SLOUGH BOROUGH COUNCIL

REPORT TO: Overview & Scrutiny Committee

DATE: 25th February, 2010

CONTACT OFFICER:
(For all enquiries)   Roger Parkin, Strategic Director for Improvement & Development (01753 875207)

WARD(S):   All

PART I
FOR CONSIDERATION

PERFORMANCE REPORTING FOR 2009/10

1   Purpose of Report

The report covers provides an update on Quarter 3 performance.   .

2   Recommendation(s) / Proposed Action

The Committee is requested to resolve:

a) That the following aspects of the report be noted:

Update on Quarter 3 performance

3   Key Priorities – Taking Pride in Slough and Making a Difference to Communities

Community Strategy Priorities

This report indirectly supports the community strategy priorities.   The maintenance of excellent governance within the council to ensure it is efficient, effective and economic in everything it does is achieved through the improvement of corporate governance and democracy and by ensuring good people and management practices are in place

4   Other Implications

(a) Financial – None

(b) Risk Management – None
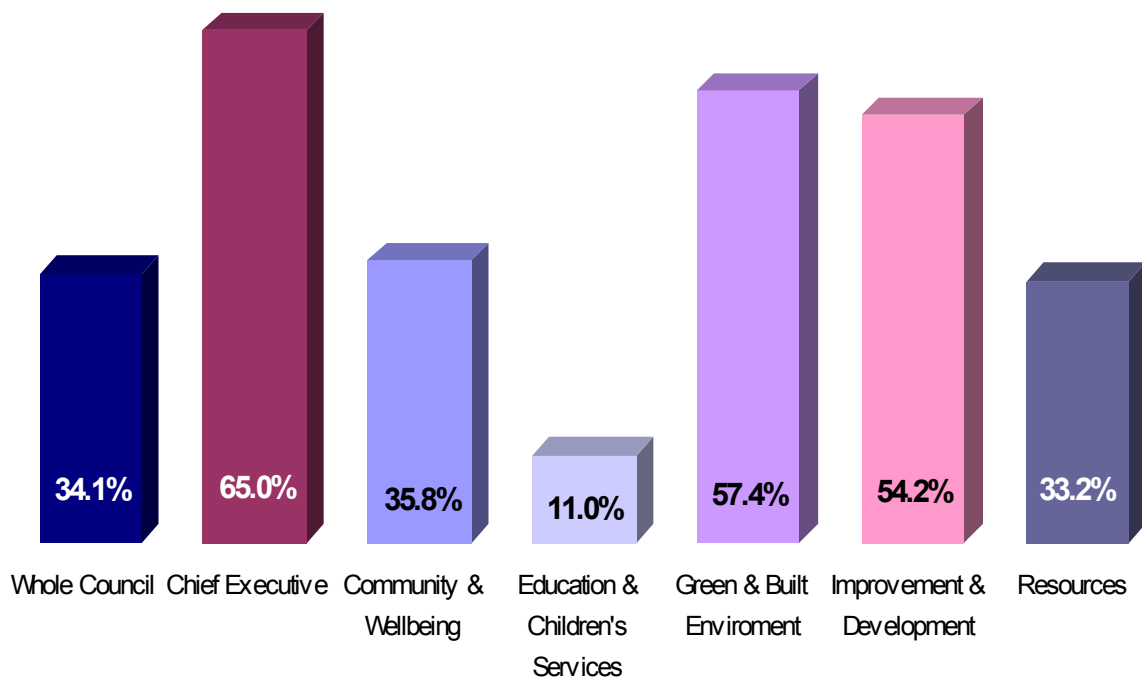
5   Supporting Information

Performance Report

5.1   The attached performance report (Appendix 1) updates Overview and Scrutiny on performance and draws attention to areas of exception, including both improved performance and areas where improvement actions are needed for performance to achieve end of year targets.

5.2   All comments on the quarter's results or action points to remedy poor performance have been provided by the Officers responsible for those individual National/ LAA and Local Indicators. Front line service areas scrutinised and agreed these corrective actions at Departmental SMT meetings (Appendix 3).

