ISLE OF ANGLESEY COUNTY COUNCIL	
REPORT TO:	**EXECUTIVE COMMITTEE**
DATE:	**SEPTEMBER 16th 2019**
SUBJECT:	**SCORECARD MONITORING REPORT - QUARTER 1 (2019/20)**
PORTFOLIO HOLDER(S):	**COUNCILLOR DAFYDD RHYS THOMAS**
HEAD OF SERVICE:	**CARYS EDWARDS**
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LOCAL MEMBERS:	**n/a**

A -	**Recommendation/s and reason/s**
	1.1 This is the first scorecard of the financial year 2019/20. **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 Q2 and that continuous scrutiny of financial performance is undertaken with particular emphasis and support given to the services under pressure due to the increasing demand so that their management of performance does not decline or underperform into Q2 **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 27th August 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**	
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 1		
FF - Background papers (please contact the author of the Report for any further information):		
• 2018/19 Scorecard monitoring report - Quarter 4 (as presented to, and accepted by, the Executive Committee in June 2019).		

SCORECARD MONITORING REPORT – QUARTER 1 (2019/20)

1. INTRODUCTION

1.1. One of the Council's duties under the Wales Programme for Improvement is to make arrangements to secure continuous improvement in the exercise of our services. We are required to put in place arrangements which allow us effectively to understand local needs and priorities, and to make the best use of our resources and capacity to meet them and evaluate the impact of our actions.

1.2. Our Council Plan for 2017 to 2022 identifies the local needs and priorities and sets out our aims for the period. The delivery of the Council Plan is delivered through the realization of the Annual Delivery Document (ADD). The ADD is created at the beginning of each financial year and identifies the key priority areas, as outlined in the Council Plan, which the council will focus on during the forthcoming 12 months. At the end of the financial year the Annual Performance Report is written to report on progress made, against this Annual Delivery Document over the last 12 months, and is published before the end of October.

1.3. This scorecard monitoring report is used as part of this process to monitor the success of our identified Key Performance Indicators (KPIs), a combination of local and nationally set indicators, in delivering the Councils day to day activities. The report also identifies any mitigating actions identified by the Senior Leadership Team (SLT) to drive and secure improvements.

1.4. This year's indicators included within the scorecard (similar to previous years) have been decided via a workshop held on the 3rd July, 2019 with members of the SLT, the Executive and Shadow Executive following guidance from Heads of Service as to which indicators they identified as key indicators and important.

1.5. The scorecard (appendix 1) portrays the current end of Q1 position and will (together with this report) be considered further by the Corporate Scrutiny Committee and the Executive during September.

2. CONTEXT

2.1. It was agreed as part of the previously noted workshop that some changes were required of the Scorecard this year to ensure a greater strategic approach. To that end, the performance monitoring KPIs have been aligned to the Councils' three strategic objectives:

- Objective 1 - Ensure that the people of Anglesey can thrive and realise their long-term potential
- Objective 2 - Support vulnerable adults and families to keep them safe, healthy and as independent as possible
- Objective 3 - Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment

2.2. There are also some KPIs which have been removed as they were deemed too operational for the Scorecard.

2.3. This report will also bring together the Customer Service, People Management and Financial Management sections of the report into one section instead of the three used previously so that a greater in–depth analysis can be undertaken of related indicators to provide assurances to the Executive that our performance management achievements are robust and sustainable. This change will ensure a greater strategic emphasis is placed upon this report.

2.4. Since the 2018/19 Q4 Scorecard report was discussed in June 2019, the Public Accountability Measures (PAMs) have been published by Data Cymru.

2.5. The bar chart below (Chart 2) demonstrates our performance over the last 3 years for comparable PAM indicators, i.e. the PAM indicators which were previously monitored for 2016 to 2018. The chart demonstrates that 4 additional performance indicator were added to the Upper Quartile (Top 6), 1 was added to the Upper Medium Quartile (7th to 11th), 1 fewer indicators in the Lower Median Quartile (12th to 16th) and 2 remain in the Lower Quartile (17th to 22nd).

