

## ISLE OF ANGLESEY COUNTY COUNCIL

<b>REPORT TO:</b>	<b>CORPORATE SCRUTINY &amp; EXECUTIVE COMMITTEE</b>
<b>DATE:</b>	<b>SEPTEMBER 12<sup>th</sup> &amp; 19<sup>th</sup> 2016</b>
<b>SUBJECT:</b>	<b>SCORECARD MONITORING REPORT - QUARTER 1 (2016/17)</b>
<b>PORTFOLIO HOLDER(S):</b>	<b>COUNCILLOR ALWYN ROWLANDS</b>
<b>HEAD OF SERVICE:</b>	<b>SCOTT ROWLEY</b>
<b>REPORT AUTHOR:</b> TEL: E-MAIL:	<b>GETHIN MORGAN</b> 01248 752111 <a href="mailto:GethinMorgan@anglesey.gov.uk">GethinMorgan@anglesey.gov.uk</a>
<b>LOCAL MEMBERS:</b>	n/a

### A - Recommendation/s and reason/s

- 1.1 This is the first scorecard of the financial year 2016/17.
- 1.2 It portrays the position of the Council against its operational objectives as outlined and agreed collaboratively between the Senior Leadership Team / Executive and Shadow Executive.
- 1.3 The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future. These can be summarised as follows –
  - 1.3.1 *Overall targets are re-evaluated during Q2 following the publication of comparator data with an emphasis on improving indicators in the lower and lower median quartiles.*
  - 1.3.2 *Achievable sickness targets for all Services are accepted based on historical data / trends to meet the corporate target of 10 days per FTE and considerable effort is made to tackle specific long term sickness cases.*
  - 1.3.3 *To continue with the regular service sickness challenge panels with an associated work-plan to keep a focus on improving our sickness management figures*

<p><b>1.3.4</b> <i>the Wales Audit Office work related to sickness is reported through to the Executive in Q3 following the examination of our practise and proposed further improvements based on national best practise adopted.</i></p> <p><b>1.3.5</b> <i>An overall view and detailed appreciation of Children's &amp; Learning indicators are analysed further and assurance is gained of adherence to corporate policies and improved performance.</i></p> <p><b>1.4</b> The Committee is asked to accept the mitigation measures outlined above.</p>		
<b>B - What other options did you consider and why did you reject them and/or opt for this option?</b>		
n/a		
<b>C - Why is this a decision for the Executive?</b>		
This matter is delegated to the Executive		
<b>CH - Is this decision consistent with policy approved by the full Council?</b>		
Yes		
<b>D - Is this decision within the budget approved by the Council?</b>		
Yes		
<b>DD - Who did you consult?</b>		<b>What did they say?</b>
1	<b>Chief Executive / Strategic Leadership Team (SLT) (mandatory)</b>	This was considered by the SLT at their meeting on the 1st of September and their comments are reflected in the report
2	<b>Finance / Section 151 (mandatory)</b>	No comment
3	<b>Legal / Monitoring Officer (mandatory)</b>	No comment
4	<b>Human Resources (HR)</b>	
5	<b>Property</b>	
6	<b>Information Communication Technology (ICT)</b>	
7	<b>Scrutiny</b>	
8	<b>Local Members</b>	
9	<b>Any external bodies / other/s</b>	
<b>E - Risks and any mitigation (if relevant)</b>		
1	<b>Economic</b>	
2	<b>Anti-poverty</b>	
3	<b>Crime and Disorder</b>	
4	<b>Environmental</b>	
5	<b>Equalities</b>	
6	<b>Outcome Agreements</b>	
7	<b>Other</b>	
<b>F - Appendices:</b>		

Appendix A - Scorecard Monitoring Report – Quarter 1, 2016/17 & Scorecard

**FF - Background papers (please contact the author of the Report for any further information):**

- 2015/16 Scorecard monitoring report - Quarter 4 (as presented to, and accepted by, the Executive Committee in May 2016).

DRAFT

## **SCORECARD MONITORING REPORT – QUARTER 1 (2016/17)**

### **1. INTRODUCTION**

- 1.1 One of the Council's aims under the Wales Programme for Improvement is to secure the means by which continuous improvement can be evidenced and presented across the board. To that end, on an annual basis, a performance report is drafted to be published by end of October, which demonstrates progress or not (as the case may be).
- 1.2 This scorecard was developed in parallel to identify and inform Council leaders of progress against indicators which explicitly demonstrates the successful implementation of the Council's day to day work and assists in providing the evidential base from which the performance report is drafted.
- 1.3 The scorecard continues to develop and embed, reflecting those changes that have been undertaken to traditional systems and practices within the Council. This year's indicators included within the scorecard (similar to last year) have been decided via a workshop on the 28<sup>th</sup> July, 2016 with the Senior Leadership Team, the Executive and Shadow Executive.
- 1.4 The scorecard (Appendix 1) portrays the current end of Q1 position and will be considered further by the Corporate Scrutiny Committee and the Executive during September.