5.3   The full suite of council indicators have also been compiled, these are available as two appendices on the council's intranet, these can be accessed at http://sbcinsite/3709.aspx. Work to identify a variance to enable further exception reporting for each of the council's indicators was discussed at SMT's last week.

5.4   The report contains three areas:

- Introduction & Summary (Appendix 1)
- Council and LAA indicators with corrective actions (Appendix 2 & 3)
- Project management Office report projects (Appendix 4)

5.5   Three new areas of Performance have been included within this report

- Cost of agency staff (Pertemps, non Pertemps and Consultants)
- Number of Corporate complaints by department
- Numbers of Freedom of Information requests not answered within 20 working days.

Performance Highlights and Exceptions

5.6   Staff appraisal completion remains a significant improvement challenge and progress has been added to this overview report to ensure continuity of corrective action. The latest information on appraisal completion rates suggests significant improvement with a completion rate of 34.1% in the year to 09/02/2010 (compared to 27.2% in the year to 31/12/2009 – an increase of 6.9% in 5 weeks). Some directorates have shown greater progress than others with Green and Built Environment and the Chief Executive's directorate leading the way in improvement.

Bar chart showing percentages by service area: Whole Council 34.1%, Chief Executive 65.0%, Community & Wellbeing 35.8%, Education & Children's Services 11.0%, Green & Built Enviroment 57.4%, Improvement & Development 54.2%, Resources 33.2%

5.6.1 **Average Queue time at my council** (GOOD TO BE LOW)
Performance has been improved significantly from 50mins average waiting time at the end of financial year 08/09 to 22 minutes as at quarter 3 for this financial year and exceeding the target of 30 mins. Processes have been reviewed to maximise adviser productivity ensuring queue awareness whilst improving customer service standards. New and improved staff training programmes are to be introduced shortly.

5.6.2 **Issues resolved Live at My Council** (GOOD TO BE HIGH)
Performance is increasing and sits at 90% for quarter 3 , therefore exceeding target of 80%. Revised and updated FAQs on the Siebel system have resulted in an improved service to customers with more queries being resolved directly by the customer service advisers at the first point of contact.

5.6.3 L17 **Average queue time for Benefits enquiries** (Call Centre - by phone)
GOOD TO BE LOW At 5.45 mins for the third quarter, the target of 7 mins has been exceeded. However, the increase from the second quarter (4.38min) can be put down to seasonal variations and an apparent reluctance of customers to leave voice mail messages. Liaison meetings between My Council and the Benefits team have continued and this has fed into a clearer understanding of customers needs and expectations.

5.6.4 NI **65 Children becoming the subject of a Child Protection Plan for a second or subsequent time** (GOOD TO BE LOW) In the 12 months to Dec 09 there were 20 children who were made subject of a Child Protection Plan (CPP) for a second a subsequent time. This represents a percentage of 12.1% of all children who were made subject of a CPP in the 12 months to Dec 09. The DCSF banding advocates that anything below 15% is good performance

– our performance shows that our Child Protection Plans lead to lasting improvements in child safety and overall well-being leading to the vast majority of children not requiring another CPP.

5.6.5 L12: **% of undisputed invoices paid within 30 days**(GOOD TO BE HIGH) Performance should improve when the unit becomes part of Shared Service and all invoices will be sent to a central point thereby reducing the risk of invoices being lost/not processed within departments. It should be noted that there is no delay whatsoever within the Payments Unit in processing invoices received and that the fault for poor performance lies wholly with the inefficiencies of departments.

5.6.6 NI 20 **Assault with Injury Crime Rate** GOOD TO BE LOW : Not on target, however gap between crime incidence in 2008 and 2009 is narrowing, from a 20% increase between April-Oct 08 and April Oct 09 to a 11% increase between April-Dec 08 and April Dec 09. Whilst there is no clear pattern or emerging hotpots of high activity the Steering Group leading on this indicator have embarked upon the following actions :Daily Scrutiny of Assaults by Sgt and/or Inspector from Community Safety to improve investigation and ensure that prompt action is taken by OICs. Scrutiny of offences to ensure correct recording Problem Profile has been commissioned through Evidence Lead Solutions.

5.6.7 L35: **The number of adult attendances at all local Leisure Centres combined with participation in all sports development activities from SBC and Slough Community Leisure**(GOOD TO BE HIGH) The latest rolling year information up to the end of December 2009 is that there have been 908,310 visits; this suggests that we will not meet end of year target of 926,545 visits and represents a decrease of 0.84% compared with 915,973 visits for the same month last year i.e December 2008. However there has been an increase from the previous month of 0.49%. A general downward trend has been noted as from September 08 onwards in line with the downturn in the economy.   Actions to review performance: SCL are constantly reviewing its services and how marketing and promotions can improve attendances and membership. Investment works at some sites has resulted in increased usage and income. The Free Swimming Initiative launch in April 2009 has seen over 25,500 swims being taken up to December 09, although take up by the over 60s has been low. Further marketing is being undertaken to address this

5.6.8 NI 59 **Initial assessments for children's social care carried out within 7 working days of referral Department of Children, Schools and Families**(GOOD TO BE HIGH) Performance for the third quarter (74.1% - Dec 2009) remains lower than the agreed target (80.0%), although it should be noted that performance is very slightly higher than the last published Statistical Neighbour (73.0% - March 2009) and England averages (72.9% - March 2009). Whilst performance has dropped since the March 2008 outturn result (78.7%), the number of completed initial assessments increased by 46% in 2008/09 when compared to 2007/08. It is now considered that the target of 80% may have been too ambitious in the context of a nationally raised profile

and increased awareness of children's safeguarding issues. Action(s) to date: A restructure of the front-end duty services to ensure duty workers taking new referrals and assessments have the capacity to manage work coming in through the door.

5.6.9 NI 73 **Achievement at level 4 or above in both English and Maths at Key Stage 2** (GOOD TO BE HIGH) 2009 outturn of 66% indicates that Slough is ranked in the lower quartile nationally for this indicator, ranked 139th nationally out of 152 local authorities. It sits joint 11th out of 11 in its Statistical Neighbours Group. Both the England and South East averages are 72% and our statistical neighbours average is 69%. Performance is well below the 2008/09 target of 74%. To raise the achievement level the Raising Achievement Team provide challenge and targeted support to schools that are below DCSF floor targets, particularly through the Improving Schools Programme (ISP) and the additional time provided by SIP's in addition to robust target setting procedures. Schools are providing 1-1 tuition, booster classes and breakfast club / after school provision to assist particularly vulnerable groups. Additional targeted support is provided for children with behavioural, SEN needs, looked after children and their carers through joint partnership work with other services. The School Improvement Service is working closely with National Strategies to provide challenge and maximise support to targeted schools.

5.6.10 NI 92 **Narrowing the gap between the lowest achieving 20% in the Early Years Foundation Stage Profile and the rest** (GOOD TO BE LOW) Slough's 2009 performance of 36.9% is a considerable improvement from previous year of 43.5% in narrowing the achievement gap. However the gap is wider that the England average of 33.9%, South East average of 32.1% and our statistical neighbours average of 36%. Slough is ranked 135th nationally out of 152 LA's. 2009 performance is wider the narrowing the gap 2008/09 target of 34.2%. The following initiatives have been implemented: Multi Agency Family Poverty Steering Action Group

- Emotional well-being training (including personal, social & emotional development)
- Focus in many Improving Schools Programme (ISP) plans
- 30 settings involved in the Every Child a Talker (ECAT)
- 9 schools involved in the Communication, Language and Literacy (CLL) Development Programme
- Profile moderation training provided each term to all of the schools and settings
- Parent Engagement Partnership
- Workforce Development and Quality Improvement Programme

5.6.11 NI 117 **16 to 18 year olds who are not in education, training or employment** (GOOD TO BE LOW): Slough's overall NEET rate for 2009/10 is 6.0% which is 0.7% higher than the previous year's rate of 5.3% and well above the current target of 4.4%. Support programmes which are in place include: partnership work with opportunity providers to offer flexible year

round provision through NEET Strategy Group and 14 to 19 Partnership, sharing of statistical data with local providers to support submissions for additional funding for provision, increased gathering and use of labour market information to inform young people of realistic options, and commitment to DCSF (Department of Children Schools and Families) Employability Scheme for young people leaving care. In addition key partners have put in a bid for the Future Job Fund initiative and there is the raising of awareness amongst young people of the September Guarantee. Following the Queen's speech in 2009 the DCSF set up the January Guarantee for 16 and 17 year olds that are NEET. All young people in this category are to be offered a place of learning or training by March 2010.

