	<b>REPORT TO CABINET TO BE HELD ON 12 DECEMBER 2017</b>
<b>This report contains exempt or confidential information in Appendix 3 which is excluded from this publication</b>	<b>Key Decision</b> <b>No</b>  <b>Forward Plan Ref No</b>
<b>Corporate Priority</b>  <b>All</b>	<b>Cabinet Portfolio</b> <b>Cllr. S Turner</b> <b>Holder</b>

**REPORT OF THE DIRECTOR (LD) – 17/290**

**WARDS AFFECTED: ALL**

**SUBJECT: PERFORMANCE MANAGEMENT FRAMEWORK -  
QUARTER 2 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 in particular:

1. The continuing 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 second 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**

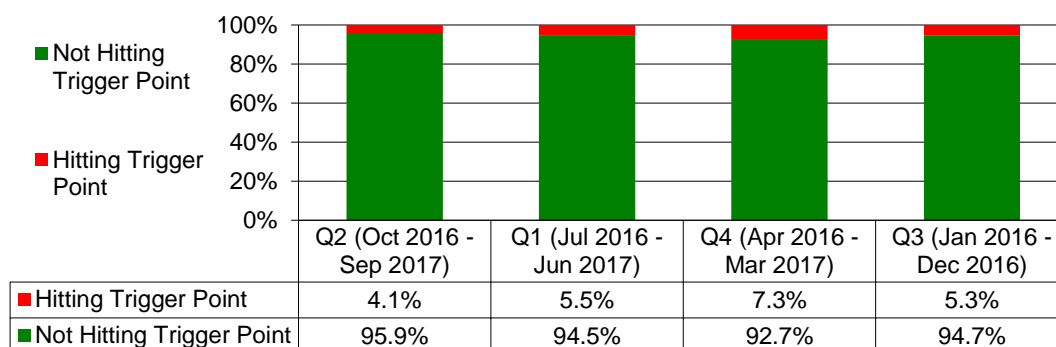
- 3.1 As stated previously, the Council operates a Performance Management Framework (PMF) which is used to monitor the performance of its services.
- 3.2 A wide range of Performance Indicators are currently monitored and reported on, to assist in managing the efficient and effective delivery of Council 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 second 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 2 2017/18 covers the period from 1 October 2016 to 30 September 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 Second 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 decrease 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 two of 2017/18 Financial Year. Five indicators are outside tolerance and these are as follows:

PI Number	Performance Indicator	Referred previously
<b>Customer Services</b>		
CS2	Percent of abandoned calls	Yes
<b>Housing</b>		
HS9	Percentage of DFG enquiries responded to within 21 days (first contact to first visit)	No
<b>Tourism</b>		
T5	Number of conference the Tourism Bureau attracts	No
MT1	Number of visitors to buildings minus schools	No
MT4	The number of pupils visiting museums and galleries in organised school groups (this does not include visits by Sixth Form Colleges or adult education institutions)	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. Proforma for the Performance Indicators listed above is attached at appendix 1.

- 3.9 It is pleasing to note that the following performance indicators which were reported at the last quarter as being 'at risk', are all now showing improvement.