### **2. CONSIDERATIONS**

- 2.1 This is the fourth year of collating and reporting performance indicators in a co-ordinated manner. The Council is seeing trends establish themselves with regards to a number of those indicators and SLT / Scrutiny and Executive comments are having an impact on operational delivery.
- 2.2 It is important to note that the formulation of this year's scorecard requested –
  - further trend analysis
  - look back at previous year's performance
  - acknowledgement of specific indicators in relation to the quartile positioning
  - a new RAG status to include yellow (Red – greater than 10% behind target, Amber – 5 to 10% behind target, Yellow – 0 to 5% behind target, Green on target)

This assists the quarterly analysis and enables performance to be considered using a number of different comparator elements.

### **2.3 PERFORMANCE MANAGEMENT**

- 2.3.1 The scorecard for Performance Management shows performance against indicators outlined and requested by the Senior Leadership Team, Executive and Shadow Executive. Targets for which however, were set at a level prior to the publication of the national comparator data being published on the 7<sup>th</sup> of September.
- 2.3.2 At the end of Q1 it is encouraging to note that the majority of indicators are performing well against their targets but we note that 3 indicators that are underperforming as Amber or Red against their annual target for the year.

**2.3.3** Two of those indicators exist within Childrens Services show an underperformance as follows –

- (i) SCC/025 – the % of statutory visits to looked after children due in the year that took place in accordance with regulations Q1 – 82.69% Target – 100, RED. This compares with a performance of 89.97% for the same time period of 2015/16. This indicator was also discussed in the 2015/16 Q4 Scorecard report.

From an excellent level 12 months ago, this Pi has seen a steady deterioration, due to the significant increase in the numbers of looked after children. A number of visits have been late because of this increase in demand. Unfortunately the resources within the service has found it difficult to maintain targets.

**Mitigation** - to improve these standards for Q2 the following will be acted upon–

- The service is focused on improving its performance as it has recently increased capacity of social workers.
- The trackers system will continue to be used weekly and a system to be devised to ensure visits are completed when staff are on leave or there are sickness absences.

- (ii) PM32 - The % of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March. Q1 – 6.1%, AMBER.

Although this is high for a single quarter, the reasons for moving school are as part of long term planning for the children e.g. adoption, therapeutic placements; or an individual child's wish to move school and therefore no mitigation is required.

**2.3.4** One indicator within Learning shows an underperformance –

- (i) 18 – LCL/004: The number of library materials issued during the year is AMBER on the scorecard with a performance of 69k issues compared to a target of 75k issues.

Library materials issued are under target and slightly down on 2015/16 figures (72.5k for the same period) but the library service has set a high annual target for the year (16k above 2015/16 performance) as a mechanism for improvement. This is challenging given the economic and staffing realities.

These figures exclude e-resources which are increasing.

**Mitigation** – to improve the issues during Q2 16/17 the service will –

- Continue to promote reading and borrowing through engaging in Reader Development Activities. These activities include reading groups for welsh speakers and learners, listening book groups for the visually impaired, a knit & natter group in Beaumaris, summer

reading challenge for children and going out to see other groups in schools and social groups (e.g. Merched y Wawr etc).

- Launch of the North Wales Library Management System in Q2 should also represent an increase in both visits and issuing of library materials. The system will allow users to borrow and return books into any library in North Wales.

**2.3.5** There was agreement at the workshop noted above in 1.3 that officers re-evaluate the Education Performance indicators that can be included on the current year's Scorecard so as to include PI's which can be monitored regularly throughout the year. This piece of work will be undertaken during Q2 and thereafter portrayed in following Scorecard reports.

**2.3.6** Whilst the remaining indicators reported for Q1 are all ragged **GREEN** or **YELLOW** within the performance management section it should be noted that this does not mean that our position on a national basis has improved across all areas.

**2.3.7** Based on initial 15/16 quartile results it appears that 52.5% of our work related the NSI / PAM indicators have seen an improvement and our ranking on a national basis has increased from 18<sup>th</sup> in 2014/15 to 12<sup>th</sup> in 2015/16.

**2.3.8** Further analysis of the overall performance can be gained through the Annual Performance Report to be published before the end of October and reported to the Scrutiny and Executive Committee's during September 2016.

**2.3.9** As was discussed in the Q4 Scorecard Report for 2015/16, a large amount of the indicators hit their targets for 2015/16, which was encouraging and this is reflected in the improved national standing. If we are to progress and improve our standing as an achieving Council, ***the SLT recommends -***

- Targets are re-evaluated during Q2 following the publication of the national comparator data with an emphasis placed on improving indicators in the lower and lower median quartiles.

