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## Overview and Scrutiny Board

**Subject Heading:**

Quarter 1 Overview and Scrutiny Board Performance Report (2018/19)

**SLT Lead:**

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**Policy context:**

The report sets out Quarter 1 performance reporting as requested by the Overview and Scrutiny Sub-Committees

**Financial summary:**

There are no direct financial implications arising from this report. However adverse performance against some performance indicators may have financial implications for the Council.

All service directorates are required to achieve their performance targets within approved budgets. The Senior Leadership Team (SLT) is actively monitoring and managing resources to remain within budgets, although several service areas continue to experience financial pressure from demand led services.

**Is this a Key Decision?**

No

**Is this a Strategic Decision?**

No

**When should this matter be reviewed?**

A number of the Overview and Scrutiny Sub-Committees are in the process of reviewing the performance indicators they monitor. Reporting to the Overview and Scrutiny Board will also need to be reviewed in due course to reflect the outcomes of this activity. The corporate performance reporting framework will also be reviewed during 2018/19.

**The subject matter of this report deals with the following Council Objectives**

Communities making Havering	[X]
Places making Havering	[X]
Opportunities making Havering	[X]
Connections making Havering	[X]

### **SUMMARY**

1. The Corporate Performance Report which is presented to the Cabinet on a quarterly basis provides an overview of the Council's performance against each of the strategic goals set out in the Corporate Plan. Historically, the Overview and Scrutiny Board also scrutinised this data however, in 2017/18, the Board decided instead to scrutinise a selection of more operational performance indicators, determined by the six overview and scrutiny sub-committees. For Quarter 1 performance reporting, these indicators have been carried forward into 2018/19 and this report provides an overview of how the Council is performing against them. Greater detail is provided in the six sub-committee reports.
2. The Children and Learning Overview and Scrutiny Sub-Committee selected a larger number of indicators (17) for tracking in 2017/18, three of which were selected for reporting to the Overview and Scrutiny and have been included in this report. For 2018/19, the Sub-Committee has selected a new suite of indicators (8 in total):
  - Percentage of early years providers judged to be good or outstanding
  - Percentage of schools judged to be good or outstanding
  - Percentage of children in good or outstanding schools
  - Number of children missing from education at month end (average)

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- Percentage of child protection visits carried out within the statutory timescale
- Number of children missing from care, missing from home or away from placement without authorisation
- Number of new in-house foster carers recruited
- Number of adopters approved

Members of the Board are asked to consider which of these it would like included in future reports to the Board.

3. Several other Overview and Scrutiny Sub-Committees are likewise in the process of reviewing the performance indicators they track, so there is likely to be further changes to the suite of indicators reported to the Overview and Scrutiny Board as the year progresses.
4. Following a trial without them during 2017/18, tolerances around targets (and therefore the amber RAG rating) have been reinstated for 2018/19 performance reporting. Performance against each performance indicator has therefore been classified as follows:
  - **Red** = outside of the quarterly target and outside of the agreed target tolerance, or 'off track'
  - **Amber** = outside of the quarterly target, but within the agreed target tolerance
  - **Green** = on or better than the quarterly target, or 'on track'
5. Where performance is rated as '**Red**', '**Corrective Action**' is included in the report. This highlights what action the Council will take to improve performance.
6. Also included in the report are Direction of Travel (DoT) columns, which compare:
  - Short-term direction of travel – compared with performance the previous quarter (Quarter 4 2017/18)
  - Long-term direction of travel – compared with performance the same time the previous year (Quarter 1 2017/18)

A green arrow (↑) means performance is better and a red arrow (↓) means performance is worse. An amber arrow (→) means that performance has remained the same.

**Quarter 1 Summary**



7. In total, 22 Performance Indicators have been included in the Quarter 1 2018/19 report. Of these, 16 have been assigned a RAG status.
8. In summary, of those PIs with a target set against them:
  - 4 (25%) have a RAG status of **Green** (on target).
  - 4 (25%) have a RAG status of **Amber** (off target but within the agreed tolerance)
  - 8 (50%) have a RAG status of **Red** (off target and outside the agreed tolerance).

