

# ISLE OF ANGLESEY COUNTY COUNCIL

<b>COMMITTEE:</b>	<b>CORPORATE SCRUTINY / EXECUTIVE COMMITTEE</b>
<b>DATE:</b>	<b>1.9.14 / 8.9.14</b>
<b>TITLE OF REPORT:</b>	<b>CORPORATE SCORECARD Q1</b>
<b>PORTFOLIO HOLDER:</b>	<b>COUNCILLOR ALWYN ROWLANDS</b>
<b>LEAD OFFICER:</b>	<b>DEPUTY CHIEF EXECUTIVE</b>
<b>CONTACT OFFICER:</b>	<b>BUSINESS PLANNING &amp; PROGRAMME MANAGER</b>
<b>PURPOSE OF REPORT:</b>	<b>FOR INFORMATION &amp; SCRUTINY OF SCORECARD</b>

## 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.

## 2. CORPORATE SCORECARD

- 2.1 The scorecard continues to develop and embed, reflecting those changes that have been undertaken to traditional systems and practices within the Council. To that end, this year's indicators included within the scorecard have been decided through a process of engagement and consultation with the Pennaethiaid, SLT, the Executive and Shadow Executive.

2.2 As a result, certain indicators will need further time for reporting processes to be fully embedded prior to all indicators being reported. It is anticipated that these processes will be embedded by Q2 of the current financial year.

2.2 The scorecard (Appendix 1) portrays the current end of quarter 1 position and will be considered further by the Executive Committee on the 8<sup>th</sup> September, 2014.

### 3. CONSIDERATIONS

3.1 This is the second year of collating and reporting performance indicators in a coordinated manner. The Council is starting to see trends establish themselves with regards to a number of those indicators.

3.2 It is important to note, that the formulation of this year's scorecard requested further trend analysis, a look back at previous year's performance and the acknowledgement of specific indicators in relation to the quartile positioning.

3.3 To date, such intelligence is not wholly gathered due to verification and validation of national indicators by Welsh Government over the summer months.

#### 3.4 PEOPLE MANAGEMENT

3.4.1 With regards to People Management however, it was noted at end of Q4 that our **sickness rates** (*indicator 1 on scorecard under people management*) portrayed a better position at the end of the year as compared to the previous year's results. 12.38 days compared to 14.45 days.

3.4.2 This improvement has continued at the end of Q1 with the result standing at **2.78** days lost due to sickness per FTE (see Table (i)). Whilst this is marginally above the corporate target of 2.5 days, this in comparison with last year's first quarter result of **3.4** days is a significant improvement across the Council.