**2.3.10** During this financial year the scorecard report will now provide an update on the progress of programmes/projects within the Authority. The information related to this can be gleaned from attachment 2. A brief update on some programmes / projects are as follows - :

**2.3.10.1** *School modernisation* – Building work has commenced on Ysgol Cybi with a provisional completion date of April 2017. Ysgol Rhyd y Llan has commenced building work in Q1 with a provisional opening date of June 2017. Work has been underway to identify sites for a new school in the Bro Rhosyr / Bro Aberffraw area, these will be cut down and a final site will be agreed in Q2 with the expectation to conduct exploration surveys on the chosen site before final purchase.

**2.3.10.2** *Adult Social Care Programme* – The programme has now been amended to reflect the changing strategy and new arrangements are being established to drive delivery. Ty Glas Housing Society, in conjunction with the Council, will begin work on clearing the Ysgol y Bont site in Q2 ready for the construction of the Extra Care Housing Facility, Hafan Cefni.

- 2.3.10.3** *Library, Culture and Youth Transformation Programme* – The Library service have been in consultation to agree on the future use of the library service provision for the island. The Youth Service have also been consulting on the future of the service and will be finalising options from the initial consultation for further consideration by service users during Q2. The Culture service invited organisations, businesses and individuals to come forward during Q1 with ideas on the future running of some of our heritage sites. These will be discussed and considered further during Q2.
- 2.3.10.4** *Leisure Transformation Project* – the commercialisation of our leisure service has established a new brand called MônActif during the year. A restructuring of the leisure service has been completed. Wifi is now available in all leisure centres and new classes (inclusive of swimming) and direct debit payment options have been made available to customers. As part of the development, it is now possible for a parent to track online how their child is developing in their swimming lessons. A Young Peoples' Forum has been established.
- 2.3.10.5** *Smarter Working Project* – The project is currently on track to be completed during Q3. Staff from Parc Mownt have all been moved into the Head Office during Q1 and Parc Mownt is now on sale. Staff from the Rovacabin are due to be relocated to Head Office by the end of Q2. The remodelling of the reception is due to be completed by October and Cyswllt Môn is expected to be in place and operational by the end of Q2.

## **2.4 PEOPLE MANAGEMENT**

- 2.4.1** With regard to People Management, it is noted that the performance of the Council's sickness rates (*indicator 3 on scorecard under people management*) at end of Q1 shows a slight improvement when compared with last year and its corporate target of 10 days per FTE. This indicates that the projected end of year sickness level (if trends continue as indicated over the past two years) would equate to 11.47 days per FTE.

## Sickness absence - average working days/shifts lost

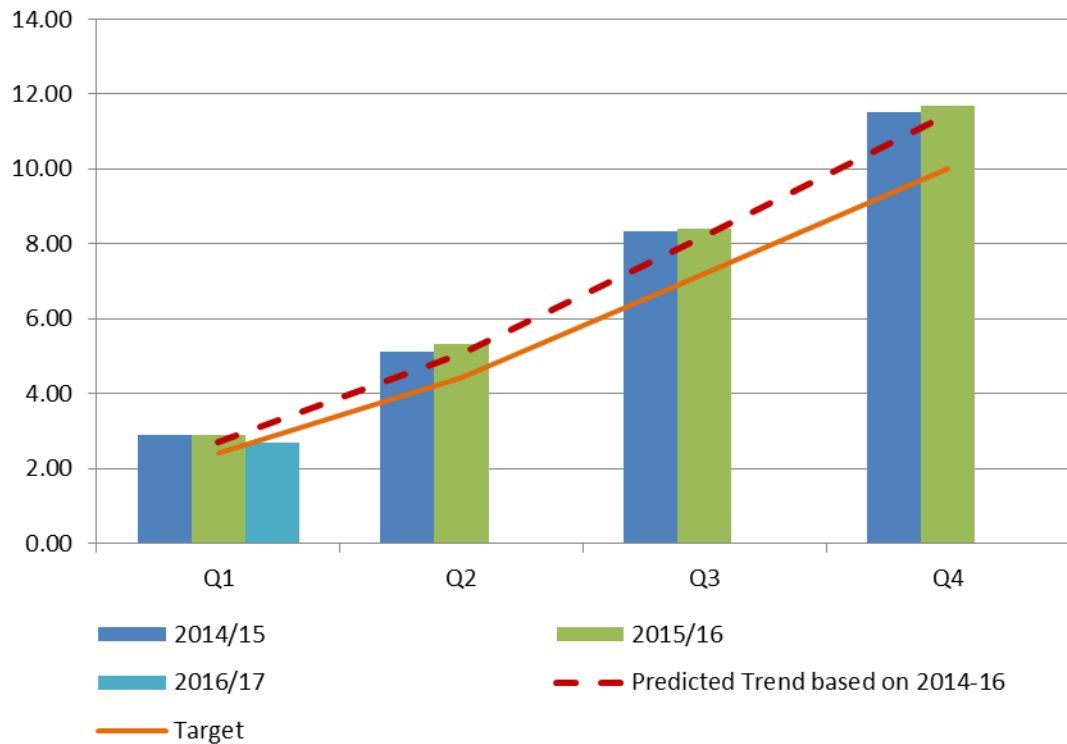


Table 1

**2.4.2** Sickness absence targets for services across the Authority have been calculated and agreed by the SLT / Penaethiaid as follows –

