

	REPORT TO CABINET TO BE HELD ON 17 OCTOBER 2017
This report contains exempt or confidential information in Appendix 2 which is excluded from this publication	Key Decision No Forward Plan Ref No
Corporate Priority All	Cabinet Portfolio Cllr S Turner Holder

REPORT OF THE DIRECTOR (LD) – 17/221

WARDS AFFECTED: ALL

**SUBJECT: PERFORMANCE MANAGEMENT FRAMEWORK -
QUARTER 1 REPORT 2017/18**

RECOMMENDATIONS:

Members are recommended to note the contents of this report and in particular the good/satisfactory levels of performance being achieved by services at the current time and in particular

1. the improvement in response times to complaints and Freedom of Information requests; and
2. the increase in compliments received by the Council in relation to the carrying out of its services.

REASON FOR RECOMMENDATIONS:

To provide information relating to Council performance for a rolling 12 month period to the end of the first quarter of 2017/18.

To ensure that the Council's Corporate Service and Business planning processes are effective.

In accordance with Government guidelines, details on the performance of the Council and its services must be made available through as many mechanisms as possible.

HIGHLIGHTED RISKS:

There are risks in respect of performance matters, primarily in respect of poor performance. Through the monitoring procedures that are in place throughout the Council, these risks are mitigated. The publication of performance information meets with the Government's public data transparency agenda and non-publication could lead to an external challenge.

1. INTRODUCTION

- 1.1 The Council is committed to a performance management culture that underpins our focus on continuous improvement. Regular monitoring of the Council's top level performance is a key component of the performance management framework (PMF) and the Corporate Planning Process overall.
- 1.2 Quarterly reports on performance are presented to Cabinet to allow Members to examine any areas where performance is shown to be downward and challenge the Services concerned with a view to identifying where performance can be improved. The process is about more than the monitoring of performance, it ensures that Members are involved in the management of the Council's performance.
- 1.3 With the exception of a small number of performance indicators, data is assessed over a rolling 12-month period. This is felt to be a more accurate means of assessing performance by removing elements of seasonality, smoothing out short-term fluctuations and highlighting longer-term trends or cycles.

2. CORPORATE AIMS/PRIORITIES

- 2.1 Performance Management is key in delivering and monitoring all the Council's aims and priorities.

3. BACKGROUND AND ISSUES

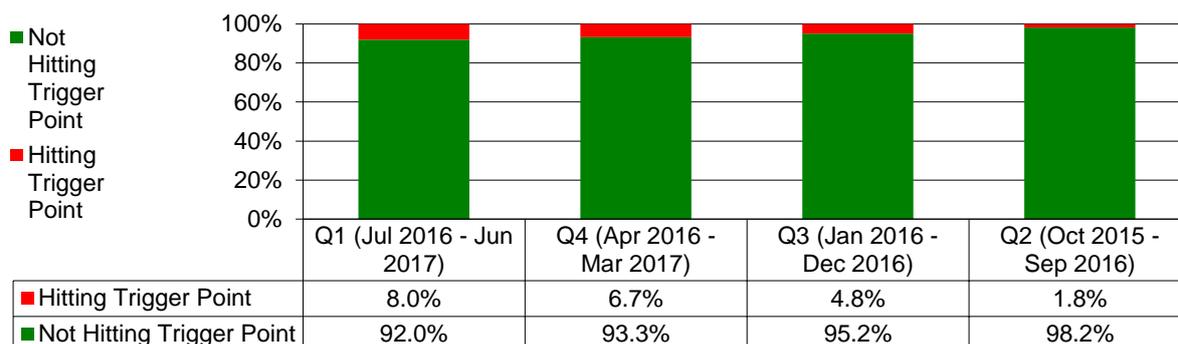
- 3.1 As stated previously, the Council operates a Performance Management Framework (PMF) which is used to monitor the performance of its services.
- 3.2 A wide range of Performance Indicators are currently monitored and reported on, to assist in managing the efficient and effective delivery of Council services and evidence how the Council is delivering against its priorities. This report sets out the results for the Performance Indicators for the period to the end of the first quarter for the 2017/18 financial year. As stated previously in this report, with the exception of a small number of performance indicators, data is assessed over a rolling 12-month period. This means that data for the end of quarter 1 2017/18 covers the period from 1 July 2016 to 30 June 2017 inclusive.

