

ISLE OF ANGLESEY COUNTY COUNCIL

REPORT TO:	EXECUTIVE COMMITTEE
DATE:	NOVEMBER 27th 2017
SUBJECT:	SCORECARD MONITORING REPORT - QUARTER 2 (2017/18)
PORTFOLIO HOLDER(S):	COUNCILLOR DAFYDD RHYS THOMAS
HEAD OF SERVICE:	SCOTT ROWLEY
REPORT AUTHOR: TEL: E-MAIL:	GETHIN MORGAN 01248 752111 GethinMorgan@anglesey.gov.uk
LOCAL MEMBERS:	n/a

A - Recommendation/s and reason/s

- 1.1** This is the second scorecard of the financial year 2017/18.
- 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 in consultation with the 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** *Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q3.*
 - 1.3.2** *As part of the work on the Childrens Services Improvement Plan, Childrens Services work with the Corporate Performance Team and continue to re-evaluate the processes related to the regular collation of PI data*
 - 1.3.3** *To continue with the regular service sickness challenge panels with an emphasis on adhering to policy expectations and support provided to those specific services who have missed their targets.*
 - 1.3.4** *The Customer Service Excellence Project continue to monitor the indicators and Childrens Services are encouraged to provide a written response to Stage 1 complaints within timescales.*

1.4 The Committee is asked to accept the mitigation measures outlined above.		
B - What other options did you consider and why did you reject them and/or opt for this option?		
n/a		
C - Why is this a decision for the Executive?		
This matter is delegated to the Executive		
CH - Is this decision consistent with policy approved by the full Council?		
Yes		
D - Is this decision within the budget approved by the Council?		
Yes		
DD - Who did you consult?		What did they say?
1	Chief Executive / Strategic Leadership Team (SLT) (mandatory)	This was considered by the SLT at their meeting on the 6th November and their comments are reflected in the report
2	Finance / Section 151 (mandatory)	No comment
3	Legal / Monitoring Officer (mandatory)	No comment
4	Human Resources (HR)	
5	Property	
6	Information Communication Technology (ICT)	
7	Scrutiny	Having considered all the information presented along with the explanations given for under-performance and mitigation measures proposed, the Committee resolved <ul style="list-style-type: none"> • To accept the Corporate Scorecard report for Q2 2017/18 • To note the areas which the Senior Leadership Team is managing to secure improvements into the future as set out in paragraphs 3.1.1 to 3.1.4 of the report, and • To accept the mitigation measures as outlined therein.
8	Local Members	
9	Any external bodies / other/s	
E - Risks and any mitigation (if relevant)		
1	Economic	
2	Anti-poverty	
3	Crime and Disorder	

4	Environmental	
5	Equalities	
6	Outcome Agreements	
7	Other	
F - Appendices:		
Appendix A - Scorecard Quarter 2 Appendix B – Programmes and Projects Performance Dashboard – Quarter 2 Appendix C – Projected Revenue Outturn for the Financial Year Ending 31 March 2018 – Quarter 2		
FF - Background papers (please contact the author of the Report for any further information):		
<ul style="list-style-type: none"> • 2017/18 Scorecard monitoring report - Quarter 1 (as presented to, and accepted by, the Executive Committee in September 2017). 		

SCORECARD MONITORING REPORT – QUARTER 2 (2017/18)

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 previous years) have been decided via a workshop held on the 26th July, 2017 with members of the Senior Leadership Team, the Executive and Shadow Executive.
- 1.4 The scorecard (Appendix A) portrays the current end of Q2 position and will be considered further by the Corporate Scrutiny Committee and the Executive during November.

2. CONSIDERATIONS

- 2.1 This is the fifth 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 –

- 2.2.1.1 The addition of the new PAM (Public Accountability Measures) national performance indicators that are collected on a quarterly basis into the Performance Management Section;
- 2.2.1.2 The inclusion of a Service breakdown for some of the Financial Management indicators as an attachment to this report (Appendix D);
- 2.2.1.3 The People Management section now includes the breakdown for Primary and Secondary schools Sickness data as recommended in the WAO report on sickness management; and
- 2.2.1.4 The Customer Service section on responses to complaints within timescale is now split in two, Corporate Complaints and Social Services Complaints.

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 have been reviewed in comparison with the publication of the national comparator data published on the 13th of September.
- 2.3.2 At the end of Q2 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 One indicator within Adult Services continues to show an underperformance from Q1 –
 - (i) 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 is AMBER on the scorecard with a performance of 83.4% compared to a target of 93%. This performance is a decline on Q1 figures of 88.6%, however an improvement on the performance of Q2 2016/17 which was 82.3%. It should be noted that due to the Service moving to a new Database System, WCCIS, this PI only consists of data up to the 15th of August as it has not been possible to report from the WCCIS system at the time of writing this report.

The Carers Team is a small team of 2. Support from the overall social work team ensured good performance to the end of year 2016/17. Whilst performance has deteriorated slightly in the first half of 2017/18 the service is confident that with further planned support from the social work team this performance will improve and achieve the PI target.