**RECOMMENDATIONS**

That Members of the Overview and Scrutiny Board:

- 1) **Review** the performance set out in **Appendix 1** and the corrective action that is being taken to improve this where necessary.
- 2) **Agree** which indicators from the suite of eight selected by the Children and Learning Overview and Scrutiny Sub-Committee for monitoring in 2018/19 are to be included in future reports to the Board.

**REPORT DETAIL**

**1. Highlights:**

- Contractor liaison with residents during regeneration work is on track. Since establishing the joint venture company in April 2018, Wates has undertaken “Meet the Developer” consultation meetings, which 126 residents and neighbours of the estates in Phase One of the programme attended. To date, regeneration consultation meetings have involved 1,482 residents across the 12 sites. The programme has also been supported by newsletters, website updates and features in local publications.
- The rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+) is below target (where lower is better) and has improved. At the end of Quarter 1, there had been 49 new admissions of service users over the age of 65 into long term care homes, compared to 50 at the same point in 2017/18.
- The average number of days taken to remove fly-tips is below target (where lower is better), and is better than both the previous quarter and the same period last year.
- The total number of in-house foster carers has increased compared to last quarter and last year and is on track to achieve the target of 90 by financial year end. Work is ongoing to recruit high quality foster carers through the Face to Face Pathways Programme. Marketing is being targeted at the caring professions (e.g. teachers, nurses and social workers), certain faith communities and prospective carers who are prepared to look after older children, in order to increase the diversity of foster carers and reflect the profile of children needing care.

**2. Improvements required:**

- 67.3% of Stage 2 complaints relating to services within the remit of the Towns and Communities Overview and Scrutiny Sub-Committee were responded to within 20 days against a target of 95%. Performance has therefore declined compared to last quarter (when 86.4% were responded to within the target timescale). Targets relating to Stage 2 complaints can be missed due to the extreme complexity of some complaints. Some cases have been historic and require review of files dating back many years, and / or liaison with external agencies. All Stage 2 complaints are investigated fully and with complete transparency, so as to achieve resolution to the matter for the customer without the need to escalate it further, to Stage 3 of the council’s procedure or the Ombudsman. Where responses are delayed, case officers maintain regular contact with complainants.
- The percentage of housing repairs completed within the target timescale is below target and has declined compared with the previous quarter. A service improvement action plan has been put in place by the responsive repairs maintenance contractor. The action plan is monitored and scrutinised at regular review meetings that have been arranged specifically for this purpose, in addition to the normal contractual and partnership

meetings. The contractor's improvement plan will be reviewed to identify any further changes that could be implemented to improve performance against this KPI.

- The percentage of priority calls responded to by the police within the target timescale is below target and is worse than reported at the end of the previous financial year. Fewer "immediate" (I) calls in Havering were responded to within the target timescale than in the two other boroughs in the East Area Borough Command Unit. However, local performance in relation to "significant" (S) calls was better than in the other boroughs. Demand has especially increased in relation to Fast Road Calls and calls relating to domestic abuse. The borough also experienced various critical incidents during Quarter 1 which impacted on resourcing levels and therefore response times.
  - The number of instances where an adult patient was ready to leave hospital for home or move to a less acute stage of care but was prevented from doing so, per 100,000 population (delayed transfers of care) was slightly above target in Quarter 1, and higher than at the same point last year. During the first three months of the year, there was an average of 15 delays to discharges per month, whereas over the same period last year there was an average of 10. The vast majority of delays are in the acute sector and are the responsibility of Health partners.
  - As at the end of Quarter 1, the amount of waste per head of population presented to the East London Waste Authority (ELWA) was above target and higher than for the same period last year. Various waste prevention campaigns continue to be delivered and the council is reviewing its own operations (especially within Highways and Grounds Maintenance) in order to reduce waste generation. Reducing tonnages remains challenging however as it is largely reliant on attitudinal and behaviour change amongst residents.
3. The full Quarter 1 performance report is attached as **Appendix 1**.

**REASONS AND OPTIONS**

**Reasons for the decision:** To provide Overview and Scrutiny Board Members with an update on the Council's performance during Quarter 1 of 2018/19.