- Adults – 13 days
- Children's - 10.5 days
- Council Business - 8.5 days
- Regulation & Economic Development - 8 days
- Highways, Waste & Property - 9.5 days
- Housing - 11.5 days
- Learning - 10 days
- Resources - 7 days
- Transformation - 7 days

**2.4.3 Point to Note** - If all service targets are met above, the Council will meet its sickness absence target of 10 days per FTE. Based on 15/16 figures, this would place the Council just below the Welsh median of 10.2 days sick per FTE.

**2.4.4** Service Performance against these targets for Q1 indicate that 3 Services are RED compared to their targets for the quarter:

- Childrens Services – 5.17 Days Sick per FTE (Target 2.63)
- Highways, Waste and Property – 2.77 Days Sick per FTE (Target of 2.38)



- Learning – 2.83 Days Sick per FTE (Target of 2.5)

**2.4.5** One of the main reasons for not achieving our corporate target for 2015/16 was due to an increase in our Long Term Sickness rates which equated to 58% of the total sickness days lost. In this respect, Q1 has seen a significant improvement in comparison with Q1 2015/16, 3000 days sick compared to 4000 days sick respectively (See table 2 below).

### LONG TERM SICK DAYS

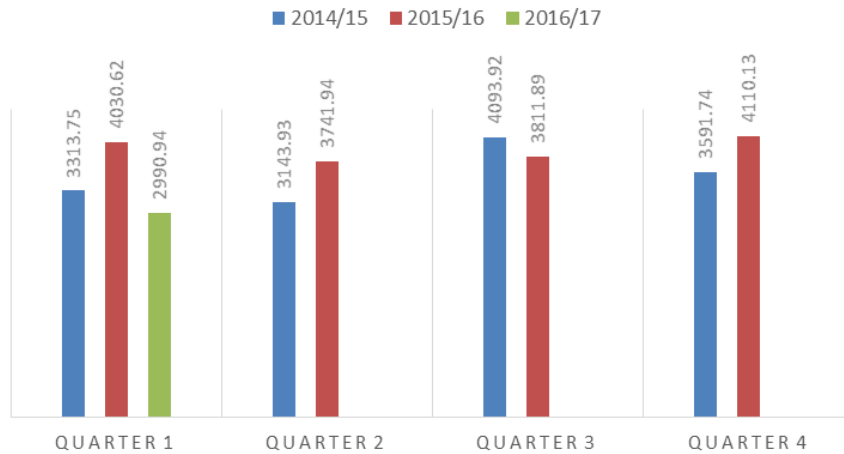


Table 2

**2.4.6** Long Term sickness equated to 49% of our total sickness for Q1 compared to 60% over the same period for 2015/16. A continued drive and need to decrease long term figures is seen as essential to improve our year on year forecast.

**2.4.7** With regards to short term sickness our year on year comparison doesn't show the same improvement. Indeed, for Quarter 1 our short term sickness days per FTE have declined from the same period last year by 412 days. This is illustrated below in Table 3.