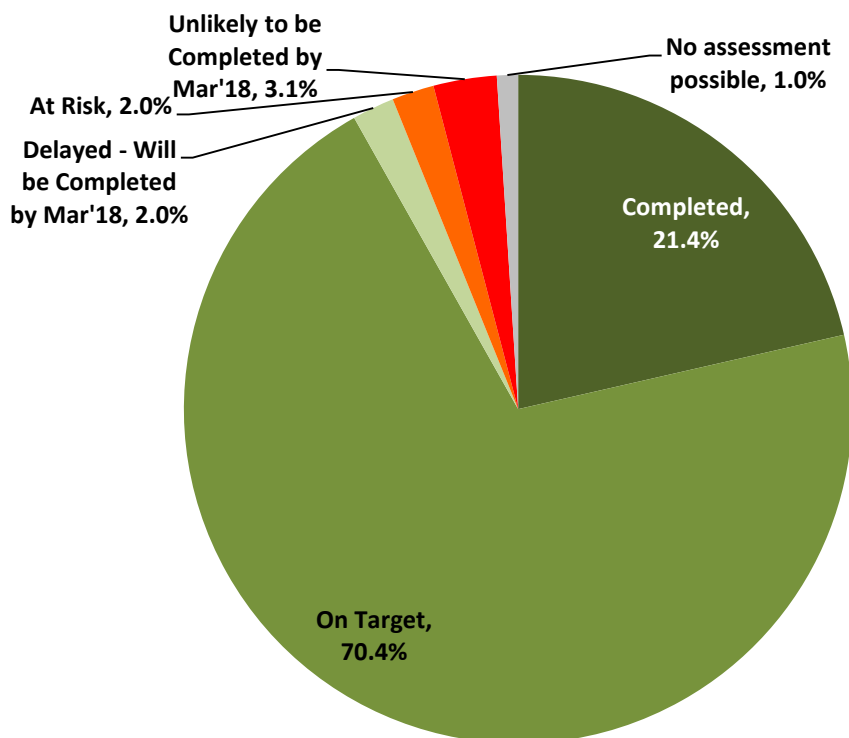
PI Number	Performance Indicator	Performance Qtr1 2017/18	Performance Qtr 2 2017/18
CS1	Percent of calls answered within 20 seconds	48.9%	49.4%
CF6	Percent of non-disputed sundry debts collected since 1April	65.5%	93.0%
PAS8c	Reduction in water consumption	0.4%	-15.5%
DS4	% minutes and executive decisions produced within 48 hours of meeting	66.7%	83.3%

- 3.10 There are a number of services where overall performance is identified as good. The Regulatory & Governance Service currently has 80.0% of their performance indicators performing well and 75% exceeding target. The Harbours service has 80.0% of their performance indicators performing well and on target and all other PIs within acceptable levels of tolerance.

### 3.11 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.

- 3.12 Monitoring of Critical Success Factors (CSFs) shows that at the current time 5.1% of CSFs are at risk or unlikely to be completed by the end of the Financial Year.



3.13 It is pleasing to note that over 21% of CSFs set for 2017/18 have already been completed and these are as follows:

CSFs Completed by Quarter 2 2017/18
<b>Operations, Transport and Countryside Services</b>
To introduce MOT facilities at Dean Road garage
To maintain 4 parks accredited with green flag awards and/or awards for excellence
To renew operator licence
<b>Benefits</b>
Successfully bid for funding from DWP for RBI activities
<b>Harbours</b>
Review, enhance and achieve MCA approval of both Port Waste Management Plans
<b>Projects</b>
Open Scarborough Leisure Village
Submit planning application for Whitby Piers Refurbishment
Submit planning application for Church Street Flood Alleviation Works
Submit planning application for Runswick Bay Coast Protection Works
Complete Pier Road WC Extension
Re-procure new coastal maintenance framework
Engage HLP Project Officer, procure consultants and commence detailed design of South Cliff Gardens HLF Project
<b>Sustainable Communities</b>
Develop an agreement with Ryedale District Council for the delivery of community safety support, to support additional income generation
<b>Tourism</b>
Obtain DBID - Destination Business Improvement District, private sector 5 year funding bid.
Delivery and assessment of major events within the Borough
- Seafest
- Armed Forces Day
- P1 day
- Tour de Yorkshire
Obtain sponsorships for major events within the Borough

CSFs Completed by Quarter 2 2017/18
<b>Operations &amp; Events</b>
CCTV - to retain (annually) the funding from partnership working with North Yorkshire Police
Upgrade all parking machines to accept new £1 coins
Filey Brigg - Improvements to pitches to enable all weather use
Whitby - Improvements to Beach Management Centre to offer sale of deck chairs and provide tourist information
Whitby - Improve signage for Cliff Lift, Beaches and Chalets

### 3.14 Significant Partnerships

3.15 The Council classes its significant partnerships as:

**‘partnerships of major financial consequence and significantly affecting corporate priorities if the partnership were to fail’.**

3.16 A system is in place to assess the level of significance of all council partnerships, to provide a systematic means of identifying which partnerships are of the greatest significance to the Council and therefore require regular monitoring and scrutiny. Reporting to Scrutiny on individual significant partnerships is by exception only. This ensures that all significant partnerships continue to be monitored but that Scrutiny is focused on areas where there are concerns/risks of failure.