**Other options considered:** N/A

**IMPLICATIONS AND RISKS**

**Financial implications and risks:**

There are no financial implications arising from this report. Whilst it is expected that targets will be delivered within existing resources, it should be noted that adverse performance against some indicators may have financial implications for the Council. However, officers regularly review the level and prioritisation of resources required to achieve the targets agreed by Cabinet at the start of the year.

Robust ongoing monitoring is undertaken as part the established financial and service management processes and the Senior Leadership Team (SLT) is actively monitoring and managing resources to remain within budgets, although several service areas continue to experience significant financial pressures in relation to a number of demand led services such as housing and children's services and adults' social care. SLT officers are focused upon controlling expenditure within approved directorate budgets and within the total General Fund budget through the delivery of savings plans and mitigation plans to address new pressures that are arising within the year.

**Human Resources implications and risks:**

There are no Human Resources implications or risks arising directly from this report.

**Legal implications and risks:**

Whilst reporting on performance is not a statutory requirement, it is considered best practice to review the Council's progress against the Corporate Plan and Service Plans on a regular basis.

**Equalities implications and risks:**

The following performance indicators currently rated as 'Red' could potentially have equality and social inclusion implications for a number of different social groups if performance does not improve:

- % of housing repairs completed within the target timescale
- % of "I" calls responded to within target
- % of "S" calls responded to within target
- Obese children (4-5 years)
- The number of instances where an adult patient is ready to leave hospital for home or move to a less acute stage of care but is prevented from doing so, per 100,000 population (delayed transfers of care)

The commentary for each indicator provides further detail on steps that will be taken to improve performance and mitigate these potential inequalities.

**BACKGROUND PAPERS**

The Corporate Plan is available on the Council's website at:

[https://www.havering.gov.uk/downloads/download/575/corporate\\_and\\_service\\_plans](https://www.havering.gov.uk/downloads/download/575/corporate_and_service_plans)



## Overview & Scrutiny Board Performance Report: Quarter 1 2018/19

Corporate Performance Indicator
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RAG Rating	Direction of Travel (DOT)
GREEN On or better than target On track	↑ <b>Short Term:</b> Performance is better than the previous quarter <b>Long Term:</b> Performance is better than at the same point last year
AMBER Worse than target but within target tolerance	→ <b>Short Term:</b> Performance is the same as the previous quarter <b>Long Term:</b> Performance is the same as at the same point last year
RED Worse than target and outside tolerance Off track	↓ <b>Short Term:</b> Performance is worse than the previous quarter <b>Long Term:</b> Performance is worse than at the same point last year

