

Rutland County Council

Catmose, Oakham, Rutland, LE15 6HP. Telephone 01572 722577 Facsimile 01572 758307 DX28340 Oakham

Ladies and Gentlemen,

A meeting of the **PLACES SCRUTINY PANEL** will be held in the Council Chamber, Catmose, Oakham, Rutland, LE15 6HP on **Thursday, 7th April, 2016** commencing at 7.00 pm when it is hoped you will be able to attend.

Yours faithfully

Helen Briggs Chief Executive

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9) PERFORMANCE MANAGEMENT REPORT - QUARTER 3 2015/16

To receive Report No. 37/2016 from the Chief Executive.

(Previously circulated under separate cover.) (Pages 3 - 48)

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Agenda Item 9

Report No: 37/2015 PUBLIC REPORT

CABINET

16th February 2016

Performance Management Report – Quarter 3 2015/16

Report of the Chief Executive

Strategic Aim: All			
Key Decision: No		Forward Plan Reference: FP/310715/02	
Exempt Information		No	
Cabinet Member(s) Responsible:		Cllr Terry King, Deputy Leader of the Council	
Contact Officer(s):	Jason Haynes, Performance and Application Support Team Manager		Tel: 01572 720962 jhaynes@rutland.gov.uk
	Helen Briggs,	Chief Executive	Tel: 01572 758201 hbriggs@rutland.gov.uk

DECISION RECOMMENDATIONS

That Cabinet:

1. Notes the overall position in relation to performance for the third quarter of 2015/16 and the actions being taken to address areas of underperformance.

1. PURPOSE OF THE REPORT

1.1 To report to Cabinet on the Council's performance for the third quarter of 2015/16.

2. BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 This is the third quarterly Corporate Performance Management report of 2015/16, 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

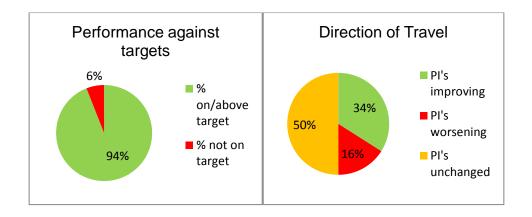
3.1 This report brings together an update on progress across a number of areas:

Performance against our Corporate Aims and Objectives

3.2 **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. 94% of indicators are on/above target in Quarter 3. This will be monitored throughout 2015/16 to show direction of travel through the year.



Corporate Health

3.3 344 Freedom of Information requests were received during Quarter 3, and 99% of them were answered within the 20 day deadline (LI004 % of FOI requests replied to within 20 days). A further improvement on performance compared to previous months with only 4 (1%) of the total of FOI's received not being completed on time.

Quarter	No of FOI	Completed	Quarter	Cumulative
	Requests	on time	%	%
3 15/16	344	340	99	97
2 15/16	345	338	98	96.5
1 15/16	392	373	95	95
4 14/15	382	367	96	95
3 14/15	240	224	93	92
2 14/15	244	224	91	91

The FOI's received during Quarter 3 can be broken down as follows:

Directorate	Number of FOI's	Number/% ov deadline	er 20 day
People	65	3	4.6%
Resources	98	0	0%
Places (Inc. Land Charges)	181	1	0.5%

Delivering Council Services within our MTFP

Q2	8	0	3
Q3	9	0	2

3.4 So far during 2015/16, 45 meeting have been held (with 18 held during Quarter 2), all agendas (LI031) and draft minutes (LI032) have been published on time for these meetings.

120 complaints have been received so far during 2015/16, with 83 (69%) responded to within 10 days. 75% of complaints were responded to within timescales during Quarter 3 which is an improvement on the previous quarter (59%) and further work is being done to improve the response rate in the future, including ensuring those dealing with complaints remember to promptly notify the Governance team which complaints are responded to, and also putting arrangements in place to make it easier for extensions to be arranged with customers where applicable. The stage 1 complaints received can be broken down as follows:

	Places	Resources	People*
Stage 1 Total	19	2	11*
Number exceeding 10 day response target	5	0	3*
% within 10 day response target	74%	100%	73%*

*Peoples Directorate stage 1 complaints follow a separate social care protocol

7 of these complaints were escalated to stage 2, with only 1 exceeding the 10 day response target.

	Places	Resources	People*
Stage 2 Total	5	0	2*
Number exceeding			
10 day response	1	n/a	0*
target			
% within 10 day	100%	n/a	100%*
response target	10076	11/a	100 /6

*Peoples Directorate stage 2 complaints follow separate social care protocols with a different statutory timescale.