3.3 The Council's approach is based on exception reporting, and detailed information is only provided for those indicators which are deemed to be 'at risk' ie where targets are not being achieved and performance is in a downward direction of travel. Tolerance limits have also been set for all indicators; these have been established so that minor fluctuations in performance and achievement of targets can be disregarded. This ensures that the focus is firmly on areas of concern.

3.4 It is pleasing to note that the results of the exception reporting for the first quarter of 2017/18 have identified only a small number of PIs that meet the criteria for 'at risk', with good or satisfactory performance being achieved in most areas.

3.5 Direction of Travel - % of Performance Indicators hitting exception reporting trigger point

3.6 The Chart below compares the position re number of indicators where performance is hitting the exception reporting trigger point. There has been a slight increase in the number of indicators hitting the exception reporting trigger since the last quarter.



3.7 A small number of Key performance indicators are highlighted as 'at risk' at quarter one of 2017/18 Financial Year. Only 8% of indicators are outside tolerance and these are as follows:

Number	Performance Indicator	Referred previously
Corporate Finance		
CF6	Percent of non-disputed sundry debts collected since 1 April	No
Customer Services		
CS1	Percent of calls answered within 20 seconds	Yes
CS2	Percent of abandoned calls	Yes
Property Services		
PAS8c	Reduction in water consumption	No
Sustainable Communities		
SCT14	No. of community payback hours to support environmental and physical improvements for the benefit of communities across the Borough	No
Tourism		

Number	Performance Indicator	Referred previously
SIV4	Number of conference days at the Scarborough Spa and Whitby Pavilion	No
Regulatory & Governance		
DS4	% minutes and executive decisions produced within 48 hours of meeting	No

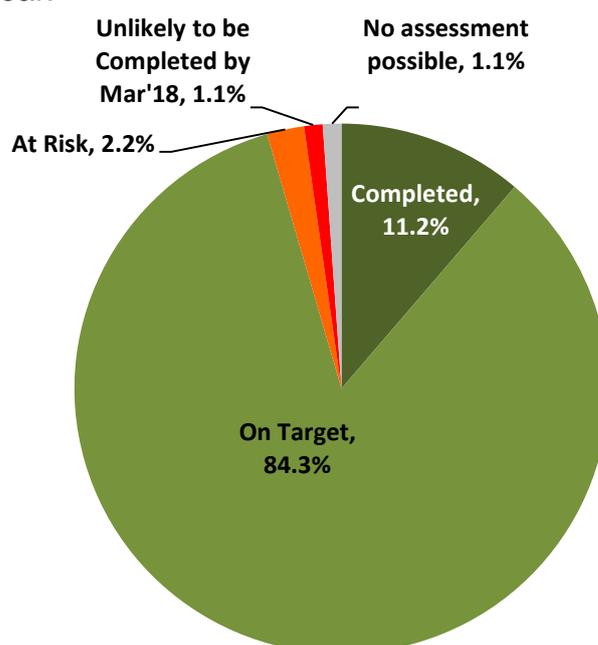
3.8 A proforma is completed for indicators which are identified as 'at risk', to provide further information concerned as to reasons for the current levels of performance. Comparisons to the previous year's data for the same period are shown where information is available. The proforma also includes a trend chart which shows details of performance for each indicator on a monthly or quarterly basis. Services are also required to complete an action plan which will be monitored and progress reported to Cabinet. A Proforma for the Performance Indicators listed above is attached at appendix 1.

3.9 The number of performance indicators which are identified as 'at risk' is exceptionally low. It should be noted that there were in addition a small number of other Performance Indicators found to meet the criteria of 'at risk', however, these were found to be within acceptable tolerance levels.

3.10 Critical Success Factors

Performance is also monitored through 'Critical Success Factors' which are the projects and performance measures which each service will deliver in the year ahead, as their contribution to the Council's aims and priorities as set out in the Corporate Plan.

3.11 Monitoring of Critical Success Factors (CSFs) shows that at the current time 3.4% of CSFs are at risk or unlikely to be completed by the end of the Financial Year.



3.12 Sickness Absence Monitoring

3.13 It is pleasing to note that there has been a decrease in the level of sickness absence since the last quarter, from 8.85 days per FTE to 8.40 days per FTE (rolling 12 month average). A detailed table in relation to sickness absence is provided at appendix 2. This details sickness by service and further information has been provided by each Service Unit Manager where the level of sickness absence meets the exception criteria of not meeting target, and performance is worse than the same time period last year, and there has been no improvement since the previous quarter.