Mitigation – to improve the issues during 17/18 the service will –

- Continue to ensure support to Carers Team as appropriate. The service would wish to note that performance will vary slightly dependent on seasonal factors. i.e. unscheduled care pressure, leave etc.

- 2.3.4 Two indicators within Childrens Services show an underperformance during the quarter –

- (i) 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, which is AMBER with performance of 19.5% compared to a target of 15%.

Although this is high after 6 months, the reasons for moving school are as part of long term planning for the children e.g. adoption, therapeutic placements, new placements, moving from closed schools to new schools and therefore no mitigation is required.

- (ii) 11) PM28 - The average length of time for all children who were on the CPR during the year, and who were de-registered during the year (days), which is RED with a performance of 375.5 Days against a target of 250 Days

This PI refers to children who have been deregistered only and it does not refer to the total number of children on the register. Therefore caution must be exercised when analysing the data.

We have seen a period during which some children who had been on the register for some time were deregistered as the figures for quarter 2 included children who had been on the register for 4 years. It is to be welcomed that their circumstances have improved leading to their names now being removed.

In addition the number of children on the Child Protection Register has decreased significantly over the last 6 months with 56 children currently on the Register compared with 102 at the end of March 2017.

2.3.5 No information has been provided by Childrens Services for indicator 07 and 08 on the scorecard for Q2.

2.3.6 It was noted in the September meeting when the committee discussed the indicators related to Children that further work was needed to interrogate and corroborate the associated data so that an accurate picture could be ascertained as to current performance. This work has been on-going over the past six weeks and the Service has an action plan in place with short, medium and long term gains to be made so as to improve the position and provide accurate and up-to-date data for consideration. This work (short and medium term) will be complete by year's end and should provide an accurate picture of performance for the year.

2.3.7 Children Services have provided the following update on improvements which link into the PIs on the scorecard –

2.3.7.1 Practice Evaluation Report for quarter 1 showed that practice remains inconsistent. However; there are examples of good practice that have been confirmed by CSSIW as achieving the required outcome for the child/ren and their families. Managers have continued to focus on improving the quality of Social Work practice in relation to Court work, case recording, assessment, analysis of risk, Looked After Children Reviews and visits, Child protection visits, Core group meetings and Pathway Plans (SIP 3.3). Targeted interventions continue to be undertaken with individual Social Workers who have not

improved the quality of their practice. The Service has now agreed to prioritise improvements in Social Work assessment practice.

2.3.7.2 A **Court Action Plan** has been developed to focus on improving the quality and analysis of all assessments undertaken to inform our decision making and will support arrangements for 'front loading' public law cases. Practice Leader's now have oversight of the Court timeframe for cases within their Practice Groups and will support and guide Social Worker's to ensure better preparation for Court and that documents are filed on time

2.3.7.3 Despite the inconsistency in practice, we have positive evidence of the workforce working directly with families leading to improved outcomes. We have seen a **significant reduction** in the children on the **Child Protection Register** from 102 in March 2017 to 56 on the register on 31st of August, 2017 a 55% decrease. Children's Services have adopted the **Thornton/Gwynedd Risk Model** to continue supporting social workers to work proactively with families to manage risk - spending much more time working alongside them helping them to change so that the family is a safe place for their children. There is a need now to embed the risk model within practice and to support practitioners and practice leaders to further develop their skill in implanting the model to support effective risk decisions. Bruce Thornton co-author of the model is undertaking a **Practice Coach Development** role for a period of 7 months to focus on:

- Providing coaching and mentoring to help develop the skills, knowledge and competence of practitioners and practice leaders.
- Support Service Managers to implement, process, systems and procedures to ensure that the Risk Model is implemented within service processes
- Support the development of the Risk Model within critical and reflective supervision.

2.3.8 One new indicator within the Housing Service which was Red on the scorecard for Q1 has now improved and is Green on the scorecard at the end of Q2 –

- (i) 28) PAM/015 - The average number of calendar days taken to deliver a Disabled Facilities Grant (DFG), GREEN, 196 Days against a target of 200. After undertaking the mitigation and reviewing the indicator during Q2, the service have improved the process and saved 29.7 Days during the period.

2.3.9 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 will improve across all areas.

2.3.10 During Q2 the targets have been reviewed following the publication of the national comparator data with an emphasis placed on improving indicators in the lower and lower median quartiles.

2.3.11 No changes have been made to the Social Services indicators (01-11) as the PI results for 2016/17 have been held back by the Welsh Government. At the time of writing this report no date for the release of this data has been published.

2.3.12 There has also been no change in the targets for the Education PIs (12-19) as the targets for the Authority are not yet available. These are to be discussed and agreed in Q3 as it is early in the year to set targets for the 17/18 school academic year.