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. A member of the Governance team is now feeding back on the outcome of these at Peoples Directorate team briefings initially to ensure that any common issues and best practice are shared amongst colleagues. If this proves successful, attendance at other directorate meetings will be arranged.

Comments - Total 7

	Places	Resources	People
Total for Directorate	5	1	1

Compliments - Total 37

	Places	Resources	People
Total for Directorate	17	7	13

Creating a Brighter Future for All	Q2	12	1	1
	Q3	11	1	2

3.5 So far during 2015/16, 65% of single assessments (PI060) have been completed within 45 days against a target of 80%. 82% of single assessments were completed within 45 days during Quarter 3 above target and a continuation of the improvement (51% in Q1, and 64% in Q2) in performance in this area during 2015/16. Work continues to further improve performance in this area.

Of the 33 children who have become subject to a child protection plan during 2015/16, 4 (12%) have previously been on a plan (PI065), taking us above our local target of 10%, although still below the national average of 16.6%. Two of these children are part of the same family and all four of the previous child protection plans ended over 5 years ago.

5.6% of the eligible population of Rutland are currently claiming benefits as of latest published figures for May 2015 (PI152, working age people in receipt of benefits). In comparison, the average for the East Midlands is 12%, and the national average is 12.5%.

77.8% of the working age population of Rutland is currently in employment (PI151). Of these 12% are self-employed. As at the end of September there were 112 people in Rutland eligible to claim Jobseekers Allowance (compared to 132 the previous quarter), 22% (25) have been claiming JSA for over 12 months (information taken from NOMIS website).

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	Change since previous quarter
West Berkshire	82.7%	-0.8%
Wiltshire	79.5%	-0.2%
Central Bedfordshire	78.6%	+0.4%
Rutland	77.8%	-2.0%
Bath and NE Somerset	76.6%	+1.3%
Cheshire East	75.1%	-0.7%
Cheshire West	74.1%	+1.2%

Creating a Safer Community for All

Q2	2	0	0
Q3	2	0	0

3.6 There have been 10 people killed or seriously injured on our roads so far this year (with 6 occurring during Quarter 3 PI047). Of these 4 have been fatalities (3 in Quarter 3). There have been no children killed or seriously injured in road traffic accidents (PI048) in Rutland during 2015/16.

Building our Infrastructure

Q2	4	1	0
Q3	5	0	0

3.7 47 affordable homes have been delivered (PI155) so far this year, with four completed during Quarter 3, against a target of 33, a further 8 are under construction and if all are completed on time we will be well above target for 15/16. At the same point last year 21 affordable homes had been completed.

Meeting the Health	and Wellbeing	Needs of the
<u>Community</u>		

Q2	9	1	0
Q3	8	1	1

3.8 Child Poverty in Rutland is now 7.3% (compared to a national average of 18.6%), a further decrease from the previous year (8.4%)

This reduction aligns to falls in child poverty nationally with Rutland still significantly below the national level which currently stands at 18.6%. The Child poverty strategy is now in place and poverty pledges have been provided by key partners, focussing on key issues such as affordable homes and energy efficiency. Although the poverty levels are low in comparison to regional and national data there are areas in Rutland with much higher levels of child poverty than the average for the County and as such services are targeting those areas with information and support.

Of the Blue Badge applications processed during Quarter 3 (LI105) 97% have been completed on time, a second quarter showing significant improvement in performance (from 48% completed on time in Quarter 1), reflecting the good work the Corporate Support has been doing to improve service in this area, 89% of blue badge applications have been processed within 4 weeks during 2015/16 and due to the

positive work being done to further improve performance this is anticipated to be well above target at year end.

There has been an increase in the average length of temporary stays in B&B accommodation (LI130) to 26 days (from 13 days in Quarter 2) taking this back above target. This is primarily due to two individuals who the service has been unable to move back into one bedroom accommodation and a couple of difficult cases where the individuals have been in temporary accommodation since November.

A dashboard, summarising performance against a number of Public Health indicators is included as **Appendix D**

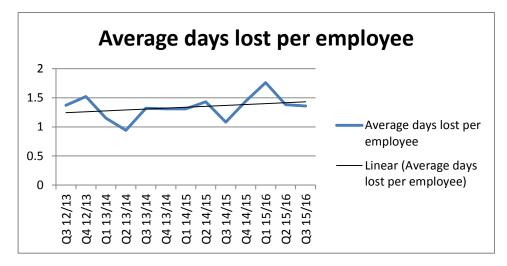
For a number of indicators trend data is currently unavailable as we currently only have 1 or 2 years data. As Public Health supply us with more data, trend analysis will be added where appropriate.

