

## ISLE OF ANGLESEY COUNTY COUNCIL

<b>REPORT TO:</b>	<b>EXECUTIVE COMMITTEE</b>
<b>DATE:</b>	<b>JUNE 17<sup>th</sup> 2019</b>
<b>SUBJECT:</b>	<b>SCORECARD MONITORING REPORT - QUARTER 4 (2018/19)</b>
<b>PORTFOLIO HOLDER(S):</b>	<b>COUNCILLOR DAFYDD RHYS THOMAS</b>
<b>HEAD OF SERVICE:</b>	<b>CARYS EDWARDS</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>	<b>n/a</b>

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

- 1.1** This is the final scorecard of the financial year 2018/19.
- 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 2019/20. Particular emphasis is given to those indicators which have seen a declining trend year upon year to ensure performance improves during 2019/20
  - 1.3.2** To hold a workshop with the SLT, Executive and Shadow Executive during Q1 to confirm relevant indicators for inclusion on the 2019/20 scorecard
  - 1.3.3** To revise the 19/20 targets to ensure they are challenging yet achievable and where targets are not met in the year that a year on year improvement is the minimum expectation

<p><b>1.3.4</b> A continued focus is made on maintaining and/or improving attendance at work with the responsibility for this sitting with service managers supported by the Corporate Sickness Absence Co-ordinator and HR staff. Challenge panels should also be utilised as and when required</p> <p><b>1.3.5</b> A corporate target of 9.75 days sickness per FTE for 2019/20 is adopted once again.</p> <p><b>1.3.6</b> The newly established Transforming Business Processes Board should consider how the Customer Service Indicators should be monitored as part of their developing work on the Customer Service Strategy to ensure that there is a proactive approach to improving customer service.</p> <p><b>1.3.7</b> The new Children &amp; Family Services procedure for responding to complaints is embedded into day to day activities in order to reduce the number of complaints and improve the rate of written responses to complaints within timescales</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? What did they say?</b>	
<b>1</b>	<b>Chief Executive / Strategic Leadership Team (SLT) (mandatory)</b> This was considered by the SLT at their meeting on the 28 <sup>th</sup> May and their comments are reflected in the report
<b>2</b>	<b>Finance / Section 151 (mandatory)</b> No comment
<b>3</b>	<b>Legal / Monitoring Officer (mandatory)</b> No comment
<b>4</b>	<b>Human Resources (HR)</b>
<b>5</b>	<b>Property</b>
<b>6</b>	<b>Information Communication Technology (ICT)</b>
<b>7</b>	<b>Scrutiny</b> Comments following the Corporate Scrutiny Meeting on the 3/6 to be

		discussed at this meeting
<b>8</b>	<b>Local Members</b>	
<b>9</b>	<b>Any external bodies / other/s</b>	
<b>E - Risks and any mitigation (if relevant)</b>		
<b>1</b>	<b>Economic</b>	
<b>2</b>	<b>Anti-poverty</b>	
<b>3</b>	<b>Crime and Disorder</b>	
<b>4</b>	<b>Environmental</b>	
<b>5</b>	<b>Equalities</b>	
<b>6</b>	<b>Outcome Agreements</b>	
<b>7</b>	<b>Other</b>	
<b>F - Appendices:</b>		
<p>Appendix A - Scorecard Quarter 4  Appendix B – Programmes and Projects Performance Dashboard – Quarter 4  Appendix C – Revenue Outturn for the Financial Year Ending 31 March 2019 – Quarter 4</p>		
<b>FF - Background papers (please contact the author of the Report for any further information):</b>		
<ul style="list-style-type: none"> <li>• 2018/19 Scorecard monitoring report - Quarter 3 (as presented to, and accepted by, the Executive Committee in March 2019).</li> </ul>		

## SCORECARD MONITORING REPORT – QUARTER 4 (2018/19)

### 1. INTRODUCTION

- 1.1 This is the final quarter scorecard for the financial year ending 31<sup>st</sup> March, 2019.
- 1.2 This scorecard report and scorecard (Appendix A) will be considered further by the Corporate Scrutiny Committee and the Executive during June, 2019.
- 1.3 By undertaking this work, the Council is seeing trends being established with regards to a number of those indicators and the comments by SLT / Scrutiny and the Executive are having an impact on operational delivery.

### 2.1 PERFORMANCE MANAGEMENT

- 2.1.1 The Performance Management section of the scorecard shows performance against indicators outlined and prioritised by the Senior Leadership Team, Executive and Shadow Executive.
- 2.1.2 At the end of another challenging year for the public sector, it is encouraging to note that the majority of indicators performed well against their targets and that these achievements should be celebrated in the drafting of the Annual Performance Report which will be scrutinised during the autumn.
- 2.1.3 For comparative purposes and **based on 17/18 quartile results**, our end of year performance would achieve an improved change in quartile for 5 of our indicators (only 16 indicators can currently be compared nationally) and a decline in 1 of our indicators. In total 94% of these comparable indicators would have seen an improvement or maintained their current quartile –

The 5 which would improve on their 17/18 quartile result are noted as follows;

