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Rutland County Council

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Meeting: PEOPLE (ADULTS & HEALTH) SCRUTINY PANEL

Date and Time: Thursday, 9 July 2015 at 7.00 pm

Venue: COUNCIL CHAMBER, CATMOSE, OAKHAM,
RUTLAND, LE15 6HP

Clerk to the Panel: Corporate Support 01572 758311
email: corporatesupport@rutland.gov.uk

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QUARTER 4 PERFORMANCE MANAGEMENT REPORT

7) QUARTER 4 PERFORMANCE MANAGEMENT REPORT 2014-15

(Previously circulated under separate cover)

(Pages 1 - 48)

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CABINET

16th June 2015

Performance Management Report – Quarter 4 2014/15

Report of the Chief Executive

Strategic Aim:	<i>All</i>	
Key Decision: No	Forward Plan Reference: <i>FP190515/01</i>	
If not on Forward Plan: N/A	Chief Executive Approved	Scrutiny Chair Approved
Reason for Urgency:	N/A.	
Exempt Information	No	
Cabinet Member(s) Responsible:	Councillor T King, Portfolio Holder for Places (Development and Economy) and Resources	
Contact Officer(s):	Debbie Mogg, Director for Resources	Tel: 01572 758358 dmogg@rutland.gov.uk
	Diane Baker, Head of Corporate Governance	Tel: 01572 720941 dbaker@rutland.gov.uk
Ward Councillors		

DECISION RECOMMENDATIONS

That Cabinet:

1. Notes the overall position in relation to performance for the year 2014/15

1. PURPOSE OF THE REPORT

- 1.1 To report to Cabinet on the Council's performance for the fourth quarter of 2014/15.

2. BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 This is the fourth quarterly Corporate Performance Management report of 2014/15, highlighting performance for the year to date. It is intended to update Cabinet in performance:

- Against our strategic aims and objectives;
- Of the Customer Services team;
- On the sickness absence targets; and
- On Safeguarding

It is also intended to provide an update on a number of projects that the Authority is involved in delivering; this information is provided in the Project Update appendix to the report (**Appendix E**)

3. OVERALL SUMMARY

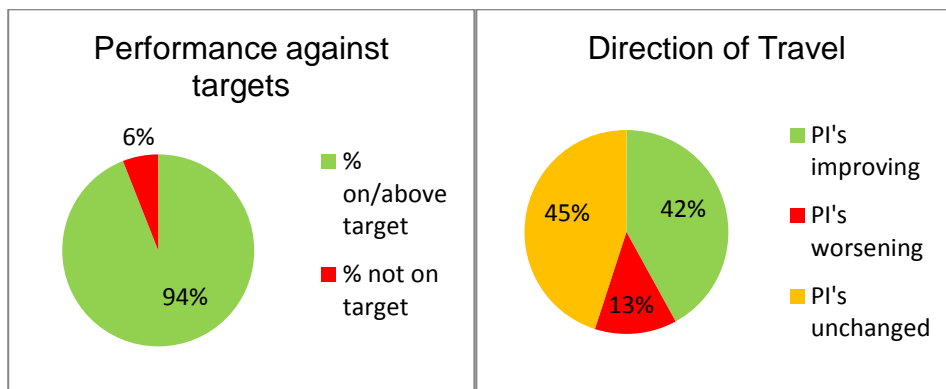
4.1 This report brings together an update on progress across a number of areas:

Performance against our Corporate Aims and Objectives

4.2 **Appendix A** contains detailed information on the Council's performance in relation to a number of local and statutory indicators covering the Council's Aims and Objectives, summarised below.

Overall Performance Summary

The performance against targets graph represents how many indicators are currently above and below target. The direction of travel graph shows a comparison with the previous quarter, giving an indication of how much of an improvement has been made. Performance against targets has increased to 94% in Quarter 4 (from 88% in Quarter 3), this is the highest it has been throughout 2014/15 and reflects the work being done by teams to achieve targets throughout the year.



Corporate Health

4.3 Another quarter of improvement in FOI figures (LI004 % of FOI requests replied to within 20 days), with Quarter 4 being the best performance in the last two years

The Council introduced a new Compliments, Comments and Complaints Procedure on January 1st 2015. During Quarter 4 we received a total of 68 complaints, 63 (93%, LI034) of which were dealt with during the 10 day response period. The current target for this indicator is 95% whilst the new process is established within the Authority. Once established the Corporate Support team is aiming for 100% of complaints to be responded to within the 10 day target period.

We also received comments and compliments as set out below, these are passed onto Heads of Service within the relevant departments to discuss with staff involved.

Comments - Total 6

	Places	Resources	People
Total for Directorate	4	2	0

Compliments – Total 21

	Places	Resources	People
Total for Directorate	12	3	6

Delivering Council Services within our MTFP

Q4	4	4	1
Q3	6	2	1

- 4.4 All agendas have been published on time Quarter 4, with 1 set of draft minutes issued late (out of 29 scheduled). Despite both these indicators (LI031 and LI032) finishing just below the target of 100%, the table below shows the good performance that has been seen throughout this year with only one set of documents late in each resulting in the target being missed.

	Q1 Performance	Q2 Performance	Q3 Performance	Q4 Performance
LI031 – Agendas	100%	100%	95%	100%
LI032 – Minutes	100%	100%	100%	97%

Creating a Brighter Future for All

Q4	15	1	0
Q3	14	2	0

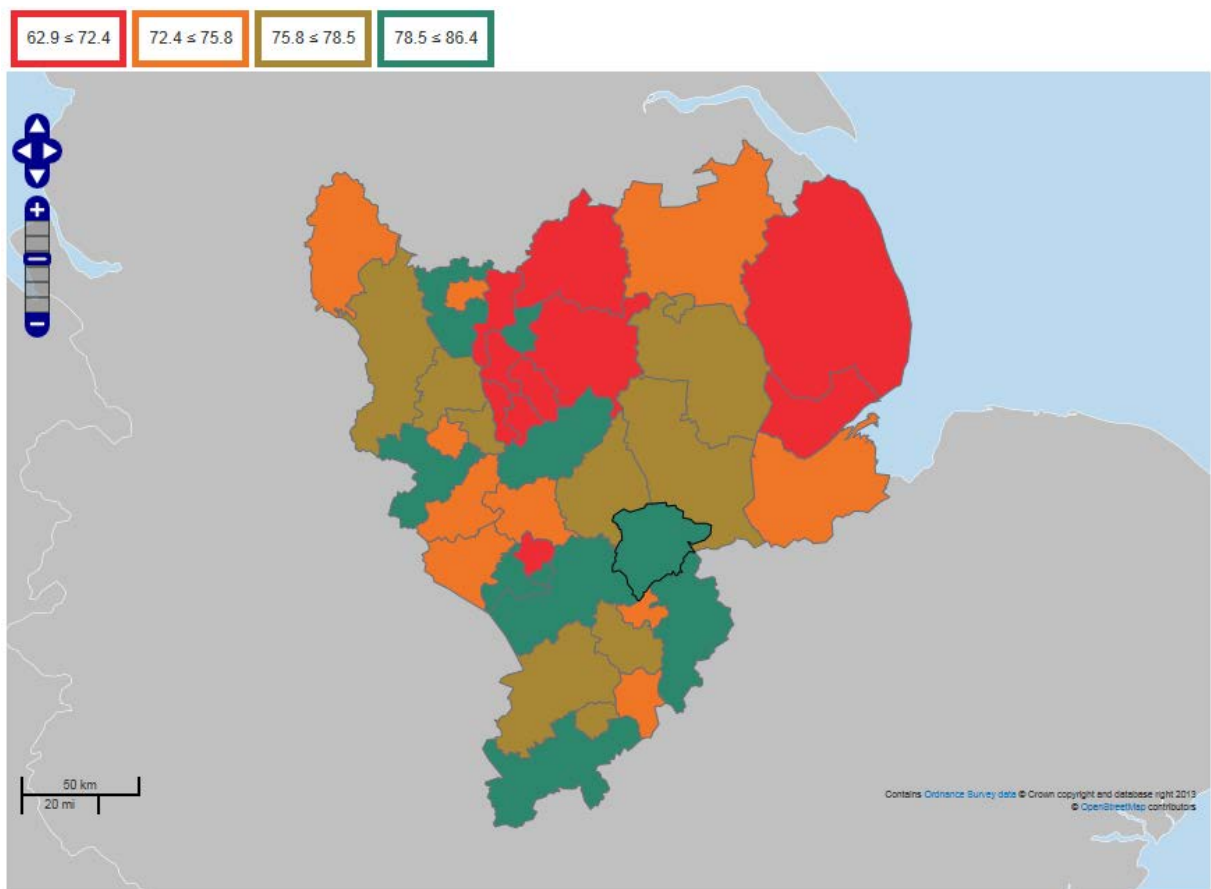
- 4.5 Further improvement in the new single assessment process has been seen during Quarter 4, with 82% of single assessments completed within timescales during 2014/15 showing a gradual improvement throughout the year.(40% in Q1, 73% in Q2 and 76% in Q3).