Creating a Sustained Environment	Q2	3	0	0
	Q3	3	0	0

3.9 Although down slightly from the previous quarter (65.6%), estimated recycling rates (PI192) remain above our 59% target at 62.5%. Household waste figures (PI191 representing the number of kilograms of household waste collected per household) at 119kg per household are below our local target of 130kg and rates from the same period last year when it was 129kg.

Sickness Monitoring

3.10 The chart below shows average days lost per employee over the last three years, and there has been a small decrease on the last quarter (down to 1.36 from 1.38 in Quarter 2).



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

Customer Services

3.11 Compared to the same time last year call volumes reduced across the same period, with enquiries and emails increasing.

The daily averages for CST for Quarter 3, when compared to the same time last year were as follows:

	Daily Average			
	Q3 2015/16 Q3 2014/15			
Calls	277 288			
Enquiries	75 67			
Emails	60	49		

Comparing key statistics with the same period last year shows that the percentage of abandoned calls has stayed the same, while the percentage of calls being answered within 15 seconds has dropped 7% from 63% last year to 56% this year.

	Q3 2015/16	Q3 2014/15
% abandoned	8%	8%
calls		
% calls	56%	63%
answered with		
15 seconds		

For the majority of Quarter 3 2014/15, CST had just over 6 Full Time Equivalent (FTE) staff working in the contact centre. In the same period in 2015/16 there were just over 4.5FTE/ To accommodate this change and to reduce the abandoned call rate experienced earlier in 2015/16, the peak times for abandoned calls were analysed and some part time working hours were amended to mirror the busier periods of service. This helped with reducing some of the abandoned calls but meant there were less staff available for the quieter periods, where most of the calls were answered within the 15 second target.

Customer Services data is currently being reviewed, with the team looking at Govmetric data, coupled with local data on service usage to look at busy periods, identifying which day of the week is busiest, peak hours for abandoned calls, etc. so that the provision of the service can be changed to meet these demands.

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

Safeguarding

3.12 The quarterly safeguarding report is 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

- 3.13 At the end of Quarter 3 there were 24 actions overdue for implementation, three of which were classified as high priority and were due over 3 months ago
 - An action regarding the development of arrangements to involve ICT in new projects was agreed. This recommendation is being progressed as part of a wider review of policies, procedures and system management.
 - One recommendation related to the Agresso system to improve controls for setting up new users, amending user privileges and reviewing users' roles.
 - Due to a BACS compatibility issue with the laptops used by other officers there is no separation of duty between the officer setting up benefit payments runs and the officer completing the BACS payment run.

The Director of Resources and Assistant Director – Finance have reviewed the issues outstanding and do not consider the current risk to be high for the following reasons:

- A suite of IT project documentation has been developed and is currently being applied to the key LiquidLogic (social care case management system) project. This suite of documentation will be rolled out for all new projects commencing 1st April 2016 once reviewed for any lessons learnt or areas of improvement.
- The recommendation re Agresso is concerned with the setting up of new accounts rather than addressing weaknesses in the existing setup which compromise the integrity of transaction processing.
- The issue re segregation of duties on the BACS system has been resolved following technical support.

4. CONSULTATION

4.1 Consultation is not required as no changes are being proposed within this report.

5. ALTERNATIVE OPTIONS

5.1 Alternative options are not considered within this report.

6. FINANCIAL IMPLICATIONS

6.1 There are no direct costs associated with this report.

7. LEGAL AND GOVERNANCE CONSIDERATIONS

7.1 There are not considered to be any legal or governance issues associated with this report.

8. EQUALITY IMPACT ASSESSMENT

8.1 An Equality Impact Assessment (EqIA) has not been completed because there no service, policy or organisational changes are being proposed.

9. COMMUNITY SAFETY IMPLICATIONS

9.1 There are no Community Safety implications arising from this report.

10. HEALTH AND WELLBEING IMPLICATIONS

10.1 There are no Health and Wellbeing implications arising from this report, **Appendix D** summarises performance against a number of Public Health indicators.

11. CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

11.1 94% of indicators measured during Quarter 2 were on or above target, with measures in place to improve performance where targets are not currently being met. Main areas of concern have been highlighted in this report and the remedial action being undertaken to improve performance has been identified. Performance will be monitored during Quarter 4 and direction of travel will be reported to show where improvements have been made.

Overall performance based on activity in the third quarter is satisfactory.

12. 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.

