

Report of the Chief Executive

# Performance Monitoring 2018/19 – Quarter One Results

### SUMMARY

- 1.1 This report includes highlights from key performance measures in the Council Plan 2016-19 and departmental business plans. These priority measures form the Council Scorecard for 2018/19 and ensure that CLT and councillors are aware of key performance issues and outcomes.
- 1.2 At the end of quarter one (30 June 2018), 69% of performance measures in the Council Scorecard are forecast to meet or exceed their year-end target; with 46% achieving their quarter one target. Results are RAG rated, according to their performance against improvement targets. The Council Scorecard Performance Dashboard is shown in **Appendix 2**.
- 1.3 Key achievements noted at quarter one include:
  - There's been a reduction in the number of children and young people in the city with a child protection plan; with families supported to positive outcomes where possible.
  - Delayed transfers of care from hospital continue to perform strongly, exceeding many of our peers.
  - Projects in City Development and Growth have supported 96 businesses in Derby between April and June 2018.
  - Levels of sickness absence remain high but a gradual fall continues, reflecting the impact of the new Health and Wellbeing Strategy.
- 1.4 Accountable officers have provided commentary to put performance into context and identify actions that they are taking to improve performance (**see Appendix 3**).

### RECOMMENDATIONS

- 2.1 To note the 2018/19 quarter one performance results, recognising the achievements set out in paragraphs 4.12 to 4.17.
- 2.2 To give particular attention and follow-up to the indicators highlighted in the Improvement Report at Appendix 3.

2.3 To note that the Executive Scrutiny Board reviews performance on a regular basis, with the programme for 2018/19 set out in paragraph 4.27, and the Board may also select indicators for Performance Surgery on the basis of this report.

# **REASON FOR RECOMMENDATIONS**

3.1 Performance monitoring underpins the Council's planning framework to ensure we review progress regularly and then achieve our priorities and deliver value for money. The Scorecard reflects key performance / budget risks that Corporate Leadership Team, senior colleagues and councillors need to review regularly. Early investigation of variances enables prompt remedial action to be taken when needed.

# SUPPORTING INFORMATION

### Background

- 4.1 The **Council Plan 2016-19** has a vision for a 'Derby 2030: a safe strong and ambitious city', supported by eight cross-cutting priority outcomes that reflect both statutory requirements and key 'risk / demand' areas.
- 4.2 In August 2018, Council Cabinet published the **Council Delivery Plan**, which describes how the Council Plan 2016-19 will be put into practice over the next year; through the new Administration's priorities, actions and measures. Progress on the Council Delivery Plan will be reported on every six months, with the first update to be reported at the end of quarter 2 (September 2018).
- 4.3 The **Council Scorecard** contains key measures from the Council Plan and supporting Delivery Plan, which describes how the Council Plan priorities are being put in to practice. Currently, and for the last few years, the scorecard has been structured around the priorities in the Council Plan 2016-19:
  - Safe
  - Strong
  - Ambitious
  - Resilient
- 4.4 The scorecard was refreshed for 2018/19 and measures were selected according to the following criteria:
  - measure is linked to an area of significant budget pressure / income source
  - a reflection of demand for services
  - key inspection / reputational / compliance risk area
  - measure links to a commitment in the latest edition of the Council Plan, and also meets at least one of the criteria above.

- 4.5 The updated scorecard contains 46 measures, which give CLT and councillors a consistent view of performance in some of the high risk and / or priority areas. Proposals for the scorecard were approved at Cabinet on 18 July 2018 but will be subject to regular review to identify any other high risk areas / measures which meet the above criteria, in particular to ensure alignment with the Delivery Plan. Targets will also be reviewed as part of this process.
- 4.6 However, one measure has been removed from the Council Scorecard, following approval by Cabinet in July 2018 (FPA PM21 Unqualified Audit Opinion), as this is measured through FPA 22a and 22b.
- 4.7 The traffic light system used to assess performance against the targets set is shown below.

Colour	Status	Measure
Blue	Completed	Performance above 2% of target
Green	On track	Performance meets target
Amber	Minor slippage	Performance within 5% of target
Red	Major slippage	Performance more than 5% adverse of
		target

## Council Scorecard Monitoring – 2018/19 Quarter One

- 4.8 A summary dashboard for the Council Scorecard is shown in **Appendix 2**. An improvement report is presented in **Appendix 3**, which contains details of the current actions being taken to address areas that are not in line with expected performance. The results and supporting commentary for all measures contained within the Council Scorecard are at **Appendix 4**.
- 4.9 The quarter one position shows that:
  - 69% of measures are forecast to meet or exceed the year-end target
  - 46% of measures have achieved their quarterly target
  - 50% of measures are forecast to improve compared to last year.