- a) PAM/017 – Number of visits to leisure centres where an increase of 45 thousand visits was seen compared to 17/18. This performance would have seen the indicator in the Upper Median quartile during 2017/18.
- b) PAM/019 – The Percentage of planning appeals dismissed which improved from 47% in 17/18 to 74% in 18/19. This performance would have seen the indicator move from the lower quartile to the Upper Median quartile during 2017/18. However, as this indicator deals with a small number of applications the performance can fluctuate greatly year on year.
- c) PAM/008 – Percentage of pupil attendance in primary schools with a performance of 93.9% in the 17/18 academic year. This indicator has already been published through the Welsh Government and this is the basis for benchmarking in this years' benchmarking results (18/19 PAM Results). Despite a decline in pupil attendance from the 94.6% seen during the 16/17 academic year (released in 17/18 PAM results), a large number of local authorities saw an even larger decline and because of this our performance has seen the indicator placed in the top quartile during 2018/19.
- d) PAM/032 – Average Capped 9 score for pupils in year 11 with a performance of 349.1 in the 17/18 academic year. Like above, the

results have already been published through the Welsh Government which has the indicator placed in the Upper Median quartile.

- e) PAM/009 – Percentage of year 11 leavers not in Education, Training or Employment (NEET) with a performance of 1.1% at the end of 2018, an improvement from the 4.2% in 2017. This indicator has been published by Careers Wales and has seen the indicator move from the lower quartile to the Upper quartile in 2018/19.

The 1 indicator which would have seen a decline in their quartile result was;

- a) PAM/012 – Percentage of households successfully prevented from becoming homeless which saw a decline from 65.2% in 17/18 to 52.93% in 18/19. This performance would have seen the indicator move to the lower quartile in 17/18.

- 2.1.4** The Social Services indicators (01-11) PI results for 2017/18 were released by the Welsh Government during Q3. Because of the inconsistencies of the statistics provided by Authorities across Wales, this release was released as experimental statistics once again this year and therefore not available for comparator purposes. Therefore our Social Services data will not be able to be compared at a national level for the time being.
- 2.1.5** We can however state that 75% of comparable indicators measured from Children Services have improved year on year, whilst Adult Services saw a 67% decline in performance year on year with 4 of the 6 indicators measured declining.
- 2.1.6** The Education indicators which are available (indicators 13,14,31,32,33 and 34 on the scorecard) have performed well over the year with 67% of the indicators improving year on year and where the year on year indicators have declined from the 16/17 academic year, other councils have declined further, as explained above (2.1.3). There was also evidence that all Key Stages have shown an improvement during the 2017/18 academic year.
- 2.1.7** Our year on year performance for all comparable indicators (32 in total) demonstrates that 69% have either improved or maintained performance during the year (19 improved and 3 maintaining performance).
- 2.1.8** This performance is in general pleasing to see and is a reflection of the picture seen throughout the year in the scorecard reports. We will however not officially know how we have performed in comparison with others until the results for 18/19 are published by Data Cymru in September. The overall picture will be discussed in the Annual Performance Report (as noted in 2.1.2), to be considered by the Corporate Scrutiny Committee and The Executive prior to adoption by the Council in the autumn.
- 2.1.9** In the light of a continuous improvement mind set embedded within Council services however, it is deemed necessary to provide some narrative about the 3 indicators which have underperformed as Amber or Red against their annual targets for the year.
  - 2.1.9.1** Two indicators within Adult Services which underperformed for the year

- (i) 11) PM20a – RED - The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later. The performance here was 30.87% at the end of Q4 against a target of 50%.

This indicator deals with a small number of cases and therefore performance can fluctuate considerably from quarter to quarter. In Q4, as a result of the re-ablement intervention that the service has provided, there has been an increase in the package of care for an additional individual supported as opposed to a reduced package of care. This reflects the nature of their presenting illnesses.

Into 2019/20, we will review the current reablement service and will consider methods of data collection that provides more detailed outcomes and rationale for ongoing interventions.

- (ii) 07) PAM/025 (PM19) – RED - The Rate of people kept in hospital while waiting for social care per 1000 population aged 75+. The performance of this indicator was 7.78 at the end of the year against an annual target of 3.

It is acknowledged that there was a high rate of Delayed Transfer of Care (DTC) particularly during the first two quarters of the year. It was anticipated that the newly commissioned patch based Domiciliary Care contract would make a positive impact in the figures. This could be seen in the performance in Q3 (1.53) where there was an improvement on the performance seen in Q2 (1.79) and Q1 (2.30). This improvement has not been seen in Q4 however where an additional 2.17 was seen over the period.

We are currently working towards ensuring that we have sufficient reablement capacity to meet increasing demand to address any concern in performance during 2019/20. Further analysis of the increasing DTC figures during Q4 noted that the increase could also be down to incorrect coding of clients, and we are working collaboratively with our Health Board colleagues to secure a more robust data coding process, particularly in one hospital which was responsible for 89% of the figures. Further training will take place at this hospital to ensure the correct procedures are being completed into 2019/20.

**2.1.9.2** One indicator within Regulation & Economic Development has underperformed during Q3 –

21) PAM/018 – RED- The percentage of all planning applications determined in time. The cumulative performance up to the end of the year was 81% against a target of 90%. The performance for Q3 alone was 74% and is the main reason for now being below target.

The main reasons for the underperformance over the year was due to the absence of a Senior Planning Officer during a substantial proportion of the year and a heavy workload in shaping the new planning system while coping with the requirements of GDPR.

To improve the performance into 2019/20, we will continue to ensure that new systems adopted in Q4 are in place to agree on a definite timetable

for any extension in time where applications can be brought to an early decision while deficient applications will be determined through refusal.

