

FLINTSHIRE COUNTY COUNCIL

REPORT TO: **CABINET**

DATE: **TUESDAY, 16 DECEMBER 2014**

REPORT BY: **CHIEF EXECUTIVE**

SUBJECT: **2014/15 MID YEAR CHIEF OFFICER REPORTS**

1.00 PURPOSE OF REPORT

1.01 To receive the 2014/15 mid year Chief Officer performance reports. The reports cover the period April to September 2014.

1.02 To note the following: -

- areas of positive performance;
- areas of concern;
- the progress updates for the Council Improvement Priorities that are not set as an in-year priority;
- progress updates for key projects and collaborative areas of work;
- the risks highlighted (including operational, project and collaborative risks);
- the assessment of any regulatory reports; and
- performance against National Strategic Indicators (NSIs) and Public Accountability Measures (PAMs).

2.00 BACKGROUND

2.01 Twice annually (at quarters 2 and 4) performance highlight reports (referred to as the Reports herein) will be presented from Chief Officers. These will be similar to those previously produced for Head of Service reporting, with a focus on performance exceptions, both good and poor. This ensures that the 'business as usual' is still being monitored and reported against.

2.02 The contents of the Reports include:

- areas of positive performance;
- areas of concern;
- the Council Improvement Priorities that are not set as an in-

year priority;

- progress for key projects and collaborative areas of work;
- risk summaries;
- reporting against findings from internal and external regulatory bodies e.g. Wales Audit Office, Care and Social Services Inspectorate Wales or Estyn; and
- performance against the statutory national performance indicators (NSIs and PAMs).

3.00 CONSIDERATIONS

3.01 The Reports have been prepared by the 9 Chief Officers.

3.02 Copies of the detailed 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 this report contains a schedule of all the quarterly and annually reported NSIs and PAMs.

3.04 Analysis of performance against target for the performance indicators is undertaken using the RAG (Red, Amber, Green) status. This is defined as follows: -

- RED equates to a position of unacceptable performance.
- AMBER equates to a mid-position where the performance has not achieved target but is within an acceptable level.
- GREEN equates to meeting or exceeding target.

Target analysis can only be performed where data is available and a target has been set.

3.05 Of the 22 indicators that could be analysed: -

- 15 (68%) were assessed as Green;
- 7 (32%) were assessed as Amber; and
- None were assessed as Red.

3.06 Trend analysis to compare current outturn with the 2013/14 year end performance was undertaken for 24 indicators: -

- 16 (67%) had improved;
- 7 (29%) had downturned; and
- 1 (4%) maintained the same level of performance (100%).

3.07 Appendix 2 of this report contains a schedule of all the risks highlighted within the Reports. Analysis of the current (net) risk levels

identified: -

- 3 (7%) are high (red);
- 37 (88%) are medium (amber); and
- 2 (5%) are low (green).

3.08 The 3 high (red) risks are: -

3.08a **Portfolio – Governance**

Operational Risk – Compliance with the statutory timescales for Freedom of Information (FOI) Act requests

For the last quarter 77% of requests were determined within the statutory time frame. This is the first quarter where the average has fallen significantly below the 85% expected by the Information Commissioner's Office. Work is ongoing to raise awareness with services to increase priority and comply with the statutory timescale.

3.08b **Portfolio – Social Services**

Operational Risk – Resilience of the independent sector

This risk is particularly concerned with care home capacity for residential care and the recruitment and retention of high quality nursing staff for residential care. Actions to help mitigate the risk include: -

- development of training and support programmes for the care home market to ensure there is high quality and robust leadership;
- development of market position statements which set out commissioning intentions and the need for developing residential care home capacity; and
- close working with Health to ensure a sufficient supply of competent qualified nurses.

3.08c **Portfolio – Organisational Change (2)**

Operational Risk – Reduction of future workloads resulting in the need to review service team structures and resource levels

This fee income generating service is likely to see significant reduction in future funding made available for schemes and as a direct result a reduction in fee generation. Consideration is therefore being given to the future direction and structure of these Architectural & Design Consultancy Service.

4.00 RECOMMENDATIONS

4.01 That Cabinet consider the mid year Chief Officer 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: -

- areas of positive performance;
- areas of concern;
- the progress updates for the Council Improvement Priorities that are not set as an in-year priority;
- progress updates for key projects and collaborative areas of work;
- the risks highlighted (including operational, project and collaborative risks);
- the assessment of any regulatory reports; and
- performance against the NSIs and PAMs.

5.00 FINANCIAL IMPLICATIONS

5.01 There are no specific financial implications within this report.

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 and Scrutiny Committees will receive the Reports relevant to their areas of work as part of their forward work programme alongside the appropriate Improvement Plan monitoring reports.

11.00 CONSULTATION UNDERTAKEN

11.01 The Reports are being shared with Portfolio holders prior to being presented to Overview and Scrutiny Committees.

12.00 APPENDICES

Appendix 1 - Schedule of NSIs and PAMs

Appendix 2 - Summary of the operational, project and collaborative

risks identified within the Reports

LOCAL GOVERNMENT (ACCESS TO INFORMATION ACT) 1985
BACKGROUND DOCUMENTS

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