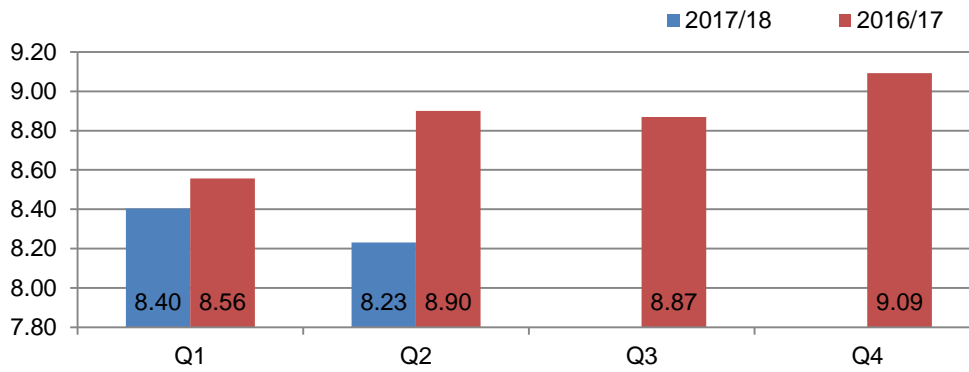
3.17 Partnership Score Cards are completed by the Responsible Officer for the Partnership, in conjunction with the Lead Member, on an annual basis. A scoring mechanism is used to provide a RAG (Red, Amber, Green) status for each partnership to facilitate exception reporting. The results of the quarterly review for Significant Partnerships for 2017/18 is attached at appendix 2 and it is pleasing to report that the RAG status of all partnerships is showing green, low level of concern.

### 3.18 Sickness Absence Monitoring

3.19 There has been a reduction in the level of sickness absence since the last quarter, from 8.90 days per FTE to 8.23 days per FTE (rolling 12 month average). A detailed table in relation to sickness absence is provided at appendix 3. 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.

### 3.20 Sickness Absence - Sickness per FTE for 2017/18 and 2016/17 (12 month rolling average)

The chart below compares the sickness per FTE for each quarter for the current and previous year (12 month rolling average). There has been a continuous reduction in sickness absence across the Council over the last two quarters.