Sub-committee	Indicator and Description	Value	2018/19 Annual Target	2018/19 Q1 Target	Tolerance	2018/19 Q1 Performance	Short Term DOT against Q4 2017/18	Long Term DOT against Q1 2017/18	Comments		
Towns and Communities	No. of Stage 1 complaints received	Smaller is better	N/A	N/A	N/A	192	↑	764	↑	210	<p>The Towns &amp; Communities OSSC has requested complaints performance data for the services within its remit. 117 out of 131 (89%) of non-ASB related Stage 1 Housing complaints were closed within 15 days in Quarter 1. 59 out of 65 (91%) Stage 1 complaints relating to Housing repairs were closed within 15 days. Whilst the timeliness of responses to Stage 1 Housing repairs complaints is below target (95%), performance has significantly improved compared with the same period last year (56%).</p> <p>During Quarter 1, there were also 49 Stage 2 complaints that fell within the remit of the Towns and Communities OSC. Of these, 33 were closed on time, resulting in the outturn being significantly below target.</p> <p>Issues contributing to below-target performance include:</p> <ul style="list-style-type: none"> <li>- The Housing Complaints Team lost two experienced officers in Quarter 1 which impacted overall performance. The team has successfully recruited to these roles in Quarter 2. Once training is completed, an increase in performance is expected in Quarters 3 and 4.</li> <li>- There has been an increase in complaints due to letters sent to Private Sector Leasing (PSL) tenants regarding the PSL review and negative publicity in the local press surrounding this.</li> </ul> <p><b>Corrective Action:</b> A new Interim Senior Complaints Officer has been put in place to manage the Housing complaints team and the workload. The Acting Assistant Director of Housing has also instigated a more structured approach to achieving targets with milestones and warnings incorporated into the process. Also closer senior management scrutiny has been built into the system.</p> <p>89.4% (5,971 out of 6,676) of repairs were completed within the target timescale in Quarter 1. An improvement plan was implemented by the contractor which the Council was assured would result in improved performance during the last quarter of 2017/18. Regrettably this was not achieved and performance remains below target.</p> <p><b>Corrective Action:</b> The main corrective actions taken by the contractor involved recruiting additional resources to assist in managing the number of "out of target orders", scrutinising employee productivity and reviewing supply chain management to ensure timely completions. Recruitment continues to be difficult for the contractor, however additional resources have now been appointed and it is anticipated that the backlog of overdue orders will reduce. The Director of Neighbourhoods has met with the Managing Director of Breyers to highlight the importance of service delivery to Havering and gain assurance that performance will improve. Completion of the agreed actions and progress in achieving performance targets is scrutinised at regular contract management meetings and at separate monthly service improvement meetings. The contractor's improvement plan will be reviewed to identify any further changes that could be implemented to improve performance against this KPI.</p> <p>Since establishing the Joint Venture company in April 2018, Wates has completed 'Meet the Developer' consultation meetings, which 126 residents and neighbours of the estates in Phase One of the programme attended. The consultation programme is set to recommence in September 2018.</p>
	% of Stage 1 complaints closed in 15 days	Bigger is better	95%	95%	N/A	91.1% RED	↑	87%	↑	83%	
	No. of Stage 2 complaints received	Smaller is better	N/A	N/A	N/A	49	↑	162	↓	36	
	% of Stage 2 complaints closed within 20 days	Bigger is better	95%	95%	N/A	67.3% RED	↓	86.4%	↓	94%	
	% of housing repairs completed within the target timescale	Bigger is better	96%	96%	N/A	89.4% RED	↓	91.2%	↓	94.1%	
	Contractor liaison with residents during regeneration work	N/A	Residents Consulted	Residents Consulted	N/A	On Track GREEN	-	NEW	-	NEW	