### SHORT TERM SICK DAYS

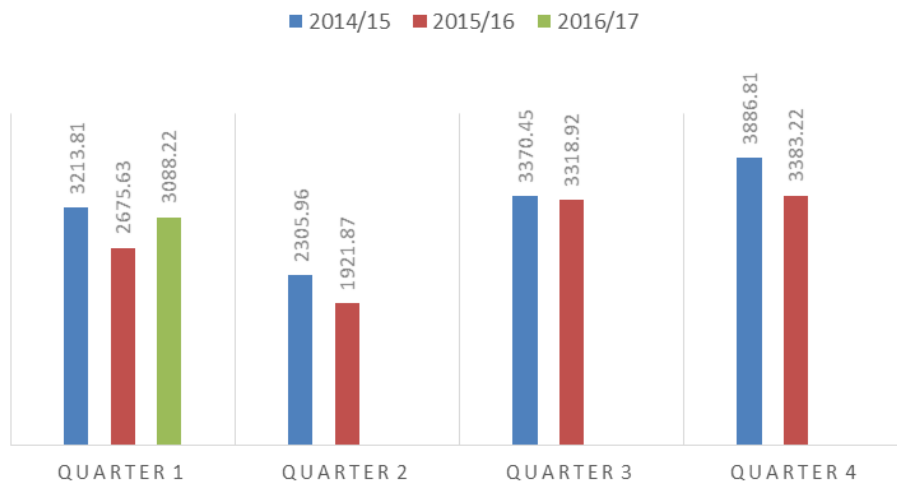


Table 3

- 2.4.8** Associated with sickness rates is the ‘management’ of sickness. An integral part of the management process within the Council is staff’s compliance with corporate sickness policies which includes the undertaking of return to work interviews and Attendance Review Meetings (*indicators 7 & 8 on scorecard*).
- 2.4.9** The Council continues to embed this working practice across its services but during Q1 the Return to Work (RTW) interviews within timescale (77%) dropped slightly below the target of 80% for the first time in since Q4 2013/14 (Table 4).
- 2.4.10** This year, for the first time on the scorecard, the total % of RTW held has been included, which demonstrates those that have been conducted within timescale in addition to those completed outside the timescale. A performance for Q1 of 93% is a healthy result, however, we have set a challenging target of 95% for this indicator.
- 2.4.11** During Q1 the services which failed to hit the Corporate Target of 80% within timescale were Transformation 50%, Resources 67%, Childrens Services 63%, and Highways, Waste and Property 73%. The total % RTW interviews held (within and out of timescale) shows a similar story to those within timescale (Transformation 50%, Childrens Services 83%, and Regulation & Economic Development 86%). The remaining services are within 5% of the targets.

**% Return to Work Interviews Held**

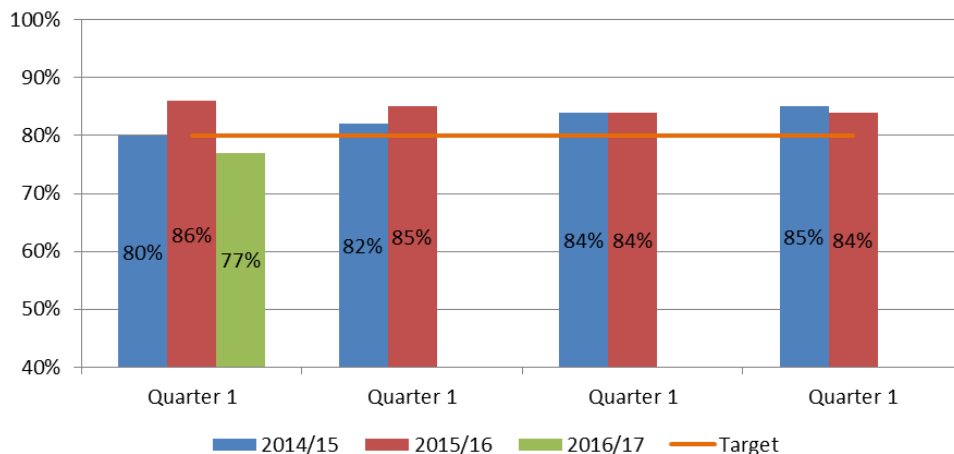


Table 4

- 2.4.12** It was recommended by the SLT in 2015/16, that further consideration and focus is given to the management of recurring short-term sickness absence where trigger points are reached and the completion of attendance review meetings (ARM’s) are undertaken. There is an additional PI in the new 2016/17 scorecard which takes into consideration all ARMs completed (within and outside of timescale) to ensure that they are being undertaken even if not within the timescale.
- 2.4.13** At the end of Quarter 1, a total of 75% of ARMs have been completed by the services (excluding ARMs within Schools as information was not available due to the summer holidays). The services who failed to hit the target for this period were Resources (36%), Housing (65%), Transformation (67%) and Regulation & Economic Development (70%).

#### **2.4.14 The SLT therefore recommends –**

- *Achievable sickness targets for all Services are accepted based on historical data / trends to meet the corporate target and considerable effort is made to tackle sickness both short term and long term sickness cases.*
- *To continue with the regular service sickness challenge panels with an associated work plan to keep a focus on improving our sickness management figures*
- *The Wales Audit Office work related to sickness is reported through to the Executive in Q3 following the examination of our practise and proposed further improvements based on national best practise adopted.*