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Rutland County Council Quarterly Performance Report Quarter 3 2015/16



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 3, expressed as total days per directorate and days lost per employee.

Directorate	Days lost through	Headcount as at	Headcount as at 31 st	Average	Days lost per
	Sickness	1 st October 2015	December 2015		employee
PEOPLE	410	220	217	218.5	1.88
PLACES	146	150	151	150.5	0.97
RESOURCES	70	92	92	92	0.76
TOTAL	626	462	460	461	1.36

In Quarter 3, the average number of days lost has decreased slightly to 1.36 (from 1.38 in the previous quarter).

Quarter 3: Long term and short term sickness

The table below shows the incidence of short and long term sickness absence within the Council for Quarter 3. 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	70	52	8	62
PLACES	32	26	2	30
RESOURCES	31	25	0	31
TOTAL	133	103	10	123



Comparison

The table below compares the sickness for Quarter 3 of 2015/16 to that of the previous 3 quarters.

Year	Days lost through	Average No of	Days lost per employee	Days lost per month
	Sickness	employees		
Q3 2015/16	626	461	1.36	218
Q2 2015/16	636	461	1.38	212
Q1 2015/16	797	453	1.76	266
Q4 2014/15	653	452	1.44	218
QTR AVERAGE	685	457	1.50	229



Corporate Health Indicators

2 indicator is currently above target	2 indicators are on target	0 indicator currently not meeting target
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Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
Ll001 - % of invoices paid on time (30 calendar days from receipt)	95%	93%	A	94.7% of invoices were paid on time during Quarter 3.
LI003 - % of audits to be delivered by year end	90%	71%	G	On target
LI004 - % of FOI requests replied to within 20 days	100%	98%	A	344 Freedom of Information requests were received during Quarter 2, with 340 (99%) completed on time.
LI005 – Average number of days to respond to Ombudsman complaints	28 days	-	G	Two complaints were escalated to the Local Government Ombudsman, however in both cases no investigation was undertaken.



Delivering Council Services within our MTFP

9 indicators are currently above target	0 indicators are on target	2 indicator currently not meeting target
target		meeting target

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI020 - % of Council Tax received	87.5%	94.4%	G	
LI021 - % of NNDR received	87.5%	96.4%	G	
LI022 – Benefits claims – speed of processing	22 days	21 days	G	
LI024 – Issue monthly financial reports within 4 days of m o nth end	100%	100%	G	
LI025 – Statement of accounts produced by 30 th June each year	Achieved		G	
LI029 - % of sundry debt recovered	90%	94%	G	99% of the previous years and 88% of the current years debt has so far been recovered during 2015/16
LI031 - % of agendas and reports published 5 days before meetings	100%	100%	G	18 meetings were held during Q3. All agendas and reports were issued on time.
LI032 - % of draft minutes issued to officers with 5 days of the meeting followed by publication on the Council's website within 7 days of the meeting	100%	100%	G	18 meetings were held during Q2. All minutes were delivered on time.
LI033 - % of priority 1 faults closed within SLA	95%	100%	G	So far during 2015/16 there have been 4 priority one faults logged with the Service Desk (2 in both Quarter 2 and 3),all of which were closed within SLA



Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI034 - % of stage 1 complaints answered with 10 day response target	100%	69%	R	120 complaints received so far during 2015/16, with 83 responded to within timescales.46 complaints during Q2, 27 of which were answered within response time.
LI035 - % of stage 2 responses issued within 10 working days	100%	76%	R	So far during 2015/16 17 complaints have escalated to stage 2, with 13 responded to within timescales.



Creating a brighter future for all -

Overall Performance

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI060 – Percentage of single assessments for children's social care carried out within 45 days of commencement	80%	65%	R	65 single assessments were completed during Q3, with 82% completed within 45 days
PI062 – Stability of placements for looked after children: number of moves	6%	0%	G	At the end of December there were 34 LAC children, none of whom have had 3 placement moves or more in the last twelve months.
PI063 – Stability of placements for looked after children: length of placement	70%	94%	G	Out of 34 LAC children, 15 have been in care for 2.5 years or more. Of those, 14 had remained in the same placement for over 2 years.
PI064 – Child protection plans lasting 2 years or more	5%	0%	G	So far during 2015/16 24 children have ceased to be the subject of a child protection plan. None of these children has been on a plan for 2 years or more.
PI065 – Percentage of children becoming the subject of Child Protection plans for a second or subsequent time within the previous two years	5%	12%	R	So far during 15/16 33 children have become the subject of a child protection plan and of these 4 has had previous plans
PI066 – Looked after children cases which were reviewed within required timescales	100%	100%	G	All Looked After Children reviews have been completed within timescales.
PI067 – Percentage of child protection cases which were reviewed within required timescales	100%	100%	G	All children subject to a CP plan have been reviewed within timescales
PI068 – Percentage of referrals to children's social care going to assessment	75%	80%	G	There were 91 referrals made during Quarter 3, with 54 (60%) of them going onto single assessment.