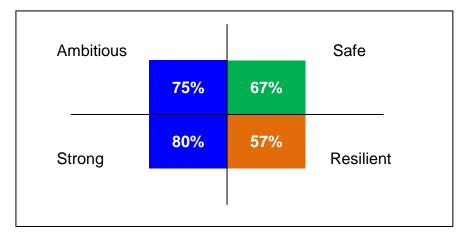
4.10 Summary performance results for all priority measures included in the Council Scorecard are as follows:

Traffic Light Status	Q1 actual v Q1 target	Forecast against year-end target	2017/18 Performance
Green / Blue – met or exceeded target	46%	69%	54%
Amber - missed target by up to 5%	11%	14%	33%
<b>Red</b> - missed target by more than 5%	43%	17%	13%

Direction of Travel	Forecast v previous year outturn	2017/18 v 2016/17
<b>↑</b> Better	50%	33%
→ Same / planned reduction	38%	20%
↓ Lower	12%	47%

Note: The comparative figures in previous years will relate to a different set of performance measures as the scorecard is reviewed and refreshed annually.

4.11 The percentage of measures that are forecasted to meet or exceed the 2018/19 target, for each priority within the Council Scorecard, is as follows.



**Key Areas to note – Improving Performance** (where the quarterly target has been exceeded / year-end target is forecast to be exceeded)

4.12 **Regen PM22 - Number of businesses supported**. Projects managed by the City Development and Growth department supported 96 local businesses in Q1 and the target of 200 for the year should be exceeded.

- 4.13 **CPM24a Average time taken to process change of circumstances for Housing Benefit**. Claims are being processed faster than last year, and it is hoped this will improve further as some sickness issues in the teams are resolved. However, performance on new claims (CM PM24) is below target. This is also forecasted to improve by the end of 2018/19; as sickness issues are addressed.
- 4.14 AHH 02Cb Delayed transfers of care from hospital (social care responsibility). The data shows that Derby has one of the most effective partnerships in the country at getting people out of hospital and into an appropriate setting. Performance continues to be strong, and should be within the targets set under the Better Care Fund, although these targets are subject to regular review across partners. High demand does, however, remain a key pressure, and has been identified as a risk to performance.
- 4.15 **IC PM06 Number of households assisted through the Healthy Housing Hub.** 184 households were assisted with repairs, improvements, adaptations and advice in Q1, which is on course to achieve a higher level than last year. The Hub provides low cost interventions to prevent the need for more costly health and social care. Evaluation carried out by Public Health evidences that it is effective in reducing the need for acute services and helping people stay independent.
- 4.16 EIISS PM04 Number of children on a Child Protection Plan (CPP). The number of children and young people with a CPP has reduced from a peak of 569 six months ago to 486 at 30 June 2018. Positive outcomes have been achieved in many cases, with risks reduced and cases stepped down. Where this has not been possible, appropriate actions have been taken to keep children and young people safe. Weekly demand management meetings, chaired by the SD People Services; alongside our 'business as usual' performance and quality assurance processes, are making sure that we are actively monitoring demand, threshold and outcomes; focusing on the experiences of our children and young people.
- 4.17 El 12/El 3 Percentage of children and young people's early help cases where progression tools show an improving direction of travel after support has been provided. Over the first 3 months of 2018/19, 96% of children and young people and their families that have received an early help service have been supported to positive outcomes. This is in addition to the young people that are supported through targeted Group Work in Schools, with 350 children and young people accessing a variety of group work in the last term of 2017/18 (up to the end of July 2018).

**Key areas to note – Deteriorating Performance** (where the target is also forecast to be missed at year end)

- 4.18 **SEND6 (L&I PM26a) Education and Health Care Plans (EHCPs) issued within 20 weeks**. Performance between April 2018 and June 2018 was affected by the focus on converting Statements to EHCPs to meet the statutory deadline of March 2018 (given the 20 week period overlaps the quarterly time span). As at 31 March, there were 206 cases undergoing EHCP assessment. Now the conversions work is complete, it is expected that performance for issuing new plans will improve towards the target level during quarter two (75% of plans issued within 20 weeks) although it is noted that the team is not yet at full capacity. An update on SEND was considered by Executive Scrutiny in July 2018 and a Performance Surgery will be hosted by the end of 2018/19. Actions being taken to support improved performance include:
  - restructuring responsible teams, which includes recruiting to vacant posts
  - the implementation of strengthened IT systems to improve tracking of cases in the 'assessment' and 'plan' stages.