**2.1.10** The remaining indicators are all ragged as GREEN or YELLOW within the performance management section which is encouraging to note. It is however concerning that 53% of the comparable indicators from Q3 saw a downward trend in Q4 which resulted in 3 indicators dropping to a lower RAG status.

**2.1.11** *In order to continually improve our standing as an achieving council, the SLT recommends –*

**2.1.11.1** *Underperformance is recognised and managed with mitigation measures completed to aide improvement during 2019/20. Particular emphasis is given to those indicators which have seen a declining trend year upon year to ensure performance improves during 2019/20*

**2.1.11.2** *To hold a workshop with the SLT, Executive and Shadow Executive during Q1 to confirm relevant indicators for inclusion on the 2019/20 scorecard.*

**2.1.11.3** *To revise the 19/20 targets to ensure they are challenging yet achievable and where targets are not met in the year that a year on year improvement is the minimum expectation.*

**2.1.12** Appendix B shows the whole programme of work which the two Corporate Transformation Programme Boards are overseeing. The issues highlighted are being managed and tracked accordingly via the Boards which meet on a quarterly basis.

**2.1.13** 2018/19 has seen achievements for the Council with regards to its transformation programme. For example (non-exhaustive list) we have –

**2.1.13.1** Completed the build on Ysgol Santes Dwynwen;

**2.1.13.2** Opened Hafan Cefni, our first extra care provision;

**2.1.13.3** Retendered the Home Care Provision on the Island;

**2.1.13.4** Agreed on and gained planning permission for the location of a temporary stopping site for Gypsy Travellers;

**2.1.13.5** Updated the look and feel of our website in order to drive our digital channel shift agenda;

**2.1.13.6** Improved our Scrutiny arrangements and received a positive review by the Wales Audit Office (WAO);

**2.1.13.7** Completed the build and let the new business units at Pen-Yr-Orsedd, Llangefni

## **2.2 PEOPLE MANAGEMENT**

**2.2.1** The management of our people is a crucial aspect of the Council's corporate management which enables us (when managed sufficiently) to continue with our aim of improving the delivery of our services for the people of Anglesey. A good and healthy workforce engenders a good and improving provision of service.

**2.2.2** Attendance at work is an area which is reported on monthly and analysed to ensure improvement. Quarter 4 showed a score of 2.91 Working Days Lost (WDL) per FTE which is an improvement on that seen in the 3.08 WDL in Quarter 4 for 2017/18. The cumulative score for the year is 10.34 WDL per FTE (indicator 3 on scorecard under people management). This is however over the target of 9.75WDL per FTE for the year and also over the 9.96 WDL per FTE seen in 2017/18. As a result, our overall end of year performance should see our national ranking drop one quartile to the Lower Median Quartile when compared to the 2017/18 results. However early indications from a number of authorities positioned similar to Ynys Mon in 2017/18 also show an increase in WDL per FTE.

**2.2.3** In order to improve performance of our sickness rates further during 2019/20, service targets have been identified for the forthcoming year based on the 2018/19 trends.

**2.2.4 The SLT therefore recommends –**

**2.2.4.1** A continued focus is made on maintaining and/or improving attendance at work with the responsibility for this sitting with service managers supported by the Corporate Sickness Absence Co-ordinator and HR staff. Challenge panels should also be utilised as and when required.

**2.2.4.2** A corporate target of 9.75 days sickness per FTE for 2019/20 is adopted once again.

## **2.3 CUSTOMER SERVICE**

**2.3.1** Up to the end of Q4, users used AppMôn technology to submit close to 4700 reports (including fly tipping, faulty street lighting, compliments or complaints, broken pavements, sports club database forms and ordering recycling bins). This is over double of the 2000 reports seen in 17/18. 84% of these reports have come through the website which has seen an updated look and feel during Q4.

**2.3.2** A new indicator for this year is the number of registered users we have on AppMôn and the Council Website which has increased by over 1500 users from the end of Q3 to 8155 at the end of Q4. This is positive and it is anticipated that now the new website is in place this will encourage a greater use of online forms and online contact which will drive our digital channel shift to enabling resident to be able to pay and request services online. Because of this it is expected that online web payment numbers will also increase further in 2019/20.

**2.3.3** Our social media presence increased once again during Q4 to 29.5k followers. This is shared between Facebook (13.5k followers), Twitter (15k followers) and Instagram (1k). These modes of communication are continuing to increase and the flow of information distributed and received via these channels will only increase further, changing the way by which residents and others communicate with us as a Council.

**2.3.4** Regarding Customer Complaints Management, by the end of the year 76 Complaints were received (compared to 71 in 17/18). 74 of the complaints that



required a response have received a response and of these complaints 16 were upheld in full (Housing [4], Highways, Waste & Property [4], Resources [4], Learning [2], Regulation & Economic Development [1], and Transformation [1]), 7 were partially upheld (Resources [2], Resources + Transformation [1], Learning [1], Regulation & Economic Development [1] and Regulation & Economic Development + Highways, Waste & Property [1]) whilst the remaining 49 were not upheld.

