

**Commentary on Red RAG KPIs
Quarter 2 2015/2016**

Performance Indicator	12. Number of successful smoking quitters aged 16 and over through cessation service
Reasons for poor performance/decline	<p>With the exception of June, since April 2015 there has been a month on month decrease in the number of smoking quitters in the borough. In comparison with last year's activity for April to September there was an increase (2.0%) in the number of people setting a quit date (499 in 2015/16 compared to 489 in 2014/15). But there was a 33.3% decrease in the number of people who successfully quit during the same period (180 quitters in 2015/16 year-to-date compared to 270 in 2014/15).</p> <p>A decline in the number of people successfully quitting has also been reported nationally, with anecdotal evidence suggesting that this may be due to an increase in people using e-cigarettes to help them stop smoking. It is also possible that the decline seen nationally could have been affected by a fall in smoking prevalence. However, neither has been proven.</p>
Actions being taken to improve performance	<p>An improvement plan has been implemented to improve uptake in both Level 2 and 3 services, with proactive measures to identify and support general practices with the highest number of registered smokers and unplanned hospital admissions for Chronic Obstructive Pulmonary Disease (COPD), as well as targeted approaches for high-risk groups including pregnant women, routine and manual workers and those with mental health problems.</p> <p>Public Health are scoping potential incentive schemes to support quitters. Furthermore, to encourage more quitters in the borough £15,000 has been budgeted for promotional campaigns (including Stoptober, No Smoking Day and #makeachange).</p> <p>A local Tobacco Alliance has been established to collaborate on the development of the local smoking strategy. Preventing people from smoking has been identified as a priority by the Health and Wellbeing Board. Therefore, local health promotion campaigns will also focus on preventing initiation of smoking by adolescents.</p>
Improvements in performance that are anticipated as a result of the actions taken	<p>The targeted interventions implemented will help increase the number of quitters, particularly by those in high-risk groups. Increased stop smoking capacity within the local community. Coordination with national promotional campaigns will increase the awareness of stop smoking services, and increase the number of people setting a quit date.</p> <p>Local health promotion campaigns will help reduce the borough's number of adolescents who smoke.</p>

Performance Indicator	15 &16 – Child weight management referrals & Child weight referrals completed
Reasons for poor performance/decline	Quarter 2 covers the summer holidays and, historically, there is difficulty with performance over this period; in quarter 2 2014 there were 0 child weight referrals completed.
Actions being taken to improve performance	<p>A number of meetings have been held with the school nursing team, health youth workers, youth service, children centre staff and healthy schools to promote the programmes and to increase referrals.</p> <p>Action is being taken to improve the link between the national child measurement programme (NCMP) and child weight management referrals. There is also ongoing work taking place in schools; tier 1 interventions are being delivered in schools, and this is being used to identify tier 2 referrals.</p> <p>Regular emails are being sent to all previous referrers and people attending tier 1 training. This will improve awareness and promote child weight management referrals.</p>
Improvements in performance that are anticipated as a result of the actions taken	<p>Improved awareness of child weight management referrals and increased performance in both the number of referrals and the number of referrals completed.</p> <p>Better connections between the NCMP and child weight management referrals.</p>

Performance Indicator	15. Child Weight referrals
Reasons for poor performance/decline	By the end of quarter 2 (6 months of the year) only 25.3% or 124 of the target of 480 referrals had been made. Although quarter 2 saw an increase of 21.43% (12 referrals) over quarter 1. The service is not on track to achieve the year end target.
Actions being taken to improve performance	<p><u>October – December</u> Number of programmes delivered: 4 programmes (3 family programmes, 1 teenagers programme)</p> <p><u>January – March 2016</u> Number of programmes to be delivered: 8 Number of starters: 120 if at capacity of 15 families per programme (96 if 80% occupancy)</p> <p>Table below of work carried out and being carried out to increase the number of referrals over the next 6 months following partnership working and networking.</p>