2.3.13 The SLT recommends –

2.3.13.1 *Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q3.*

2.3.13.2 *As part of the work on the Childrens Services Improvement Plan, Childrens Services work with the Corporate Performance Team and continue to re-evaluate the processes related to the regular collation of PI data.*

2.3.14 Appendix B shows the whole programme of work which the two Corporate Transformation Programme Boards are overseeing. Whilst some of the programmes / projects are ragged as RED it is important to state that the issues highlighted are being managed and tracked accordingly via the Boards which meet on a quarterly basis.

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 the end of Q2 of 4.25 shows a further improvement when compared with the same period for 2016/17 of 4.89. This indicates that the projected end of year sickness level (if trends continue as indicated over the past two years) would equate to 9.90 days per FTE.

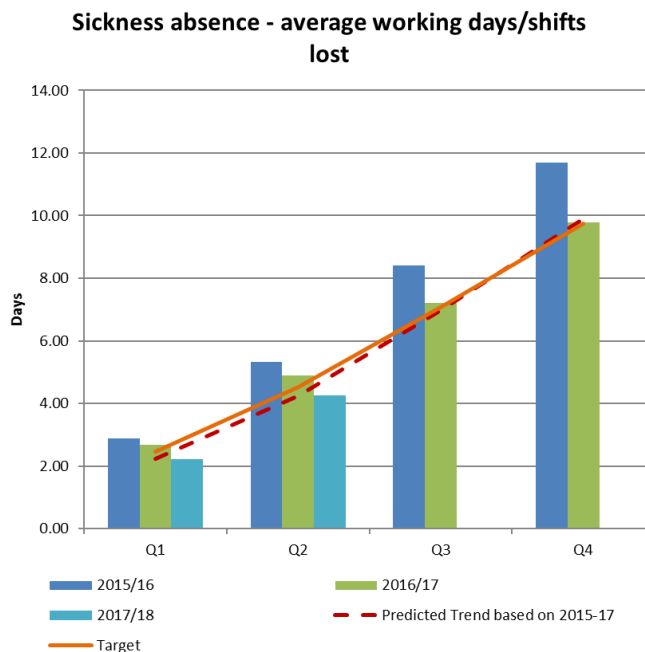


Table 1

2.4.2 Service Performance against these targets for Q2 indicate that only 2 Service is RED or AMBER compared to their targets for the quarter:

2.4.2.1 Regulation & Economic Development – RED – 5.07 Days Sick per FTE (Target 3.07). The main reason for the decline in the service sickness for Q2 continues to be because of a number of long term sickness cases in Leisure, resulting in a total of 391 Days lost to sickness in the period compared to the service total of 874 Days lost to sickness, or 45% of the Service total sickness levels for the period.

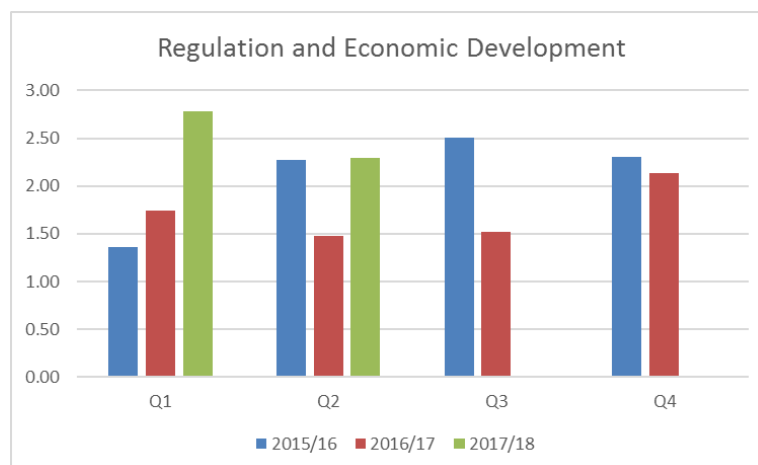


Table 2

2.4.2.2 Adult Services – AMBER – 6.55 Days Sick per FTE (Target 6.08). The main reason for the decline in the sickness is as of a result of Long Term sickness cases in the Provider Unit, which equates to 1365 Days sick of the Service total of 2557 Days sick (53%). The Provider Unit also saw an increase of 165 Days in short term sickness during Q2 (500 Days sick) compared to Q1 (335 Days sick).

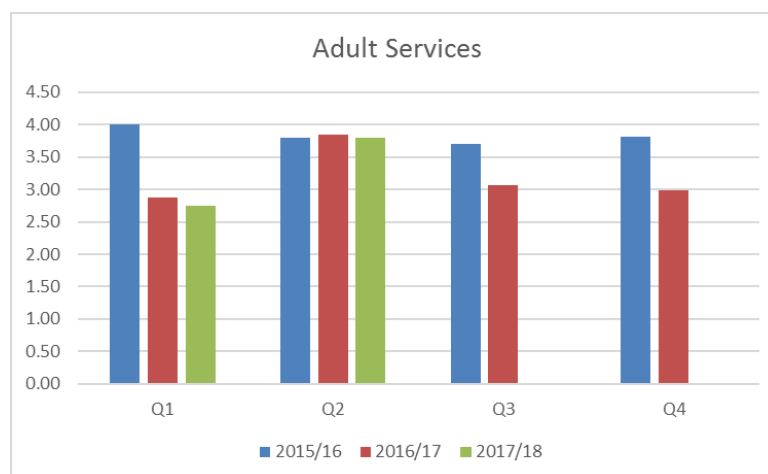


Table 3

2.4.3 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*).

