

Overview and Scrutiny Board 28 November 2018

Subject Heading:

Quarter 2 Overview and Scrutiny Board Performance Report (2018/19)

SLT Lead:

Jane West, Chief Operating Officer

Report Author and contact details:

Sandy Hamberger, Assistant Director of Policy, Performance and Community Sandy.hamberger@havering.gov.uk
01708 434506

Policy context:

The report sets out Quarter 2 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

- 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 subcommittees. 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 Board. For 2018/19, the Sub-Committee has selected a new suite of indicators (8 in total). These are:
 - Percentage of early years providers judged to be good or outstanding
 - Percentage of 16-18 year olds who are not in education, employment or training (NEET), or not known
 - Percentage of children in good or outstanding schools
 - Average number of children missing from education at month end
 - Percentage of Initial Child Protection conferences held within 15 days

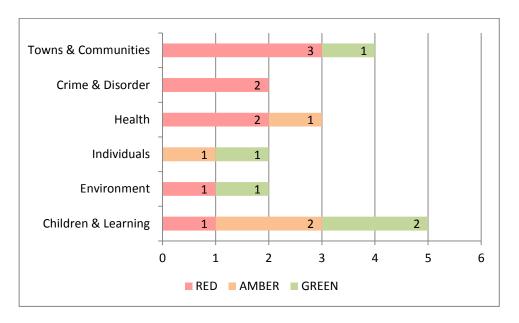
- Number of children missing from care, missing from home or away from placement without authorisation
- Number of new in-house foster carers recruited
- Number of adopters approved

Members of the Overview and Scrutiny Board are asked to consider which of these eight indicators should be included in future reports to the Board.

- 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. 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 (\uparrow) means performance is better and a red arrow (\checkmark) means performance is worse. An amber arrow (\rightarrow) means that performance has remained the same.

Quarter 2 Summary



- 7. In total, 27 Performance Indicators have been included in the Quarter 2 2018/19 report. Of these, 18 have been assigned a RAG status.
- 8. In summary, of those PIs with a target set against them:
 - **5** (28%) have a RAG status of **Green** (on target).
 - 4 (22%) have a RAG status of Amber (off target but within the agreed tolerance)
 - 9 (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:

- The rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+) remains below target (where lower is better).
- 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 percentage of early years providers judged to be good or outstanding remains above target and better than at the same point last year (at 96% compared with 93%).
- The number of adopters approved is on target for this point in the year and higher than at the same point last year.

2. Improvements required:

- 77.6% of Stage 1 complaints relating to services within the remit of the Towns and Communities Overview and Scrutiny Sub-Committee were responded to within 15 days against a target of 95%. Performance has therefore declined compared to last quarter (when 91.1% were responded to within the target timescale). The majority of the missed complaints were from Housing Services. A new process has been put into place to deal with Housing complaints to bring about improvements to each of the service areas in Housing Services. Since 5 November 2018, Complaints Officers have been allocated to each of the service areas and are being managed and directed by the Service Managers for: Property and Land, Tenancy Sustainment and Housing Demand. One officer remains in the Neighbourhoods Complaints Team and is responsible for the allocation of complaints, Members and MP Enquiries and FOIs.
- The percentage of housing repairs completed within the target timescale is below target and has declined compared with the previous quarter. A new improvement action plan has been put in place by the responsive repairs maintenance contractor. This 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 has advised that their new plan should result in improved performance and that the target will be achieved by March 2019.
- 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 quarter. Fewer "immediate" (I) calls in Havering were responded to within the target timescale than for the rest of the East Area Borough Command Unit. However, local performance in relation to "significant" (S) calls was better than in the other boroughs and there was a significant improvement in Domestic Abuse (S) calls compared to last quarter (72% last quarter, 89.3% this quarter).
- 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 2, and higher than at the same point last year. As at the end of Quarter 2, there was an average of 16 delays to discharges per month, whereas over the same period last year there was an average of 11. The vast majority of delays are in the acute sector and are the responsibility of Health partners.

3. The full Quarter 2 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 2 of 2018/19.

Other options considered: N/A

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no financial implications arising from reviewing performance indicators and/or agreeing further indicators for review. 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