All operational performance is now measured through compulsory weekly performance managers meetings. Team Managers are now on track to complete a monthly performance report which will be submitted to the performance board.

79.7% of the working age population of Rutland are currently in employment (PI151). The table below compares the overall employment rate in Rutland with a number of our statistical neighbours and also how each has changed since last quarter.

Local Authority	Overall Employment Rate Q4	Change since previous quarter
West Berkshire	82.2%	-0.7%
Central Bedfordshire	81.6%	+1.2%
Rutland	79.7%	+0.7%
Wiltshire	79.1%	+1.5%
Cheshire East	75.5%	+0.6%
Cheshire West	74 %	+0.9%
Bath and NE Somerset	73.3%	+0.5%

The map below shows the overall employment rate across the East Midlands at the end of Q4, with authorities above 78.5% shown in green, Rutland is marked with a black border.



Creating a Safer Community for All

Q3	2	0	0
Q2	2	0	0

- 4.6 There have been 23 people killed or seriously injured on our roads so far this year (PI047). Of these 7 have been fatalities (5 of which occurred during Quarter 3 Oct – Dec). There have been no children killed or seriously injured in road traffic accidents (PI048) in Rutland during 2014/15.

Building our Infrastructure

Q4	5	0	0
Q3	4	0	1

- 4.7 62 affordable homes have been delivered (PI155) so far this year, against a target of 42 moving this indicator back above target at the end of 2014/15 as expected with a number of these houses completed during the last quarter of the year and with a further 55 currently under construction as of 31st March.

Processing of major planning applications (PI157a) has ended the year above target at 80% (against a target of 60%). The table below shows a comparison with some of our statistical neighbours using most recently published data (Quarters 1-3 2014/15) for this indicator

Local Authority	% of major planning applications processed in a timely manner
Shropshire	91.3%
Bedford	88%
Rutland	82.3%
Wiltshire	78.3%
Bath and NE Somerset	72.3%
Cheshire West	70%
West Berkshire	69.3%
Central Bedfordshire	69%

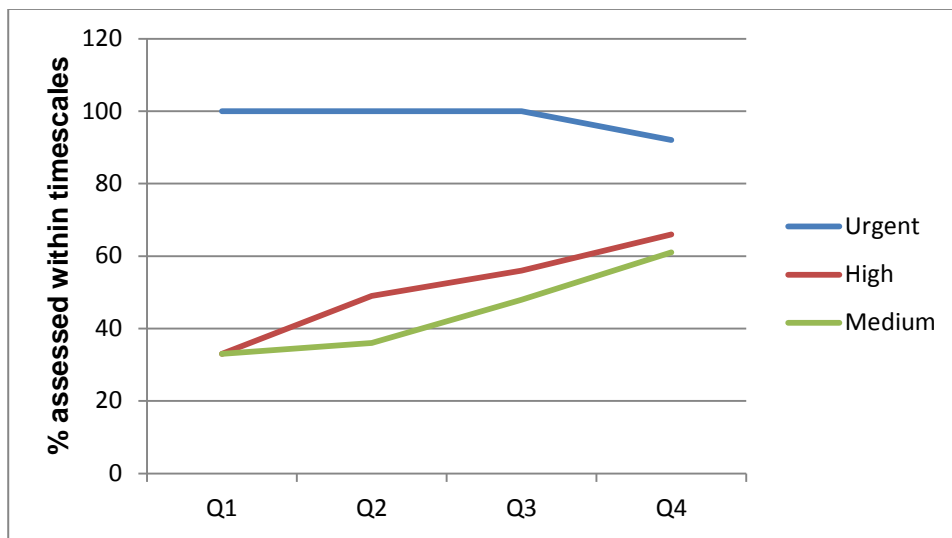
Meeting the Health and Wellbeing Needs of the Community

Q4	8	2	2
Q3	8	1	3

- 4.8 92% of urgent Occupational Therapy referrals have been assessed within the 1 week target during 2014/15 (LI134). Despite there being a slight dip in performance in Q4 (from 100% assessed within 1 week up to Quarter 3) this is still well above the target for this year of 80%.

High (LI135) and medium (LI136) referrals assessment figures have also improved throughout 2014/15 although both still remain below target at the end of the year with 66% of high priority referrals assessed within 28 days during 14/15 (against a target of 75% and 61% of medium priority referrals assessed within 4 months (against a target of 80%). Both were 100% in Quarter 4 and it is expected that this improvement in performance will continue into the next reporting year with more robust working practices now in place.

The graph below shows performance across 2014/15 for these 3 indicators and shows how work to improve processes throughout the year has had a positive effect on performance.



The Public Health Dashboard has been updated, to include a column ranking us against our comparator authorities for each indicator. This is because, given Rutland's generally good health, it is appropriate to challenge ourselves to be better than our comparator local authorities, not just the national average.

For a number of indicators trend data is currently unavailable as we currently only have 1 or 2 years data. As Public Health supply us with more data, trend analysis will be added where appropriate.

The current dashboard of these indicators, showing this and comparison against national averages and current status is shown as **Appendix D**. Work will now continue with the NHS to ensure that moving forward data is updated in a timely fashion.

Creating a Sustained Environment

Q4	3	0	0
Q3	3	0	0

4.9 Estimated recycling rates (PI192) remain above our 61% target at 62.84%. Household waste figures (PI191 representing the number of kilograms of household waste

collected per household) at 121.65kg per household are below rates from the same period last year when it was 128kg.

Sickness Monitoring

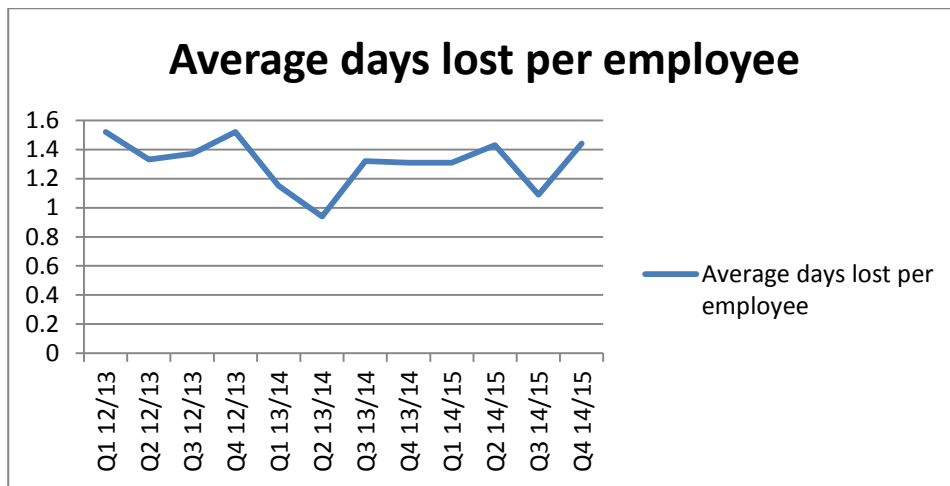
4.10 The following table summarises the sickness monitoring information for 2013/14:

	Days lost through Sickness	Number of employees	Days lost per employee	Days lost per month
Q4 2014/15	653	452	1.44	218
Q3 2014/15	494	456	1.08	165
Q2 2014/15	662	462	1.43	221
Q1 2014/15	628	478	1.31	209
TOTAL	2437	462	1.32	203

Average days lost per employee has increased to 1.44 following a drop in Q3 (1.08). This is primarily due to an increase in the number of long term sickness instances reported, from 5 in Quarter 3 to 12 in Quarter 4. The tables below show the number of short and long term instances of sickness in the last three quarters:

	Total Sickness Occurrences	Long Term	Short Term
Quarter 1	121	10	111
Quarter 2	89	14	75
Quarter 3	105	5	100
Quarter 4	89	12	77

The chart below shows average days lost per employee over the last three years, and shows that it has been steadily declining over that period from an average of 1.49 days per quarter in 2011/12 to 1.32 in the current year (although this is an increase on 13/14 when it was only 1.19)



The total number of days lost per employee for the last four quarters (5.26 days) is lower than the national average for Local Government employees of 8 days.

More detailed information relating to sickness is contained in **Appendix A**.

Customer Services

- 4.11 Compared to the same time last year call and email volumes have remained fairly static, with a small increase to call volumes, and a small drop in both enquiries and emails.