Challenges	Solutions/What is being done?
Lack of delivery staff	<ul style="list-style-type: none"> - Looking for additional delivery staff - Training session in November for delivery staff
Increasing referrals from health professionals	<ul style="list-style-type: none"> - Meetings have been held with a number of partners and a number booked in to increase referrals <p style="margin-left: 40px;">Held</p> <ul style="list-style-type: none"> - Jacqui Hutchinson – Childrens Centres - Julie Mayer – CRI team (outreach drug and alcohol support service) - Lindsey Royan – IAPT - Phillip Oldershaw - Eileen Dawson – School nurses/NCMP <p style="margin-left: 40px;">Booked</p> <ul style="list-style-type: none"> - Erik Stein - Jo Caswell - Felix Sullivan – Sport Inspired <ul style="list-style-type: none"> - Ensuring that potential referrers are informed of upcoming programmes and are aware of outcomes of the programme - All attendees on Tier 1 Training are now being provided with info on programmes and how to refer into them or talk to families to encourage them to self-refer - Initial meet held with Eileen Dawson to develop a pathway for all children identified as overweight/obese as part of the NCMP and develop closer links with the programme - Attendance at School nurse (SN) forums to be booked in - Work with SNs plan of when they are attending schools and link in some healthy lifestyle sessions
Increase awareness of the programme and referrals/self-referrals	<ul style="list-style-type: none"> - Pilot programme being delivered in schools in September term and January term which will raise awareness of a healthy lifestyle; it will also allow us to identify which children are overweight and can be referred onto the programme as mentioned above - Develop social media presence – initial meeting held with Ellen Doran - Update information on getting active website - Promotion of programmes linked in with other Physical Activity Team events e.g. Stoptober utilising Community Health

		Champions - Links with Sport Inspired to be developed
	With more programmes being delivered there is a need for more venues for the programme	- Looking at running programmes from Childrens centres as well as Leisure Centres - Teenagers programmes can be run from a variety of venues as Physical Activity space is not required
	Delivering to a larger number of families on programmes is challenging	- Community Health Champions (who have attended training on Child Obesity) are now assisting on programmes to ensure additional support for families
Improvements in performance that are anticipated as a result of the actions taken	<p>Recruitment of more theory leaders to increase the number of programmes that can be offered</p> <p>Pilot Programmes in primary schools in January will increase the number of referrals to be made.</p>	

Performance Indicator	21. Number of fixed penalty notices issued for environmental crime
Reasons for poor performance/decline	The performance for this month indicates that the team is slightly below the target level of activity. Staffs on maternity leave have impacted on performance. However, the direction of travel for this indicator is very positive when compared to the same period last year. The service issued 412 FPNs in quarter 2 of this year when compared to 263 FPNs in the same period last year.
Actions being taken to improve performance	Recently recruited agency staff to bringing the service up to full staffing level.
Improvements in performance that are anticipated as a result of the actions taken	It is hoped that the staff training and recently recruited agency staff will improve performance for this indicator and will have a positive impact on output. It should be noted that the service is on target in meeting its income target of £154k; already £6k below target.

Performance Indicator	23. The weight of waste recycled per household
Reasons for poor performance/decline	<p>The weight of waste recycled per household in quarter 2 is 61kg, which is below the quarter target of 81.25kg.</p> <p>The reduction of recycling among other things is attributed to the shift in season and the reduced tonnage of green waste collected. This is due to the industrial action by drivers of the GMB Union in March, April, May and June 2015. During strike period recycled materials (brown bin) and general</p>

	waste (grey bin) including side waste were collected in the same vehicles.
Actions being taken to improve performance	Waste Minimisation Team will continue to support residents to reduce waste, promote recycling and address the issue of contamination of the recycling brown bins.
Improvements in performance that are anticipated as a result of the actions taken	There would be a marginal improvement but year-end target of 325kg per household will not be met.

Performance Indicator	25. Care leavers in employment, education or training
Reasons for poor performance/decline	<p>In Q2 2015/16, performance has dropped to 43.3% (based on the new cohort); lower than Q2 performance in 2014/15 and end of year although this is not directly comparable. Performance is RAG rated Red as we are below target to meet our local target set at 55%-60%. It is important to note that the care leaver EET performance end of year figure for 2014/15 put the borough above the national and London average.</p> <p>Performance has been affected by the additional cohort change for this indicator, which has been expanded to include young people formally looked after whose 17th, 18th, 19th, 20th or 21st birthday falls within the collection period i.e. the financial year. This change has resulted in the cohort expanding from 169 in 2014/15 to over 220 in 2015/16. This expansion in the cohort has impacted on EET performance in 2014/15.</p>
Actions being taken to improve performance	<p>A NEET Barbecue event took place on 10th August 2015. A large variety of education providers and apprenticeship sites were present where our client group 16-21. 24 young people attended and signed up for various courses.</p> <p>Within the Learn2Live team meetings so far representatives from educational services Tomorrow's People, Barking and Dagenham college and DV8 have attended. There are at least two different educational services attending on a monthly basis.</p> <p>The team also runs a health and wellbeing course with the integrated youth service, which are based at the Vibe and they run for 6 months.</p> <p>Barking Dagenham College also want to run training for staff 'Teacher Training', which will enable staff to run accredited courses on site.</p> <p>There are also plans to run workshops for driving including undertaking the theory test and going through the skills of driving – some young people out of borough have found that their employment options are widened if they can drive.</p> <p>We have 21 young people currently in University and 2 who have just completed.</p>