**2.3.5** Lessons learnt from the upheld and partly upheld complaints this year include:

- Reviewing administration of benefit claims
- A better explanation of planning processes was required
- Internal procedures to be reviewed when dealing with LPE1 form submissions; and
- Services were reminded of the requirement to respond fully and promptly to correspondence

**2.1.2** Within Social Services there were 8 Stage 2 complaints (Adult Services [6], Children & Family Services [2]) and 44 Stage 1 Complaints (Children's Services [30], Adult Services [14]) received for 2018/19. Of these complaints, a total of 57% (Red on the scorecard) have been responded to within timescale with 19 late responses (Children & Family Services [13] and Adult Services [6]). Although the Children & Family Services failed to send written responses within timescale for 13 of the 30 Stage 1 complaints, 24 of the 30 (80%) had held a discussion with the complainant within timescales. It should be noted that 100% of the complaints seen in Q4 were responded to in time.

**2.3.6** The % of FOI requests responded to within timescale performed at 81% (Green on the scorecard) at the end of 2018/19 compared to 78% at the end of 2017/18. This is encouraging as the Council has dealt with 1052 requests, or 7532 questions, during 2018/19, up from the 919 seen in 2017/18.

**2.3.7** Of the 1052 requests there were 200 late responses in 2018/19. The majority of the late responses came from Social Services (Adult Services and Children & Family Services) which equated to 31% of the late responses (53% of the 117 received by the services), Learning with 18% (29.5% of the 122 received by the service), Regulation & Economic with 18% (21.5% of the 163 received by the service), Resources with 8.5% (9% of the 195 received by the service) and Transformation with 8% (8% of the 92 received by the service). Our response to FOIs is important and the SLT and Heads of Service continue to monitor the performance of FOIs closely.

**2.3.8** *The SLT therefore recommends –*

**2.3.8.1** *The newly established Transforming Business Processes Board should consider how the Customer Service Indicators should be monitored as part of their developing work on the Customer Service Strategy to ensure that there is a proactive approach to improving customer service.*

**2.3.8.2** *The new Children & Family Services procedure for responding to complaints is embedded into day to day activities in order to reduce the*

*number of complaints and improve the rate of written responses to complaints within timescales.*

## **2.4 FINANCIAL MANAGEMENT**

- 2.4.1** There is an overspend of £633k for the year ending 31 March 2019. This is better than expectation and reports made throughout the year. The service budgets overspend was £2.287m Corporate finance underspends of £1.654 have reduced the overall overspend. The Services that are still experiencing significant budgetary pressures are similar to 2017/18 (Children and Families Services and Learning). The Adults Service budgets are also under pressure due to increasing demand. The Heads of Service were requested to limit their expenditure to essential only and have responded positively to the request during the year. Going forward the level of corporate finance underspends will not be sustained and therefore it is important that the issues of demand led budgets are addressed.
- 2.4.2** This is a provisional outturn report and is subject to change as new information becomes available between now and when the final Statement of Accounts is reported on in September
- 2.4.3** Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q4' which has been discussed in The Executive meeting on the 17<sup>th</sup> June.

## **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 2019/20. Particular emphasis is given to those indicators which have seen a declining trend year upon year to ensure performance improves during 2019/20.
- 3.1.2** To hold a workshop with the SLT, Executive and Shadow Executive during Q1 to confirm relevant indicators for inclusion on the 2019/20 scorecard.
- 3.1.3** To revise the 19/20 targets to ensure they are challenging yet achievable and where targets are not met in the year that a year on year improvement is the minimum expectation.
- 3.1.4** A continued focus is made on maintaining and/or improving attendance at work with the responsibility for this sitting with service managers supported by the Corporate Sickness Absence Co-ordinator and HR staff. Challenge panels should also be utilised as and when required.

- 3.1.5** A corporate target of 9.75 days sickness per FTE for 2019/20 is adopted once again.
  - 3.1.6** The newly established Transforming Business Processes Board should consider how the Customer Service Indicators should be monitored as part of their developing work on the Customer Service Strategy to ensure that there is a proactive approach to improving customer service.
  - 3.1.7** The new Children & Family Services procedure for responding to complaints is embedded into day to day activities in order to reduce the number of complaints and improve the rate of written responses to complaints within timescales
- 3.2** The Committee is asked to accept the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q4 2018/19