2.4.4 The Council continues to embed this working practice across its services and by the end of Q2 882 of the cumulative 1223 Return to Work (RTW) interviews were held within timescale (72%). This is an improvement on Q1 where 462 of the 684

were completed within timescale (67%). However, this continues to be below the target of 80% and is now AMBER (Table 4). The total RTW interviews held (within and out of timescale) is low at 86% compared to a target of 95%, this is however a slight improvement on Q1's total of 85%.

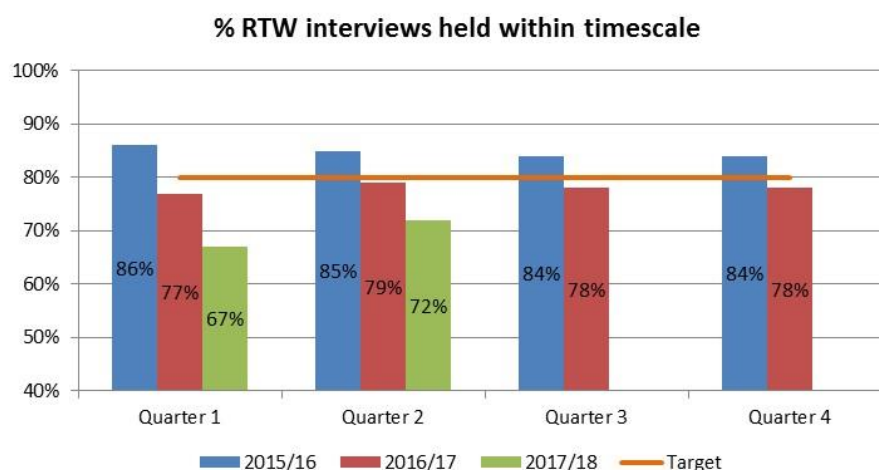


Table 4

2.4.5 By the end of Q2 the services which failed to hit the Corporate RTW Target of 80% within timescale were Childrens Services 58%, Learning 68%, Adult Services 73%, Highways, Waste and Property 75%, and Resources 75%.

2.4.6 There were two services that were Red (more than 10% below target) on the total % RTW interviews held (within and out of timescale), Learning at 81% completed and Childrens Services at 84% completed. The remaining services are within 5% of the targets.

2.4.7 The ARM figures for Q2 at 59% (46 of the 78 ARMs due) have declined on the 78% seen in Q1 (these figures do not include Schools). Services have been reminded of the need to undertake ARMs and this will continue to be an area for particular attention in the challenge panels of 2017/18.

2.4.8 Whilst improvements can still be made with the adherence to the Absence Management Policy, i.e. RTW and ARMs, it is encouraging to note that the overall sickness target has been achieved for the 4th quarter running and if this trend continues we anticipate a result of 9.9 Days per FTE (based on a 3 year average).

2.4.9 The SLT therefore recommends –

2.4.9.1 *To continue with the regular service sickness challenge panels with an emphasis on adhering to policy expectations and support provided to those specific services who have missed their targets.*

2.5 CUSTOMER SERVICE

2.5.1 During Q2, users used AppMôn technology to submit 1k reports (including fly tipping, faulty street lighting, compliments or complaints, broken pavements, sports

club database forms and ordering recycling bins). 83% of these reports have come through the website, a similar level to Q1 where 85% of reports were submitted via the website.

2.5.2 Further work is required to secure the amount of downloads of AppMôn from the supplier. This work will be undertaken during Q3 and the results of which reported in the Q3 Scorecard Report.

2.5.3 The remaining indicators within the Digital Services Section focus on the website and on our social media presence. We had an increase of 54k unique visits up to the end of Q2 compared to the same period last year (328k for 17/18 and 274k for 16/17). Our social media presence has also resulted in a total of 23k social media accounts following us on Facebook (11k followers) and Twitter (12k followers).

2.5.4 Regarding Customer Complaints Management, by the end of Q2 43 Complaints were received. 92% of the complaints requiring a response by the end of Q2 (38 complaints) have received a response within timescale (2 late responses by Highways, Waste & Property and 1 by Resources). Of these complaints 13 were upheld in full (Highways, Waste & Property [5], Resources [4], Regulation & Economic Development [1], Housing [1], Transformation [1] and Social Services [1]). 1 complaint was partly upheld (Housing) whilst the remaining 25 were not upheld. For further information on Corporate Complaints, please see the following link: <http://www.anglesey.gov.uk/council-complaints-statistics/111531.article>

2.5.5 There were 6 Stage 2 Complaints in Social Services (Childrens Services [4] and Adult Services [2]) and 30 Stage 1 Complaints (Childrens Services [25], Adult Services [5]) received up to the end of Q2.