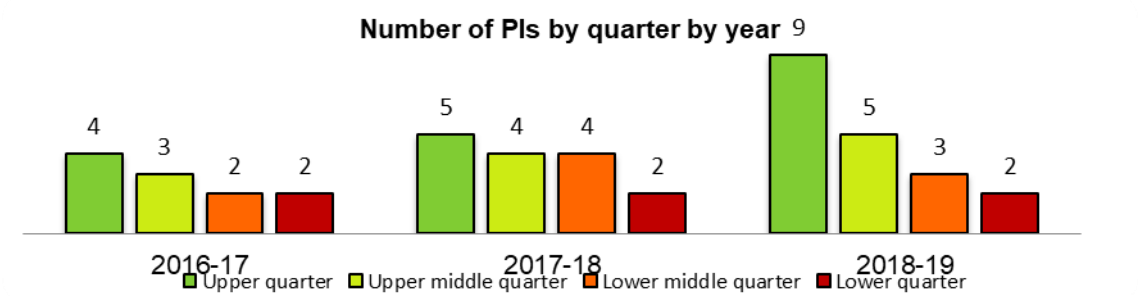

Chart 1

2.6. This performance associated with our published indicators, notes that our national standing has improved once again this year as we currently have the most amount of indicators in the upper quartile throughout Wales. This is encouraging to note and one could argue that such a performance is due to the increased challenge placed upon the scorecard and its monitoring over the past 3 years.

2.7. The pie chart below (chart 2) also shows that during 2018/19, 54% of our indicators either improved or maintained performance and 40% declined in performance when compared to the performance of 2017/18. 7% of the indicators are new PAM indicators for the year and do not therefore have performance data for 2017/18 which can be compared.

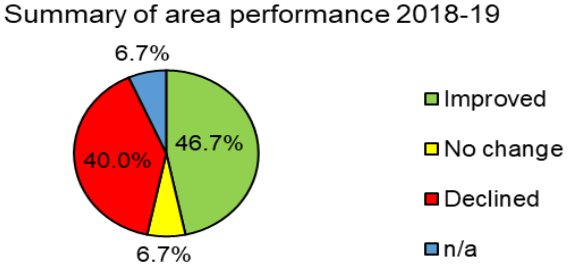

Chart 2

2.8. Further analysis of the overall annual performance will be gained through the Annual Performance Report to be adopted by the Council during the autumn.

3. CORPORATE HEALTH PERFORMANCE

3.1. It is encouraging to note that the majority of the indicators monitored are performing well against targets. Some of the highlights are noted below.

3.2. Attendance at work is an area which is reported on monthly and is analysed to ensure improvement. At the end of Q1 the Council is GREEN against its target with 2.24 days lost to absence per FTE in the period. This is an improvement on the levels seen during Q1 2018/19 where 2.69 days were lost to absence per FTE. It is also the same as the 2.23 days lost to absence per FTE seen in Q1 2017/18 which was the best performing year for absence since we began monitoring in this way.

3.3. The digital strategy continues to see fruition during Q1 where the majority of indicators under the digital service shift subheading sees an upward trend compared to Q4. This is positive as the transaction costs are theorised to be lower than face to face contact.

3.4. Currently there is no cause for concern with the customer service charter sub heading where the majority of indicators are performing well against targets. These indicators are being considered by the Transforming Business Processes Board in the development of the Customer Strategy which will be completed by the end of Q2.

3.5. The financial management section demonstrates at the end of Q1 an initial projection that the budget will be overspent by £1.6m for the year ending 31 March 2020. The service budgets are expected to overspend by £1.481m and corporate finance is forecast to overspend by £0.265m. An underachievement of £0.158m is expected on the standard Council Tax. Surplus income of £0.304m is forecast on the Council Tax Premium. The net surplus on Council Tax overall is £0.146m.

3.6. The Adults Service budgets continue to be under pressure due to increasing demand and the transition of a costly placement from Children's Services. It is the normal pattern for the final out-turn position to be better than the first quarter estimate. However, if the projected overspend transpires it would be funded from the Council's general balances which would reduce to £4.791m. This reduction weakens the Council's financial position but vindicates the decision not to use general balances to fund part of the 2019/20 budget.

3.7. Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q1' which will be discussed in The Executive meeting on the 16th September.

3.8. What this demonstrates therefore is the reasonable assurance which can be provided through the use of the scorecards analysis that the Council's day to day activities in managing its people, its finances and serving its customers are delivering against their expectation to a standard which is appropriate and agreed by Members. This is also reflected in the fact that the majority of indicators from a performance management perspective are also performing well.