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 17/18 Result	Tuedd Bl i Bl / Yr on Yr Trend	Chwarter 17/18 Quartile	*Chwarter 18/19 Quartile
01) PAM/029 (PM33) - Percentage of children in care who had to move 3 or more times	Gwyrdd / Green	↓	9.52%	11%	9%	↓	-	-
02) PAM/028 (PM24) - Percentage of child assessments completed in time	Melyn / Yellow	↓	86.17%	90%	67.57%	↑	-	-
03) SCC/025 - The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations	Melyn / Yellow	↑	81%	83%	63.32%	↑	-	-
04) 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)	Gwyrdd / Green	↓	241	320	326.5	↑	-	-
05) SCC/010 - The percentage of referrals that are re-referrals within 12 months	Melyn / Yellow	↑	16.87%	15%	-	-	-	-
06) SCC/006 - The percentage of referrals during the year on which a decision was made within 1 working day	Gwyrdd / Green	↑	98%	94%	-	-	-	-
07) PAM/025 (PM19) - Rate of people kept in hospital while waiting for social care per 1,000 population aged 75+	Coch / Red	↓	7.78	3	6.58	↓	-	-
08) SCA/018b - 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	Gwyrdd / Green	↓	93.30%	93%	96%	↓	-	-
09) 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	↓	17.35	19	17.44	⇒	-	-
10) PM18 - The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	↓	90.91%	90%	93.25%	↓	-	-
11) PM20a - The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	Coch / Red	↓	30.87%	50%	59.26%	↓	-	-
12) PM20b - The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Gwyrdd / Green	↑	62.84%	62%	62.65%	⇒	-	-
13) PAM/007 - Percentage of pupil attendance in secondary schools (Termly)	Melyn / Yellow	↓	92.91%	93.30%	93.3%**	↓	Uchaf / Upper	Uchaf / Upper**
14) PAM/008 - Percentage of pupil attendance in primary schools (Termly)	Gwyrdd / Green	↓	94.98%	93.90%	93.9%**	↓	Canolrif Isaf / Lower Median	Uchaf / Upper**
15) PAM/010 (STS/005b) - Percentage of streets that are clean	Gwyrdd / Green	↓	95.29%	94%	93%	↑	Canolrif Isaf / Lower Median	Canolrif Isaf / Lower Median
16) PAM/030 (WMT/009b) - Percentage of waste reused, recycled or composted	Melyn / Yellow	↑	69.86%	72%	72.2%	↓	Uchaf / Upper	Uchaf / Upper
17) PAM/035 - Average number of working days taken to clear fly-tipping incidents	Gwyrdd / Green	↓	0.2	1	-	-	-	-
18) PAM/043 - Kilograms of residual waste generated per person	Melyn / Yellow	⇒	240kg	210kg	236kg	↓	-	-
19) PAM/017 (LCS/002b) - Number of visits to leisure centres	Gwyrdd / Green	↑	553k	515k	508k	↑	Canolrif Isaf / Lower Median	Canolrif Uchaf / Upper Median
20) PAM/023 (PPN/009) - Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	⇒	98%	95%	98%	⇒	Uchaf / Upper	Uchaf / Upper
21) PAM/018 - Percentage of all planning applications determined in time	Coch / Red	↓	80%	90%	86%	↓	Isaf / Lower	Isaf / Lower
22) PAM/019 - Percentage of planning appeals dismissed	Gwyrdd / Green	↑	74%	65%	47%	↑	Isaf / Lower	Canolrif Uchaf / Upper Median
23) PAM/041 - Percentage of NERS clients who completed the exercise programme	Gwyrdd / Green	↓	67%	50%	-	-	-	-
24) PAM/042 - Percentage of NERS clients whose health had improved on completion of the exercise programme	Gwyrdd / Green	↑	85%	80%	-	-	-	-
25) PAM/012 - Percentage of households successfully prevented from becoming homeless	Melyn / Yellow	↓	52.93%	55%	65.20%	-	Canolrif Uchaf / Upper Median	Isaf / Lower
26) PAM/013 - Number of empty private properties brought back into use	Gwyrdd / Green	↑	78	75	75	↑	Uchaf / Upper	Uchaf / Upper
27) PAM/014 - Number of new homes created as a result of bringing empty properties back into use	Gwyrdd / Green	⇒	9	4	4	↑	-	-
28) PAM/015 (PSR/002) - Average number of calendar days taken to deliver a Disabled Facilities Grant	Gwyrdd / Green	↑	161.9	175	177	↑	Uchaf / Upper	Uchaf / Upper
29) PAM/037 - Average number of days to complete repairs	Melyn / Yellow	↓	13.63	12	-	-	-	-
30) PAM/038 - Landlord Services: Percentage of homes that meet the Welsh Housing Quality Standard (WHQS)	Gwyrdd / Green	⇒	100%	100%	-	-	-	-
31) PAM/009 - Percentage of Year 11 leavers not in Education, Training or Employment (NEET) [Annual]	-	-	1.1%	-	4.20%	↑	Isaf / Lower	Uchaf / Upper**
32) PAM/032 - Average Capped 9 score for pupils in year 11 [Annual]	-	-	349.1	-	335.9	↑	Isaf / Lower	Canolrif Uchaf / Upper Median**
33) PAM/033 - Percentage of pupils assessed in Welsh at the end of the Foundation Phase [Annual]	-	-	88.3%	-	72.6%	↑	-	-
34) PAM/034 - Percentage of year 11 pupils studying Welsh (first language) [Annual]	-	-	65%	-	63.7%	↑	-	-
35) PAM/040 - Percentage of Quality Indicators (with targets) achieved by the library service [Annual]	-	-	-	-	-	-	-	-
36) PAM/024 (PM13a) - Percentage of adults satisfied with their care and support [Annual]	Gwyrdd / Green	-	97%	92%	92%	↑	-	-
37) PAM/026 (PM15) - Percentage of carers that feel supported [Annual]	Gwyrdd / Green	-	94%	90%	90%	↑	-	-
38) PAM/027 (PM13c) - Percentage of children satisfied with their care and support [Annual]	Gwyrdd / Green	-	89%	83%	83%	↑	-	-
39) PAM/020 (THS/012a) - Percentage of A roads in poor condition [Annual]	Gwyrdd / Green	-	3%	3%	3.20%	↑	Canolrif Uchaf / Upper Median	Canolrif Uchaf / Upper Median
40) PAM/021 (THS/012b) - Percentage of B roads in poor condition [Annual]	Gwyrdd / Green	-	3.80%	5%	4.40%	↑	Canolrif Uchaf / Upper Median	Canolrif Uchaf / Upper Median
41) PAM/020 (THS/012c) - Percentage of C roads in poor condition [Annual]	Gwyrdd / Green	-	8.60%	10%	8.90%	↑	Canolrif Isaf / Lower Median	Canolrif Isaf / Lower Median
42) PAM/039 - Landlord Services: Percentage of rent lost due to properties being empty [Annual]	-	-	1.30%	-	-	-	-	-