				County Council
Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI109 – Delivery of Ofsted Action Plan for children's centres	100%	100%	G	Work ongoing to deliver Action Plan, currently on target.
PI151 – Overall employment rate (working age)	79.7%	77.8%	A	77.8% of the working age population are in employment in Rutland (Oct2014-Sep2015). Compared to 73.5% (East Midlands) and 73.4% (National average)
PI152 – Working age people in receipt of benefits	7.3%	5.6%		5.6% (1,260) of the working age population are currently receiving benefits, compared to 12% (East Midlands) 12.5% (National)This breaks down as follows:
20			G	 140 claiming Job Seekers Allowance 630 claiming ESA and Incapacity Benefits 90 lone parents 190 carers 20 on other income related benefits 160 disability 50 bereaved
LI085 – Percentage of NEET (Not in Employment, Education or Training) performance for Rutland	2%	1.2%	G	Eleven 16-18 year olds were classed as NEET at the end of December, a small increase (up from 7) on the previous quarter.
LI126 – Youth provision participation	450	404	A	
LI163 – Percentage of payments by results claimed for targeted Troubled Families	50%	70%	G	



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	18	10	G	Figures for September to December shows that there has been 3 serious injuries and 3 fatalities during the period
PI048 – Children killed or seriously injured in road traffic accidents	1	0	G	There have been no child injuries so far during 2015/16

21



Building our infrastructure -

Overall Performance

5 indicators are
currently above
target0 indicators are on
target0 indicators
currently not
meeting target

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI154 – Net additional homes provided	105	152	G	38 additional dwellings completed during Quarter 3
PI155 – Number of affordable homes delivered.	33	47	G	4 affordable homes completed this quarter, with a further 8 under construction and scheduled to be completed this year.
PI157(a) – Processing of planning applications – Major Applications	60%	64.9%	G	An improvement on previous quarters (77.7% processed within timescales in Q3) and has now moved back above target.
PI157(b) – Processing of planning applications – Minor Applications	65%	72.1%	G	
PI153(c) – Processing of planning applications – Other Applications	80%	89.1%	G	



Meeting the health and wellbeing needs

of the community – Overall Performance

9 indicators are currently above target	1 indicators is on target	0 indicators currently not meeting target
-----------------------------------------------	---------------------------	--------------------------------------------------------

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI105 - % of blue badge applications processed within 4 weeks of application	80%	89%	G	During Quarter 3, 150 blue badge applications have been processed, with 146 (97%) completed during timescales.
LI107 – Hospital discharges are safe and effective with patients assessed within timescales	80%	100%	G	
LI111 - % of carers signposted to developed non- stat	80%	79%	A	
LI127 – Child poverty in Rutland	9%	7.3 %	G	Children living in poverty has fallen from 8.4% and currently stands at 7.3% for Rutland. This reduction aligns to falls in child poverty nationally with Rutland still significantly below the national level which currently stands at 18.6%.
LI130 – Reduction in the length of temporary stays in B&B	18	26	R	An increase in the length of stays from the previous quarter (13 days)
LI172 – % of Safeguarding Adults referrals screened within one working day	80%	100%	G	All alerts are looked at and screened by the Senior practitioner or team manager on the day they are received.
LI173 - % Adult Social Care reviews for people with a learning disability completed annually	75%	100%	G	
LI180 - % of hospital discharges resulting in a fine	5%	1%	G	There were 71 section 5's during Quarter 3 (an increase on Quarter 2, when there were 45), with 0 resulting in a delays attributable to RCC.



Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI181 – Number of Adult Social Care reviews completed within timescales	80%	87%	G	97 reviews completed so far during 2015/16 with 84 completed on time.
LI182 - % of service users who were still at home 91 days after discharge	90%	92%	G	Of the 116 patients discharged from hospital to rehabilitation where the intention is for the patient to go back home during 2015/16, 107 were still at home 91 days later.