Improvements in performance that are anticipated as a result of the actions taken	<p>NEETs will reduce. Staff will receive a certificate award and will be able to run a variety of accredited classes to enable our young people to improve their life chances.</p> <p>Care leavers will be able to have many more opportunities and support directly from the L2L team.</p>
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Performance Indicator	27. 16 to 18 year olds who are not in education, employment or training (NEET)
Reasons for poor performance/decline	<p>Whilst the not in education, employment or training (NEET) population is still too high at 6.2% (equating to 289 young people) the percentage of 16 to 18 year olds who are (NEET) has decreased slightly to 6.2% compared to 7.2% in Q2 2014/15. Performance on NEETs has remained higher than national and London averages of 5.2% and 3.8% respectively, but is reducing overall.</p> <p>It is also important to take this figure in the context of the reduction of combined NEET and Unknown figures. Reducing Unknowns will cause NEETs to rise in the short term as they are 'discovered' to be NEET, after which they can be targeted with support</p>
Actions being taken to improve performance	<p>A considerable amount of effort is going into reducing this figure. A number of initiatives to track and support young people have been introduced to track young people and support them following the merger with the Youth service including out of hours tracking and a JCP NEET support worker working directly with schools. The borough has had and continues to have considerable success in tackling Unknowns (the combined NEET and Unknown figure had the greatest reduction in London between June 2014 and June 2015 when the total was reduced from over 20% to 12%.The LA is also bidding to become a sub-contractor for the ESF NEET strand. An additional Youth worker and Jobcentreplus worker have been assigned to support NEET advisers in engaging the hard to reach and their work will include door knocking and home visits.</p>
Improvements in performance that are anticipated as a result of the actions taken	<p>NEET figures are expected to continue to improve to close the gap with the national average although, in the short term, ongoing improvements in Unknown reduction will continue to have the opposite effect.</p>

Performance Indicator	28. Percentage of primary schools rated as good or outstanding
Reasons for poor performance/decline	<p>An increased percentage of children are attending good or better schools in Barking and Dagenham and school inspection outcomes at primary have improved. In Q2, 76% of primary schools are currently rated as good or outstanding compared to 67% as at end of August 2014.</p> <p>Despite improvement, we are RAG rated red due to progress</p>

	<p>against our ambitious target set at 100% by December 2015.</p> <p>After 2 years of very heavy inspections, there were only 7 primary schools inspected during 2014/15 academic year and none have been inspected so far in this academic year.</p> <p>Of the remaining 8 RI schools, the LA judges 3 as securely good now which would increase the primary inspection outcomes to 82%, in line with the national average. A further 2 primary schools are close to good and the 3 remaining schools have monitoring boards in place and are all being strongly supported by schools with outstanding leadership.</p>
Actions being taken to improve performance	<p>Barking and Dagenham primary school inspection outcomes are closing on national average of 82% but this remains a key area of improvement as outlined in the Education Strategy 2014-17.</p> <p>Intensive Local Authority support is being provided to vulnerable schools and supporting the new Requires Improvement monitoring processes.</p> <p>The Education Strategy 2014-17 sets out the key actions to improve primary school inspection outcomes – please refer to:</p> <p>https://www.lbbd.gov.uk/council/priorities-and-strategies/corporate-plans-and-key-strategies/education-strategy/overview/</p>
Improvements in performance that are anticipated as a result of the actions taken	<p>Primary schools move from requires improvement to good.</p>

Performance Indicator	32. Looked After Children (LAC) with Health Checks
Reasons for poor performance/decline	<p>In Q2 2015/16, the percentage of looked after children in care for a year or more with an up to date health check dropped to 73% compared to 82% in Q1 and 92% as at the end of year (2014/15). A drop in performance, between Q4 and Q2 has been observed for the last two years as performance on LAC health checks fluctuates throughout the year as new children come into care. By the end of the financial year performance usually exceeds 90%, above national and London averages.</p> <p>A review of LAC medicals out of time was undertaken in early October to understand decline in performance. Reasons for decline in performance in Q2 2015/16 are as follows:</p> <ol style="list-style-type: none"> 1. Social Workers are not completing the required forms in a timely fashion to pass to Health, despite Health Business Support Officer chasing them regularly. 2. Delays in receiving the Health Care Plan following the health check also