The daily averages for CST for Quarter 4, when compared to the same time last year were as follows:

	Daily Average	
	Q4 2014/15	Q4 2013/14
Calls	314	310
Enquiries	104	112
Emails	52	55

Call volume figures contain those calls dealt with directly by Customer Services, calls that are forwarded through to other departments for resolution and general switchboard calls.

Detailed performance information for Customer Services is contained in **Appendix B**.

Safeguarding

- 4.12 The quarterly safeguarding report is now included as an appendix to this report. This report provides an overview of safeguarding activity in Rutland and aims to highlight good practice and identify areas for development/improvement.

More detailed information is contained in **Appendix C**.

Outstanding Audit Recommendations

- 4.13 At the end of Quarter 4 there were 73 open audit recommendations, 10 of these were overdue for implementation.

Of the overdue recommendations:

There are two overdue ICT related recommendations, one regarding the development of arrangements to involve ICT in new projects and one to update the ICT system master list. Both of these and other ICT related recommendations are being progressed as part of a wider review of policies, procedures and system management that is being undertaken by the Interim Head of ICT. Both actions have not progressed since the previous quarter.

Three recommendations relate to the Agresso system. Recommendations to improve controls for setting up new users, amending user privileges and reviewing users' roles are overdue. An Agresso consultant has been appointed and critical tasks are being prioritised to address these actions.

A low risk recommendation for internal and external data matching to be undertaken to detect possible NDR fraud is outstanding. The Council assessed the possibility of working with an external partner and it was not financially viable. They are now working with Leicestershire City Council on the potential for joint fraud work.

An audit on Community Care Finance identified the need to complete the interface between Abacus and Agresso to improve timeliness of invoices. The interface is due on the next release from Abacus and will be loaded and operational in May 2015.

Three recommendations relate to safe driving at work. Internal Audit recommended the introduction of a "Safe Driving at Work Policy", the need for driver documentation checks and overall responsibility for oversight and compliance for safe driving to be assigned to one team. A new policy and procedures have been produced and will be presented to SMT on 23rd June 2015 for approval.

4. CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

- 6.1 Overall performance based on activity in the fourth quarter is satisfactory.

5. APPENDICES

Appendix A – Quarterly Performance Report
Appendix B – Customer Services
Appendix C – Safeguarding
Appendix D – Public Health Dashboard
Appendix E – Project Update

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.

Rutland County Council
Quarterly Performance Report
Quarter 4
2014/15

Corporate Health Summary

All sickness absence information is collected and stored in the Agresso HR/Finance system including reasons for absence. Sickness information is reported, recorded and managed through the current policy and procedures, with support from Human Resources where this becomes necessary. Return to work interviews are held after each sickness absence instance and these provide a record of the management process.

The table below shows the number of days lost by each directorate in Quarter 4, expressed as total days per directorate and days lost per employee.

Directorate	Days lost through Sickness	Headcount as at 1 st January 2015	Headcount as at 31 st March 2015	Average	Days lost per employee
PEOPLE	401	226	226	226	1.77
PLACES	96	139	140	139.5	0.69
RESOURCES	156	87	86	86.5	1.80
TOTAL	653	452	452	452	1.44

➔ In Quarter 4, the average number of days lost has increased to 1.44 (from 1.08 in the previous quarter).

Quarter 4: Long term and short term sickness

The table below shows the incidence of short and long term sickness absence within the Council for Quarter 4. Long term sickness is defined as more than 20 working days, and short term sickness is defined as 20 working days or less. Data shown is for the number of occurrences, (each non-continuous sickness period).

Directorate	Total Occurrences	No of employees	Long Term	Short Term
PEOPLE	44	42	8	36
PLACES	25	22	1	24
RESOURCES	20	19	3	17
TOTAL	89	83	12	77

Comparison

The table below compares the sickness for quarter 4 of 2014/15 to that of the previous 3 quarters.





Year	Days lost through Sickness	Average No of employees	Days lost per employee	Days lost per month
Q4 2014/15	653	452	1.44	218
Q3 2014/15	494	456	1.08	165
Q2 2014/15	662	462	1.43	221
Q1 2014/15	628	478	1.31	209
QTR AVERAGE	609	462	1.32	203

Corporate Health Indicators

2 indicator is currently above target

3 indicators are on target






0 indicator currently not meeting target





Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI001 - % of invoices paid on time (30 calendar days from receipt)	95%	93%		93% of invoices were paid within 30 days of receipt during Quarter 4, a decrease on the previous quarter (95.7%). Overall performance in the year is slightly below target mainly due to an increasing number of disputed invoices/checks undertaken on invoices pre-payment in light of the increased fraud risk.
LI003 - % of audits to be delivered by year end	90%	91%		At the time of reporting, 91% of the audit plan had been delivered (up to at least draft report stage).
LI004 - % of FOI requests replied to within 20 days 14	100%	95%		Following an audit where it was discovered that quarters 1, 2 & 3 figures were incorrectly stated, albeit still showing a marked improvement, the figures for q.4 are now correct. It can be seen that this is the best performance recorded to date – a great effort by the FOI team and information providers.
LI005 – Average number of days to respond to Ombudsman complaints	28 days	2 days		No new complaints have been received during Quarter 4.
LI006 – The % of the RCC workforce who are female	-	76.2%		
LI007 – The % of the RCC workforce who are aged 16-24	-	2.2%		
LI008 – The % of the RCC workforce who are aged over 65	-	6.17%		
LI009 – The % of the RCC workforce who are members of an ethnic minority	-	1.54%		

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI010 – The % of the RCC workforce who are disabled	-	3.7%		
LI034 - % of complaints answered with 10 day response target	95%	93%	A	There were 68 complaints during Quarter 4, and 63 were answered with target time.

Delivering Council Services within our MTFP










4 indicators are currently above target	4 indicators are on target	1 indicator currently not meeting target
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Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI020 - % of Council Tax received	99%	98.9%		Council Tax recovery levels have been maintained throughout the year although the Council has seen an increased use of its discretionary fund and a rise in the number of crisis loans indicating that the financial climate is more challenging.
LI021 - % of NNDR received	99%	98.5%		Business rates recovery is broadly in line with target but has been impacted by two key issues a) late notification of business rate changes by the Valuation Office for OEP units resulting in bills being raised late in the year and payments not received before the year end; and b) the Council being notified by the Valuation Office that a property (which had already been billed) was due to be removed from the rating list but was not removed by them until 2015/16.
LI022 – Benefits claims – speed of processing	22 days	20 days		All claims during Quarter 3 were processed within an average 16 days.
LI024 – Issue monthly financial reports within 4 days of month end	100%	100%		All management reports issued within agreed timescales
LI025 – Statement of accounts produced by 30 th June each year	Achieved			The Statement of Accounts was produced and published by the 30 th June and approved by the Audit and Risk Committee on the 9 th September 2014.




Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI029 - % of sundry debt recovered	90%	62%		The year to date figure is distorted by one large invoice (in excess of £500k) relating to the Better Care Fund whereby NHS England would not release payment until receiving formal approval of various forms by the Health and Wellbeing Board. As the Board sat in late March, payment of the invoice was not received until early April. If this invoice is exempted from the statistics, the % recovered would be in excess of the 90% target.
LI031 - % of agendas and reports published 5 days before meetings	100%	99%		29 agendas and reports were due during Quarter 4 with all agendas and reports published on time during the quarter.
LI032 - % of draft minutes issued within 5 days of the meeting (or 2 days in respect of cabinet record)	100%	99%		There were 29 scheduled meetings during Quarter 4, and minutes were delivered on time for 28 of these.
LI033 - % of priority 1 faults closed within SLA	95%	93%		<p>There was 1 priority 1 calls in Quarter 4 related to a problem with the Agresso system which was closed within SLA.</p> <p>Throughout 14/15 there have been a total of 24 priority one calls, and 22 of these have been closed within SLA.</p>

Creating a brighter future for all – Overall Performance

15 indicators are currently above target	1 indicators are on target	0 indicators currently not meeting target
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Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI060 – Percentage of single assessments for children’s social care carried out within 35 days of commencement	80%	82%		Performance has improved since April (performance at end of Q1 was 40%) and further work is underway to address teething and performance issues.
PI062 – Stability of placements for looked after children: number of moves	6%	0%		No LAC children have had 3 placement moves or more during the period.
PI064 – Child protection plans lasting 2 years or more	5%	0%		No change on previous quarters, there are currently no child protection plans lasting more than 2 years.
PI065 – Percentage of children becoming the subject of Child Protection plans for a second or subsequent time within the previous two years	5%	0%		No children have been subject to a second or subsequent CP plan in the previous two years.
PI066 – Looked after children cases which were reviewed within required timescales	100%	100%		All Looked After Children reviews have been completed within timescales.
PI067 – Percentage of child protection cases which were reviewed within required timescales	100%	100%		All children subject to a CP plan have been reviewed within timescales during 2014/15
PI068 – Percentage of referrals to children’s social care going to assessment	75%	92%		Out of 240 referrals during 2014/15, 221 went onto single assessment
PI103 – Special Education Needs (SEN) statements issued within 26 weeks	100%	100%		All statements completed within statutory target during this year.
PI109 – Delivery of Ofsted Action Plan for children’s centres	100%	100%		Work ongoing to deliver Action Plan, currently on target.



Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI151 – Overall employment rate (working age)	79.7%	79%		16,600 (79.7%) of the working age population of Rutland are currently employed. In comparison, the average across the East Midlands is 73.5%
PI152 – Working age people in receipt of benefits 19	7.3%	5.9%		5.9% (1,330) of the working age population are currently receiving benefits. This breaks down as follows: 190 claiming Job Seekers Allowance 590 claiming ESA and Incapacity Benefits 100 lone parents 170 carers 30 on other income related benefits 210 disability 50 bereaved
LI085 – Percentage of NEET (Not in Employment, Education or Training) performance for Rutland	2%	1.2%		This is the percentage of 16-18 year olds not in education, employment and training (NEET). There are currently only 8 individuals who are NEET, who are being offered support through services targeting this group.
LI126 – Youth provision participation	600	909		Service currently reaching a large cohort of young people and performing well above target.

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI128 – Number of children, young people and their families accessing Team 1 services	799	2109		Target reached. Overall figure: 2109, broken down as follows 1047 adults (now attending 2 sessions or more in Children Centres) 871 Children (now attending 2 sessions or more in Children Centres) 30 Changing Lives 115 Aiming High 46 CAF
LI147 - % of foster carers recruited per year	2	100%		Target was to recruit a minimum of 2 foster carers during the year, this has been achieved.
LI163 – Percentage of payments by results claimed for targeted Troubled Families	50%	70%		We have made a claim for 70% of our 30 targeted families.

Creating a safer community for all






– Overall Performance

2 indicators are currently above target	0 indicators are on target	0 indicators currently not meeting target
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Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI047 – People killed or seriously injured in road traffic accidents	23	23		Revised figures for the period 1 st April 2014 to 31 st March 2015 show 7 fatal and 16 serious injuries during the period.
PI048 – Children killed or seriously injured in road traffic accidents	3	0		There have been no child injuries during the period 1 st April 2014 to 31 st March 2015.

Building our infrastructure – Overall Performance

5 indicators are currently above target	0 indicators are on target	0 indicators currently not meeting target
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Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI154 – Net additional homes provided	112	225		There were 81 house completions for the period from 1 st Jan 2015 and 31 st Mar 2015.
PI155 – Number of affordable homes delivered.	41	62		41 affordable homes were completed in the last quarter, making a total of 62 for the whole year. As at 31 st March 2015 a further 55 affordable homes were under construction.
PI157(a) – Processing of planning applications – Major Applications	60%	80%		80% of all major applications were processed on time during 14/15. In Quarter 4 all were processed on time.
PI157(b) – Processing of planning applications – Minor Applications	65%	68%		Performance was impacted by the change in policy on legal agreements. Applications that were pending a decision awaiting completion of a legal agreement no longer had a requirement for such an agreement. These decisions were already out of time and all were released over a short period of time.
PI157(c) – Processing of planning applications – Other Applications	80%	90%		Performance was impacted by a change in policy on legal agreements. It only resulted in a small reduction in performance but overall performance was still above target for Q4 and for the year as a whole.








Meeting the health and wellbeing needs of the community – Overall Performance

8 indicators are currently above target

2 indicators is on target

2 indicators currently not meeting target

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI107 – Hospital discharges are safe and effective with patients assessed within timescales	80%	100%		Continued good performance in this area, with all discharges assessed within timescales for the fourth quarter in a row.
LI108 – Success rate for joint and fully funded CHC (continuing health care) cases	50%	93%		Ongoing work with health and care providers continues to show improvements.
LI111 - % of carers signposted to developed non-statutory services following carers assessment	80%	100%		All carers assessed during Quarter 4 were signposted on to established non statutory services as appropriate.
LI127 – Child poverty in Rutland	9%	8.4 %		<p>Currently at 8.4% overall. Internal and external partner pledges have now been approved and published to support the Strategy.</p> <p>Child poverty in Rutland is still significantly below the national level which currently stands at 20.6%. Rutland is the third least deprived local authority area on this measure. In addition to this, new target areas have been identified which has helped to direct services more specifically. Therefore, although the poverty data still indicates low numbers of children (and their families) in poverty, services are able to target those groups that are most in need of them.</p>

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI130 – Households prevented from becoming homeless	24	22		Homeless preventions have increased this quarter due to the number of people at risk of homelessness. We have been able to prevent a number of those threatened with homelessness due to the increase in the number of available new build properties and subsequent re-lets from void properties.
LI134 – % of urgent OT referrals assessed within 1 week	80%	92%		A slight dip in cumulative performance, due to one urgent case being seen 1 day out of target at the request of the service user.
LI135 – % of high priority OT referrals assessed within 28 days	75%	66%		Following staffing problems earlier in the year, which have affected the cumulative performance figure, we are now reliably meeting this target.
LI136 – % of medium priority OT referrals assessed within 4 months	80%	61%		Following gains made in reducing the waiting list last quarter, we have achieved 100% of moderate OT assessments assessed within 4 months this quarter.
LI137 – % of high/urgent need cases where work has commenced within a year	75%	96%		During Quarter 4, no high/urgent cases were held up for financial reasons.
LI138 – % of reablement service users not requiring an on-going commissioned service	45%	70%		Measures taken to improve access to domiciliary care provision, which were causing a bottleneck earlier in the year, have now been resolved leaving more time for the REACH team to focus on re-abling people and preventing the need for ongoing services, rather than providing home care.
LI164 – % of people with a Learning Disability or Mental Health condition in receipt of a Personal Budget	70%	68%		No change on Q2 performance (68%).




Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
L1172 – % of Safeguarding Adults referrals screened within one working day	80%	100%	G	During Q4, all safeguarding referrals were screened within timescales.