4. PERFORMANCE MANAGEMENT

4.1. At the end of Q1 it is encouraging to note that the majority of performance indicators are performing well against their targets. This compares favourably to the position we were in during Q1 in 2018/19. Having said this, we do note that five indicators have started the year as underperforming against their targets and are highlighted as being Red or Amber in the Scorecard.

4.2. Performance for **Objective 1** at the end of Q1 has been good and no indicators that are monitored quarterly against the objective are currently underperforming and all bar one are GREEN against targets for the quarter.

4.3. Performance against the indicators for **Objective 2** have also performed well with only three indicators of the 17 monitored in Q1 (18%) currently underperforming for the objective.

4.3.1. Indicator 25 – Percentage of child assessments completed in time – which is AMBER with a performance of 85.32% against a target of 90%. This is down from the 96.39% seen in Q1 2018/19 and slightly below the result seen at the end of 2018/19 of 86.17%.

The reason for the lateness in completing assessments was due to the lack of management in one practice group, which has since been addressed. Moving on a new process has been introduced where the data will be collated in a different manner that should lead to an improvement in Q2.

4.3.2. Indicator 34 - The average number of calendar days to let lettable units of accommodation (excluding DTLs) – which is RED with average of 25.6 days to let units against a target of 21 days.

During the quarter 62 units of accommodation were let and of these 43 (69% in total) were let outside of the target of 21 days. 17 of the 43 units (40%) also took more than 42 days to let during the period.

To improve the situation into Q2 onwards, a new streamlined process has been introduced within the Housing Service. It is hoped that the new process should result in units being let in a timelier manner.

4.3.3. Indicator 35 - Landlord Services: Percentage of rent lost due to properties being empty is RED on the scorecard with 1.6% lost against a target of 1.15%

This indicator is directly linked with the indicator discussed above. As it has taken more time to let lettable units of accommodation then the rent lost is higher.

4.4. The indicators to monitor **Objective 3** have also performed well in Q1 where only one indicator of the seven (14%) monitored for the objective has underperformed against target.

4.4.1. Indicator 43 - Percentage of planning enforcement cases investigated within 84 days – which is RED with a performance of 55% against a target of 80%. This is a new indicator for the Scorecard this year, however performance of this indicator was 17% during Q4 2018/19.

There is good progress being made given the historic backlog and current performance demonstrates a significant increase over every quarter result for 2018/19 as new processes are embedded and the backlog is cleared. It is anticipated that this improvement will continue into the year ahead.

5. RECOMMENDATIONS

5.1. 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 –

5.1.1. Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q2 and that continuous scrutiny of financial performance is undertaken with particular emphasis and support given to the services under pressure due to the increasing demand so that their management of performance does not decline or underperform into Q2.