## **2.5 CUSTOMER SERVICE**

- 2.5.1** This year sees the introduction of 5 new Performance Indicators (items 11-15), specifically looking at the channel shift in communication with the Council. These do not have targets set up for this year, we do however expect an upward trend in all of these indicators during the year.
- 2.5.2** Two of the new indicators look at the successful launch of AppMôn, where 429 users have installed the App on their mobiles. The users have used the technology to submit 70 reports to us during Q1 (including fly tipping, faulty street lighting, compliments or complaints, broken pavements, sports club database forms and ordering recycling bins).
- 2.5.3** The remaining indicators focus on the website and on our social media presence. We had 134k unique visits to the website during Q1. Our social media presence has also resulted in a total of 18k social media accounts following us on Facebook (8k followers) and Twitter (10k followers).
- 2.5.4** Regarding Customer Complaints Management, by the end of Q1 15 Complaints were received and no Stage 2 complaints in Social Services. All of the complaints have received a response and of these complaints 3 were upheld in full (Regulation & Economic Development [1], Highways, Waste & Property [1], and Resources [1]), 3 was partially upheld (Regulation & Economic Development [1], Highways, Waste & Property [1], and Housing [1]) whilst the remaining 8 were not upheld.
- 2.5.5** A total of 78% of the complaints have been responded to within timescale with 6 late responses (Adult Services [2] Highways, Waste & Property [1], Housing [1], and Childrens Services [1]). This is significantly up from the 64% at the end of 2015/16, however it is slightly below the target of 80%.
- 2.5.6** The % of FOI requests responded to within timescale performed at 76% at the end of Q1 compared to 67% at the end of 2015/16. In total there was 209 FOI requests in Q1 with 50 late responses. The majority of the late responses came from Resources which equated to 52% of the late responses (74% of the 35 received by the service), Regulation & Economic Development with 16% (29% of the 28 received by the service), and Social Services with 12% (13% of the 45 received by the service).

- 2.5.7** The Mystery Shop (Items 16-19 on the scorecard) has been pencilled in to take place in Q3. The Mystery Shop will again be undertaken by the Tenants Advisory Group. Findings and recommendations of their report will be reported here for the in Q3.

## **2.6 FINANCIAL MANAGEMENT**

- 2.6.1** A total overspend of £366k is projected for the year-ending 31 March 2017. £125k of this is on service budgets though it must be highlighted that this is made up of a number of over and underspends. The Services that are still experiencing budgetary pressures are similar to 2015/16 (Children's Services, Waste and Resources) but the Heads of Service are aware of the issues and are working to reduce the level of overspending at the year end. The projected level of overspend is around 0.3% and the Council has a sufficient level of general reserves to fund this level of overspending should it materialise at the end of the financial year
- 2.6.2** It should be noted that quarter 1 is early in the financial year and items such as the impact of winter maintenance have not been included in the forecast as there is no information available. Forecasts are subject to change as new information becomes available. However with regular scrutiny from SLT and if remedial action is taken by Heads of Services these will help the services manage within the budgets they can control.
- 2.6.3** Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q1' which is an agenda item in this meeting.

## **3. RECOMMENDATIONS**

- 3.1** The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future. These can be summarised as follows –
- 3.1.1** Overall targets are re-evaluated during Q2 following the publication of comparator data with an emphasis placed on improving indicators in the lower and lower median quartiles.
- 3.1.2** Achievable sickness targets for all Services are accepted based on historical data / trends to meet the corporate target of 10 days per FTE and considerable effort is made to tackle specific long term sickness cases.
- 3.1.3** To continue with the regular service sickness challenge panels with an associated work-plan to keep a focus on improving our sickness management figures
- 3.1.4** The Wales Audit Office work related to sickness is reported through to the Executive in Q3 following the examination of our practise and proposed further improvements based on national best practise adopted.
- 3.1.5** An overall view and detailed appreciation of Children's & Learning indicators are analysed further and assurance is gained of adherence to corporate policies and improved performance.
- 3.2** The Committee is asked to accept the mitigation measures outlined above.

Corfforaethol - Corporate Scorecard Ch-Q1 2016/17

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 15/16 Result	Canlyniad 14/15 Result
01) No of Complaints received (excluding Social Services)	Gwyrdd / Green	-	15	15	59	65
02) No of Stage 2 Complaints received for Social Services	-	-	0	-	5	
03) Total number of complaints upheld / partially upheld	-	-	6	-	21	
04) Total % of written responses to complaints within 20 days	Melyn / Yellow	-	78%	80%	64%	
05) Number of concerns (excluding Social Services)	-	-	44	-	261	71
06) Number of Stage 1 Complaints for Social Services	-	-	13	-	53	
07) Number of Compliments	-	-	189	-	712	521
08) % of FOI requests responded to within timescale	Ambr / Amber	↑	76%	80%	67%	65%
09) Number of FOI requests received	-	-	209	-	854	894
10) % of telephone calls not answered	Gwyrdd / Green	↓	14%	15%	12%	
11) No of AppMôn users	-	-	429	-	-	
12) No of reports received by AppMôn	-	-	70	-	-	
13) No of web payments	-	-	-	-	-	
14) No of 'followers' of IOACC Social Media	-	-	18k	-	-	
15) No of visitors to the Council Website	-	-	134k	-	-	
16) % of written communication replied to within 15 working days of receipt (Mystery Shop) (Ch3/Q3)	-	-	-	-	67%	
17) % of written responses in the customers language of choice (Mystery Shop) (Ch3/Q3)	-	-	-	-	100%	
18) % of telephone calls answered bilingually (Mystery Shop) (Ch3/Q3)	-	-	-	-	77%	
19) % of staff that took responsibility for the customer query (Mystery Shop) (Ch3/Q3)	-	-	-	-	90%	