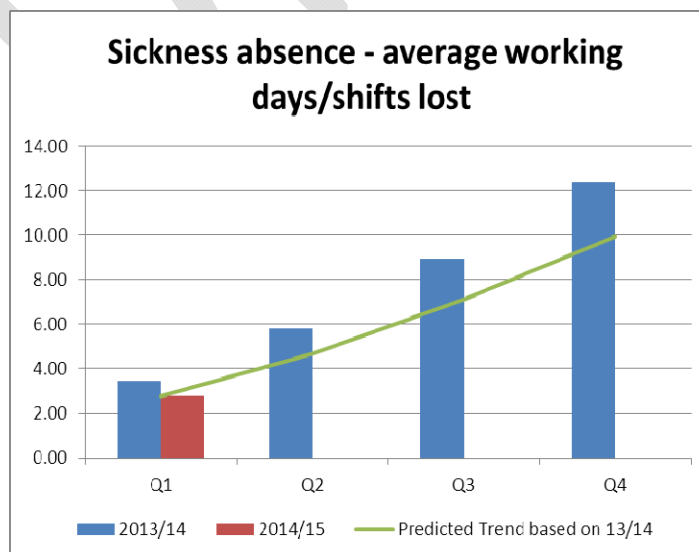


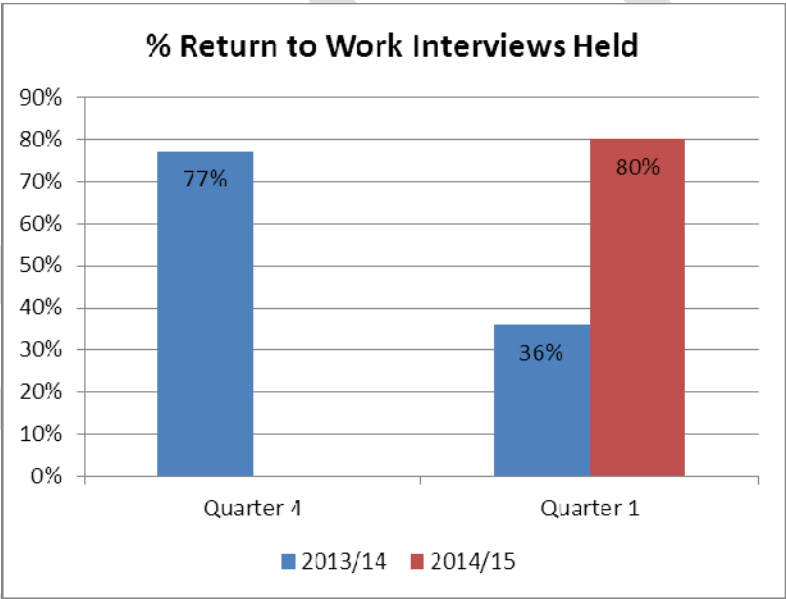
Table (i)

**3.4.3** Taking into consideration the comparator data outlined in the above table (i), if the Council continues to perform in accordance with 13/14 sickness trends it is forecasted that our end of year sickness rate would equate to **10.12** days per FTE which again would demonstrate a marked improvement on 13/14 figures.

**3.4.4** 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 include **return to work interviews** (*indicator 5 on scorecard*).

**3.4.5** The Council continues to embed this working practice across its services and employing a dedicated sickness coordinator has undoubtedly seen a corporate improvement since last year. This has been further embedded during the first quarter, with Return To Work (RTW) interviews increasing from a year end (13/14) position of 59% to approximately **80%** achieved during Q1 as indicated in Table (ii) below.

Table (ii)



**3.4.6** In relation to sickness absence figures – each service has been attributed a different sickness target based on historical sickness data / trends. These targets have been calculated in a way which makes targets more achievable and as a result meaningful to the Services as a whole. If all targets are met, the Council will meet its sickness absence target of 10 days per FTE.

**3.4.7** However, to date, the services who are performing over their service target are Resources, Children's Services and Council Business and further monitoring of these services during Q2 will be undertaken.

**3.4.8** Whilst the Council performs better as against its sickness target year on year, it is noted that the notional cost of sickness for Q1 is in excess of £500k.

- 3.4.9** Similarly, RTW interviews where improvements are needed from Q1 data are Children's Services (59%), Council Business (57%) and Economic and Community Regeneration (63%).
- 3.4.10** The Committee's attention is drawn to the RTW figures reported for the Learning Service which have improved significantly from the comparator data for Q1 of 13/14 (0%) with 87% of RTW interviews held during Q1 across the service (inclusive of school based data sourced).
- 3.4.11** As noted in Q4 (13/14) and again here at the end of Q1 (14/15) taking into consideration the improvements made it is acknowledged by the Senior Leadership Team that in order to continue with this overall improvement - there is a need to further embed good management processes and practices by learning from each other during 2014/15 so as to improve further on our sickness rates, costs and management as an Authority.