Creating a sustained environment – Overall Performance

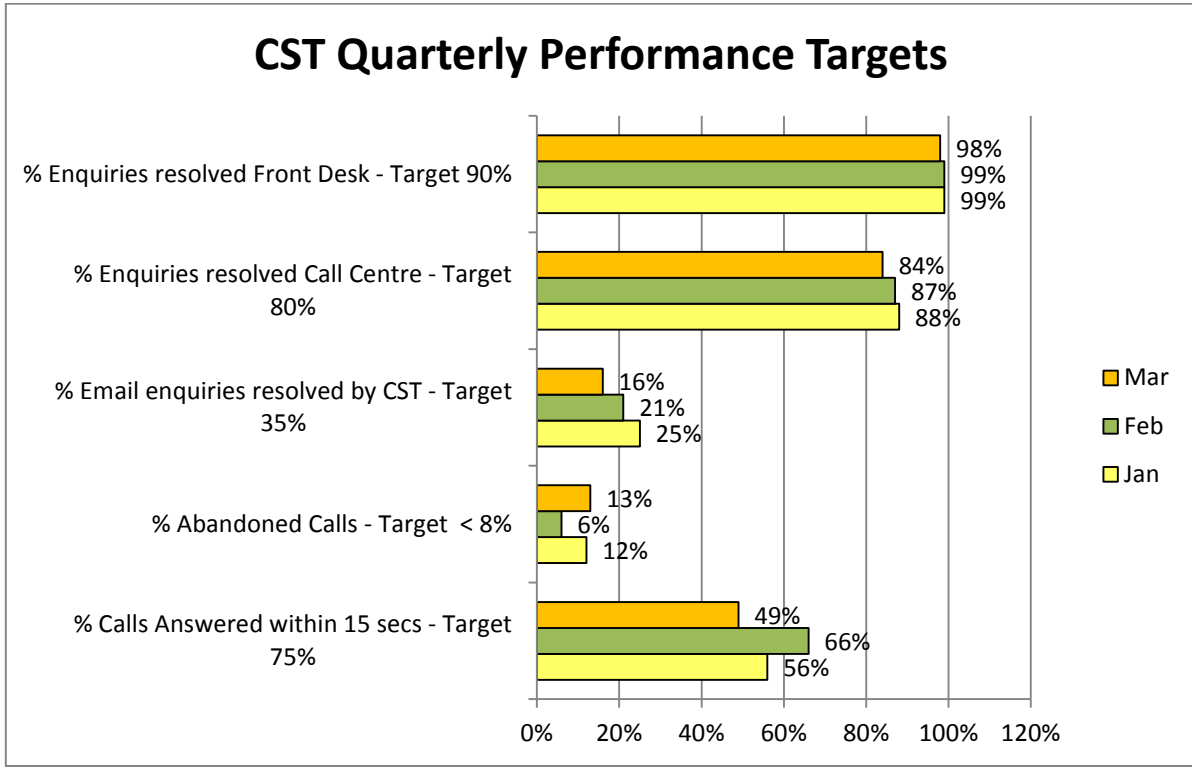
3 indicators are
currently above
target

0 indicator s are on
target

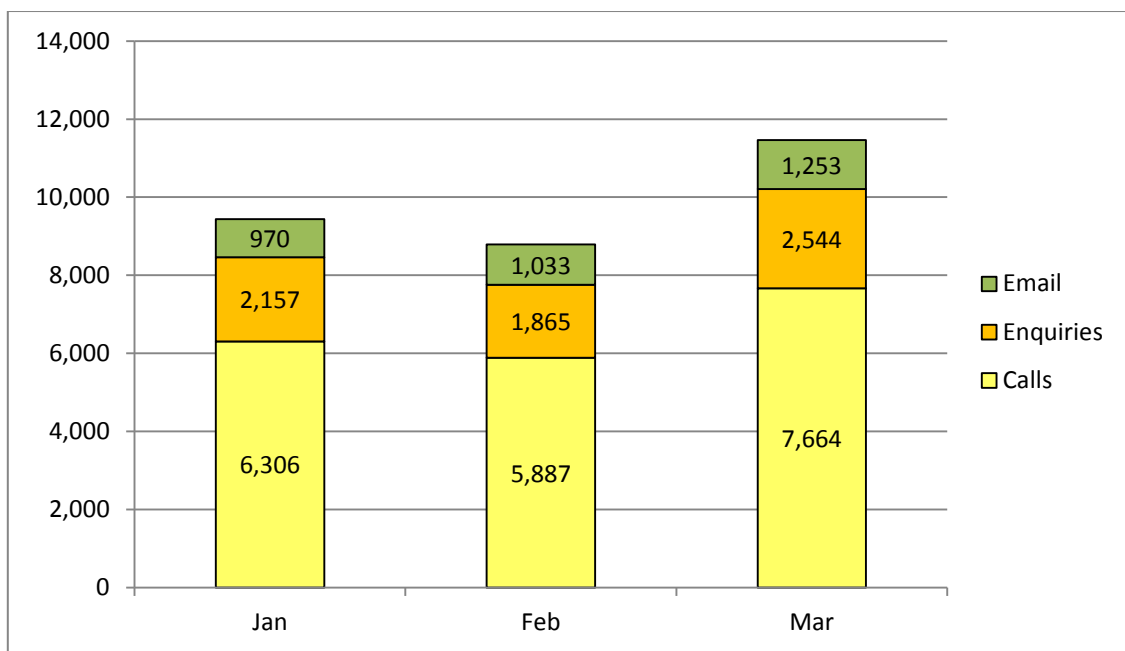
0 indicators
currently not
meeting target

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI191 – Residual household waste per household	130	121.65		Based on estimated figures.
PI192 – Percentage of household waste sent for reuse, recycling and composting	61%	62.84%		Based on estimated figures.
PI193 – Percentage of municipal waste land filled	5%	1.27%		Based on estimates figures.

CST Quarter 4 Performance



Volumes

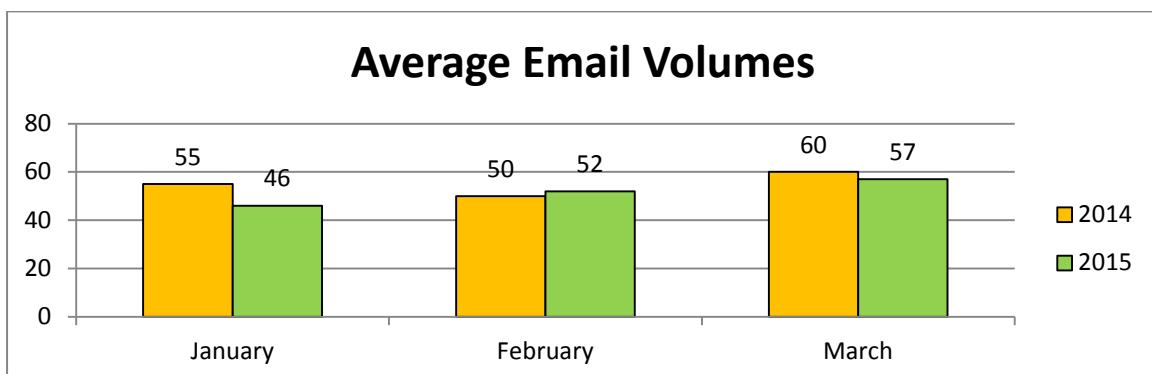
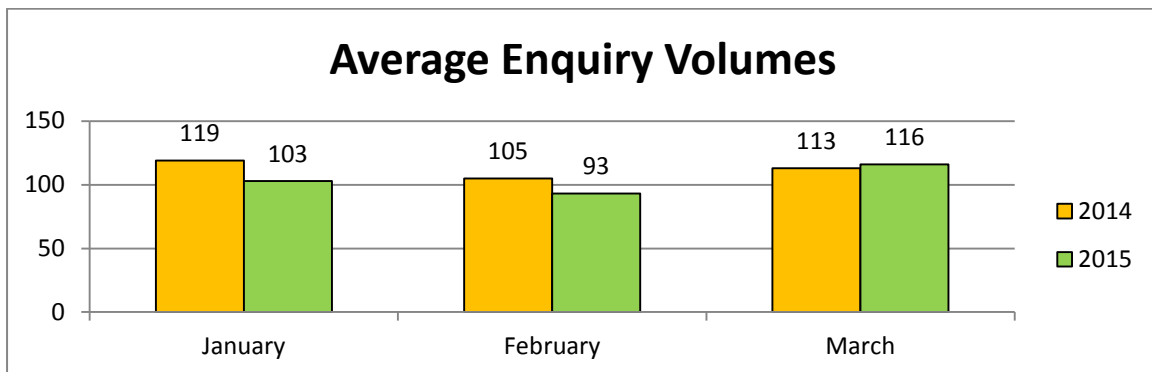
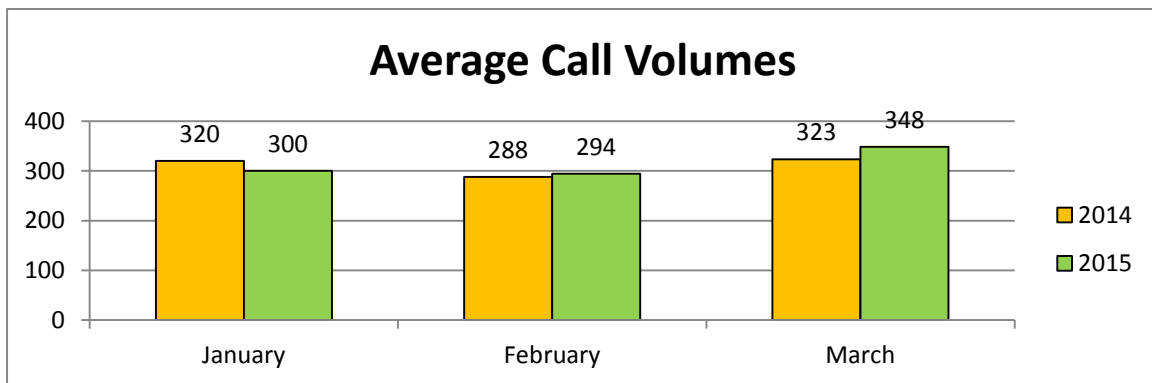


