P Jones
PLA 004b - The percentage of minor planning applications determined during the quarter within 8 weeks	Amber	Downturned	57.00	65.00	The outturn for Q3 (57%) is down slightly in relation to Q2 (58.77%), which in turn fell short of the revised target (65%). Apart from the increased emphasis on negotiating quality which is difficult to quantify, there are a number of reasons why decisions on the minor applications go beyond the 8 weeks. These include the number of applications needing to be reported to the Committee meetings for reasons which include the need for Section 106 Agreements to cover affordability of housing (under Policies HSG 3 and HSG 5). Nevertheless it is anticipated that a review of the delegated scheme will address some of these delays and, longer term, the introduction of a more robust system of pre-application advice (with charges) will allow any planning issues to be dealt with prior to the submission of applications in some cases. We will also be seeking to streamline the procedures involved with legal agreements, again to reduce delays currently involved with these.	Glyn P Jones
PLA 005 - The percentage of enforcement cases resolved during the quarter within 12 weeks of receipt	Green	Improved	75.17	75.00	The performance within Quarter 3 has exceeded the target.	Glyn P Jones
ADAPTATIONS						
PSR 006 - The average number of calendar days taken to deliver low cost adaptation works in private dwellings where the disabled facilities grant is not used	Green	Improved	75.74	88.00	As can be seen, time taken on adult occupational therapy waiting lists is reflected in this PI and reduced waiting times in mid 2011 continue to have a positive impact on performance. However the Occupational Therapy Team received an increase in referrals in the summer months which will impact on performance in a time of fixed resources. It is important to note that this PI is measured very differently across Wales, and comparisons are therefore variable. In Flintshire adaptations up to the value of £1000 have been undertaken as minor adaptations and this has negatively impacted on our performance, but has had a positive outcome for the service user.	Maureen Mullaney
PSR 009a - The average number of calendar days taken to deliver a Disabled Facilities Grant for Children and Young People	Green	Improved	292.50	350.00	Target achieved	Carol Salmon

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PSR 009b - The average number of calendar days taken to deliver a Disabled Facilities Grant for Adults	Amber	Improved	394.57	350.00	There has been, as we have identified in previous years, an increase in Occupational Therapy referrals in summer. This impacts further into the year as capacity to assess also changes. A budget pressure bid has been submitted to increase assessment capacity in imaginative ways. This will be reported later in the year.	Maureen Mullaney
SOCIAL CARE FOR CHILDREN						
SCC 001b - For those children looked after whose second review (due at 4 months) was due in the year, the % with a plan for permanence at the due date	Green	Static	100.00	100.00	All children due for their second review in the Quarter were provided with a plan for permanence.	Carol Salmon
SCC 016 - The percentage of reviews of child in need plans carried out within statutory timescales during the year	Green	Downturned	88.10	70.00	Although a slight decline on last quarter, performance in Q3 is still well above target and last year's outturn.	Carol Salmon
SCC 024 - The percentage of children looked after during the year with a Personal Education Plan within 20 school days of entering care or joining a new school in the year ending 31st March	Not Applicable	Not Applicable	0.00	80.00	No children were due a Personal Education Plan between October and December.	Carol Salmon
SCC 025 - The percentage of statutory visits to looked after children due in the year that took place in accordance with the regulations	Amber	Improved	77.82	93.00	All Statutory visits are now required to be recorded on Paris in order to be verified and counted within the PI, which means that the data is now fully auditable. No verbal assurances that visits have taken place within timescales have been accepted. Capacity problems due to sickness in the Permanency Team (CYAST) have impacted on the recording of statutory visits to looked after children in Quarter 3. An analysis of the records of visits on Paris has been completed and the Team Manager has been notified of the remedial work that needs to be completed in order that the visit records are brought up to date. Additional capacity provided within the team will ensure that visits are recorded promptly in order to be counted within the PI.	Carol Salmon
SCC 028 - The percentage of children looked after who had a fully completed and updated assessment and progress record at their third review	Amber	Improved	66.67	70.00	The Performance Team meet on a monthly basis with the Children and Young Adults Support Team to advise of assessments which are becoming due. However, the ICS Assessment and Progress Record is a lengthy and time-consuming document to complete, and where cases are in court proceedings, priority is given to adoption and court paperwork. Members considered the issues around this PI, including the length and complexity of the paperwork required and the very low All Wales average for this indicator, and recommended that the target should be reclassified to incremental at the target setting event in November 2011. In Quarter 3, three out of nine Assessment and Progress Records were completed outside the statutory timescales. In one case, work on the document was started in early January, and in the other two cases a recommendation was made by the Independent Reviewing Officer that the work should be completed by the time of the next review.	Carol Salmon
SCC 030a - The percentage of young carers known to Social Services who were assessed.	Green	Static	100.00	80.00	All identified young carers were provided with a assessment and a service.	Carol Salmon
SCC 030b - The percentage of young carers known to Social Services who were provided with a service	Green	Static	100.00	80.00	All identified young carers were provided with a assessment and a service.	Carol Salmon

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SCC 033c - The percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19	Green	Downturned	80.00	75.00	One young person was not in education or employment due to ill health.	Carol Salmon
SCC 039 - The percentage of health assessments for looked after children due in the year that have been undertaken	Amber	Improved	72.58	75.00	A process of continuous overview and scrutiny remain central to our internal activities. As noted in previous action plans we remain limited in our response to Health activities and deadlines. We continue to have a dialogue with Health Representatives both in the North Wales area and other Health colleagues when children are placed out of county about time frames and standards. 45 out of the 62 health assessments (72.6%) due in the quarter were undertaken within the statutory timescales. This was a good improvement on Quarter 2. The actions to notify the LAC nurse of new placements, and to develop a new local performance indicator to capture appointments which were requested to Health within timescales, have both been completed.	Carol Salmon
SCC 042a - IA - The percentage of initial assessments completed within 7 working days	Green	Improved	93.67	89.00	Because of the delays experienced with the electronic management authorisation of assessments, it has been agreed that Social Workers will now sign off their own assessments, with managerial oversight provided at the point of transfer or closure. This means that completed assessments can now be signed of in a timely manner. The Performance Team will continue to flag up unauthorised assessments. However, in some cases where there is no urgent child protection need, and where the service user finds it difficult to engage with Social Services, assessments may take longer than the statutory 7 working days to complete. In Quarter 3, five initial assessments were completed outside the statutory timescale of 7 working days. One was allocated late because of insufficient capacity in the Duty & Assessment Team to carry out the assessment. Additional temporary capacity has been provided in the team. The other four assessments were conducted at the service user's pace, the longest taking 19 days.	Carol Salmon
SCC 042b - IA - The average time taken to complete initial assessments that took longer than 7 working days to complete	Amber	Improved	13.80	10.50	Because of the delays experienced with the electronic management authorisation of assessments, it has been agreed that Social Workers will now sign off their own assessments, with managerial oversight provided at the point of transfer or closure. This means that completed assessments can now be signed of in a timely manner. The Performance Team will continue to flag up unauthorised assessments. However, in some cases where there is no urgent child protection need, and where the service user finds it difficult to engage with Social Services, assessments may take longer than the statutory 7 working days to complete. In Quarter 3, five initial assessments were completed outside the statutory timescale of 7 working days. One was allocated late because of insufficient capacity in the Duty & Assessment Team to carry out the assessment. Additional temporary capacity has been provided in the team. The other four assessments were conducted at the service user's pace, the longest taking 19 days.	Carol Salmon