	<p>contribute to health checks being out of time. A total of 59 health assessments are still being quality assured by health staff. Once received in social care, performance is most likely to improve to over 75%.</p> <p>There has also been a recent change of process, resulting in an improvement in the return of paperwork. Performance on health has also been included in performance dashboards for each team across social care. The rapid increases being made are an essential element of the SAFE programme. They demonstrate improved understanding of thresholds and better multi-agency working. Current performance is on track to exceed 90% (target) at the end of March 2015/16.</p>
Actions being taken to improve performance	<p>Actions taken to improve performance are:</p> <ul style="list-style-type: none"> • New option has been added to ICS to record the status of "Paperwork completed and sent to Health" to enable better reporting on delays and problems with paperwork. This will enable improved tracking and escalation points to senior managers. • An action plan is in place to improve performance, monitored at monthly meetings between the Local Authority and Designated LAC Nurse to review progress and address any issues. • Regular meetings to review progress and address any issues have been implemented to improve performance. • Continued regular communication to all staff and Health BSO to attend the Team Meetings regularly.
Improvements in performance that are anticipated as a result of the actions taken	<p>Performance to increase to 85% at end of Q3 and over 90% at end of year. Targets set to ensure there is no end of year clean up.</p>

Performance Indicator	36. Average time taken to re-let local authority housing (calendar days)
Reasons for poor performance/decline	<p>At end of Q2, performance has improved greatly.</p> <p>The operational performance (Repair of property excluding lettings) for Qty 2 is now at 33.6 days</p> <p>Operational performance QYT 1 average 35.6 days (total = 46.6 days)</p> <p>Operational performance QYT2 average 33.6 days (total = 44.75 days)</p>
Actions being taken to improve performance	<p>We have identified the area that require improvement as follows:</p> <ol style="list-style-type: none"> 1. Fluctuations in workload – consider demand with process for additional resources via subcontracting and / or additional work via internal refurbishment works. 2. Review size of team. Isolate plastering and electrical work other than for small works. 3. Consider a rip out gang. Perhaps clean out labourers also removing plaster and possibly installing plasterboard. 4. Initial preparation is too lengthy. Identify the cause. 5. Very little use is made of pre-termination visits. Discuss with Housing Management. 6. Condition of void properties could be better. More strict enforcement of the recharge policy. 7. Proper dedication of gas engineers to voids. 8. Dedicated asbestos surveyor – but issues with visibility of

	property until clean out is carried out.
Improvements in performance that are anticipated as a result of the actions taken	Performance is expected to continue to improve with confidence that that 30 day target will be achieved.

Performance Indicator	43. The percentage of Council Housing rent collected
Reasons for poor performance/decline	<ol style="list-style-type: none"> 1. HB paid to rent as a percentage of rent debit is down by 2.5% in 15/16 compared to 14/15. The cash effect of this so far this year equates to £1m and would equal £1.9m if continued over the full year. 2. Factors contributing to this are: <ol style="list-style-type: none"> a. Welfare reform: <ol style="list-style-type: none"> i. Benefit cap: this currently affects 130 properties and is estimated to have a full year impact of reducing HB by £100k. ii. Under occupancy (bedroom tax): there are 941 households affected by the 14% single room deduction. The weekly impact is £14,547 which will equate to an annual impact of approximately £756k. There are a further 216 households affected by the 2 room deduction of 25% costing £6k per week, with a full year effect estimated at £320k. The total year impact is estimated therefore at £1m. iii. The Change to the CTS scheme has also increased pressure on the household budget. This is because even the poorest households are having to make a contribution to wards their Council Tax of at least 25%. This changed from 15% in April 2015. It is believed that this has affected and will affect rent payments although it is not possible to estimate this in terms of specific financial impact iv. Government contribution to the DHP grant has reduced from £1.3m to £749k. Currently there is still £500k to be allocated from the fund and it is estimated that £200k is to be paid to the HRA for those households who are eligible for the discretionary support . At this point in 2014/15 there was £800k still be allocated . The amount available to Council tenants in 2015/16 is substantially less and therefore the amount available in funding to the HRA is significantly reduced. Ie £500k <p>This year has seen the full impact of welfare reform as historically the DHP funding did cover shortfalls and the changing legislation “loophole” for Bedroom Under Occupancy also resulted in additional monies being awarded last year covering the shortfalls.</p>
Actions being taken to improve performance	<ol style="list-style-type: none"> 1. Rents campaigns every month to generate approx additional revenue to year end. 2. Using Agilisys Revenues Collection (ARC) to generate potential additional revenue to year end.

