

CYNGOR SIR POWYS COUNTY COUNCIL.

CABINET EXECUTIVE
18th September 2018

REPORT AUTHOR: County Councillor Aled Davies
Portfolio Holder for Finance, Countryside and Transport

SUBJECT: Performance Report Quarter 1 2018-19

REPORT FOR: Decision

1. Summary

1.1 This report provides a Quarter 1 2018-19 update against:

- **Top 20 Performance Indicators** – The Powys specific Performance Indicators (PIs) are based on what is most important to Powys, informed by Vision 2025, regulatory reports, and a mix of Public Accountability Measures (PAMs) and local measures
- **Corporate Improvement Plan 2018-2023 (CIP)** - The Corporate Improvement Plan is our road map to Vision 2025, setting out our top priorities and milestones. It draws together information from a number of our key strategies, summarising in one document the steps to meet our priorities and the improvements you can expect to see when the plan is delivered

1.2 And an overview of 2017-18 end of year data for:

- **Public Accountability Measures (PAMs)** – The 26 PIs which Powys will use to measure its high level performance, in comparison to the other 21 councils in Wales

2. Top 20 Performance Indicators

2.1 The full detail of the Top 20 PIs can be found in Appendix A. It should be noted that when some measures are broken down into their subsections there are then 23 measures used in this comparison.

At the end of Quarter 1 the performance of the PIs is reported as follows:

No of Measures	RAG - Green	RAG - Amber	RAG - Red	RAG not available (due to annual, no system or no target)
23	6	5	1	11

Of the 11 measures where a RAG is not available, seven are due to the measures only being available for collection on an annual basis. Two have no target set, and two do not have systems in place for collection. It should also be noted that six of the seven annual measures need a target setting, and one of the two measures with no system in place need a target setting.

2.2 It is proposed that the following actions are carried out as a matter of urgency to ensure that at Quarter 2 a complete view of performance is available:

- Targets need to be set for all measures, including profiling across the quarters where appropriate
- Systems need to be agreed for data collection for the following two measures:
 - Average time from referral to delivery of service
 - % of calls answered within timescale (within the contact centre)
- Cabinet consider the detail within Appendix A and agree the Executive Management Team lead remedial actions for the Red and Amber measures to ensure that performance improves in these areas.

The table below show the measure, and issue to resolve:

Measure	Issue	Remedial Action
Percentage of CP statutory visits carried out within timescale	RED against target	Review of processes to streamline tasks undertaken by social workers to avoid duplication e.g. numerous forms required to be completed for Continue to have assessment meetings so as to ensure management oversight of assessments and completion dates.
Percentage of assessments completed for children within statutory timescales	AMBER against target	Continue to monitor and ensure appropriate staffing resources are available to respond. Address why we have no strategy meetings and a very high number of strategy discussions and Section 47 assessments undertaken. Review Threshold document and how this is being implemented at the front door. August 2018
Percentage of LAC statutory visits carried out within timescale	AMBER against target	Continue to provide regular supervision so as to ensure support and management oversight. Improvement Plan action: B23 All staff are undertaking signs of safety training to further enhance assessment skills and improve quality of practice. Improvement Plan action: B24 Implement Quality Assurance Panel to support the implementation of the QA framework –Sept 18. Improvement Plan action: B29

Percentage of pupil attendance in primary schools	AMBER against target	A new 12 week attendance process for raising attendance A new attendance guide for schools outlining statutory responsibilities Regular meetings with Challenge Advisor and Educational Welfare Officer's Attendance Manager to attend Team around the School meetings Regular
Percentage of pupil attendance in secondary schools	AMBER against target	A new 12 week attendance process for raising attendance A new attendance guide for schools outlining statutory responsibilities Regular meetings with Challenge Advisor and Educational Welfare Officer's Attendance Manager to attend Team around the School meetings
Number of working days/shifts per FTE employee lost due to sickness absence	AMBER against target	EMT agreed the need to obtain feedback from staff to ascertain why the sickness is at the current level e.g. is it a case of increase pressures on individuals, lack of planning etc. EMT introducing staff engagement exercise to increase learning for EMT, to include EMT members meeting with groups of staff around some of the issues talked about and what it feels like to them with feedback expected into EMT.