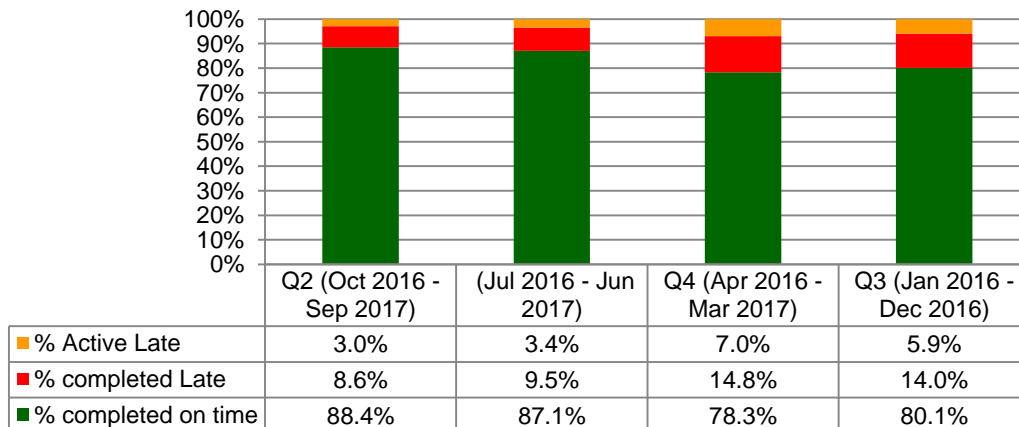


### 3.21 Complaints, Compliments and Satisfaction

3.22 The response times for stage 1 complaints shows that 88.4% of responses are provided within 20 working days across the Council. This is an improvement on the previous quarter, 87.1%, and on the same period last year, 79.4% (12 month rolling average). The average time to respond to complaints across the Council over the last 12 month period was 9 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 4. This details performance in responding to complaints by service.

### 3.23 Complaints - % of complaints complete within 20 working days

The chart shows the percentage of complaints completed within 20 working days, completed late and active late. The percentage of complaints completed within 20 working days has been gradually increasing over the last 12 months.



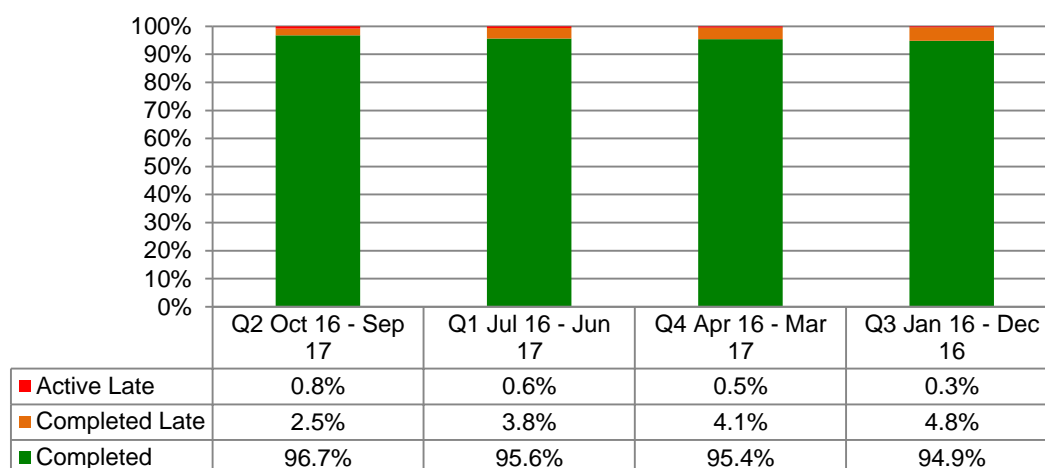
3.24 There has been a significant increase in the number of compliments recorded. For the period October 2016 to September 2017, a total of 103 compliments were recorded, compared to 81 for the period October 2015 to September 2016. On the whole there has also been an increase in satisfaction across services. A table providing further details in relation to compliments and service satisfaction is provided in appendix 5.

### 3.25 Freedom of Information Requests

3.26 The response times for Freedom of Information requests shows that 96.7% of responses are provided within 20 working days across the Council. This represents an improvement on the previous year of 95.1% and the previous quarter of 95.6% (12 month rolling average). The average number of days to respond to a Freedom of Information request across the Council is 9.9 working days. This 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 6. This details performance in responding to Freedom of Information requests by service.

### 3.27 FOI Requests – Percentage completed within 20 working days

The chart shows the percentage of FOI requests completed within 20 working days, completed late and active late. The percentage of FOI requests completed within 20 working days has continually improved over the last 12 months



## 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

### **Communications**

5.6

### **Others**

5.7 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.



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**Director**

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**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](mailto:petra.jackson@scarborough.gov.uk)

## Risk Matrix

<b>Risk Ref</b>	<b>Date</b>	<b>Risk</b>	<b>Consequences</b>	<b>Mitigation</b>	<b>Current Risk Score</b>	<b>Target Score</b>	<b>Service Unit Manager/ Responsible Officer</b>	<b>Action Plan</b>
1	December 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	December 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	December 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