### **3.5 FINANCIAL MANAGEMENT**

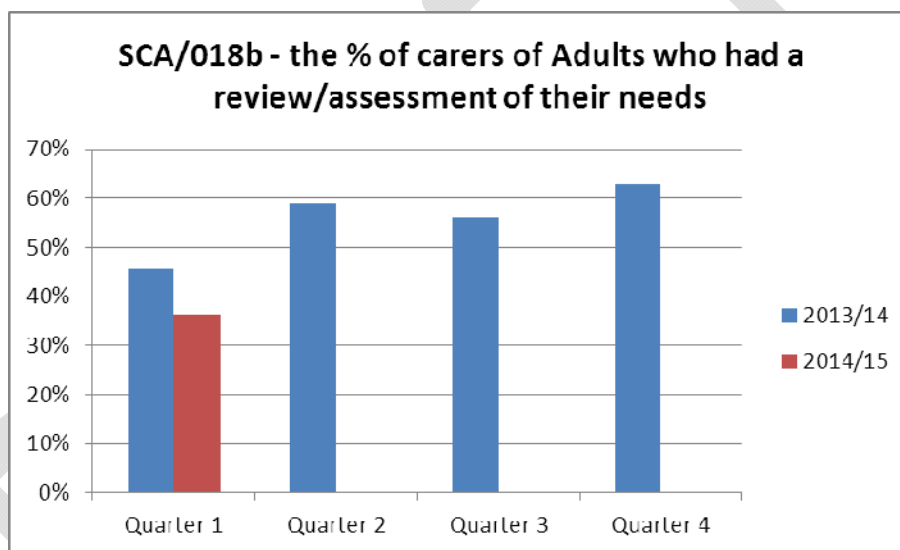
- 3.5.1** This is the first quarter since the inception of the scorecard where financial information has been collated and reported on. It is acknowledged that this report provides only a brief picture of the end of quarter position and that all indicators haven't been reported. Further detail can and will be gained from the quarter one financial monitoring report which will be available at the same meeting.
- 3.5.2** It is noted however, from the information reported that the service whereby there is a significant variance against profile in relation to 1<sup>st</sup> quarter spend is Resources. This is due to the number of external agency staff employed in order to ensure the completion of the statement of accounts and subsequent audit which is to be completed by the 30<sup>th</sup> September.
- 3.5.3** In addition, it is noted that Learning have considerably overachieved their Q1 income against target due to receipt of grants which haven't as of yet been profiled and that both Adults and Economic and Community Regeneration are underachieved against their quarterly income targets.
- 3.5.4** Whilst Adults underachievement is due to the demand driven nature of the provision, the Economic and Community Regeneration figures are based on current practise which are manually uploaded onto the system at end of quarter. By the end of Q3 this year, it is anticipated that these manual processes will have been substituted by electronic means which will provide a clearer and up-to-date picture of financial performance against income.
- 3.5.5** It is also noted within this report that the current end of quarter position as against our profiled spend v salary is an over-spend nearing £1million. This is in-keeping with our spend on agency staff which whilst totalling approx. £500k in the scorecard is also reflecting a commitment up until the end of Q2.
- 3.5.6** Whilst certain areas are of concern to the Senior Leadership Team the current quarter position will be scrutinised further over the summer months with a view of

identifying worrying trends and real concerns at end of Q2 so that mitigating measures can be put in place.

### 3.6 PERFORMANCE MANAGEMENT

3.6.1 With regards to the management of performance, two indicators within **Adult Services** show an underperformance –

3.6.1.1 (i) *03 - SCA/018b - the % of carers of Adults who had a review/assessment of their needs* which shows as **RED** on the scorecard. The result for quarter 1 of 36.4% is low compared to a total of 45.7% at the end of quarter 1 2013/14 and very low compared to the annual target of 70%. Of the 241 clients not yet assessed, 62 (26%) have refused an assessment and 179 (74%) are awaiting an assessment or review. Early indications show that this indicator is expected to improve during quarter 2, The welsh average for 12/13 was 38.7% (13/14 figures yet to be released).



3.6.1.2 (ii) *04 - SCA/018c – the % of carers of adults who were assessed or re-assessed in their own right during the year who were provided with a service* which also shows as **RED**. This indicator (62.3%) is currently underperforming against the target of 75% and is also underperforming against quarter 1 13/14 (69.7%),

3.6.2 The scorecard also draws attention to the underperformance of one of **Children's** indicators –

3.6.2.1 (i) *12 - SCC/043a – The % of required core assessments completed within 35 working days* which shows an overall underperformance against target and comparator data from Q1 in 13/14 (90.91%). This indicator was identified by the Service as underperforming at beginning of the quarter (40% during April) and positive actions were taken to improve its overall performance. Whilst

performing below target due to complexities of cases, it is acknowledged that following a positive start to 13/14 the overall performance dipped, which if not mitigated (as is currently the case) there is a risk for this year's out-turn to underperform.