3.14 Complaints, Compliments and Satisfaction

3.15 The monitoring of response times for stage 1 complaints is now undertaken and this shows that 86.4% of responses are provided within 20 working days across the Council. This represents an improvement on 77.9% for the same period last year (12 month rolling average). The average time to respond to complaints across the Council over the last 12 month period was 9.8 working days, significantly less than the target response time of 20 working days. A detailed table in relation to response times to complaints is provided at appendix 3. This details performance in responding to complaints by service and further information has been provided by each Service Unit Manager where the complaints response times meets the exception criteria.

3.16 A total of 100 compliments were received which is an increase on the same period last year (12 month rolling). A table providing further details in relation to compliments and service satisfaction is provided in appendix 4.

3.17 Freedom of Information Requests

3.18 The Freedom of Information Act, Environmental Information Regulations and INSPIRE Regulations give the right to access official information. Compliance with the legislation is monitored by the Information Commissioner's Office, who have recently raised the threshold that triggers their monitoring of public authorities when responding to freedom of information (FOI) requests. Public authorities will now be considered for monitoring if fewer than 90% of their FOI responses fall within the statutory timescale. The Council's target to complete all Freedom of Information requests within 20 working days has therefore been increased to 90% to correspond with this and the majority of services are meeting this new target.

3.19 Response times for Freedom of Information requests shows that 95.7% of responses are provided within 20 working days across the Council. This represents an improvement on the previous year of 94.8%. The average number of days to respond to a Freedom of Information request is 10 working days, which is significantly less than the target statutory response time of 20 working days. A detailed table in relation to response times is provided at

appendix 5. This details performance in responding to Freedom of Information requests by service.

4.0 RECOMMENDATIONS

- 4.1 As stated previously, results of the exception reporting analysis have identified only a small number of performance indicators to be 'at risk'. Overall, the Council's services have been assessed to be performing well or satisfactorily.

5. IMPLICATIONS

Policy

- 5.1 No specific implications

Financial

- 5.2 There are no direct financial consequences

Legal

- 5.3 No direct legal implications identified.

Sustainability

- 5.4 There are no sustainability issues identified at this time

Equalities and Diversity

- 5.5 No specific implications

Others

- 5.6 I have considered whether there are any Staffing, Planning, Crime and Disorder, Health and Safety, and Environmental implications arising from this report and am satisfied that there is no identified implication that will arise from this decision.



Lisa Dixon
Director

Author: Petra Jackson, Performance and Admin Manager
Telephone No: 01723 383528 E-mail address: petra.jackson@scarborough.gov.uk

Background Papers:

None

IF YOU HAVE ANY QUERIES ABOUT THIS REPORT OR WISH TO INSPECT ANY OF THE BACKGROUND PAPERS, PLEASE CONTACT PETRA JACKSON 01723 383528, e-mail petra.jackson@scarborough.gov.uk

Risk Matrix

Risk Ref	Date	Risk	Consequences	Mitigation	Current Risk Score	Target Score	Service Unit Manager/ Responsible Officer	Action Plan
1	October 2017	Performance Management arrangements are not responsive and effective	Poor service performance External auditor criticism	Performance Management Framework	A3	A3	Performance and Admin Manager	None
2	October 2017	Performance information is not made available to the public	This is against the Government's guidelines and the Council could be challenged	Publication of information via the web site, Annual report and news articles	A3	A3	Performance and Admin Manager	None
3	October 2017	Responses to complaints are not timely	Poor service performance Poor customer care Low levels of customer satisfaction	Monitoring and reporting of response times by service – identification of problem areas and focus on improvements	B3	A3	Performance and Admin Manager	None

Glossary of Terms

Risk

An event which may prevent the Council achieving its objectives

Consequences

The outcome if the risk materialised

Mitigation

The processes and procedures that are in place to reduce the risk

Current Risk Score

The likelihood and impact score with the current mitigation measures in place

Corporate Objectives

An assessment of the Corporate Objectives that are affected by the risk identified.

Target Risk Score

The likelihood and impact score that the Council is aiming to achieve

Service Unit Manager

The Service Unit or Officer responsible for managing the risk

Action Plan

The proposed actions to be implemented in order to reduce the risk to the target score

Risk Scoring

Impact	5					
	4					
	3					
	2					
	1					
		A	B	C	D	E
	Likelihood					

Likelihood:

A = Very Low

B = Not Likely

C = Likely

D = Very Likely

E = Almost Certain

Impact

1 = Low

2 = Minor

3 = Medium

4 = Major

5 = Disaster