

**FLINTSHIRE COUNTY COUNCIL**

**REPORT TO:** **SOCIAL AND HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE**

**DATE:** **THURSDAY 18<sup>TH</sup> JUNE, 2015**

**REPORT BY:** **ENVIRONMENT AND SOCIAL CARE OVERVIEW & SCRUTINY FACILITATOR**

**SUBJECT:** **YEAR END IMPROVEMENT PLAN MONITORING REPORTS**

**1.00 PURPOSE OF REPORT**

1.01 To consider elements of the 2014/15 Year End Improvement Plan Monitoring Report relevant to the Social and Health Care Overview and Scrutiny Committee.

1.02 To consider the following:-

- The levels of progress and confidence in meeting the Council's Improvement Priorities and their impacts including the milestones achieved.
- The measures which evidence achievement and the baseline data, and targets.
- The baseline risk assessment for the strategic risks identified in the Improvement Plan and the arrangements to control them.

**2.00 BACKGROUND**

2.01 The new style Improvement Plan adopted by Council in June 2013 which is aligned to the new three year Outcome Agreement, focuses on the priorities which are expected to have the most impact during 2014/15.

2.02 In addition to the Improvement Plan Monitoring Report, quarterly performance highlight reports will be presented from the Chief Officers. These will be similar to those previously produced for quarterly reporting.

**3.00 CONSIDERATIONS**

3.01 The Improvement Plan Monitoring Report gives an explanation of the progress being made towards delivery of the impacts set out in the Improvement Plan. The narrative is supported by measures and/or milestones which evidence achievement. In addition, there is an assessment of the strategic risks and the level to which they are being controlled.

3.02 For the Social and Health Care Overview and Scrutiny Committee the following Improvement Plan sub-priority reports are attached at Appendix 1 and 2:-

- Independent Living
- Integrated Community Social and Health Services

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

**Performance**

- RED – equates to a position of under-performance against target.
- AMBER – equates to a mid-position where improvement may have been made but performance has missed the target.
- GREEN – equates to a position of positive performance against target.

**Outcome**

- RED – equates to a forecast position of under-performance against target at year end.
- AMBER – equates to a forecast mid-position where improvement may have been made but performance will miss target at year end.
- GREEN – equates to a forecast position of positive performance against target at year end.

3.04 The high (RED) risk area identified within the elements of the Improvement Plan Monitoring Report relevant to the Social and Health Care Overview and Scrutiny Committee, is as follows:-

3.04.1 **Priority: Living Well (Independent Living)**  
***PSR/009a – The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people (target = 257 days).***

There were only two adaptations undertaken for children through DFG's during 2014/15. Due to the highly complex nature of both adaptations the total number of days taken were 1,238 days, giving an annual average of 619 days.

**4.00 RECOMMENDATIONS**

4.01 That the Committee consider the 2014/15 Year End Improvement Plan Monitoring Reports, highlight concerns and feedback details of any challenge to the Corporate Resources Overview & Scrutiny Committee who are responsible for the overview and monitoring of performance.

**5.00 FINANCIAL IMPLICATIONS**

5.01 There are no specific financial implications for this report; however the Council's Medium Term Financial Plan is aligned to resource the priorities of the Improvement Plan.

**6.00 ANTI POVERTY IMPACT**

6.01 There are no specific anti poverty implications for this report, however poverty is a priority within the Improvement Plan 2014/15.

**7.00 ENVIRONMENTAL IMPACT**

7.01 There are no specific environmental implications for this report; however the environment is a priority within the Improvement Plan 2014/15.

**8.00 EQUALITIES IMPACT**

8.01 There are no equalities implications for this report.

**9.00 PERSONNEL IMPLICATIONS**

9.01 There are no personnel implications for this report.

**10.00 CONSULTATION REQUIRED**

10.01 Publication of this report constitutes consultation.

**11.00 CONSULTATION UNDERTAKEN**

11.01 The Chief Officer Team and the Performance Leads from across the Authority have contributed to help shape the new approach to reporting.

**12.00 APPENDICES**

12.01 Appendix 1 – Independent Living  
Appendix 2 – Integrated Community Social and Health Services

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

None.

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