**3.6.3** The other two indicators which at end of Q1 are demonstrating an underperformance is –

**3.6.3.1** (i) *19 - LCS/002b: The number of library materials issued, during the year per 1,000 population* which shows a 10% underperformance against target for the 1<sup>st</sup> quarter &

**3.6.3.2** (ii) *37 - The transformation of leisure project* which is to report on direction, activity and progress at the forthcoming service excellence programme board meeting at the end of September

**3.6.4** The scorecard this year highlights the performance of our waste service in collecting refuse from households across the island. It is drawn to the attention of the committee that whilst 53 missed bin collections have been recorded during Q1, this is in comparison with an overall figure of approx. 1.1million collections' island wide which equates to a missed bin collection rate of 0.005%.

**3.6.5** Other performance management indicators are operating within tolerances and as such are being monitored regularly by our corporate performance management arrangements with exceptions being brought to the attention of the Senior Leadership Team regularly.

**3.6.6** Having said that, further work is required to align working practices so that all indicators are communicated in a timely manner at end of quarter for a comprehensive understanding of our performance management to be gained through the committee structure. Those indicators where information needs to be collated are as follows –

**3.6.6.1** Education

**3.6.6.2** Outcome Agreement

**3.6.7** Discussions are on-going under leadership from the SLT to rectify these matters so that a comprehensive understanding of performance indicators can be gained in a timely manner so as to inform leaders of the Council's progress against all targets.

### **3.7 CUSTOMER SERVICE**

**3.7.1** Regarding Customer Management, improvement is noted in the number of complaints received against target. During Q1 only 12 complaints were received against an expectation of 16 and of these complaints 6 were either upheld or partially upheld, the remainder were unsuccessful. Again, this demonstrates a better position than 13/14 where in total 65 complaints were received.

**3.7.2** The management of complaints according the Q1 data demonstrates that they are acknowledged and responded to within timescale. If this trend continues then we'd anticipate seeing considerably less number of complaints received by the Council. This obviously depends on our overall management of arising issues and trying our utmost to become customer, citizen and community focused as noted in the Corporate Plan 2013-17.

**3.7.3** With regards to adopting a customer centred approach one area which Officers have demonstrated a difficulty in achieving target is that of responding to FOI requests within timeframe. These requests totalled 237 over Q1 (or 3.65 requests per working day) and included 1008 questions requiring a response. Of these there was an expectation that the Council required to respond to 166 requests (approx. 2.5 requests per day) over the period which demonstrates what could be a major resource implication for services if the rate continues or increases across the Council.

**3.7.3.1** The majority of these requests are made from –

3.7.3.1.1 The Media

3.7.3.1.2 Private Applicants

3.7.3.1.3 And other private companies

**3.7.3.2** Further and more detailed information can be gained from <http://www.anglesey.gov.uk/council-and-democracy/data-protection-and-foi/council-access-to-information-statistics/>

## **4.RECOMMENDATIONS**

**4.1** 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 –

4.1.1 Sickness management – the further embedding of management processes across the Council so that we learn from each other with the aim of reducing our sickness rates to a corporate target of 10 sickness days per FTE.

4.1.2 The collation of relevant performance management data in a timely manner to comprehensively inform Members and Senior Officers of the current state of play across all indicators.

4.1.3 The management of risks associated with underperforming areas of work which if ignored could and would become an issue for the day to day management of Council provision – the need to press ahead and clarify direction with regards to the transformation of both our library and leisure provision will be a priority.

4.1.4 Freedom of Information requests – a review of the processes associated with realising these requests.

**4.2** The Committee is asked to accept the mitigation measures associated with any area of concern outlined above so that they can be communicated to the Executive Committee at their meeting on 8<sup>th</sup> September, 2014.