Creating a sustained environment -

Overall Performance

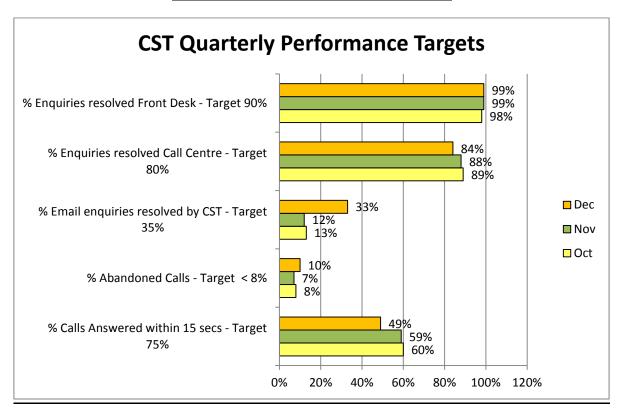
Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI191 – Residual household waste per household	130	119	G	
PI192 – Percentage of household waste sent for reuse, recycling and composting	61%	62.48%	G	
PI193 – Percentage of municipal waste land filled	5%	0%	G	

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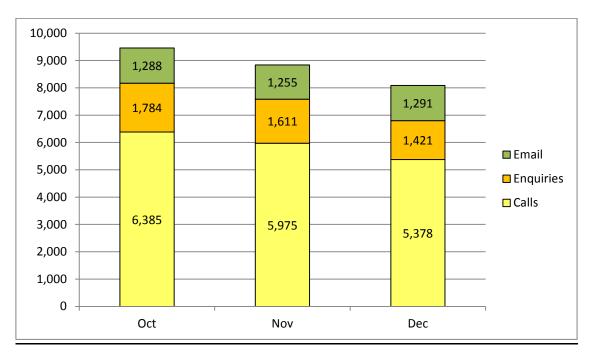
Report No: 37/2016

Appendix B



CST Quarter 3 Performance

Volumes

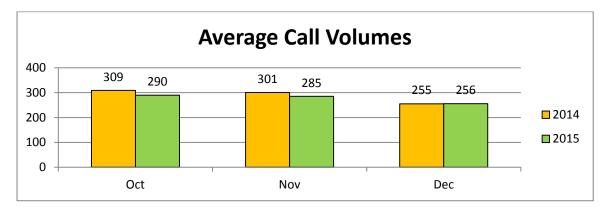


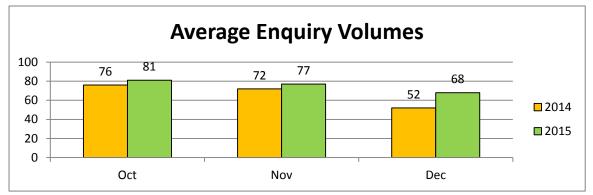
Volumes – Daily Average

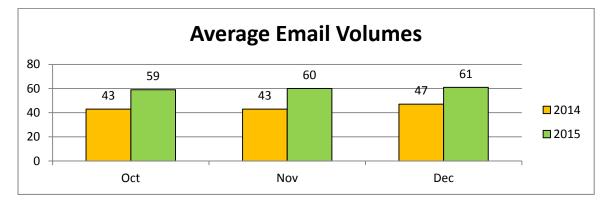
Compared to the same time last year (see below) there has been a small reduction in call volumes throughout Quarter 3, with enquiries and email volumes both increasing.

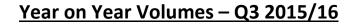
Volumes – Daily Average comparison

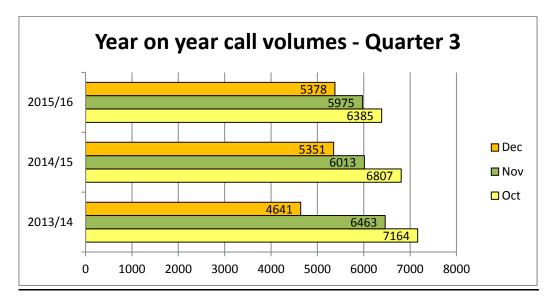
The charts below show a comparison of the daily average volumes with the same period last year.