Volumes – Daily Average

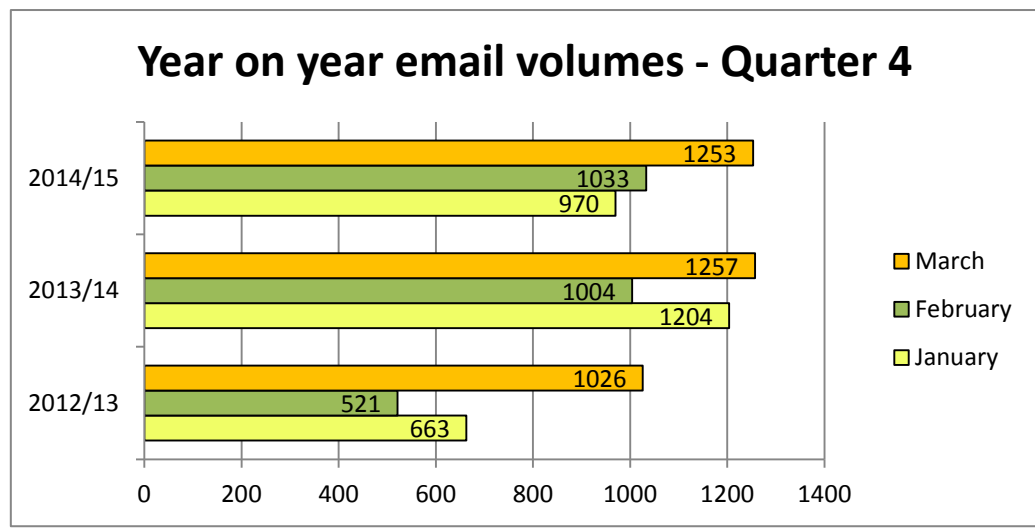
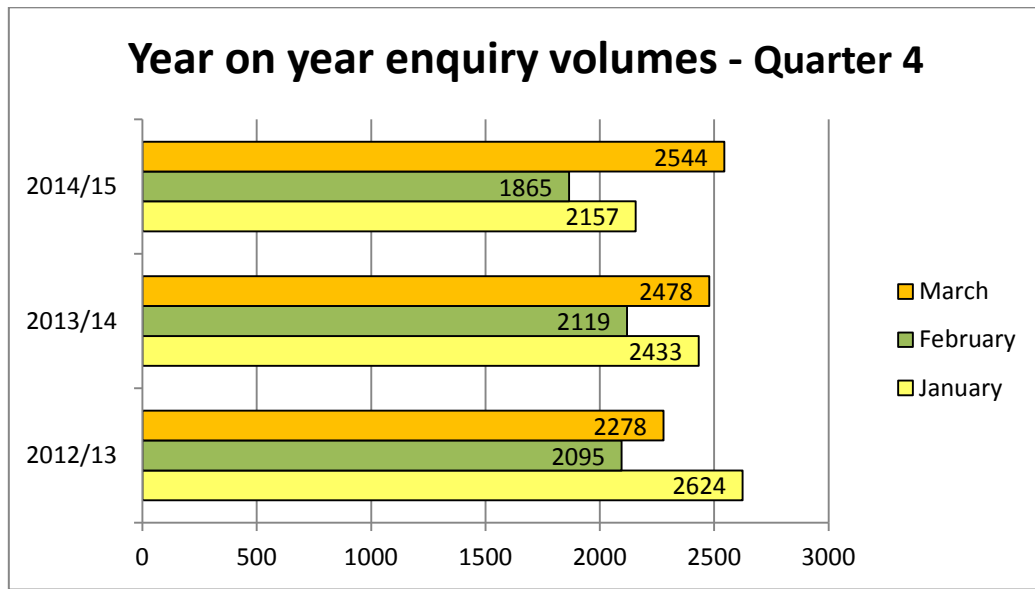
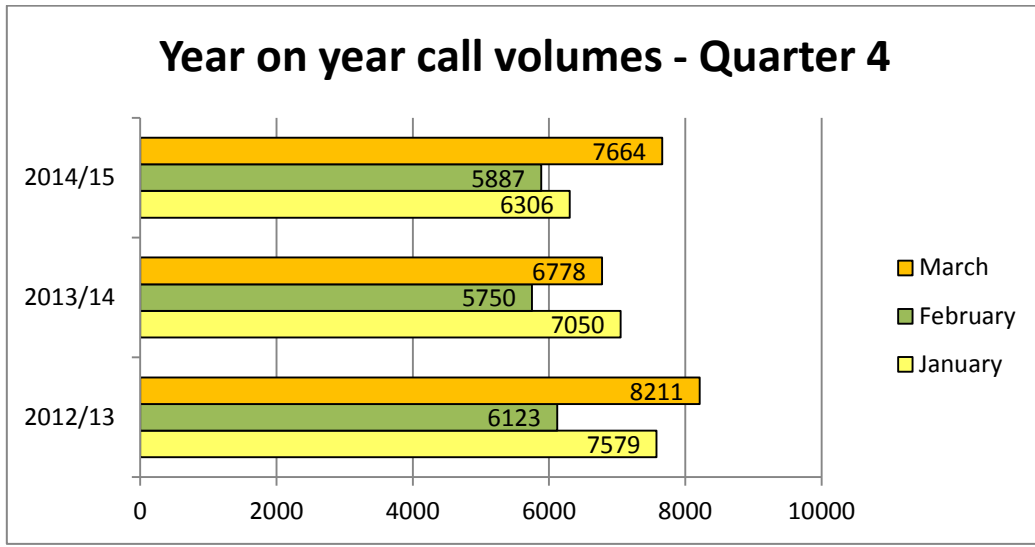
Compared to the same time last year (see below) volumes have remained fairly static, although there was a drop across all three types of contact in January.

Volumes – Daily Average comparison

The charts below show a comparison of the daily average volumes with the same period last year.







Year on Year Volumes – Q3 2014/15







GovMetric Q4 2014/15

GovMetric Summary

Face to Face				Overall Rating
No. of respondents	398	67	91	 Good
%age of respondents	72%	12%	16%	

Telephone

No. of respondents	Due to pressures and other resource issues within the team this information has not been recorded during Quarter 4.
%age of respondents	

Web				Overall Rating
No. of respondents	115	28	73	 Average
%age of respondents	53%	13%	34%	

Of the respondents who left comments with their feedback, the main themes were:

- A number of comments related to general information on the website, highlighting areas where the information was out of date or where it wasn't relevant and where links didn't work.
- A number of comments mentioning the lack of contact details and email addresses for various sections of the website.
- Positive feedback on the Admissions section, that the process is nice and simple.
- Positive feedback on tourism and local information on things to do in the County making a number of peoples visits to the area much easier.
- Positive feedback about the Libraries and Museums section.

This feedback will be followed up with the relevant departments so the website can be improved where applicable.

APPENDIX C SAFEGUARDING

Context

This report combines adult and children's safeguarding data and analysis and provides an overview of safeguarding activity in Quarter 4 of 2014/15. It aims to highlight good practice and identify areas for development/improvement which will be incorporated into delivery plans for the relevant service areas. The children's data (except for the re-referral information) is shared with partners as required by the Local Safeguarding Children's Board (LSCB) performance scorecard.

CHILDREN & YOUNG PEOPLE UPDATE

Early Intervention

There were 31 new Common Assessment Frameworks (CAF's) opened in Quarter 4, 9 of which were referred by Social Care, representing 29% of the total number of CAF for the quarter.

Rutland	Q1	Q2	Q3	Q4	Total	Reporting Frequency
Number of new CAF's	23	20	16	31	90	Quarterly
Number/Proportion of Children's Social Care referrals that result in a CAF*	6	9	4	9	28	Quarterly
	11.3%	4.7%	3%	10%		

*The proportion of referrals resulting in a CAF is calculated on referrals only, not referrals/contacts

Contact referral and assessment

- There was a 9% decrease in contacts this quarter (173 as opposed to 190 in quarter 3). Of those contacts, 44% (76) went on to referral compared to 39% (75) last quarter.
- The timeliness of assessments continues to be good at 100% within 10 days.
- There were 29 section 47 enquiries during quarter 4.

	Q1	Q2	Q3	Q4	Total/ Cumulative	Reporting Frequency
Number of contacts to Children's Social Care (include referrals)	162	192	190	173	717	Quarterly
Number of referrals to Children's Social Care	53	52	74	76	255	Quarterly
Number of referrals made by EDT/Out of Hours Team (including those that were recorded as contacts only)	0	1	4	1	6	Quarterly
Number/Percentage of Single Assessments carried out within 40 working days	2	61	33	31	127	Quarterly
	40%	73.2%	75%	35%		
Number of strategy discussion meetings	7	17	21	33	78	Quarterly
Number of S47 enquiries	7	12	22	29	70	

Child Protection

- There were 27 child protection plans at 31st March 2015. This is a 15% increase on Quarter 3.
- The largest category of abuse for CP plans at end of March 2015 was emotional, which represented 36% of all plans, followed by multiple at 33%.
- Of the children with a CP plan for 3 months or more at 31st December 2014, 100% had been reviewed within timescales (PI 67).
- Of children with a child protection plan at 30th June 2014, the largest age group with 11 children was the 0 to 4 age group (representing 33%) followed by age 10 to 15 representing 34%. 59% of children with CP plans at the end of June 2014 were male, 41% were female. 92% of children subject to plans were White British.