Performance within this area is subject to routine monitoring by the directorate-led SEND Improvement Board, which meets monthly.

- 4.19 **EaRS PM53 Return to work interviews conducted within three working days**. Although there has been a small improvement since last year, fewer than two thirds of interviews were completed and recorded within target timescale. Senior managers, with support from the Health and Wellbeing Team, will continue to focus on this area as a tool to better understand and appropriately reduce staff sickness. Sickness absence levels have slightly improved compared to the same quarter last year, but the year-end forecast remains above the challenging target. Actions to improve this are contained within the Sickness Absence Improvement Plan, which is monitored routinely by Corporate Leadership Team (CLT).
- 4.20 **L&D PM07b Average time to issue a Local Land Charges search.** This measure was added to the Scorecard this year to reflect the Government's aim that customers should not wait longer than 10 days for a search, in order to speed up housing transactions. Current capacity challenges have impacted on performance (17.2 days at Q1), but resource and training requirements for the team are being reviewed to support improvements.
- 4.21 AHH 02D Adult social care clients, who received short term support, who then required no other services. This measure is an assessment of the effectiveness of our "front door services" in preventing the need for further costly interventions. Current performance is slightly below both the comparable 2017/18 result and the target. There have been improvements in data quality, ensuring accuracy in the position presented, and a planned Peer Assessment in October 2018 will consider both compliance and the quality of support in this area.

- 4.22 AHH Local 2A(i) Long term/permanent admissions to care for younger adults. Although above target, there were just six admissions in the last quarter, so individual cases can affect this measure considerably. It is too soon to predict whether overall admissions will be above or below the 2017/18 level. Work will continue to appropriately support independence, where possible.
- 4.23 **L&I PM23e Percentage of children's homes that are Good or Outstanding**. There are two out of our five homes judged as 'requiring improvement' and one assessed as 'inadequate'. Improvement plans are in place for all these homes and lead officers are in regular communication with Ofsted on the progress that is being made in securing improvements, focusing on making sure that we are meeting the outcomes of any children living there. Ofsted have subsequently revisited the home judged as inadequate, and confirmed that all issues have been fully addressed. We anticipate a full re-inspection of this home in due course.
- 4.24 **SS PM07 Children in care**. There were 494 children in care at the end of June 2018, which is the highest end-of-quarter figure for the last eight years. Rigorous quality assurance and management oversight have given assurance that we are taking children into care only when necessary to keep them safe. Targeted work is progressing through weekly demand meetings, chaired by the Strategic Director People Services; however the priority will remain on ensuring that children and young people are safe. A rise in demand and challenges on the sufficiency of placements means that we continuing to place a high number of children in care in Independent Fostering Agency placements (**SS PM23b**). This is also considered and challenged through the demand meetings, and work remains ongoing to progress soft market testing on fostering arrangements.
- 4.25 **YA&H PM08 New affordable homes completed.** The eight units forecast to be completed in Q1 slipped, but one additional unit was brought in. Although the forecast is to be on track by year-end, this measure has been highlighted as historically prone to slippage, as it relies on the actions of third parties, whether they are developers, contractors or housing associations.

# **Business Plans**

4.26 All performance measures and objectives within business plans are monitored on DORIS and reported to Directorate Management Teams. Full business plan reports are available by Directorate and Department for Q1 on DORIS (the Council's Performance Management System).