People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 15/16 Result	Canlyniad 14/15 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2262	-	2310	2336
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-	-	1262	-	1303	1362
03) Sickness absence - average working days/shifts lost	Ambr / Amber	-	2.69	2.5	11.68	11.53
04) Short Term sickness - average working days/shifts lost per FTE	-	-	1.37	-	4.89	5.49
05) Long Term sickness - average working days/shifts lost per FTE	-	-	1.32	-	6.79	6.04
06) % of stress related sickness	Gwyrdd / Green	↑	5%	9%	7%	5%
07) % of RTW interview held within timescale	Melyn / Yellow	↓	77%	80%	84%	85%
08) % of RTW interview held	Melyn / Yellow	-	93%	95%	-	
09) % of Attendance Review Meetings held	Melyn / Yellow	-	75%	80%	-	
10) Local Authority employees leaving (%) (Turnover) (Annual)	-	-	6%	-	-	
11) % of PDR's completed within timeframe	Gwyrdd / Green	↑	85.5%	80%	-	
13) % of staff with DBS Certificate (if required within their role)	-	-	-	-	98%	
13) No. of Agency Staff	-	↑	22	-	26	21
14) Staff Survey (Staff Satisfaction) - TBC						
15) Staff Survey (Staff Satisfaction) - TBC						
16) Staff Survey (Staff Satisfaction) - TBC						

Rheolaeth Ariannol / Financial Management	CAG / RAG	Tuedd / Trend	Cyllideb / Budget	Canlyniad / Actual	Amrywiad / Variance (%)	Rhagolygon o'r Gwariant / Forcasted Actual	Amrywiad a Ragwelir / Forcasted Variance (%)
01) Forecasted end of year outturn (Revenue)	Gwyrdd / Green	-	£114,742,000	-	-	£114,867,000	0.11%
02) Forecasted end of year outturn (Capital)	-	-	£36,742,668	-	-	£31,607,007	-13.98%
03) Salary Year to Date Variance	Coch / Red	-	£20,446,160	£20,038,976	-2.03%	-	-
04) % of Budget spent on Salary	-	-	-	57.09%	-	-	-
05) Cost of agency staff	Coch / Red	-	£39,101	£307,314	87.28%	-	-
06) Budget v Actuals	Coch / Red	-	£30,253,939	£28,780,711	-5.12%	-	-
07) Achievement against efficiencies	-	-	£2,980,000	£2,411,189	-23.59%	-	-
08) Income v Targets (excluding grants)	Coch / Red	-	-£6,574,582	-£6,314,157	-4.12%	-	-
09) Amount borrowed	-	-	-	£110M	-	-	-
10) Cost of borrowing	-	-	-	-	-	£8,189,681	-
11) % invoices paid within 30 days	-	-	-	84.90%	-	-	-
12) % of Council Tax collected (for last 3 years)	-	-	-	98.46%	-	-	-
13) % of Business Rates collected (for last 3 years)	-	-	-	98.66%	-	-	-
14) % of Sundry Debtors collected (for last 3 years)	-	-	-	93.28%	-	-	-
15) % Housing Rent collected (for the last 3 years)	-	-	-	-	-	-	-
16) % Housing Rent collected excl benefit payments (for the last 3 years)	-	-	-	-	-	-	-