	Q1	Q2	Q3	Q4	Cumulative	Reporting Frequency
Number of children subject to a CP Plan	26	29	32	27	n/a	Quarterly
Number/Rate in each Category of Abuse						
Neglect	7	4	5	5	n/a	Quarterly
Physical	3	0	0	0	n/a	
Emotional	1	6	6	12	n/a	
Sexual	4	1	1	1	n/a	
Multiple	11	18	20	9	n/a	
White	25	27	28	25	n/a	Quarterly
Mixed	0	0	0	0	n/a	
Asian	0	0	0	0	n/a	
Black	0	0	0	0	n/a	
Other	0	0	0	0	n/a	
Undetermined	1	2	4	2	n/a	
Unborn	0	0	1	0	n/a	Quarterly
0 - 4	14	11	12	11	n/a	
5 - 9	3	6	7	5	n/a	
10 - 15	9	12	11	9	n/a	
16+	0	0	1	2	n/a	
Male	11	15	17	16	n/a	Quarterly
Female	15	14	14	11	n/a	
Unborn	0	0	1	0	n/a	
Percentage of CP cases which were reviewed within required timescales	100%	100%	100%	100%	100%	Quarterly Target - 100%
Number of CP cases allocated to a Social Worker	100%	100%	100%	100%	100%	Target - 100%

Looked After Children

Rutland	Q1	Q2	Q3	Q4	Cumulative	Reporting Frequency
Number of Looked After Children	37	32	33	33	n/a	Quarterly
Ethnicity of LAC						
White	27	28	31	32	n/a	Quarterly
Mixed	2	1	1	1	n/a	
Asian	0	0	0	0	n/a	
Black	4	1	1	0	n/a	

Other	2	2	0	0	n/a	
Undetermined	0	0	0	0	n/a	
0 - 4	12	13	11	11	n/a	
5 - 9	7	6	10	8	n/a	
10 - 15	10	9	8	9	n/a	
16+	7	4	4	5	n/a	
Male	15	14	18	17	n/a	
Female	22	18	15	16	n/a	
Percentage of LAC at period end with 3 or more placements	0%	0%	0%	0%	0%	
LAC cases which were reviewed within required timescales	100%	100%	100%	100%	100%	
Stability of placements of LAC: length of placement					100%	

ADULTS UPDATE

Safeguarding Adults Data Collection

94 alerts were received in Q4. As in Q3 the number of community alerts has increased to the extent that it was higher than residential alerts. 16 of this number resulted in the implementation of the Safeguarding Adults Procedures. At the last Safeguarding Effectiveness Group meeting there was a discussion around how Rutland's social care data base records safeguarding referrals to the 'front door' as enquiries rather than referrals.

Referrals from Residential settings/workers and from Adult Social Care staff were significantly higher than Q3 – working relationships and communications with residential providers has improved with the outcome of providers making contact with the Adult Duty Team both to report concerns and to seek guidance and advice around adult safeguarding.

Location of alleged abuse	Q1	Q2	Q3	Q4	Total	Reporting Frequency
Community	10	22	46	50		Quarterly
Residential	18	25	40	44		Quarterly
Unknown	0		0			Quarterly
Source of Referral for all Alerts	Q1	Q2	Q3	Q4		
Primary Health Care	0	1	1	3		
Secondary Health Care	5	1	8	9		
Adult Mental Health Setting	0	0	0	0		
Residential	6	16	17	31		
Day Care	0	0	6	5		
Social Worker/Care Manager	5	12	15	23		

Self-Directed Care Staff	0	0	0	0
Domiciliary	1	2	9	3
Other Care Workers	0	0	0	0
Self	0	0	1	2
Family Member	7	8	13	6
Other Service User	0	0	0	0
Friend/Neighbour	0	1	5	1
Care Quality Commission	3	3	3	4
Housing	1	2	4	1
Education	0	0	0	0
Police	0	0	1	1
Other	0	1	1	5
Not Known			2	0

Closed Cases in Quarter 4

Safeguarding Adults performance data is obtained when a case is closed at the end of the Safeguarding Adults process. 14 cases were closed in Quarter 4. One investigation was terminated at the request of the service user therefore 13 outcomes are reported. Older people are consistently the largest service user group represented in safeguarding within adult social care services and in this quarter there were 4 referrals from a learning disability residential provider.

Outcome	Q1	Q2	Q3	Q4
Substantiated - fully	3	4	3	5
Substantiated - partially	0	1	0	1
Not Substantiated	4	4	0	3
Inconclusive	1	1	0	4

Primary Client Type	Q1	Q2	Q3	Q4
Older Person	7	8	3	7
Mental Health		0	0	1
Learning Disability	1	0	0	5
Physical Disability		2	0	1
Not recorded		0	0	0
Primary Age Group	Q1	Q2	Q3	Q4
18-64	1	0	0	4
65-74	3	1	0	2
75-84	1	5	0	3
85-94	3	3	3	5

95+	0	1	0	0
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Type of Abuse*	Q1	Q2	Q3	Q4
Physical	5	3	0	2
Sexual		0	0	2
Psychological&Emotional		0	0	4
Financial & Material	2	3	0	1
Neglect & Acts of Omission	1	4	3	5
Discriminatory		0	0	0
Institutional		0	0	0
Not Known		0	0	0

*Cases may include more than one category

Source of Referral	Q1	Q2	Q3	Q4
Primary Health Care	0	0	1	1
Secondary Health Care	0	0	0	1
Adult Mental Health Setting	0	0	0	0
Residential	5	2	0	4
Day Care	0	0	0	0
Social Worker/Care Manager	0	3	0	4
Self-Directed Care Staff	0	0	0	0
Domiciliary	0	2	0	1
Other Care Workers	0	0	0	0
Self	0	0	0	2
Family Member	3	2	2	1
Other Service User	0	0	0	0
Friend/Neighbour	0	1	0	0
Care Quality Commission	0	0	0	0
Housing	0	0	0	0
Education	0	0	0	0
Police	0	0	0	0
Other	0	0	0	0
Not Known		0	0	0

Protection Plans	Q1	Q2	Q3	Q4
Adult Protection Plans accepted by either the service user or the	0	1	0	2

agencies involved				
Adult Protection Plans not accepted	0	0	0	0
Could not consent	0	0	0	0
Repeat Referrals	Q1	Q2	Q3	Q4
No of Repeat Referrals	0	2	0	1

Activity:

Rutland Adult Social Care Peer Review – February 2015

Effectiveness of Partnerships

When examining the effectiveness of partnerships, the peer review team found there was good engagement at a strategic level. They also identified a strong commitment to the Safeguarding Adults Board, Health & Well-being Board and Scrutiny.

The team cited recent improvements at an operational level and underlined the need to continue building on these at pace. More consideration could be given to building reciprocity and raising awareness of the Board’s work – both internally and externally.

Raising Awareness

The team found that Senior Leadership at the Council assert a clear message that safeguarding is everyone’s business and a priority for the whole organisation.

Recent work to improve community safety was also commended - e.g. working with Police, Community Safety and the retail sector to extend Keep Safe to other customer groups.

Going forward, consideration should be given to further developing the public’s understanding of adult safeguarding. Safeguarding and advocacy information could also be given greater prominence on the Council’s website.

Effectiveness of frontline

The team commented that staff were knowledgeable, informed and committed, as well as being open and honest. Frontline practice was found to have improved significantly over the past 12 months.

The team cited strong feedback from customers and providers who stated that interventions were person-centred, focussed on outcomes, with right balance of support and challenge. They also found that carers were confident they could and would contact the Council about any concerns.

It was suggested there could be greater clarity and consistency around policy, procedures and guidance.

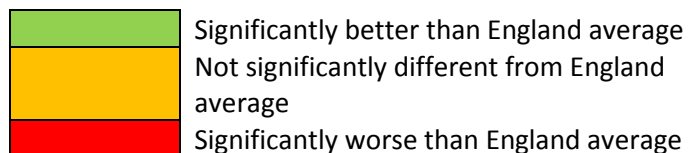
Support for Safeguarding

As well as establishing a clear message that safeguarding is everyone’s business, the Council was found to have strong political oversight, support and challenge at the Safeguarding Adults Board and at Scrutiny.

The Interim HoS role has played an important role in raising awareness and effectiveness of safeguarding practice.

- Provider Failure – Adult Social Care Teams responded to a domiciliary care provider ceasing trading and ensured that all service users were safe and not left in situations where they could be deemed at risk due to lack of service provision and continuity of care.
- Provider risk register is being updated by the Contracts Team and the Acting Duty Team manager. This enables senior managers to monitor the services they are commissioning.