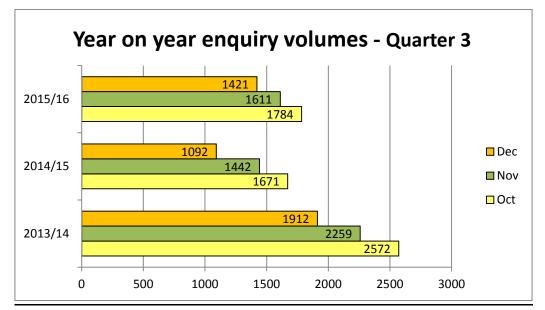


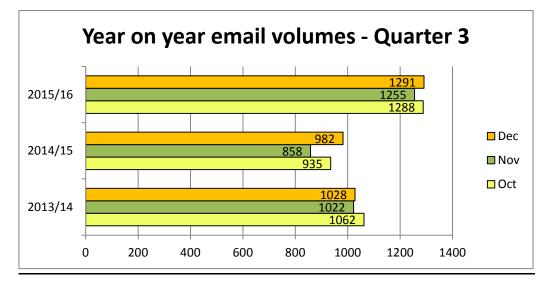












GovMetric Q2 2015/16

GovMetric Summary

Face to Face

No. of respondents %age of respondents

:		\odot	Overall Rating
375	34	63	(••)
70%	7%	13%	Good

Telephone

No. of respondents %age of respondents This process is under review as the time taken to assist a customer to leave feedback is affecting the advisors' ability to process calls quickly. The new Customer Service Manager is reviewing Govmetric to establish a better way of providing this service to our customers without compromising our service overall.

Web

No. of respondents %age of respondents

\odot	\bigcirc	\odot
73	24	73
43%	14%	43%



APPENDIX C SAFEGUARDING

Context

This report combines adult and children's safeguarding data and analysis and provides an overview of safeguarding activity in Quarter 3 of 2015/16. 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 23 new Common Assessment Frameworks (CAF's) opened in Quarter 3, 9 of which were referred by Social Care, representing 39% of the total number of CAF for the quarter.

Rutland	Q1	Q2	Q3	Q4	Total	Reporting Frequency
Number of new CAF's	40	7	23			Quarterly
Number/Proportion of Children's Social Care referrals that result in a CAF*	8	2	9			Quarterly
	20%	29%	39%			Quarterly

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

Contact referral and assessment

- There was a 14% decrease in contacts this quarter (202 as opposed to 234 in Quarter 2). Of those contacts, 45% (91) went on to referral compared to 33% (78) last quarter.
- 82% of all single assessments closed during Quarter 3, were closed within timescales (45 days)
- There were 53 section 47 enquiries during Quarter 3.

	Q1	Q2	Q3	Q4	Total/ Cumulative	Reporting Frequency
Number of contacts to Children's Social Care (include referrals)	255	234	202			Quarterly
Number of referrals to Children's Social Care	100	78	91			Quarterly
Number of referrals made by EDT/Out of Hours Team (including those that were recorded as contacts only)	20	3	0			Quarterly
Number of single assessments started during Quarter	84	74	54			
No. of single assessments	77	72	65			
closed, and % closed within 45 days	65%	58%	82%			Quarterly
Number of S47 enquiries	28	17	53			Quarterly

Child Protection

- There were 34 child protection plans at 31st December 2015. This is a 31% increase on Quarter 2.
- The largest category of abuse for CP plans at end of September 2015 was emotional, which represented 56% of all plans.
- Of the children with a CP plan for 3 months or more at 31st March 2015, 100% had been reviewed within timescales (PI 67).

	Q1	Q2	Q3	Q4	Cumulative	Reporting Frequency				
Number of children subject to a CP Plan	33	26	34		n/a	Quarterly				
Number/Rate in each Catego	ory of Abi	021								
Neglect	5	7	12		n/a					
Physical	0	0	0		n/a	-				
Emotional	17	14	19		n/a	Quarterly				
Sexual	1	1	1		n/a	Quarterly				
Multiple*	9	4	2		n/a					
*Breakdown of Multiple:										
Phys/Neglect/Emotional	1	1	0		n/a					
Phys/Sexual	1	0	0		n/a	Quarterly				
Phys/Emotional	7	3	2		n/a	Quarterry				
		5	2		n/a					
Unborn	0	0	0		n/a					
0 - 4	15	8	14		n/a	Quarterly				
5 - 9	7	6	12		n/a					
10 - 15	9	8	6		n/a					
16+	2	4	2		n/a					
			1		1	1				
Male	17	14	17		n/a					
Female	16	12	17		n/a	Quarterly				
Unborn	0	0	0		n/a					
Percentage of CP cases which were reviewed within required timescales	100%		100%		100%	Quarterly Target - 100%				
Number of CP cases allocated to a Social Worker	100%		100%		100%	Target - 100%				
Looked After Children										
Rutland	Q1	Q2	Q3	Q4	Cumulative	Reporting Frequency				
Number of Looked After Children	34	31	34		n/a	Quarterly				
Ethnicity of LAC										
White	32	29	31		n/a					
Mixed	2	2	3		n/a					
Asian Black					n/a n/a	Quarterly				
Other			_		n/a					
Undetermined					n/a					

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

ADULTS UPDATE

Safeguarding Adults Data Collection

100 alerts/enquiries were received in Q3. This represents an increase from Q2 and reflects the ongoing effectiveness of receiving alerts through the RCC single point of contact. The data reflects that individuals know where to raise their concerns as well as providers being confident to inform the Prevention and Safeguarding Team of incidents in residential care.