2.5.5.1 Of the 30 Stage 1 complaints, a total of 53% (the same as at the end of Q1), have been responded to in writing within timescale. There were 14 late written responses in total with 12 in Childrens Services and 2 in Adult Services.

2.5.5.2 The reason for this underperformance within Childrens Services was a failure to send written responses within timescale.

2.5.5.3 Having said this, 22 of the 25 (88%) complaints received by Children Services had held a discussion with the complainant within timescales which is an improvement on the performance in Q1 (80%).

2.5.6 The % of FOI requests responded to within timescale performed at 79.4% at the end of Q2 compared to 80% at the end of Q1. In total there was 479 FOI requests in Q1 with 82 late responses. The majority of the late responses came from Regulation & Economic Development which equated to 28% of the late responses (26% of the 88 received by the service), Social Services with 24% (22% of the 91 received by the service), and Learning with 16% (33% of the 39 received by the service). For further information on FOI requests please visit the following link: <http://www.anglesey.gov.uk/council-and-democracy/data-protection-and-foi/council-access-to-information-statistics/>

2.5.7 *The SLT therefore recommends –*

2.5.7.1 *The Customer Service Excellence Project continue to monitor the indicators and Childrens Services are encouraged to provide a written response to Stage 1 complaints within timescales.*

2.6 FINANCIAL MANAGEMENT

- 2.6.1** A total overspend of £1.924m is projected for the year-ending 31 March 2018. £2.706m of this is on service budgets, which are made up of a number of over and underspends. This is an improvement on of £0.343m on Quarter 1. The Services that are still experiencing significant budgetary pressures are similar to 2016/17 (Children and Families Service, and Learning). The Heads of Service are aware of the issues and are working to reduce the level of overspending which is within their control at the year-end. Corporate Finance is expected to underspend by £0.331m and Council Tax, which includes the Council Tax Premium, is forecast to collect a surplus of £0.450m. The overall overspend is, therefore, reduced to £1.924m. The projected level of overspend is 1.53% of the Council's net budget. The general balances are currently sufficient enough to sustain the overspend without impeding on the minimum level target of £6m set by the Full Council on 28 February 2017.
- 2.6.2** It should be noted that Quarter 2 that the impact of winter maintenance has 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 Q2' which will be discussed in The Executive meeting on the 27th November and the Finance Scrutiny Panel on the 1st December.

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** Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q3.
- 3.1.2** *As part of the work on the Childrens Services Improvement Plan, Childrens Services work with the Corporate Performance Team and continue to re-evaluate the processes related to the regular collation of PI data.*
- 3.1.3** To continue with the regular service sickness challenge panels with an emphasis on adhering to policy expectations and support provided to those specific services who have missed their targets.
- 3.1.4** The Customer Service Excellence Project continue to monitor the indicators and Childrens Services are encouraged to provide a written response to Stage 1 complaints within timescales.
- 3.2** The Committee is asked to accept the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q2 2017/18

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Canlyniad 15/16 Result
Siarter Gofal Cwsmer / Customer Service Charter						
01) No of Complaints received (excluding Social Services)	Melyn / Yellow	↓	43	36	71	59
02) No of Stage 2 Complaints received for Social Services	-	-	6	-	5	5
03) Total number of complaints upheld / partially upheld	-	-	-	-	25	21
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green	↓	92%	80%	93%	64%
04b) Total % of written responses to complaints within 20 days (Social Services)	Coch / Red	↓	47%	80%	63%	-
05) Number of concerns (excluding Social Services)	-	-	65	-	191	261
06) Number of Stage 1 Complaints for Social Services	-	-	30	-	54	53
07) Number of Compliments	-	-	358	-	566	712
08) % of FOI requests responded to within timescale	Gwyrdd / Green	⇒	79.40%	80%	77%	67%
09) Number of FOI requests received	-	-	479	-	1037	854
10) % of telephone calls not answered	Gwyrdd / Green	⇒	12%	15%	13%	12%
11) % of written communication replied to within 15 working days of receipt (Mystery Shop)	Gwyrdd / Green	-	78%	-	67%	-
12) % of written responses in the customers language of choice (Mystery Shop)	Gwyrdd / Green	-	100%	-	100%	-
13) % of telephone calls answered bilingually (Mystery Shop)	Gwyrdd / Green	-	83%	-	77%	-
14) % of staff that took responsibility for the customer query (Mystery Shop)	Melyn / Yellow	-	87%	-	90%	-
Newid Cyfrwng Digidol / Digital Service Shift						
15) No of AppMôn users (annual)	-	-	-	-	-	-
16) No of reports received by AppMôn	-	↑	1k	-	1k	-
17) No of web payments	-	↑	8k	-	10k	-
18) No of 'followers' of IOACC Social Media	Gwyrdd / Green	↑	23k	21k	21k	-
19) No of visitors to the Council Website	Gwyrdd / Green	↑	328k	271k	541k	-