Sub-committee	Indicator and Description	Value	2018/19 Annual Target	2018/19 Q1 Target	Tolerance	2018/19 Q1 Performance	Short Term DOT against Q4 2017/18		Long Term DOT against Q1 2017/18		Comments
Crime and Disorder	Average response time to "I" calls	Smaller is better	15mins	15mins	± 0%	not known	-	not known	-	N/A	The MPS has a target to reach 90% of "Immediate" (I) graded calls within 15 minutes of the call being made. The MPS target for "Significant" (S) grade calls is to reach 90% within one hour of the call being made. Data from police is no longer available as a percentage figure for each month but is now provided as a rolling average for I and S grades of calls met within target times, and also domestic abuse (DA) calls in each of these gradings. The rolling average is provided from 4th September 2017, when revisions to the tri-borough model came into effect. As at w/c 9 July 2018, 81% of I calls in Havering had been responded to within the target timescale, compared to 85% in Redbridge and Barking and Dagenham and 84% across the East Area Borough Command Unit (EA BCU) as a whole. Whilst still below target, performance in relation to S calls was better, with 83% responded to within the target time compared to 76% in Redbridge, 79% in Barking and Dagenham and 79% across the EA BCU as a whole.
	% of "I" calls responded to within target	Bigger is better	90%	90%	± 0%	81% since September 2017 RED	↓	83.5% (Sep-Mar average)	-	N/A	As Havering is the area of least demand in the tri-borough and therefore the smallest initially assigned resource, the impact is felt hardest when demand increases. It also means that vehicles have to travel longer distances to cover calls when demand outstrips resource thus increasing the likelihood of missing the target. Because demand in Havering is slightly less compared to other areas of the tri-borough partnership, missing targets in relation to individual calls also has a bigger impact on Havering's overall performance. There has been a notable increase in Fast Road Calls which are often missed by the traffic unit which disproportionately impact Havering due to the proximity of the M25.
	Average response time to "S" calls	Smaller is better	60mins	60mins	± 0%	not known	-	not known	-	N/A	Havering has lost ground over the summer which is a high leave period and a time of increased demand, particularly in relation to Domestic Abuse (DA) "I" calls which have increased by a third since September.
	% of "S" calls responded to within target	Bigger is better	90%	90%	± 0%	83% since September 2017 RED	↓	84.7% (Sep-Mar average)	-	N/A	Havering has also had various challenging critical incidents which has had a significant impact on resourcing levels
	Deployable police resources compared with establishment	Bigger is better	TBC	TBC	± 0%	DWO PCs on ward 89% of time	↑	DWO PCs on ward 78% of time	→	DWO PCS on ward 89% of time	This information is not available in a reliable, accessible format on the Metropolitan Police's internal 'dashboards'. For those officers posted to Dedicated Ward Officer (DWO) roles, the number of working days lost due to abstractions each quarter is shown, based on converting the figure provided in hours into eight-hour working days.
	% of ASB reports relating to traveller incursions	N/A	N/A	N/A	N/A	2.5%	N/A	7.8%	N/A	1.0%	During Quarter 1, 29 calls were made to the Police regarding traveller incursions at 13 separate locations. These calls accounted for 2.5% of all ASB reports made during that period.
Health	Obese Children (4-5 years)	Smaller is better	Better than England (9%)	N/A	Similar to England	10.9% (2016/17) RED	-	N/A	↓	10.8% (2015/16)	Our target for this indicator is to be better than England (9%) and the latest data shows Havering's percentage of obese children aged 4-5 to be worse than England, at 10.9%.  <b>Corrective action:</b> Directed by Havering's 'Prevention of Obesity Strategy 2016-19', our borough working group continues to progress actions within the gift of the local authority and partners, and within available budgets. Progress since the last update is as follows: - Council and NHS premises have begun registering as Breastfeeding Welcome, with the scheme being publicly launched in August, linking in with World Breastfeeding Awareness Week. - Monthly 'Starting Solid Foods' workshops have been co-delivered by Health Visitors and Early Help Practitioners at Collier Row Children's Centre since January and have been well attended and received. We are scoping capacity to extend these to additional Children's Centres. - The Healthy Early Years London pilot has concluded with three settings achieving the bronze award and two silver. Phased rollout across the borough commenced in June. - A new Veggie Run game app was successfully launched by Havering Catering Services in April, aiming to increase uptake of healthy school meals, improve children's knowledge of healthy eating and award prizes that encourage healthy lifestyles. - The Public Health and Waste and Recycling teams have started working together to promote the Water Refill scheme with the dual aims of reducing plastic waste and reducing sugar intake.  Obesity is a complex issue and many of the opportunities to tackle it fall outside of the local authority's influence. As such, work continues at national level, guided by the national 'Childhood Obesity: A Plan for Action' and we continue to link with national campaigns and programmes where appropriate.

