

SOCIAL & HEALTH CARE OVERVIEW & SCRUTINY COMMITTEE

Date of Meeting	Thursday 20 th October, 2016					
Report Subject	Quarter 1 Improvement Plan Monitoring Report					
Cabinet Member	Cabinet Member for Social Services					
Report Author	Chief Executive					
	Chief Officer – Social Services					
Type of Report	Strategic					

EXECUTIVE SUMMARY

The Improvement Plan for 2016/17 was adopted by the Council on 14th June, 2016.

This report presents the monitoring of progress for the first quarter of the Improvement Plan 2016/17 priority 'Modern and Efficient Council' relevant to the Organisational Change Overview and Scrutiny Committee.

Flintshire is a high performing Council as evidenced in previous Improvement Plan monitoring reports as well as in the Council's Annual Performance Reports. This Quarter 1 monitoring report for the 2016/17 Improvement Plan is also a positive report, with the majority of activities being assessed as making good progress 83% and likely to achieve the desired outcome 83%. In addition, 50% of the performance indicators met or exceeded target for the quarter. Risks are also being successfully managed with the majority being assessed as moderate (71%).

This report is an exception based report and therefore detail focuses on the areas of under-performance.

RECO	MMENDATIONS
1	That the Committee consider the Quarter 1 Improvement Plan monitoring report for the Living Well priority to monitor under performance and request further information as appropriate.

REPORT DETAILS

1.00	EXPLAINING THE IMPROVEMENT PLAN MONITORING REPORT							
1.01	The Improvement Plan monitoring report gives and explanation of the progress being made towards the delivery of the impacts set out in the 2016/17 Improvement Plan. The narrative is supported by performance indicators and/or milestones which evidence achievement. In addition, there is an assessment of the strategic risks and the level to which they are controlled.							
1.02	Analysis of performance against the Improvement Plan measures is undertaken using trend arrows.							
	Analysis of trend performance (against previous quarters, or against the same quarter of the previous year for Quarter 1) is shown with an arrow;							
	• To indicate upward trend ^①							
	• To indicate downward trend \square							
	 To indicate no change 							
1.03	 Monitoring our Activities Each of the sub-priorities have high level activities which are 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 ARAG status is also given as an assessment of our level of confidence at this point in time in achieving the 'outcome(s)' for each sub-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) 							
1.04	 In summary our overall progress against the high level activities is: - ACTIVITES PROGRESS We are making good (green) progress in 10 (83%). We are making satisfactory (amber) progress in 2 (17%). We are making limited progress (red) in 0 (0%). 							

	ACTIVITIES OUTCOME								
	• We have a high (green) level of confidence in the achievement of								
	10 (83%).								
	 We have a medium (amber) level of confidence in the achievement of 2 (17%). 								
	 We have a low (red) level of confidence in the achievement of 0 (0%). 								
1.05	One activity showed a red RAG status for current progress:-								
	Priority: Living Well (Ensure that the workforce are trained in line with the new codes of practice for safeguarding) Each portfolio has completed a self-assessment to identify awareness levels of safeguarding issues. The analysis will help inform the Corporate Safeguarding Training Strategy. The outcome is assessed as amber.								
1.06	Monitoring our Performance								
	Analysis of performance against the Improvement Plan performance indicators is undertaken using the RAG (Red, Amber Green) status. This is defined as follows: -								
	 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. 								
1.07	Analysis of current levels of performance for those PIs which are measured quarterly and where performance could be compared with target, shows the following: -								
	 1 (50%) had achieved a green RAG status 								
	 0 (0%) had achieved an amber RAG status 								
	 1 (50%) had achieved a red RAG status 								
1.08	Analysis of the trend for those indicators where performance could be compared with the Q1 period of 2015/16, shows:								
	 1 (50%) had improved 								
	 0 (0%) had remained at the same level 								
	 50 (50%) had downturned 								
1.09	Monitoring our Risks								
1.00	Analysis of the current risk levels for the strategic risks identified in the								
	Improvement Plan is as follows: -								
	 0 (0%) is insignificant (green) 								
	 0 (0%) are minor (yellow) 								
	 5 (71%) are moderate (amber) 								
	 2 (29) are major (red) 								
	 0 (0%) are severe (black) 								
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1.10	The one major (red) risks area identified for the Social & Health Ca Overview & Scrutiny Committee is:-						
	Priority: Living Well <i>Risk: Fragility and sustainability of the care home sector</i> Flintshire's Residential Care review has been completed, we continue to work with care providers, locally, regionally and Nationally to address the complex and broad range of issues. The sector remains fragile and remains a key council priority.						

2.00	RESOURCE IMPLICATIONS
2.01	The Council's Medium Term Financial Plan is aligned to resource the priorities of the Improvement Plan.
2.02	Resources to produce the progress and trend analysis reports has reduced significantly through the use of the CAMMS system.

3.00	CONSULTATIONS REQUIRED / CARRIED OUT						
3.01	Overview and Scrutiny Committees have been involved in quarterly performance progress reports.						
	The Audit Committee receives twice yearly Improvement Plan risk reports.						

4.00	RISK MANAGEMENT
4.01	Progress against the risks identified in the Improvement Plan have been reported on for Quarter 1 and the detail is included in the report at Appendix 1.

5.00	APPENDICES
5.01	Appendix 1 – Quarter 1 Improvement Plan Monitoring Report – Living Well.

6.00	LIST OF ACCESSIBLE BACKGROUND DOCUMENTS						
6.01	None.						
	Contact Officer: Telephone:	Margaret Parry-Jones 01352 702427					
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7.00	GLOSSARY OF TERMS								
7.01	Improvement Plan: the document which sets out the annual priorities of the Council. It is a requirement of the Local Government (Wales) Measure 2009 to set Improvement Objectives and publish an Improvement Plan.								
7.02	CAMMS: is an integrated planning, risk management and programme / project management and reporting software. It was purchased in April 2015 and work to commence implementation began in May; focusing initially on the Council's Improvement Plan and the Portfolio of Social Services.								
7.03	Headings: 'Pre. Year Period Actual': Performance Indicators are compared back to the same quarter of the previous reporting year.								
7.04	Trend Arrows: An upward trend arrow doesn't necessarily mean an improvement in performance and nor does a downward trend necessarily mean a reduction in performance. The trend arrows relate to the target set, so if a target is, for example, to reduce sickness absence and the reported actual is less than the previous quarter, a downward trend arrow would be generated, even though the performance has actually improved because less people are off sick. The improved performance will be shown in the RAG status (as detailed below) as green.								
7.05	Risk Matrix: Risks are now assessed using the improved approach to risk management endorsed by Audit Committee in June 2015. Paragraph 6.03 contains a link to the Audit Committee report which outlines the new approach, including the use of a new and more sophisticated risk assessment matrix which provides greater opportunities to show changes over time. Risk Likelihood and Impact Matrix								
		Catastrophic	Y	A	R	R	В	В	
	Impact Severity	Critical	Y	Α	Α	R	R	R	
	Impact	Marginal	G	Y	А	А	А	R	
		Negligible	G	G	Y	Y	А	А	
			Unlikely (5%)	Very Low (15%)	Low (30%)	Significant (50%)	Very High (65%)	Extremely High (80%)	
	Likelihood & Percentage of risk happening								
	The new approach to risk assessment was created in response to recommendations in the Corporate Assessment report from the Wales Audit Office and Internal Audit.								