5.6.12 NI 121 **Mortality rate from all circulatory diseases at ages under 75** (GOOD TO BE LOW): Data is published annually by the ONS. The mortality rate per 100,000 for 2005-2007 is 97.13, with the mortality rate for 2008 specifically being 92.83 which represents an improvement on the previous year of 117.21 and an improvement against the 3 year average. There is still a significant gap between target and performance although it is improving. A three year average trend figure tends to be used due to annual fluctuation. This represents a long-term health outcome indicator. Actions include smoking cessation and vascular risk reduction, also initiatives with Pharmacies.

5.6.13 NI 135 **Carers receiving needs assessment or review and a specific carer's service, or advice and information**(GOOD TO BE HIGH) Provisional outturn figures of 542 carers services derived from manual systems as at 22nd January 2010 means that there still remains a significant gap of 258 between performance and the target of 800 carers services. Corrective actions to ensure performance aligns with target include:Team targets set and staff are being supported and reminded of the importance of completing carers assessments, teams have been sent lists of carers who received a service last year to ensure that they are reviewed.Training is also being provided to ensure staff complete carers assessments accurately on the IAS system. Staff are being set personal targets for completing carers assessments by the Head of Service. The Carers Lead is visiting teams to train and advise staff of the statutory duty to offer carers an assessment. Additionally a self assessment/review process is being assessed.

Service Plan Monitoring

5.7   In line with the development plans for the balanced scorecard the performance team have continued with the pilot of service plan monitoring. The results of this pilot were mixed; many managers who were sent requests for updates reported that they were unaware of the actions in their service plan. The timeliness and quality of responses also requires improvement if this system is too be of benefit, many managers either failed to respond or entered ambiguous corrective actions. These areas were discussed at last Thursdays SMT meeting and plans put in place to respond. Further work will be undertaken by the performance team to engage staff at DMT level in the process.

Project Management Update

5.8   The project tracker (final two pages of Appended Performance report) has been updated for this period and includes a confidence level based on how many key elements of the PRINCE2 process being in place and, for the first time, includes information from the highlight reports received so far.

5.9   The Project Management process is currently being audited and it is likely to fail due to a lack of compliance. Improving Project Management is currently rated as 'red' as it was planned to have closed and evaluated the project by now. However, as several gold projects are currently under review and the level of compliance has been low, the timeline has been extended by 6 months.

5.10   Of the 19 projects currently using PRINCE2, 7 projects currently have a confidence level of Red; 7 of Amber and 5 as Green. The confidence level is dependent upon the number of key elements of the process being in place: where there are less than 2 elements in place the project has been given a confidence level of RED, 2 elements in place means the confidence level is AMBER, more than 2 elements makes a project GREEN.

5.11   Following the results of the Prince2 Practitioner re-sit exams in November, the over all pass rate for SBC has now risen to 70%. This is very comparable to the national average for the same period which is 72%. In addition, the first of two PRINCE2 overview training days has already taken place with the second to be held on the 12th February. This will complete the training schedule for this phase.

5.12   SMT's and Directors have scrutinised some of the Project Management Office (PMO) report prior to CMT this has led to a number of updates and changes, including some additions/removals of projects from the Gold Register.

5.13   These are;

*   Removal of Park Investments Program as this is now completed
*   Consolidation of Chalvey Regeneration into Neighbourhoods project

5.14   Addition of 3 new projects covering:

*   Housing Futures (ALMO move)
*   HMO and Migration
*   2011 Census

<u>Appendices</u>

*   Introduction & Summary (Appendix 1)
*   Council and LAA indicators with corrective actions (Appendix 2 & 3)
*   Project management Office report projects (Appendix 4)