# **Performance Review**

4.27 The following measures are scheduled for review by Executive Scrutiny Board during 2018/19:

Month	Theme	Council Scorecard Measures
September	Update on	No measures

Month	Theme	Council Scorecard Measures
2018	Leisure and Culture projects	
October 2018	Corporate Peer Challenge – progress since review in June 2017	<ul> <li>CP 08f Average working days lost to sickness per FTE employee (excluding schools)</li> </ul>
		<ul> <li>FPA PM22a Unqualified audit opinion on last year's statement of accounts</li> </ul>
		<ul> <li>FPA PM22b Positive Value for Money opinion from external auditors on last year's statement of accounts</li> </ul>
November 2018	Managing demand in People Services	<ul> <li>AHH Local 2A(i) - Adults (18 to 64) admitted on a long term or permanent basis to residential or nursing care (per 100,000 population)</li> </ul>
		<ul> <li>AHH Local 2A2(ii) - Adults (65 and over) admitted on a long term or permanent basis to residential or nursing care (per 100,000 population)</li> </ul>
		<ul> <li>AHH 02cb - Delayed transfers of care from hospital, Social Care Delays only.</li> </ul>
		<ul> <li>AHH 02b - Achieving independence for older people through rehabilitation/intermediate care (still independent 91 days after discharge)</li> </ul>
		<ul> <li>EI12 / EI3 - Percentage of children and young people's early help cases where progression tools show an improving direction of travel after support has been given</li> </ul>
		<ul> <li>EIISS PM04 (SS PM04) - Children who are the subject of a child protection plan, per 10,000 population aged under 18 (Snapshot)</li> </ul>
		<ul> <li>SS PM07 - Children in Care per 10,000 population aged under 18 (EIISS PM05)</li> </ul>
		<ul> <li>SS PM23b - Percentage of children placed with Independent Fostering Agencies (IFA)</li> </ul>
December 2018	Inspections update – JTAI,	<ul> <li>SEND 6 (L&amp;I PM26a) - % of NEW EHCPs issued in 20 weeks</li> </ul>
	ILACS, YOS, SEND and Adults peer review	<ul> <li>EI12 / EI3 - Percentage of children and young people's early help cases where progression tools show an improving direction of travel after support has been given</li> </ul>
		<ul> <li>EIISS PM04 (SS PM04) - Children who are the subject of a child protection plan per 10,000 population aged under 18 (Snapshot)</li> </ul>
		<ul> <li>SS PM07 - Children in Care per 10,000 population aged under 18 (EIISS PM05)</li> </ul>
		<ul> <li>SS PM23b - Percentage of children placed with Independent Fostering Agencies (IFA)</li> </ul>
		- SS PM25 - Percentage of children who wait less than 16 months between entering care and moving in with their adoptive family
		- AHH 02D - % of new Adult Social Care clients who

Month	Theme	Council Scorecard Measures
		received short term support, who then required no other services
January 2019	-	<ul> <li>DH Local 01 / BV 66b - Rent arrears of current tenants as a % of rent roll</li> </ul>
		<ul> <li>DH Local 142 - Total number of cases resolved under 'prevention duty'</li> </ul>
		<ul> <li>DH Local 143 - Total number of cases resolved under 'relief duty'</li> </ul>
February 2019	•	<ul> <li>CP 08f - Average working days lost to sickness per FTE employee (excluding schools)</li> </ul>
		<ul> <li>EARS PM53 - Percentage of sickness incidents where a return interview has been completed within three working days</li> </ul>

4.28 In addition, there will be a Performance Surgery in SEND by the end of March 2019.

# OTHER OPTIONS CONSIDERED

5.1 Not applicable.

This report has been approved by the following colleagues:

Legal	Head of Legal	
Finance	Strategic Director of Corporate Resources	
Human Resources Service Director(s)		
Other(s)	Head of Performance and Intelligence	
	Equality and Diversity Lead	
For more information contact:	Natalie Tuckwell 01332 643465 natalie.tuckwell@derby.gov.uk	
	Sarah Walker 01332 646366 sarah.walker@derby.gov.uk	
Background papers:		
List of appendices:	Appendix 1 – Implications	
	Appendix 2 – Council Scorecard Dashboard	
	Appendix 3 – Q1 Improvement Report	

# IMPLICATIONS

#### **Financial and Value for Money**

1.1 The report shows how the Council is delivering value for money against its Council Plan objectives, customer standards and performance measures.

### Legal

2.1 None directly arising.

### Personnel

3.1 The performance framework includes indicators which monitor aspects of the workforce, for example, sickness absence.

## IT

4.1 None directly arising.

#### **Equalities Impact**

5.1 The performance framework includes indicators which monitor the impact of Council initiatives on diverse groups.

#### Health and Safety

6.1 None directly arising.

#### **Environmental Sustainability**

7.1 None directly arising.

#### **Property and Asset Management**

8.1 None directly arising.

#### **Risk Management and Safeguarding**

9.1 The report demonstrates the progress being made towards performance measures that have missed target, and outlines the implications and actions to be taken in the appendices.

### Corporate objectives and priorities for change

10.1 The report demonstrates progress made towards achieving the Council's priority outcomes as published in the Council Plan.