Sub-committee	Indicator and Description	Value	2018/19 Annual Target	2018/19 Q1 Target	Tolerance	2018/19 Q1 Performance	Short Term DOT against Q4 2017/18	Long Term DOT against Q1 2017/18	Comments		
	Percentage of patients who are satisfied with GP out of hours services (Partnership PI)	Bigger is better	Better than England (69%) (TBC)	N/A	Similar to England	64% AMBER	-	N/A	↓	67% (July 2017)	The latest available data for patient experiences of GP out-of-hours services shows no significant difference between the percentage of patients who are satisfied with the service in Havering and the England average. This follows an overall improvement in the England average performance as compared to the previous year (2017 – 66%). Use of out-of-hours services includes contacting an NHS service by phone (e.g. 111) and going to A&E which a vast proportion (54% and 31% respectively) of the 882 Havering respondents who answered this question say they did.
	The number of instances where an adult patient is ready to leave hospital for home or move to a less acute stage of care but is prevented from doing so, per 100,000 population (delayed transfers of care)	Smaller is better	7	7	± 10%	7.8 RED	↓	5.46	↓	4.92	To date there has been an average of 15 delays to discharges per month, whereas at the same stage last year there had been an average of 10. The vast majority of delays are in the acute sector and are the responsibility of Health.
Individuals	% of service users receiving direct payments	Bigger is better	35%	35%	± 5%	33.6% AMBER	↓	34.1%	↑	33.3%	Performance is below target (where bigger is better) for the % of service users who receive their care via a Direct Payment but is improved compared with the same point last year, and within target tolerance. <b>Corrective Action:</b> A bank of Personal Assistants (PAs) is now in place. It is envisaged that this will improve the take-up of Direct Payments throughout the year
	Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+)	Smaller is better	660	145	± 5%	106 GREEN	↑	519	↑	108.1	At the end of Q1 there had been 49 new admissions into long term residential / nursing care. At the same stage last year there had been 50. The target has been set higher than last year's outturn due to this indicator being a BCF indicator, against which 2 year targets were previously submitted to NHS England for both 2017/18 and 2018/19.
Environment	Average no. of days taken to remove fly-tips	Smaller is better	1 day	1 day	± 0%	0.6 days GREEN	↑	1 day	↑	0.8 days	The average number of days taken to remove fly-tips is below target, and is better than last quarter and the same period last year.
	The level of waste per head of population presented to East London Waste Authority (ELWA)	Smaller is better	441.01 kg per head (TBC)	110.25kg per head (TBC)	± 0%	120.20kg (provisional) RED	↓	436.07kg per head	↓	118.4kg per head	Performance is above target (where lower is better) but this will be as a consequence of high levels of green waste during the Spring. <b>Corrective Action:</b> Various waste prevention campaigns focusing on home composting, reuse, and the Love Food Hate Waste campaign are in place to help achieve the target. We are also reviewing operations in Highways and Grounds Maintenance to reduce waste and, with ELWA, are strengthening processes targeting potential commercial waste entering the domestic waste stream at the household reuse and recycling centre. Without restrictions on the amount of waste we collect through the household waste collection service, containing and reducing tonnages is very challenging and relies on attitudinal change.
Children & Learning	% of care leavers in both education, employment or training and suitable accommodation	Bigger is better	60%	60%	±5%	57.4% AMBER	↓	58.8%	↓	60.9%	Of 148 care leavers, 85 are in both EET and suitable accommodation. The percentage of care leavers in suitable accommodation remains above 90% and consideration is being given to ensuring that the categorising of the accommodation as 'suitable' takes into account the young person's view as well as that of the professionals involved. The proportion in education, employment or training is lower, although still better than national and London averages. Performance often dips at this point in the year, as young people's destinations post September are not known. Another factor is young people coming into care later, and the service therefore having less time to work with them in preparing for the transition to adulthood. <b>Corrective Action:</b> There is an ongoing focus on the outcomes of care leavers through the Face to Face Pathways Innovation Programme. A recent successful application to the DWP's Community Budget will enable us to deliver a programme which will support young people to attain employment and / or embark on further education. The programme will focus on functional skills qualifications, becoming 'work-ready' and stepping into employment.  Funding from the DWP has also allowed the Council to set up a fortnightly Work Club at The Cocoon providing drop-in sessions which offer practical support and help to unemployed young people in care and care leavers.

Sub-committee	Indicator and Description	Value	2018/19 Annual Target	2018/19 Q1 Target	Tolerance	2018/19 Q1 Performance	Short Term DOT against Q4 2017/18		Long Term DOT against Q1 2017/18		Comments
	Total no. of in-house foster carers	Bigger is better	90	80	±2.5%	80 GREEN	↑	77	↑	77	The total number of in-house foster carers has increased compared to last quarter and last year and is on track to achieve the target of 90 by financial year end. Work is ongoing to recruit high quality foster carers through the Face to Face Pathways Programme. Marketing is being targeted at the caring professions (e.g. teachers, nurses and social workers), certain faith communities and prospective carers who are prepared to look after older children, to increase the diversity of foster carers and reflect the profile of children needing care.
	% of looked after children placed in LBH foster care	Bigger is better	40%	40%	±5%	39.3% AMBER	↓	44.5%	↑	39.1%	The outturn against this KPI is based on the total number of in-house and family and friends placements. As at the end of June we had 39.3% (96/244) LAC placed in LBH foster care. This has fallen below the target since the end of the previous financial year due to children leaving care. The In-Care strand of the Face to Face Pathways Programme is focused on enhancing our resources to ensure that in-house options are available for all LAC, regardless of their needs.