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Corporate Scorecard - Quarter 1

Customer Service	Actual	Target	RAG	Trend	13/14 Result
01) No of Complaints received	12	16	Green	↑	65
02) No of Complaints upheld	6	4	Amber	↓	15
03) % of Complaints acknowledged within 5 working days	100%	100%	Green	-	-
04) % of written responses within 20 days	100%	100%	Green	-	-
05) Number of concerns	10	23	Green	↑	92
06) Number of compliments	112	-	-	-	-
07) No. of Ombudsman referrals upheld	0	0	Green	→	-
08) Mystery Shopper Scores 0-4 (Annual)	-	-	-	-	-
09) Mystery Shopper Scores 5-7 (Annual)	-	-	-	-	-
10) Mystery Shopper Scores 8-10 (Annual)	-	-	-	-	-
11) Average time taken to answer telephone (sec)	9	15	Green	→	-
12) % of telephone calls abandoned	13%	15%	Green	↑	-
13) % of correspondence acknowledged to within 5 working days (mystery shopper) (Annual)	-	-	-	-	-
14) % of correspondence repied to within 15 working days (mystery shopper) (Annual)	-	-	-	-	-
15) % of FOI Requests Responded to Within Timescale	57%	80%	Red	↓	-
16) Number of FOI Requests Responded to Within Timescale	86	-	-	-	-

People Management	Actual	Target	RAG	Trend	13/14 Result
01) Sickness absence - average working days/shifts lost	2.78	2.5	Amber	↑	12.38
02) No of staff with attendance of 100% (6 Months)	-	-	-	-	-
03) Short Term sickness	3214	-	-	-	16.5k
04) Long Term sickness	3314	-	-	-	12.3k
05) % of RTW interview held	80%	80%	Green	↑	59%
06) % of stress related sickness	8%	9%	Green	↑	10%
07) No. of occupational health referrals	83	-	-	-	362
08) No. or workplace injuries	47	79	Green	↑	315
09) No. of PDR's completed within timeframe (Qtr 2)	-	-	-	-	-
10) Number of staff authority wide, including teachers and school based staff (FTE)	2353	-	-	-	2366
11) Number of staff authority wide, excluding teachers and school based staff(FTE)	1399	-	-	-	1395
12) Local Authority employees leaving (%) (Turnover) (Annual)	-	-	-	-	-
13) Local Authority employees made redundant (compulsory)	17	-	-	-	-
14) No. of Agency Staff	24	-	-	↓	18
15) No of grant funded posts	122.5	-	-	↓	128.75
16) % of staff with email facility	54	-	-	↑	52

Financial Management	Spend (£)	Variance (%)	RAG	Trend	13/14 Result
01) Projected end of year position				-	-
02) Spend v Profile (Over spending) Resources	£1,203,225.00	26.28%	Red	-	-
04) Spend v Profile (Under spending) Learning	-£382,918.00	-37.22%	Amber	-	-
05) Achievement against efficiencies (over/under) Service 1	-	-	-	-	-
06) Achievement against efficiencies (over/under) Service 2	-	-	-	-	-
07) Achievement against efficiencies (over/under) Service 3	-	-	-	-	-
08) Income v Targets – (Under achieving) Adults Services	£161,606.00	11.49%	Amber	-	-
09) Income v Targets – (Under achieving) Economic & Community	£87,596.00	11.58%	Amber	-	-
10) Income v Targets – (Over achieving) Learning	-£1,460,593.00	106.27%	Red	-	-
11) Aged debt analysis across all categories of debt	-	-	-	-	-
12) Spend v Salary (£) Over + / under spending (-)	£945,342.00	-	-	-	-
13) Spend v Salary (% of Total Budget)	£37,824,760.00	-	-	-	-
14) Cost of agency staff (£'000)	£553,874.00	-	-	-	-
15) Cost of sickness absence – direct & indirect (Notional cost)	£559,345.04	-	-	-	-
16) Grants Income – Welsh Government	-	-	-	-	-
17) Grants Income - European	-	-	-	-	-
18) Grants Income – Other	-	-	-	-	-