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 15/16 Result	Canlyniad 14/15 Result	Chwarter 15/16 Quartile							
01) SCA/002b: The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	Gwyrdd / Green	↑	19.57	22	20.3	22	Isaf / Lower							
02) LI/18b The percentage of carers of adults who requested an assessment or review that had an assessment or review in their own right during the year	-	↓	81.6	-	90.8	93	-							
03) PM18 - The percentage of adult protection enquiries completed within statutory timescales	-	-	76.92	-	-	-	-							
04) PM19 - The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	-	↓	2.24	-	-	-	-							
05) PM20a - The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later (Ch3/Q3)	-	-	-	-	-	-	-							
06) PM20b - The percentage of adults who completed a period of reablement and have no package of care and support 6 months later (Ch3/Q3)	-	-	-	-	-	-	-							
07) SCC/025: The % of statutory visits to looked after children due in the year that took place in accordance with regulations	Coch / Red	↓	82.69	100	82.79	100	Canolrif Isaf / Lower Median							
08) PM24 - The percentage of assessments completed for children within statutory timescales (42 working days)	Gwyrdd / Green	-	100	100	-	-	-							
09) PM32 - The percentage of looked after children who have experienced (1) or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the year to 31 March	Ambr / Amber	-	6.1	15	-	-	-							
10) PM33 - The percentage of looked after children on 31 March who have had three or more placements during the year	Gwyrdd / Green	-	1.61	8	-	-	-							
11) Attendance - Primary (%)	Dangosyddion Perfformiad Addysg i'w gytuno yn ystod Chwarter 2 Education Performance Indicators to be agreed during Quarter 2													
12) Attendance - Secondary (%)														
13) No. of days lost to temp exclusion - Primary														
14) No. of days lost to temp exclusion - Secondary														
15) KS4 - % 15 year olds achieving L2+														
16) EDU/015a: The percentage of final statements of special education need issued within 26 weeks including exceptions	Dangosyddion Perfformiad Addysg i'w gytuno yn ystod Chwarter 2 Education Performance Indicators to be agreed during Quarter 2													
17) EDU/015b: The percentage of final statements of special education need issued within 26 weeks excluding exceptions														
18) LCL/001b: The no. of visits to public libraries during the year								Melyn / Yellow	-	68k	70k	289k	285k	-
19) LCL/004: The no. of library materials issued, during the year								Ambr / Amber	-	69k	75k	284k	305k	-
20) The number of applicants with dependent children who the Council secured non-self contained bed and breakfast accommodation								Gwyrdd / Green	→	0	-	0	-	-
21) % tenants satisfied with responsive repairs	Gwyrdd / Green	↑	93.8	92	89.5	92	-							
22) Productivity of workforce- % time which is classified as productive	Gwyrdd / Green	↑	81.5	75	74.6	-	-							
23) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Melyn / Yellow	↓	26.3	25	33.7	25	-							
24) STS/005b: The percentage of highways inspected of a high or acceptable standard of cleanliness	Gwyrdd / Green	-	91.7	94	95.1	95	Canolrif Isaf / Lower Median							
25) STS/006: The percentage of reported fly tipping incidents cleared within 5 working days	Gwyrdd / Green	-	97	94	-	95	Uchaf / Upper							
26) WMT/009b: The percentage of municipal waste collected by local authorities and prepared for reuse and/or recycled	Gwyrdd / Green	-	66.82	59.5	-	58	Canolrif Isaf / Lower Median							
27) WMT/004b: The percentage of municipal waste sent to landfill	Gwyrdd / Green	-	1.4	16.9	-	41	Canolrif Isaf / Lower Median							
28) THS/011c: The % of non-principal (C) roads that are in an overall poor condition (annual)	-	-	-	13.5	13.5	15	Canolrif Isaf / Lower Median							
29) No. of attendances (young people) at sports development / outreach activity programmes	Gwyrdd / Green	-	24.5k	20k	132k	85k	-							
30) LCS/002b: The number of visits to local authority sport and leisure centres during the year where the visitor will be participating in physical activity	Gwyrdd / Green	-	104k	101k	458k	540k	Canolrif Isaf / Lower Median							

Update May 2016

RAG: **Completed**

**On Track**

**Behind Track – needs key decisions/support**

**Late**

(White = not started)

<b>Programmes</b>	<b>Individual Projects</b>			
<b>School Modernisation</b>	Llannau Area	Holyhead Area	Bro Rhosyr & Bro Aberffraw	Seiriol South East – Beaumaris
<b>Older Adult Social Care - Home Improvement Options Project</b>	Extra Care Llangefni	Extra Care Amlwch	Extra Care South of Island	Extra Care Garreglwyd
	Supported Living	Outsourcing of internal home care	Outsourcing Warden Services	
<b>Transforming Libraries, Youth Service, Museums and Culture</b>	Transforming Museums and Culture	Remodelling of Library Service	Review of Youth Services	
<b>Leisure</b>				
<b>Energy Island</b>				
<b>Vibrant and Viable Places</b>				
<b>Single Point of Access</b>				
<b>Affordable Housing</b>				
<b>Local Development Plan (LDP)</b>				
<b>Destination Management Plan (DMP)</b>				
<b>Smarter Working</b>	Assets	ICT	Workforce Development	Contact Môn
<b>Job Evaluation and Single Status</b>				
<b>Resource Link – Northgate (HR)</b>				
<b>Customer Service Excellence</b>				

Update May 2016

RAG: **Completed**

**On Track**

**Behind Track – needs key decisions/support**

**Late**

**(White = not started)**

<b>Procurement</b>			
<b>Energy Efficiency</b>			
<b>Civica Improvements</b>			
<b>Policy Management</b>			
<b>Business Continuity</b>			
<b>Business Processes</b>			
<b>ICT Strategy</b>			
<b>Modernise and Co-ordinate the benefits advice service</b>	Welfare Reform	Tackling Poverty	Service Review