5.2. The committee is asked to accept the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q1 2019/20

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Targed Bl / Yr Target	Canlyniad 18/19 Result	Canlyniad 17/18 Result	Canlyniad 16/17 Result
Objective 1 - Ensure that the people of Anglesey can thrive and realise their long-term potential								
1) Percentage of pupil attendance in primary schools	Gwyrdd / Green	-	94.70%	93.90%	93.90%	-	93.90%	94.60%
2) Percentage of pupil attendance in secondary schools	Gwyrdd / Green	-	93.50%	93.30%	93.30%	-	93.30%	94.80%
3) Percentage of Year 11 leavers not in Education, Training or Employment [NEET] (annual)	-	-	-	-	-	1.10%	4.20%	2.30%
4) Average Capped 9 score for pupils in year 11 (annual)	-	-	-	-	-	349.1	335.9	-
5) Percentage of pupils assessed in Welsh at the end of the Foundation Phase (annual)	-	-	-	-	-	88.30%	72.60%	-
6) Percentage of year 11 pupils studying Welsh [first language] (annual)	-	-	-	-	-	65%	63.70%	-
7) Percentage of Quality Indicators (with targets) achieved by the library service (annual)	-	-	-	-	-	82%	-	-
8) Number of visits to leisure centres	Gwyrdd / Green	-	122k	120k	-	553k	508k	464k
9) Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	-	98%	95%	95%	98%	98%	98%
10) Percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation	Gwyrdd / Green	-	100%	90%	90%	-	-	-
11) Percentage of NERS clients who completed the exercise programme	Gwyrdd / Green	-	78%	50%	50%	70%	-	-
12) Percentage of NERS clients whose health had improved on completion of the exercise programme	Gwyrdd / Green	-	85%	80%	80%	83%	-	-
13) Number of empty private properties brought back into use	Gwyrdd / Green	-	40	19	75	78	75	-
14) Number of new homes created as a result of bringing empty properties back into use	Gwyrdd / Green	-	2	1	4	9	4	-
15) Number of additional affordable housing units delivered per 10,000 households (annual)	-	-	-	-	-	-	-	-
16) Landlord Services: Percentage of homes that meet the Welsh Housing Quality Standard (WHQS)	Gwyrdd / Green	-	100%	100%	100%	100%	-	-
17) Landlord Services: Average number of days to complete repairs	Melyn / Yellow	-	12.33	12	12	13.63	-	-
18) Percentage of tenants satisfied with responsive repairs (Ch4/Q4)	-	-	-	-	-	-	-	-
Objective 2 - Support vulnerable adults and families to keep them safe, healthy and as independent as possible								
19) Rate of people kept in hospital while waiting for social care per 1,000 population aged 75+	Gwyrdd / Green	-	1.66	3	3	7.78	6.58	6.05
20) The percentage of adult protection enquiries completed within statutory timescales	Melyn / Yellow	-	87.80%	90%	90%	90.91%	93.25%	90.48%
21) The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	Gwyrdd / Green	-	80%	35%	35%	30.87%	59.26%	62.60%
22) The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Gwyrdd / Green	-	61.80%	62%	62%	62.84%	62.65%	33.30%
23) 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	-	17.4	19	19	17.35	17.44	20.51
24) 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	-	98.20%	93%	93%	93.30%	96%	94.40%
25) Percentage of child assessments completed in time	Ambr / Amber	-	85.32%	90%	90%	86.17%	67.57%	89.17%
26) Percentage of children in care who had to move 3 or more times	Gwyrdd / Green	-	1.88%	2.50%	10%	9.52%	9%	5%
27) The percentage of re-registrations of children on local authority Child Protection Registers	Melyn / Yellow	-	10.53%	10%	10%	16..87%	-	-
28) 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	-	220	270	270	241	326.5	266
29) The percentage of referrals during the year on which a decision was made within 1 working day	Gwyrdd / Green	-	98.27%	95%	95%	98%	-	-
30) The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations	Melyn / Yellow	-	85.32%	90%	90%	86.17%	63.32%	79.35%
31) Percentage of households successfully prevented from becoming homeless	Gwyrdd / Green	-	69.00%	60%	60%	-	-	-
32) Percentage of households (with children) successfully prevented from becoming homeless	Gwyrdd / Green	-	83.30%	60%	60%	55.10%	65.20%	-
33) Average number of calendar days taken to deliver a Disabled Facilities Grant	Melyn / Yellow	-	173	170	170	161.9	177	-
34) Decision Made on Homeless Cases within 56 days (annual)	-	-	-	-	-	-	-	-
35) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Coch / Red	-	25.6	21	21	-	-	-
36) Landlord Services: Percentage of rent lost due to properties being empty	Coch / Red	-	1.60%	1.15%	-	1.30%	-	-
Objective 3 - Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment								
37) Percentage of streets that are clean	Gwyrdd / Green	-	100.00%	95%	95%	95.60%	93.60%	93.40%
38) Percentage of waste reused, recycled or composted	Gwyrdd / Green	-	72.79%	70%	70%	69.86%	72.20%	65.80%
39) Average number of working days taken to clear fly-tipping incidents	Melyn / Yellow	-	1.13	1	1	0.2	-	-
40) Kilograms of residual waste generated per person	Gwyrdd / Green	-	58.31kg	60kg	240kg	240kg	236kg	263kg
41) Percentage of all planning applications determined in time	Melyn / Yellow	-	86%	90%	90%	80%	86%	-
42) Percentage of planning appeals dismissed	Melyn / Yellow	-	50%	65%	65%	74%	47%	-
43) Percentage of planning enforcement cases investigated within 84 days	Coch / Red	-	55%	80%	80%	-	-	-
44) Percentage of A roads in poor condition (annual)	-	-	-	-	2.90%	2.90%	2.90%	2.30%
45) Percentage of B roads in poor condition (annual)	-	-	-	-	3.80%	3.80%	4.20%	3.20%
46) Percentage of C roads in poor condition (annual)	-	-	-	-	8.70%	8.70%	8.90%	10.10%