Rheoli Pobl / People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Canlyniad 15/16 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2278	-	2258	2310
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-	-	1265	-	1250	1303
03a) Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	4.25	4.52	9.78	11.68
03b) Short Term sickness - average working days/shifts lost per FTE	-	-	1.73	-	4.72	11.68
03c) Long Term sickness - average working days/shifts lost per FTE	-	-	2.53	-	5.06	6.79
04a) Primary Schools - Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	4.02	4.2	-	-
04b) Primary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	1.74	-	-	-
04c) Primary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	2.28	-	-	-
05a) Secondary Schools - Sickness absence - average working days/shifts lost	Gwyrdd / Green	↓	3.71	4.2	-	-
05b) Secondary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	1.76	-	-	-
05c) Secondary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	1.95	-	-	-
06) % of RTW interview held within timescale	Ambr / Amber	↑	72%	80%	78%	84%
07) % of RTW interview held	Ambr / Amber	↑	86%	95%	91%	-
08) % of Attendance Review Meetings held	Coch / Red	-	59%	80%	57%	-
09) Local Authority employees leaving (%) (Turnover) (Annual)	-	-	-	-	10%	-
10) % of PDR's completed within timeframe (Q4)	-	-	-	80%	80%	-
11) % of staff with DBS Certificate (if required within their role)	-	-	-	-	91.40%	98%
12) No. of Agency Staff	-	↑	17	-	15	26

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) Budget v Actuals	Coch / Red	↑	£66,008,000	£67,226,000	1.85%	-	-
02) Forecasted end of year outturn (Revenue)	Coch / Red	↑	£126,157,000	-	-	£128,081,000	1.53%
03) Forecasted end of year outturn (Capital)	Coch / Red	↓	£38,505,000	-	-	£22,026,000	-42.80%
04) Achievement against efficiencies	Ambr / Amber	↓	£2,444,000	-	-	£1,655,500	-32.26%
05) Income v Targets (excluding grants)	Gwyrdd / Green	↑	-£8,981,090	-£9,840,570	9.57%	-	-
06) Amount borrowed	-	↑	£12,377,000	-	-	£8,715,000	-26.59%
07) Cost of borrowing	-	⇒	£4,257,000	-	-	£4,095,000	-3.81%
08) % invoices paid within 30 days	Melyn/Yellow	↓	-	81.58%	-	-	-
09) % of Council Tax collected (for last 3 years)	Gwyrdd / Green	↑	-	98.70%	-	-	-
10) % of Business Rates collected (for last 3 years)	Gwyrdd / Green	↑	-	98.70%	-	-	-
11) % of Sundry Debtors collected (for last 3 years)	Ambr / Amber	↑	-	97%	-	-	-
12) % Housing Rent collected (for the last 3 years)	-	↓	-	100.27%	-	-	-
13) % Housing Rent collected excl benefit payments (for the last 3 years)	-	↓	-	99.98%	-	-	-