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q4

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 17/18 Result	Canlyniad 16/17 Result
<b>Siarter Gofal Cwsmer / Customer Service Charter</b>						
01) No of Complaints received (excluding Social Services)	Gwyrdd / Green	↓	76	71	71	71
02) No of Stage 2 Complaints received for Social Services	-	↓	8	-	9	8
03) Total number of complaints upheld / partially upheld	-	↑	27	-	28	25
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green	↑	93%	80%	92%	93%
04b) Total % of written responses to complaints within 15 days (Social Services)	Coch / Red	↑	57%	80%	-	-
05) Number of Stage 1 Complaints for Social Services	-	↑	44	-	51	54
06) Number of concerns (excluding Social Services)	-	↑	62	-	112	191
07) Number of Compliments	-	↓	513	-	753	566
08) % of FOI requests responded to within timescale	Gwyrdd / Green	↑	81%	80%	78%	77%
09) Number of FOI requests received	-	↓	1052	-	919	1037
<b>Newid Cyfrwng Digidol / Digital Service Shift</b>						
10) No of Registered Users on AppMôn / Website	-	↑	8155	-	-	-
11) No of reports received by AppMôn / Website	-	↑	4680	-	2k	1k
12) No of web payments	-	↑	11.2k	-	11k	-
13) No of telephone payments	-	↑	5.2k	-	5k	-
14) No of 'followers' of IOACC Social Media	-	⇒	29.5k	25k	25k	21k
15) No of visitors to the Council Website	-	↓	798k	-	820k	715k

Rheoli Pobl / People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 17/18 Result	Canlyniad 16/17 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2243	-	2252	2310
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-	-	1252	-	1244	1303
03a) Sickness absence - average working days/shifts lost	Coch / Red	↓	10.34	9.75	9.96	11.68
03b) Short Term sickness - average working days/shifts lost per FTE	-	-	4.68	-	4.63	11.68
03c) Long Term sickness - average working days/shifts lost per FTE	-	-	5.66	-	5.32	6.79
04a) Primary Schools - Sickness absence - average working days/shifts lost	Coch / Red	↓	12.21	9.5	10.39	-
04b) Primary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	4.97	-	4.85	-
04c) Primary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	7.24	-	5.55	-
05a) Secondary Schools - Sickness absence - average working days/shifts lost	Melyn / Yellow	↓	9.57	9.5	9.67	-
05b) Secondary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	5.26	-	5.32	-
05c) Secondary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	4.31	-	4.35	-
06) % of RTW interview held within timescale	Melyn / Yellow	⇒	79%	80%	73%	84%
07) % of RTW interview held	Ambr / Amber	⇒	88%	95%	85%	-
08) % of Attendance Review Meetings held	Melyn / Yellow	↑	74%	80%	69%	-
09) Local Authority employees leaving (%) (Turnover) (Annual)	-	⇒	11%	-	11%	-
10) % of PDR's completed within timeframe (Q4)	Gwyrdd / Green	↓	84%	80%	90.50%	-
11) % of staff with DBS Certificate (if required within their role)	-	-	-	-	-	98%
12) No. of Agency Staff	-	↑	10	-	12	26

Rheolaeth Ariannol / Financial Management	CAG / RAG	Tuedd / Trend	Cyllideb / Budget	Canlyniad / Actual	Amrywiad / Variance (%)	Rhagolygon o'r Gwariant / Forecasted Actual	Amrywiad a Ragwelir / Forecasted Variance (%)
01) Budget v Actuals (Controllable Budget Lines)	Coch / Red	↑	£130,566,193	£130,897,516	0.25%	-	-
02) End of year outturn (Revenue)	Coch / Red	↑	£130,899,873	£131,533,355	0.48%	-	-
03) End of year outturn (Capital)	-	-	£46,520,951	£21,649,188	-53.46%	-	-
04) Achievement against efficiencies	Ambr / Amber	↓	£2,521,500	£2,063,500	-18.16%	-	-
05) Income v Targets (excluding grants)	Gwyrdd / Green	↑	-£11,752,829	-£13,488,420	14.77%	-	-
06) Amount borrowed	-	-	£5,783,000	£15,563,536	169.13%	-	-
07) Cost of borrowing	-	-	£4,494,993	£4,035,324	-10.23%	-	-
08) % invoices paid within 30 days	-	↓	-	90.87%	-	-	-
09) % of Council Tax collected (for last 3 years)	Gwyrdd / Green	↑	-	99.10%	-	-	-
10) % of Business Rates collected (for last 3 years)	Gwyrdd / Green	↑	-	98.80%	-	-	-
11) % of Sundry Debtors collected (for last 3 years)	Melyn / Yellow	↑	-	97.60%	-	-	-
12) % Housing Rent collected (for the last 3 years)	-	↓	-	100.23%	-	-	-
13) % Housing Rent collected excl benefit payments (for the last 3 years)	-	↑	-	100.57%	-	-	-

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 -

- ***Transforming Services Programme Board and the;***
- ***Corporate Governance 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

<b>Transformation Services Programme Board</b>		
<b>Programme/Project</b>	<b>Related Projects</b>	<b>RAYG and brief Update</b>
<b>School Modernisation</b>	<b>Bro Rhosyr a Bro Aberffraw</b>	<b>Ysgol Santes Dwynwen</b> at Newborough opened on the 29 <sup>th</sup> April 2019.  Official opening end of Summer / beginning of September 2019.
	<b>Llangefni Area</b>	<b>Ysgol Bodffordd, Ysgol Corn Hir and Ysgol Henblas</b> Original decision rescinded and requested of Officers to consider the possibilities of the area under the new School Organisation Code (11/2018)  <b>Ysgol y Graig and Ysgol Talwrn</b> Original decision rescinded and requested of Officers to consider the possibilities of the area under the new School Organisation Code (11/2018)
	<b>Seiriol + South East</b>	Original decision rescinded and requested of Officers to consider the possibilities of the area under the new School Organisation Code (11/2018)
	<b>Ysgol Syr Thomas Jones and the areas Primary schools.</b>	Engagement meetings were held between 05/11/18 – 14/12/18. Work on analysing the results and developing a consultative proposal progressing.
	<b>Post 16</b>	Engagement meetings were held between the 19/11/18 – 16/12/18. Work on analysing the results has been completed and further time awarded to research future models.
	<b>Adult Social Care -</b>	<b>Llangefni Extra Care</b>
<b>South of the Island Extra Care</b>		Following the recommendation to rescind the decision on the future of Ysgol Beaumaris, further exploratory work needed in order to see what can be achieved.
<b>Housing with Internal Support</b>		The new aim of the project is to retain the service internally within the Council but to re-model in order to achieve financial savings.  Prepare Project Closure Report and present to the Adult Care Board in May 2019.
<b>Re-tendering of Home Care Services</b>		Project complete. Initiating new monitoring arrangements in partnership with health.

		Project Closed – Report presented to the Adult Care Board in February 2019.
	<b>Supported Living (External)</b>	The aim of the project is to re-model and redesign the services in close consultation with the requirements of the Supporting People Programme.  Ongoing discussions with providers at present
	<b>Day Care Services</b>	Developing the vision for day opportunities and implementation timetable.  Engaging on day opportunities strategy currently. Report to Scrutiny and Exec in Q3
<b>Transformation of Libraries, Youth Services, Museums, Culture and Market Hall</b>	<b>Transformation of Museums and Culture</b>	Melin Llynonn and Roundhouses – License given to a local man / Michelin Star, Richard Holt.  Beaumaris Court and Goal –The Council have transferred the assets to Beaumaris Town Council, awaiting agreement to be processed.
	<b>Remodelling of Library Service</b>	Project complete.  Related workstreams being managed by the Libraraies & Heritage Programme Board
	<b>Market Hall, Holyhead</b>	Project to be completed in May 2019. Problems with Phase 2 works has delayed the project – phase 2 work is ongoing.
<b>Gypsy Traveller sites</b>		Star site – Project behind schedule, Tender in place by Q1 beginning Q3, foreseen date of completion September 2019.
<b>Increase levels of recycling</b>		Please see Scorecard KPIs 16 + 17 for Q1 achievement
<b>Flood alleviation work</b>		Beaumaris – new contractors to be on site by late May 2019.  Nant y Felin, Pentraeth - works have been postponed to start towards the end of the year.  Llanfairpwll – Outline business case due to be submitted to WG end April 2019. Once receive – will arrange drop in sessions for the residents.  Valley – Outline business case submitted to the WG, awaiting update.  Dwyran – Joint working plan with Natural Resources Wales ongoing, project behind schedule and is expected to be completed mid-July 2019.



		Llangefni – Joint working plan with Natural Resources Wales ongoing, expected to be completed end of May 2019
		Bodffordd - Completed
<b>Leisure Modernisation Strategy</b>		Public Consultation has been completed and the responses have been analysed.

<b>Corporate Governance Programme Board</b>		
<b>Programme/Project</b>	<b>Related Projects</b>	<b>RAYG and brief Update</b>
<b>Resource Plan – Northgate</b>		Project closed on the 31.03.19 and carrying on as business as usual.  Project Closure Report presented to the Board in May 2019.
<b>Transforming Business Processes</b>	<b>Cyswllt Môn Expansion Programme / Face to Face Contact</b>	All PC's are currently being upgraded in the libraries as well as the software links to enabling printing and scanning.  Project behind schedule - Pilot started after Easter in Amlwch and Menai Bridge for 4 months followed by a review of the date which will be presented to the Board with recommendations for future delivery.
	<b>Telephone Contact and Channel Shift</b>	(ON HOLD) Each Contact Centre has gone live successfully without disruption to the public.  There is an evidenced improvement in the number of missed calls in those services who have gone live (up to 80% reduction in dropped calls.)
	<b>CRM</b>	Telephony Integration – ShoreTel upgrade significantly changes the user experience.  Waste Management – Specification developed. Awaiting quotation.  Blue Badge Integration – Progressing well. Forms built and integrated. No links from Council website to the National yet due to non-compliance with Welsh Language Standards.
<b>Alternative Delivery Models</b>		Work on ADM's is on-going and will be continuously be exploring new options available.