3. Corporate Improvement Plan 2018-2023

3.1 There has been inconsistency in reporting of programme performance for Quarter 1, resulting in the BRAG status' not being available against all objectives in the CIP. For this reason there is no overview given. Detail for each individual programme is outlined in Appendix B.

3.2 It is proposed that the following actions are carried out as a matter of urgency to ensure that at Quarter 2 a complete view of performance against the CIP is available:

- Introduce a consistent reporting approach across all programmes that focus on the outcomes, objectives and measures that were committed to in the CIP
- Ensure all programmes have clear milestones for their objectives. This will give assurance that there are clear plans in place for delivery
- Set targets for all outcome measures, at least annually, including profiling across the quarters where appropriate

3.3 Where programmes have identified exceptions (issues, risks) remedial action has been proposed and agreed at relevant programme boards.

4. Public Accountability Measures

4.1 Currently the all Wales analysis excludes data on waste and social care indicators, as they are not yet available (this equates to 8 out of the 26 PAM indicators). Full detail of the remaining 18 measures can be found in Appendix C.

4.2 Outlined below is a summary of our performance against the 18 PAMs:

- We are ranked 6th overall in Wales when compared against the average rankings
- We were among the top quartiles in Wales for 10 (56%) indicators
- We were among the bottom quartiles in Wales for 7 (39%) indicators. There is no quartile data available for one of the indicators
- We improved our performance in 28.6% of the indicators, compared to performance in 2016-17
- Our performance fell for 42.9% of the indicators, when compared to performance in 2016-17

4.3 Outlined below are the indicators where we are performing well, and not so well when compared to other Local Authorities across Wales:

We are among the best in Wales (Top Quartile) for:

- The average number of calendar days taken to deliver a Disabled Facilities Grant (ranked 1st)
- Percentage of appeals against planning applications dismissed (ranked 1st)
- Percentage of pupil attendance in primary schools (ranked 2nd)
- Percentage of year 11 leavers known not to be in education, training or employment (NEET) (ranked 2nd)

We need to improve (Bottom Quartile):

- Percentage of empty private sector properties brought back into use during the year through direct action by the local authority (ranked 19th)
- The percentage of reported fly tipping incidents cleared within 5 working days (ranked 19th)
- The percentage of principal B roads that are in overall poor condition (ranked 20th)
- The percentage of principal C roads that are in overall poor condition (ranked 22nd)

4.4 There is no action required against the PAMs.

5. Preferred Choice and Reasons

N/A

6. Impact Assessment

6.1 Is an impact assessment required? No

6.2 If yes is it attached? Yes/No

7. Corporate Improvement Plan

7.1 Appendix B sets out detailed performance against the CIP 2018-23

8. Local Member(s)

7.2 This report impacts all Members equally and does not affect local Members individually.

9. Other Front Line Services

Does the recommendation impact on other services run by the Council or on behalf of the Council? Yes

9. Communications

Have Communications seen a copy of this report? No

No proactive communication action required

10. Support Services (Legal, Finance, Corporate Property, HR, ICT, Business Services)

10.1 Legal : The recommendations can be supported from a legal point of view.

10.2 Finance - The contents of the report are noted.

11. Scrutiny

Has this report been scrutinised? No

12. Statutory Officers

12.1 The Solicitor to the Council (Monitoring Officer) commented as follows : “ I note the legal comments and have nothing to add to the report.”

12.2 The Head of Financial Services (Deputy Section 151 Officer) notes the content of the report.

13. Members' Interests

The Monitoring Officer is not aware of any specific interests that may arise in relation to this report. If Members have an interest they should declare it at the start of the meeting and complete the relevant notification form.

Recommendation:	Reason for Recommendation:
The above actions (2.2 and 3.2) for Cabinet and Executive Management Team are approved and resources allocated to complete them	To ensure the council can provide appropriate and timely reporting against the CIP and Top 20 PIs

Relevant Policy (ies):	CIP 2018-23; Performance Management and Quality Assurance Framework		
Within Policy:	Yes	Within Budget:	Yes

Relevant Local Member(s):	All Members
----------------------------------	--------------------

Person(s) To Implement Decision:	Executive Management Team
Date By When Decision To Be Implemented:	

Contact Officer: Emma Palmer Tel: 01874 612217 Email: emma.palmer@powys.gov.uk
--

Background Papers used to prepare Report: