

CABINET

19 September 2017

Title: Corporate Plan 2017/18 – Quarter 1 Performance Reporting	
Report of the Cabinet Member for Corporate Performance and Delivery	
Open Report	For Decision
Wards Affected: All	Key Decision: No
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Accountable Director: Tom Hook, Director of Strategy and Programmes	
Accountable Strategic Director: Claire Symonds, Chief Operating Officer	
Summary: <p>The Corporate Plan 2017/18 is a key document developed to ensure the Council has a co-ordinated approach to delivering the vision and priorities, and makes best use of the resources available. Key Performance Indicators (KPIs) and Key Accountabilities have been developed to monitor performance against the priorities and frontline services.</p> <p>Progress is reported quarterly to the Corporate Performance Group (CPG) and Cabinet and every six months to the Public Accounts and Audit Select Committee (PAASC). An in-depth focus on performance takes place at the Performance Challenge Sessions held quarterly, with areas of concern scrutinised at ‘Deep Dive’ sessions on a monthly basis.</p> <p>The corporate performance framework for 2017/18 consists of KPIs and Key Accountabilities presented under the Cabinet portfolio areas to form the basis of corporate performance monitoring. The framework sets out what needs to be monitored in the year ahead whilst acknowledging that a new framework will be required by 2018/19, as the Council moves further towards becoming a commissioning based organisation.</p> <p>This Quarter 1 report provides an update of performance between 1 April 2017 and 30 June 2017 against the Key Performance Indicators (KPIs) and Key Accountabilities.</p>	
Recommendation(s) The Cabinet is asked to:	
(i) Note progress against the Key Accountabilities as detailed in Appendix 1 to the report;	
(ii) Note performance against the Key Performance Indicators as detailed in Appendix 2 to the report; and	
(iii) Agree any actions to address areas of deteriorating performance.	

Reason(s)

To assist the Council in achieving its priority of a “Well run organisation”.

1. Introduction

- 1.1 The Council’s vision and priorities were developed and agreed by Assembly in September 2014. The Corporate Plan 2017/18 is an important part of ensuring the Council has a clear focus on delivering the vision and priorities for Barking and Dagenham. The Plan allows the Council to make best use of limited resources in areas that will make the greatest difference in achieving the overall vision and priorities.
- 1.2 Despite aiming to set a balanced budget for 2017/18, further savings are required. In order to deliver the priorities we have to remain efficient by maximising the opportunities to be digital by design, manage demand for services, generate income and adopt new ways of working through community hubs and a new relationship with the voluntary sector and the community. This is in line with the direction of travel of many local authorities.
- 1.3 The Corporate Plan is a key part of the Council’s overall 2017/18 performance framework and ‘golden thread’ which links the vision and priorities through to the key accountabilities and indicators, business plans, team work programmes and individual objectives in appraisals. It was developed in order to ensure that the Council’s contribution to achieving the priorities was proactive, co-ordinated, resourced in line with the MTFs and monitored so that Members and residents could see progress.
- 1.4 All 2015-2017 business plans were completed and detail key service priorities linked to the corporate priorities, deliverables, actions services will take (with timescales) and resources to take forward the priorities in the Corporate Plan.
- 1.5 To complete the golden thread, all staff have an annual appraisal (with a formal six-monthly review). Through this process, performance in the last year is reviewed and objectives set for the year ahead. Individual objectives are set based on business plans, thereby ensuring all staff are focused and working towards delivering the Council’s priorities. Staff are also assessed against competencies based on the values, on the basis that success also depends on the way they carry out their role. Individual learning and development needs are also identified through this process.
- 1.6 Alongside a formal appraisal, all staff should have regular supervision or one-to-ones. This enables performance to be monitored and issues addressed. The aim is to help people maximise their performance, but also to provide a formal capability process should there be consistent under-performance.

2 “What we will deliver” – 2017/18 Key Accountabilities

- 2.1 In the development of the Corporate Plan, a number of Key Accountabilities were identified that linked to the Council delivering the vision and priorities as well as service delivery over the year ahead.

2.2 The Key Accountabilities (Appendix 1) are a key element of the corporate performance framework and will continue to be reported to CPG and Cabinet on a quarterly basis and at PAASC every 6 months. They have also been used as a key aid for discussions at the quarterly Performance Challenge Sessions.

3 Key Performance Indicators 2017/18

3.1 This report provides a performance update at Quarter 1 (for the period 1st April 2017 to 30th June 2017) on the key performance indicators for 2017/18 (Appendix 2).

3.2 Throughout the year, the KPIs will be reported with a RAG rating, based on performance against target. Where relevant, in-year targets have been set to take into account seasonal trends / variations, as well as provide performance milestones. Assessing performance against in-year targets makes it easier to identify progress at each quarter, allowing for actions to be taken to ensure performance remains on track to reach the overall target for the year.




4 Performance Summary - Key Performance Indicators

4.1 The key performance indicators focus on high-level areas of importance and allow Members and officers to monitor performance in those areas. In addition to these corporate indicators, throughout the organisation there are a significant number of service level indicators which are monitored locally and provide a more detailed picture of performance.

4.2 A detailed breakdown of performance for Quarter 1 2017/18 (1st April 2017 – 30th June 2017) is provided in Appendix 2.

4.3 Those indicators which have seen a significant improvement or may be an area of concern have been included in the body of this report.

4.4 In order to report the latest performance in a concise manner, a number of symbols are incorporated in the report. Please refer to the table below for a summary of each symbol and an explanation of their meaning.

Symbol	Detail
	Performance has improved when compared to the previous quarter and against the same quarter last year.
	Performance has remained static when compared to the previous quarter and against the same quarter last year.
	Performance has deteriorated when compared to the previous quarter and against the same quarter last year.
G	Performance is expected to achieve or has exceeded the target.
A	Performance is within 10% of the target.
R	Performance is 10% or more off the target.

- 4.5 The table below provides a summary at Quarter 1 2017/18 of the direction of travel for all KPIs. Depending on the measure, Direction of Travel is determined by comparing performance with the same period last year (Quarter 1 2016/17), or performance from the previous reporting period (Quarter 4 2016/17). This should be considered in the context of significant budget reductions and our continuation to improve services.

Direction of travel			
↑	↔	↓	N/A
23 (49%)	2 (4%)	15 (32%)	7 (15%)

- 4.6 The following table provides a summary of the number of indicators with either a Red, Amber or Green rating, according to their performance against the 2017/18 target.

RAG Rating against 2017/18 target			
G	A	R	N/A
17 (34%)	11 (23%)	6 (15%)	13 (28%)

5 Key Performance Indicators – Rated Not Applicable (n/a)

- 5.1 At Quarter 1, some indicators have been allocated a Direction of Travel, or RAG Rating of 'Not Applicable'. The reasons for which are set out in the tables below.

Reason for Not Applicable Direction of Travel	Number of indicators
New indicator for 2017/18 / Historical data not available	2
Awaiting data publication	6

Reason for Not Applicable RAG rating	Number of indicators
Good performance neither high or low – no target set	5
Awaiting data / target	7

6 Focus on Performance

- 6.1 For Quarter 1 2017/18 performance reporting, focus has been given to a small selection of indicators which are either showing good performance against target, or are showing deterioration since last year and falling short of the target. It is hoped that by focusing on specific indicators, senior management and Members will be

able to challenge performance and identify where remedial action may be required during 2017/18.

6.2 Improved Performance

KPI 17 – The total Delayed Transfer of Care Days (per 100,000 population) attributable to social care

The number of delayed days caused by delayed transfers is a key Better Care Fund metric as it indicates when health and social care are working together to discharge patients, thereby reducing delays. The Joint Executive Management Committee has oversight of BCF planning and the relevant metrics. The indicator is also reported at the Adult Care and Support Performance Callover.

Throughout Q1, a total of 179 days were lost, attributable to Social Care and both Social Care and the NHS combined. When converted per 100,000 the average figure is 41.1.

ELFT were the trust responsible for the most days (91), with the reason due to “public funding”.

KPI 18 – The number of permanent admissions to residential and nursing care homes (per 100,000)

During Quarter 1, 30 people were admitted to care homes, equivalent to 147.9 per 100,000. Performance is better than the same period last year during which there were 49 admissions. The indicator is Green as performance is below both the target of 216.2 and the same period last year.

Admissions are monitored monthly through Activity and Finance meetings led by the Operational Director: Adult’s Care and Support. Analysis of local authority-funded care home admissions in 2015-16 found that admissions tended to be precipitated by carer related issues, dementia and/or acute or gradual decline in service-user’s health or wellbeing. The analysis found that social workers and managers explored the options for care in the community before placements were authorised.