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q1 2019/20

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 18/19 Result	Canlyniad 17/18 Result
Siarter Gofal Cwsmer / Customer Service Charter						
01) No of Complaints received (excluding Social Services)	Gwyrdd / Green	↑	10	19	76	71
02) No of Stage 2 Complaints received for Social Services	-	-	2	-	8	9
03) Total number of complaints upheld / partially upheld	-	-	4	-	27	28
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green	↑	100%	80%	93%	92%
04b) Total % of written responses to complaints within 15 days (Social Services)	Ambr / Amber	↓	67%	80%	57%	-
05) Number of Stage 1 Complaints for Social Services	-	-	15	-	44	51
06) Number of concerns (excluding Social Services)	-	-	19	-	62	112
07) Number of Compliments	-	-	147	-	513	753
08) % of FOI requests responded to within timescale	Gwyrdd / Green	↑	85%	80%	81%	78%
09) Number of FOI requests received	-	-	205	-	1052	919
Newid Cyfrwng Digidol / Digital Service Shift						
10) No of Registered Users on AppMôn / Website	-	↑	9.6k	-	8.2k	-
11) No of reports received by AppMôn / Website	-	↑	1.9k	-	4.7k	2k
12) No of web payments	-	↑	3.8k	-	-	-
13) No of telephone payments	-	↑	2k	-	-	-
14) No of 'followers' of IOACC Social Media	-	↑	30k	29.5k	29.5k	25k
15) No of visitors to the Council Website	-	↓	194k	-	-	-

Rheoli Pobl / People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 18/19 Result	Canlyniad 17/18 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2180			-
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-	-	1227	-	-	-
03a) Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	2.24	2.45	-	-
03b) Short Term sickness - average working days/shifts lost per FTE	-	-	0.87	-	-	-
03c) Long Term sickness - average working days/shifts lost per FTE	-	-	1.37	-	-	-
04a) Primary Schools - Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	2.49	2.75	-	-
04b) Primary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	0.88	-	-	-
04c) Primary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	1.61	-	-	-
05a) Secondary Schools - Sickness absence - average working days/shifts lost	Ambr / Amber	↓	2.11	1.92	-	-
05b) Secondary Schools - Short Term sickness - average working days/shifts lost per FTE	-	-	0.66	-	-	-
05c) Secondary Schools - Long Term sickness - average working days/shifts lost per FTE	-	-	1.44	-	-	-
06) Local Authority employees leaving (%) (Turnover) (Annual)	-	-	-	11%	11%	-
07) % of PDR's completed within timeframe (Q4)	-	-	-	80%	84%	90.50%

Rheolaeth Ariannol / Financial Management	CAG / RAG	Tuedd / Trend	Cyllideb / Budget	Canlyniad / Actual	Amrywiant / Variance (%)	Rhagolygon o'r Gwariant / Forcasted Actual	Amrywiant a Ragwelir / Forcasted Variance (%)
01) Budget v Actuals	Melyn / Yellow	-	£36,078,971	£36,230,418	0.42%	-	-
02) Forecasted end of year outturn (Revenue)	Coch / Red	-	£135,210,190	-	-	£136,809,905	1.18%
03) Forecasted end of year outturn (Capital)	-	-	£23,279,000	-	-	£18,481,000	-20.61%
04) Achievement against efficiencies	Melyn / Yellow	-	£2,735,000	-	-	£2,380,000	-12.98%
05) Income v Targets (excluding grants)	Gwyrdd / Green	-	-£2,723,899	-£3,115,152	14.36%	-	-
06) Amount borrowed	-	-	£2,184,000	-	-	£0	0.00%
07) Cost of borrowing	Gwyrdd / Green	-	£4,262,730	-	-	£4,260,516	-0.05%
08) % invoices paid within 30 days	Gwyrdd / Green	-	-	85.33%	-	-	-
09) % of Council Tax collected (for last 3 years)	Gwyrdd / Green	-	-	98.70%	-	-	-
10) % of Business Rates collected (for last 3 years)	Gwyrdd / Green	-	-	98.60%	-	-	-
11) % of Sundry Debtors collected (for last 3 years)	Melyn / Yellow	-	-	95.20%	-	-	-
12) % Housing Rent collected (for the last 3 years)	Melyn / Yellow	-	-	99.36%	-	-	-
13) % Housing Rent collected excl benefit payments (for the last 3 years)	-	-	-	98.65%	-	-	-