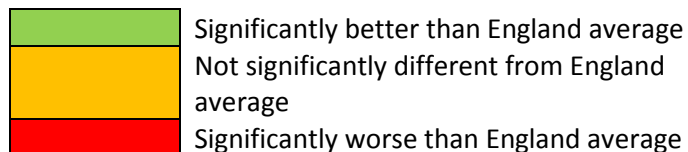
Public Health performance dashboard



* Rank out of 11 areas with 1 defined as best performance

Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
A healthier population with increased life expectancy and a reduction in health inequalities	Life Expectancy - Male	Annual	2011-13	n/a	81.2	79.4	1	
	Life Expectancy - Female	Annual	2011-13	n/a	85.7	83.1	2	
	Healthy Life Expectancy – Male	Annual	2009-11	n/a	65.8	63.4	7	No trend data currently available
	Healthy Life Expectancy – Female	Annual	2009-11	n/a	70.3	64.1	1	No trend data currently available
	Cardiovascular Disease (under 75) – mortality rate	Annual	2011-13	23	65.7	78.2	11	

Public Health performance dashboard

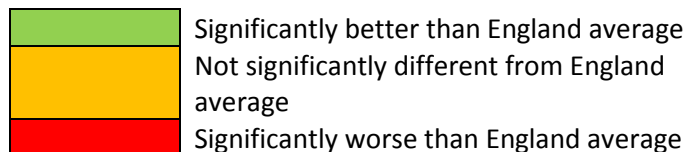


* Rank out of 11 areas with 1 defined as best performance

Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	Cancer (under 75) – mortality rate	Annual	2011-13	44	119.33	144.4	1	
The prevalence of obesity is reduced and people are more physically active	Proportion of children in Reception classified as overweight and obese	Annual	2013-14	60	16.4	22.5	6	
	Proportion of children in Year 6 classified as overweight and obese	Annual	2013-14	96	29.20	33.5	3	
	Proportion of adults (16+) who are overweight and obese	Annual	2012	63	65.58	63.78	8	No trend data currently available

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Public Health performance dashboard

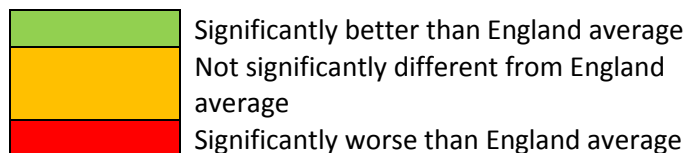


* Rank out of 11 areas with 1 defined as best performance

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Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
Smoking prevalence and the harm caused is reduced	Smoking prevalence	Annual	2013	n/a	22.3	18.4	4	
The harm caused by alcohol and drugs is reduced	Rate of hospital admissions for alcohol related harm	Quarterly	Q4 2012/13	684	1265.77	1951.1	2 (data only available for 6 areas)	
To help prevent heart disease, stroke, diabetes and kidney disease	Heath Check uptake	Quarterly	Q4 2013/14	1684	68.4%	49%	1	
To increase the level of wellbeing	Self-reported Well being							
	People with a low satisfaction score	Annual	2011/12	n/a	14.86	24.27	1	No trend data currently available
	People with a low worthwhile score	Annual	2011/12	n/a	12.81	20.08	1	No trend data currently available
	People with a	Annual	2011/12	n/a	19.21	29.02	1	No trend data currently available

Public Health performance dashboard

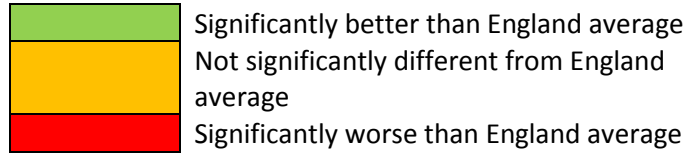


* Rank out of 11 areas with 1 defined as best performance

Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	low happiness score							
	People with a high anxiety score	Annual	2012/13	n/a	25.44	20.98	11	No trend data currently available
To reduce hospital admissions for falls	Injuries due to falls (aged 65 or over) - overall	Annual	2012/13	182	2100	2011	10	No trend data currently available
	Injuries due to falls (aged 65 or over) – males	Annual	2012/13	59	1749	1602	11	No trend data currently available
	Injuries due to falls (aged 65 or over) – females	Annual	2012/13	123	2450	2420	7	No trend data currently available
To increase control of chlamydia	Chlamydia diagnosis adults aged 15-24	Quarterly	Q3 2013	54 (upto Q3)	1685.3	1785.07	9	
To improve health outcomes and increase healthy life expectancy	% of children living in households where income is less than 60% of median household income	Annual	2011	490	8.40%	20.6%	1	

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Public Health performance dashboard



* Rank out of 11 areas with 1 defined as best performance

Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	Under 18 conception rate	Annual	2013	8	8.2	24.3	1	

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Appendix E

PROJECT UPDATE

Project	Status	RAG
Oakham Enterprise Park Business	Tenancy across the site has continued to grow with 91% (77 units, totalling 89,932sqft or 95.1% of floorspace) now let or with leases being prepared. There is firm interest in a further 2% (2 units, 3,346sqft or 3.5% floorspace) and just 7% (6 units, 1,277sqft or 1.4% floorspace) currently with no significant interest. These revised figures include the 18 new office suites which became available on 1 st April. The Events Zone is excluded but is growing steadily with the existing tenant continuing to grow.	
Oakham Enterprise Park Sport	Construction works to refurbish the building commenced in December and the Active Rutland Hub is expected to open in March/April 2015. Vale Judo club continue to occupy part of the building.	
Broadband	<p>The Digital Rutland project is progressing well and we have submitted our revised State aid Intervention Area to BDUK's National Competence Centre (NCC) for approval following the open market review and public consultation processes. Once State Aid approval is granted, additional areas which will form Phase Two of the project will be discussed with BT to further extend the reach of the programme.</p> <p>We are also currently discussing the next areas of Phase One of the project to be captured with BT and are anticipating the work to commence in the coming months, aiming for a delivery of December 2015.</p>	
Castle HLF Bid	Consultants have been appointed and final design work is underway. A revised programme has been agreed by HLF and Project Board, with the Castle closing for works between September and Easter 2016.	
Welfare Benefit Reform	Local Council Tax Support Scheme and discretionary fund – reviewed for 2014/15 and no changes were made to the current approved scheme. A further review was taken to Resources Scrutiny on 4 th September 2014 and to Cabinet on 7 th October 2014 where members recommended to consider changing the scheme from 2015/16 onwards to reduce the amount of the discretionary fund to £50k. There was a proposal made to discount child benefit in the	

Project	Status	RAG
	<p>calculation of income for the Discretionary Fund This was approved along with other policy changes by member at Cabinet on 20th January 2015.</p> <p>The Local Welfare Crisis provision – Members approved a revised policy and continuation of the scheme on 20th January 2015. The scheme is being funded from the welfare earmarked reserve.</p> <p>Single Fraud Investigation Service has been successfully implemented in Rutland from October 2014; a report was taken to Cabinet on 16th September 2014 190/2014.</p> <p>Universal Credit – expected date of implementation for Rutland area is Autumn 2015, this will be confirmed by DWP when the detailed timetable is established</p>	
Corporate Website Development	A project plan is being developed and procurement options are being assessed. A report will be presented to Cabinet to approve the procurement and the establishment of a formal project board.	
Care Act Implementation	<p>Programme Plan timescales have been achieved on the whole & Rutland CC is Care Act Compliant. The only key area outstanding being in relation to obtaining signatures on key documents in relation to our work at HMP Stocken - Partnership Delivery Agreement, Information Sharing Protocol and Memorandum of Understanding. (The service is operational and all parties have agreed to the content). Further work will be required over the summer to consult with the public on matters of charging, obtain approval for a number of key policies on charging and carers, develop a Workforce & Organisational Development Plan to address deeper cultural issues and also to specify the requirements and Project Plan for Phase 2 implementation of the Care Act in April 2016.</p>	
Better Care Fund	<p>All Business Cases have now been approved by the Health and Wellbeing Board, the next 12 months will focus on operationalising all of the plans. We will monitor performance against all schemes over the next 12 months including an annual report to review how the plan has gone.</p> <p>The S75 pooled budget agreement was approved by both Cabinet and CCG Board on</p>	

Project	Status	RAG
	<p>17th March. Awaiting Q4 performance data however Q3 saw a decline in performance against the 3 quarterly metrics including:</p> <ul style="list-style-type: none"> • an increase in permanent admissions to residential care • an increase in delayed discharges from hospital and • a slight increase in non-elective admissions. <p>This goes against the latest figures (although not final) for Q4 which sees some improvements, demonstrating how volatile the health and social care system is as well as the issue of small numbers locally. There is still uncertainty around whether there will be funding beyond 15/16.</p>	

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