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 16/17 Result	Canlyniad 15/16 Result	Chwarter 16/17 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	↑	19.01	22	20.51	20.3	-
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	Ambr / Amber	↓	83.4	93	94.4	90.8	-
03) PM18 - The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	↑	93.33	90	90.48	-	-
04) PM19 - The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over	Melyn / Yellow	↓	2.9	1.5	6.05	-	-
05) PM20a - The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	Gwyrdd / Green	↑	61.54	40	62.6	-	-
06) PM20b - The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Gwyrdd / Green	⇒	62.29	62	33.3	-	-
07) SCC/025: The % of statutory visits to looked after children due in the year that took place in accordance with regulations	-	-	-	-	79.35	82.79	-
08) PM24 - The percentage of assessments completed for children within statutory timescales (42 working days)	-	-	-	-	89.17	-	-
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	↓	19.5	15	17.53	-	-
10) PM33 - The percentage of looked after children on 31 March who have had three or more placements during the year	Gwyrdd / Green	↓	5	5	5.04	-	-
11) PM28 - The average length of time for all children who were on the CPR during the year, and who were de-registered during the year (days)	Coch / Red	↓	375.5	250	266	-	-
12) Attendance - Primary (%) (Ch3/Q3)	-	-	-	-	94.8	95.1	-
13) Attendance - Secondary (%) (Ch3/Q3)	-	-	-	-	94.6	94.5	Uchaf / Upper
14) No. of days lost to temp exclusion - Primary (Ch3/Q3)	-	-	-	-	-	-	-
15) No. of days lost to temp exclusion - Secondary (Ch3/Q3)	-	-	-	-	-	-	-
16) KS4 - % 15 year olds achieving L2+ (Q3)	-	-	-	-	58.8	56.9	-
17) KS3 - % pupils achieving CSI (Q3)	-	↑	88.9	90.1	87.6	84.5	Canrif Uchaf / Upper Median
18) KS2 - % pupils achieving CSI (Q3)	-	↑	91.4	91	89.4	91.8	Uchaf / Upper
19) FPh - % pupils achieving CSI/FPI (Q3)	-	↑	85.8	88.4	84.7	86.2	Isaf / Lower
20) LCL/001b: The no. of visits to public libraries during the year	Gwyrdd / Green	↑	146k	144k	288k	289k	Uchaf / Upper
21) LCL/004: The no. of library materials issued, during the year	Gwyrdd / Green	↓	136K	135k	272k	284k	-
22) The number of applicants with dependent children who the Council secured non-self contained bed and breakfast accommodation	Gwyrdd / Green	-	0	0	0	-	-
23) % tenants satisfied with responsive repairs	Melyn / Yellow	↓	89.33	92	90.2	89.5	-
24) Productivity of workforce- % time which is classified as productive	Gwyrdd / Green	↓	80.11	80	80.1	74.6	-
25) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Gwyrdd / Green	↑	18	23	28	33.7	-
26) PAM/013 - Number of empty private properties brought back into use	Melyn / Yellow	↑	33	35	-	-	-
27) PAM/014 - Number of new homes created as a result of bringing empty properties back into use	-	↑	1	-	-	-	-
28) PAM/015 - Average number of calendar days taken to deliver a Disabled Facilities Grant (DFG)	Gwyrdd / Green	↑	196	200	-	-	Canolrif Isaf / Lower Median
29) STS/005b: The percentage of highways inspected of a high or acceptable standard of cleanliness	Gwyrdd / Green	↑	96.3	94	93.4	95.1	-
30) STS/006: The percentage of reported fly tipping incidents cleared within 5 working days	Gwyrdd / Green	⇒	100	100	97.31	98.5	-
31) WMT/009b: The percentage of municipal waste collected by local authorities and prepared for reuse and/or recycled	Gwyrdd / Green	⇒	75.57	67	65.79	59.5	Uchaf / Upper
32) WMT/004b: The percentage of municipal waste sent to landfill	Gwyrdd / Green	⇒	0.55	5	6.6	16.9	Canolrif Isaf / Lower Median
33) THS/011c: The % of non-principal (C) roads that are in an overall poor condition (annual)	-	-	-	10	10.1	13.5	Canolrif Isaf / Lower Median
34) No. of attendances (young people) at sports development / outreach activity programmes	Gwyrdd / Green	↑	20k	30k	113k	132k	-
35) 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	↑	236k	217k	464k	458k	Isaf / Lower
36) PAM/023 - Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	↑	97	80	98	-	Uchaf / Upper

Attachment B

This document is contained within the quarterly scorecard monitoring report which is presented to the Corporate Scrutiny Committee and The Executive every quarter to provide a brief high-level update as to the status of work which is applicable and reports to both the -

- ***Partnerships, Communities & Service Improvement Transformation Programme Board and the;***
- ***Governance & Business Process Transformation Programme Board***

The key ragging for the said document is as follows –

RAG:

Completed

Project has been completed

On Track

Project is developing as expected and is on track

Behind Schedule

The Project needs key decisions / support

Late

The project is late and is falling behind expected timelines

White

The Project has not started to date

Partnerships, Communities & Service Improvement Transformation Programme Board		
Programme/Project	Related Projects	RAYG and brief Update
Modernizing Schools	Llannau Area (Ysgol Rhyd y Llan)	Completed
	Ardal Caergybi (Yshol Cybi)	Completed
	Bro Rhosyr a Bro Aberffraw	Slippage in the timeline. The timeline for building the new school at Newborough has slipped to January 2019
	Llangefni Area	The Executive decided on July 17, 2017 that Option B is the preferred option
	Seiriol + South East	The informal consultation process has been undertaken
Adult Social Care -	Llangefni Extra Care	Good progress is being made with the construction work and the builders are confident that they adhere to the timetable and the work be completed by Spring 2018.
	Amlwch Extra Care	There has been a pause and review on this but the work has been restarted to look at the Amlwch area again. An assessment is being done by the Housing Service to look at housing needs more widely within the area that includes considering Extra Care
	South of the Island Extra Care	The intention is to consult further during Autumn on a site for the proposed development in Seiriol.
	Supported Living	Re-structure during the Summer 2017
	Re-tendering of Home Care Services	Looking at the North Wales framework for Home Care. This tender has gone out in October
	In house day Services	Proposed Project being considered by the SLT in November 2017
Transformation of Libraries, Youth Services, Museums, Culture and Market Hall	Transformation of Museums and Culture	New models of management of Museums and Culture to be in place by April 2018
	Remodelling of Library Service	Proposed strategy being considered for adoption by the Executive in November 2017
	Review of Youth Services	Revised timeline agreed by the Transformation Board of Libraries, Culture and Youth on the 13/07/2017
	Market Hall	Team Capacity is currently a risk within the project

Leisure		Savings plans for 2017/18 implemented, further savings for 2018/19 put forward.
Energy Island		
Destination Management Plan (DMP)		The Destination Management Plan has been adopted by the Executive. New appointment of Destination Manager expected in Q3.
Innovative Housing Solutions		Has submitted a bid for a grant from the Welsh Government's Innovative Housing Program for housing units for young people
Gypsy Traveller sites		
Prevention Strategy	Early Intervention	
	Implementing Tackling Poverty Strategy	
	Youth Transformation	
Increase levels of recycling		
Flood alleviation work		

Governance & Business Process Transformation Programme Board		
Programme/Project	Related Projects	RAYG and brief Update
Resource Plan – Northgate		Revised timeline proposed by the Board to encompass recent discussions.
Customer Service Excellence	Cyswllt Môn Expansion Programme / Face to Face Contact	Staff ICT training scheduled for end of Q2 onwards
	Customer contact Centre	Discussions underway to merge existing call centres
	Contact over the phones + Channel Shift	Contact Centres currently being tested by the services; Revenues (scheduled for go live Q3)
	CRM	The Waste and Recycling Module to be implemented in Q3. Slipped slightly from Q2.