Corporate Scorecard - Quarter 1

Performance Management	Actual	Target	RAG	Trend	Quartile	14/15 Target	13/14 Result
01) SCA/002a: The rate of older people (aged 65 or over) supported in the community per 1,000 population aged 65 or over at 31st March	54.72	55	Green	↑	-	55	-
02) 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	18.10	19	Green	→	-	19	18.16
03) SCA/018b: The percentage of carers of adults who had an assessment or review of their needs in their own right during the year	36.4	70	Red	↓	-	70	63.2
04) SCA/018c: The % of carers of adults who were assessed or re-assessed in their own right during the year who were provided with a service	62.3	75	Red	↓	-	75	73.9
05) SCA/019: The % of adult protection referrals completed where the risk has been managed	100	90	Green	↑	-	90	88.9
06) SCC/004: The percentage of children looked after on 31 March who have had three or more placements during the year	0	8	Green	↑	-	8	7.79
07) SCC/011a: The % of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker	98.57	100	Green	↑	-	100	92.22
08) SCC/042a: The % of initial assessments completed within 7 working days	98.57	85	Green	↑	-	85	90.86
09) SCC/014: The % of initial child protection conferences due in the year which were held within 15 working days of the strategy	96.43	100	Green	↑	-	100	92.66
10) SCC/025: The % of statutory visits to looked after children due in the year that took place in accordance with regulations	96.94	100	Green	↑	-	100	90.54
11) SCC/041a: The percentage of eligible, relevant and former relevant children that have pathway plans as required	90	100	Amber	↑	-	100	77.78
12) SCC/43a: The % of required core assessments completed within 35 working days	70.27	85	Amber	↓	-	85	71.68
13) HHA/002 The average number of days between homeless presentation and discharge of duty for households found to be statutorily homeless	286	600	Green	↑	-	600	531
14) HHA/017a The average number of days all homeless families with children spent in bed and breakfast.	10.5	42	Green	↓	-	42	90.8
15) HHA/017b the average number of days that all homeless households spent in other forms of temporary accommodation	260.4	650	Amber	↑	-	650	621.6
16) LCL/001b: The no. of visits to public libraries during the year, per 1,000 per population	69k	70k	Amber	↓	-	281k	219k
17) LCL/004: The no. of library materials issued, during the year per 1,000 population	72k	80k	Red	↓	-	310k	309k
18) No. of attendances (young people) at sports development / outreach activity programmes	36k	31k	Green	↑	-	-	-
19) 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, per 1,000 population	162k	142k	Green	↑	-	611k	614k
27) THS/011c: The % of non-principal (C) roads that are in an overall poor condition	17.6	TBD	Amber	→	-	TBD	17.6
28) Jobs Created	20	8	Green	-	-	25	41
30) The number of actual missed bin collections	53	120	Green	↓	-	-	152
32) HLS/010c: Average number of days to complete routine void repair	7.2	30	Green	-	-	30	19.3
31) PLA/004c: The percentage of householder planning applications determined during the year within 8 weeks	92	85	Green	-	-	-	-
35) School Modernisation Programme	-	-	Green	-	-	-	-
36) Older Adult Social Care Programme	-	-	Green	-	-	-	-
37) Leisure Project	-	-	Red	-	-	-	-
38) Library Project	-	-	Amber	-	-	-	-
39) Adoption and compliance with a timetable for close of accounts and production of Statement of Accounts	Yes	Yes	Green	-	-	Yes	Yes
22) No. of Permanent Exclusions	0	0	Green	-	-	0	0
20) Attendance - Primary (%)	-	-	-	-	-	94.5	-
21) Attendance - Secondary (%)	-	-	-	-	-	93.3	93.4
23) No. of days lost to temp exclusion - Primary	-	-	-	-	-	-	-
24) No. of days lost to temp exclusion - Secondary	-	-	-	-	-	-	-
25) KS4 - % 15 year olds achieving L2+	-	-	-	-	-	56	54.2
26) KS4 - % 15 year olds achieving L1	-	-	-	-	-	-	-
29) No of new apprenticeships under 'Prentisiaeth Menai'	-	-	-	-	-	-	-
33) % of repairs (BMU) completed first time	TBD	-	-	-	-	-	-
34) Outcome Agreements	-	-	-	-	-	-	-