6.3 Areas for Improvement

KPI 20 – The number of successful smoking quitters aged 16 and over through cessation service

From April to May 2017/18 there were 132 quitters and 286 setting a quit date This is 79% achievement of the year-to-date target and a conversion rate of 46%. This is slightly down on figures for 16/17, but it is early in the year and difficult to draw conclusions about the yearly performance. Quarterly data will enable analysis by individual providers to see which to target for specific support.

Initial figures show the specialist service to have delivered most quits, followed by pharmacy and Primary Care, but we only have 2 months of data to go on. Several additional GP practices have agreed to participate in 17/18, but when they will join is dependent on when their staff can access Level 2 courses. Public Health will

liaise with the Lifestyles team about access to training. We now also have the Primary Care Dashboard which will be a focus for GP practices to performance monitor its achievement, in conjunction with the CCG.

7 Consultation

- 7.1 The CPG and departments (through Departmental Management Teams) have informed the approach, data and commentary in this report.

8 Financial Implications

Implications completed by: Kathy Freeman, Finance Director

- 8.1 There are no specific financial implications as a result of this report; however, in light of current financial constraints it is imperative that Officers ensure that these key performance indicators are delivered within existing budgets. These budgets will be monitored through the existing monitoring process to identify and address potential issues and also any benefits as a result of improved performance on a timely basis.

9 Legal Implications

Implications completed by: Dr. Paul Feild, Senior Corporate Governance Solicitor

- 9.1 Assembly agreed the vision and priorities in September 2014. The responsibility for implementing them rests with Cabinet. The delivery of these will be achieved through the projects set out in the delivery plan and monitored quarterly. As this report is for noting, there are no legal implications.

10 Other Implications

- 10.1 **Risk Management** – There are no specific risks associated with this report. The corporate plan report and ongoing monitoring will enable the Council to identify risks early and initiate any mitigating action. The Council's business planning process describes how risks are mitigated by linking with the corporate risk register.
- 10.2 **Contractual Issues** – Any contractual issues relating to delivering activities to meet borough priorities will be identified and dealt with in individual project plans.
- 10.3 **Staffing Issues** – There are no specific staffing implications.
- 10.4 **Customer Impact** – The vision and priorities give a clear and consistent message to residents and partners in Barking and Dagenham about the Council's role in place shaping and providing community leadership. The key accountabilities and KPIs monitored allow the Council to track delivery ensuring resources and activity are effectively targeted to help achieve the vision and priorities.

There are no specific customer impact issues to consider as a result of this report. The report highlights issues relating to performance, either good or bad, which may have an impact on the service received by customers and as such this contributes towards addressing underperformance and in turn improving service delivery.

- 10.5 **Safeguarding Children** - The priority **Enabling social responsibility** encompasses activities to safeguard children in the borough and is delivered through the Local Safeguarding Children Board and Children's Trust. The Council monitor a number of indicators corporately which relate to Children's safeguarding. By doing so the Council can ensure it continues to discharge its duties.
- 10.6 **Health Issues** - The priority **Enabling social responsibility** encompasses activities to support the prevention and resolution of health issues in the borough and is delivered through the Health and Wellbeing Board. The borough has a number of health challenges, with our residents having significantly worse health outcomes than national averages, including lower life expectancy, and higher rates of obesity, diabetes and smoking prevalence. Although delivery of health services is not the responsibility of the Council, together with health partners the Council is committed to tackling the health issues prevalent in the borough.
- 10.7 **Crime and Disorder Issues** - The priority **Encouraging civic pride** encompasses activities to tackle crime and disorder issues and will be delivered through the Community Safety Partnership. Whilst high level indicators provide Cabinet with an overview of performance, more detailed indicators are monitored locally. Data for the borough shows that Barking and Dagenham is a relatively safe borough with low crime. There is some work for the Council and partners to do to tackle the perception of crime and safety.

Public Background Papers Used in the Preparation of the Report:

- Corporate Plan 2017/18 (<http://moderngov.barking-dagenham.gov.uk/documents/s113892/Corporate%20Plan%202017-18%20Report%20-%20App.%201.pdf>)

List of appendices:

- **Appendix 1:** "What we will deliver" – Progress against Key Accountabilities 2017/18
- **Appendix 2:** Key Performance Indicators – Performance at Quarter 1 2017/18