Attachment B

	Improving Business Processes	Work plan in place - work of scoping the initial process started and completed before the end of the Q3
	Compliance and Satisfaction	
Alternative Delivery Models		High-level update to be presented to the Board during Q3
Invest to Save		
Transformation of Workforce	Workforce planning	
	Apprenticeships	
Procurement		Extended Procurement project to be set up to focus on corporate benefits for the future
Energy Efficiency		The Energy Strategy and action plan is in place. Monthly reports to be submitted to the Land and Assets Group.
Implementation of ICT Strategy		
Scrutiny Improvement Plan		Update to be presented to the Board during Q3
Communication Strategy		Communications Support Officer to be recruited in Q3 New Council Plan 2017-22 to assist shaping of strategy and also help shape our priorities in terms of communications over the coming years.

Service/Function	2017/18 Annual Budget	Q2 2017/18 Budget Year to Date	Q2 Actual & Committed spend	Q2 2017/18 Variance	Q2 Estimated Expenditure to 31 March 2018	Q2 Estimated Outturn 31 March 2018	Q1 Estimated Outturn 31 March 2018	2017/18 Projected Over/(Under)spe nd as a % of Total Budget
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	
Lifelong Learning								
Delegated Schools Budget	44,039	22,409	22,409	-0	44,039	-0	0	0.00%
Central Education	2,762	1,946	2,263	318	3,380	618	618	22.37%
Culture	1,355	810	757	-53	1,285	-70	20	-5.17%
Adult Services	22,487	11,633	11,983	350	22,678	191	299	0.85%
Children's Services	8,003	4,375	5,158	783	9,902	1,899	2,106	23.74%
Housing	1,055	981	954	-27	1,055	0	0	0.00%
Highways, Waste & Property								
Highways	6,574	4,236	4,289	53	6,674	100	3	1.52%
Property	1,071	601	569	-33	1,060	-11	-33	-1.07%
Waste	6,294	3,688	3,631	-58	6,269	-25	30	-0.39%
Regulation & Economic Development								
Economic Development	1,939	1,200	1,118	-82	2,049	110	80	5.68%
Planning and Public Protection	2,155	1,028	971	-57	2,058	-97	-14	-4.49%
Transformation								
Human Resources	1,217	629	637	9	1,217	0	0	0.02%
ICT	1,715	893	1,048	155	1,815	100	100	5.82%
Corporate Transformation	905	337	341	4	875	-30	0	-3.33%
Resources	2,756	1,601	1,728	127	2,796	40	32	1.46%
Council Business	1,615	817	921	104	1,822	207	50	12.82%
Corporate & Democratic costs	1,915	1,051	826	-224	1,667	-248	-172	-12.93%
Corporate Management	761	380	332	-49	681	-80	-70	-10.46%
Total Service Budgets	108,616	58,616	59,936	1,320	111,322	2,706	3,049	2.49%
Levies	3,335	3,334	3,332	-2	3,335	0	0	0.00%
Discretionary Rate Reliefe	60	0	0	0	60	0	0	0.00%
Capital Financing	8,149	2,193	2,192	-2	7,955	-194	-235	-2.38%
General & Other Contingencies	1,280	1,280	1,067	-213	1,067	-213	0	-16.64%
Corporate Savings	-227	-114	0	114	0	227	150	-100.00%
Support Services contribution HRA	-678	0	0	0	-678	-0	0	0.07%
Benefits Granted	5,622	700	700	0	5,470	-152	-149	-2.70%
Total Corporate Finance	17,541	7,392	7,290	-102	17,209	-331	-234	-1.89%
Total Budget 2017/18	126,157	66,009	67,226	1,217	128,531	2,374	2,815	1.88%
							0	
Funding								
NDR	-23,002	-11,501	-11,501	-0	-23,002	0	0	0.00%
Council Tax	-32,941	0	0	0	-32,981	-40	-348	0.12%
Council Tax Premium	-564	0	0	0	-974	-410	-347	72.75%
Revenue Support Grant	-69,650	-34,825	-34,825	-0	-69,650	0	0	0.00%
Total Funding 2017/18	-126,157	-46,326	-46,327	0	-126,607	-450	-695	0.36%
Total outturn including impact of funding	0	19,683	20,899	1,217	1,924	1,924	2,119	1.53%