	<p>3. Capita Nudge could possibly generate additional revenue along with other Housing Transformation.</p> <p>4. Targeting of resource in benefits by additional proactive work to accelerate the process ahead of statutory process times . (Note: there are statutory time periods to deal with information received and for residents to reply with info. By proactively managing the timeliness to ensure that claims are “completed” more quickly we can ensure claims are potentially completed more quickly</p>
Improvements in performance that are anticipated as a result of the actions taken	Expectation that year end target of 99.24% will be achieved.

Performance Indicator	<p>45. The time taken to process Housing Benefit / Council Tax benefit new claims</p> <p>&</p> <p>46. The time taken to process Housing Benefit / Council Tax benefit change events</p>
Reasons for poor performance/decline	A combination of resource issues & volume increases (including the closure of Benefits Direct, RTI casework & Fraud Queries) has resulted in a backlog of new claims & changes in circumstances.
Actions being taken to improve performance	Additional resource has been allocated to clear all work as well as a recovery plan being put in place from the beginning of September 2015. This recovery plan is being monitored by Elevate on a daily basis and monitored by the LBBD client team on a weekly basis to ensure it is having an effective impact.
Improvements in performance that are anticipated as a result of the actions taken	It is anticipated that the recovery plan will have impacted backlogs by the End of November 2015 with work no older than 30 days. The anticipated impact of reducing the backlog however will not emanate in performance improvement until January 2016.

Performance Indicator	<p>47. The percentage of Stage 1 complaints responded to within deadline</p> <p>48. The percentage of Stage 2 complaints responded to within deadline</p> <p>49. The percentage of Stage 3 complaints responded to within deadline</p> <p>51. The percentage of member enquiries responded to within deadline</p>
Reasons for poor performance/decline	Current performance is unsatisfactory.
Actions being taken to improve performance	<p>A major re-modelling of the complaints process and that of member casework is currently underway.</p> <p>This will introduce both: new governance; revised targets; a new</p>

	<p>software system; better insight through improved reporting; and a performance dashboard and a new officer working group.</p> <p>The new governance structures currently being introduced across the council are designed, in part, to ensure that a more customer focused approach to resolving complaints and casework will be embedded within the organisation. Going forward, a renewed focus on lessons learned will ensure that performance improves.</p>
Improvements in performance that are anticipated as a result of the actions taken	A clear improvement in the percentage of complaints and member enquiries responded to within deadline.

Performance Indicator	52. The average number of days lost due to sickness absence
Reasons for poor performance/decline	<p>The Quarter 2 sickness levels have risen again from the last quarter, and it shows a disappointing increase in absence levels.</p> <p>The reasons for this increase are similar to the Quarter 1 response, as it will take some additional time for this trend to be reversed, and for real improvements to be made.</p>
Actions being taken to improve performance	<p>Hotspots have been identified. These are divisions where there is a significantly higher average absence rate. Individual senior managers have meetings scheduled with HR colleagues as part of the Sickness Absence Reduction Project work. Hot spot meetings provide an opportunity to</p> <ul style="list-style-type: none"> • Review the data and compare against previous years, and other services • Review in particular the number of cases where triggers have been met and the procedure has not been applied or interventions not used proactively • Confirm the range of interventions that would be appropriate • Schedule further review meetings to identify any improvements, and ongoing support and challenge. <p>Communication about the need to keep sickness under review has been provided to managers.</p> <p>Improvements have been made to reporting, and dashboards will now include trigger reports and other data that managers will be able to run themselves.</p> <p>We are in the process of investigating other solutions such as first day absence nurse led reporting systems. The business case and return on investment is being reviewed for further consideration.</p> <p>The number of long term absences has increased slightly, the</p>

	<p>reasons for absence remain broadly the same as the previous quarter.</p> <p>We will shortly be introducing trigger related mandatory health and wellbeing checks.</p> <p>The number of flu jabs provided to staff, including those in front-line risk groups has increased on previous years, and has provided an opportunity to increase the number of bookings for other health promotion interventions such as health and wellbeing checks.</p> <p>The average performance in London is 7.54 days (across 27 authorities which collect data through LAPS (London Authority Performance System).) A number of the Councils included have small numbers of 'blue collar' workers and sickness levels tend to be lower in these authorities, which will therefore influence the overall average.</p>
<p>Improvements in performance that are anticipated as a result of the actions taken</p>	