Attachment B

		<p>School Taxi Contract – contract up and running.</p> <p>School Grass Cutting – contract up and running.</p> <p>Re-Tender Oriel Mon Café – contract up and running.</p> <p>Payment for parking in some car parks on the island – ongoing</p>
<b>Energy Efficiency</b>		<p>Plan for 2018/19 presented to Programme Board and being implemented.</p>
<b>Implementation of ICT Strategy</b>		<p>Website went live in February 2019.</p> <p>Digital Strategy 2017-2021 has been updated (Version 2.0).</p> <p>On-going work with the CRM under direction of Transformation of Business Processes Project Board.</p>
<b>Scrutiny Improvement Plan</b>		<p>Programme was put in place 18 months ago and is now complete and closed down with a new development programme in place.</p>
<b>Communication Strategy</b>		<p>Strategy approved by the Executive, document to be published on Monitor. 19/20 work-plan being developed.</p>
<b>Waste Collection &amp; Cleansing Contract</b>		<p>Started the process of retendering for our Waste Collection &amp; Cleansing Contract.</p>
<b>School Meals Contract</b>		<p>Prepare for and tender the School Meals contract ensuring a healthy and locally sourced menu for 2020-2025.</p>

**Projected Revenue Outturn for the Financial Year Ending 31 March 2019 – Quarter 4**

Service/Function	2018/19 Annual Budget	Provisional Outturn	Provisional Total Outturn Variance	Provisional Uncontrollable Variance (Exceptions)	Provisional Controllable Variance (Non-Exceptions)	Estimated Outturn 31 March 2019 over/(under) at Q3
	£'000	£'000	£'000	£'000	%	£'000
<b><u>Lifelong Learning</u></b>						
Delegated Schools Budget	43,216	43,216	0	0	0	0
Central Education	4,411	4,760	349	220	327	589
Culture	1,332	1,207	(126)	(2)	(124)	(100)
<b><u>Adult Services</u></b>	24,921	26,094	1,173	(5)	1,178	1,035
<b><u>Children's Services</u></b>	8,729	10,565	1,837	7	1,830	2,009
<b><u>Housing</u></b>	1,091	802	(289)	15	(304)	(45)
<b><u>Highways, Waste &amp; Property</u></b>						
Highways	6,385	6,101	(284)	38	(322)	(107)
Property	1,009	1,136	128	92	35	36
Waste	7,490	7,453	(37)	291	(328)	(257)
<b><u>Regulation &amp; Economic Development</u></b>						
Economic Development	1,750	1,679	(71)	36	(107)	(119)
Planning and Public Protection	2,070	1,967	(103)	18	(121)	(50)
<b><u>Transformation</u></b>						
Human Resources	1,251	1,195	(56)	(2)	(54)	(15)
ICT	2,354	2,483	128	(7)	135	112
Corporate Transformation	826	644	(182)	0	(183)	(155)

Service/Function	2018/19 Annual Budget	Provisional Outturn	Provisional Total Outturn Variance	Provisional Uncontrollable Variance (Exceptions)	Provisional Controllable Variance (Non-Exceptions)	Estimated Outturn 31 March 2019 over/(under) at Q3
	£'000	£'000	£'000	£'000	%	£'000
<b>Resources</b>	2,840	2,886	46	85	(39)	(34)
<b>Council Business</b>	1,464	1,411	(53)	0	(53)	(4)
<b>Corporate &amp; Democratic costs</b>	3,290	3,115	(175)	6	(181)	(138)
<b>Corporate Management</b>	657	659	3	0	2	15
-						
<b>Estimated Impact of Uncontrollable Costs</b>						200
<b>Total Service Budgets</b>	115,086	117,373	2,287	596	1,692	2,972
Levies	3,361	3,361	0	0	0	0
Discretionary Rate Relief	0	0	0	0	0	2
Capital Financing	7,541	6,356	(1,185)	0	(1,185)	(1,056)
General & Other Contingencies	0	0	0	0	0	(93)
Support Services contribution HRA	(693)	(845)	(152)	(152)	0	0
Benefits Granted	5,606	5,558	(48)	127	(175)	(63)
<b>Total Corporate Finance</b>	15,815	14,429	(1,385)	(25)	(1,360)	(1,210)
<b>Total 2018/19</b>	<b>130,900</b>	<b>131,802</b>	<b>902</b>	<b>570</b>	<b>331</b>	<b>1,762</b>

Service/Function	2018/19 Annual Budget	Provisional Outturn	Provisional Total Outturn Variance	Provisional Uncontrollable Variance (Exceptions)	Provisional Controllable Variance (Non-Exceptions)	Estimated Outturn 31 March 2019 over/(under) at Q3
	£'000	£'000	£'000	£'000	%	£'000
<b>Funding</b>						
NNDR	(22,574)	(22,574)	0	0	0	0
Council Tax	(34,440)	(35,357)	(269)	191	(460)	45
Council Tax Premium	(648)	0	0	0	0	(218)
Revenue Support Grant	(73,238)	(73,728)	0	0	0	0
<b>Total Funding 2018/19</b>	<b>(130,900)</b>	<b>(131,168)</b>	<b>(269)</b>	<b>191</b>	<b>(460)</b>	<b>(173)</b>
<b>Total outturn including impact of funding</b>	<b>0</b>	<b>633</b>	<b>633</b>	<b>761</b>	<b>(128)</b>	<b>1,589</b>