Q3 has seen an increase in the amount of alerts from voluntary agencies e.g. the Alzheimer's Society and the Rutland Community Agents.

18 of this number resulted in the implementation of the Safeguarding Adults Procedures.

There was a conclusion to the high profile alert of a resident absconding from a residential care home. The voluntary suspension was lifted on 10 November 2015 following multi-agency monitoring and liaison.

The number of community alerts remains almost on a par with those received from Residential settings which offers assurances that vulnerable adults in the community are offered protection via the alert process.

A poster campaign is due to be launched to promote safeguarding awareness and build on community recognition of adult safeguarding.

Location of alleged abuse	Q1	Q2	Q3	Q4	Total	Reporting Frequency
Community	34	45	47			Quarterly
Residential	24	34	53			Quarterly
Unknown	0	0	0			Quarterly

Source of Referral for all Alerts	Q1	Q2	Q3	Q4
Primary Health Care	2	0	3	
Secondary Health Care	4	7	3	
Adult Mental Health Setting	0	0	0	
Residential	13	23	40	
Day Care	1	0	2	
Social Worker/Care Manager	12	22	23	
Self-Directed Care Staff	0	0	0	
Domiciliary	4	4	10	
Other Care Workers	0	0	0	
Self	0	1	0	
Family Member	8	0	2	
Other Service User	0	0	0	
Friend/Neighbour	0	8	0	
Care Quality Commission	2	0	1	
Housing	3	3	4	
Education	0	0	0	
Police	2	4	0	
Other	2 - EMAS 1 - EDT	Other local authority – 2 3- EMAS 1 – Community Agent 1 - EDT	Other local authority – 1 Community Agent – 1 EMAS – 3 Voluntary agency – 6	
Not Known				

Closed Cases in Quarter 3

Safeguarding Adults performance data is obtained when a case is closed at the end of the Safeguarding Adults process. 10 cases were closed in Quarter 3. Older people have been consistently the largest service user group represented in safeguarding within adult social care services and in this quarter there were 3 investigations closed where the service users had a learning disability. In 2 of the cases the investigations were ceased during the process – 1 case at the request of the family and 1 where action and intervention meant that the service user was not at risk.

One of the investigations was on a provider and social workers from the Long Term and Review team worked with this provider to investigate the safeguarding concerns and reviewed the Rutland residents that were placed there.

The post for the Senior Practitioner on the Prevention and Safeguarding team will be readvertised as there were no successful applicants for the post in the recent recruitment campaign.

e going to be meeting with <mark>Dutcome</mark>	Q1	Q2	Q3	Q4
Substantiated - fully	3	4	3	
Substantiated - partially	0	0	0	
Not Substantiated	3	4	5	
nconclusive	2	1	0	
Primary Client Type	Q1	Q2	Q3	Q4
Ider Person	3	5	7	
lental Health	0	1	0	
earning Disability	4	3	2	
Physical Disability	0	0	0	
lot recorded	1	0	0	
rimary Age Group	Q1	Q2	Q3	Q4
3-64	4	2	2	
5-74	1	2	2	
5-84	1	2	3	
5-94	2	3	2	
5+	0	0	0	
ype of Abuse*	Q1	Q2	Q3	Q4
hysical	2	1	3	
exual	0	1	0	
sychological&Emotional	4	0	0	
nancial & Material	0	3	1	
eglect & Acts of mission	2	4	5	
Discriminatory	0	0	0	
nstitutional	0	0	1	
lot Known	0	0	0	

*Cases may include more than one category

Source of Referral	Q1	Q2	Q3	Q4
Primary Health Care	0	0	1	
Secondary Health Care	1	1	0	
Adult Mental Health Setting	0	0	0	

Day Care Social Worker/Care	0	0	0	
Manager	1	2	6	
Self-Directed Care Staff	0	0	0	
Domiciliary	0	3	1	
Other Care Workers	0	0	0	
Self	0	0	0	
Family Member	1	1	0	
Other Service User	0	0	0	
Friend/Neighbour	0	0	0	
Care Quality Commission	0	0	0	
Housing	0	1	1	
Education	0	0	0	
Police	1	1	0	
Other	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 agencies involved	0	0	2	
Adult Protection Plans not accepted	0	0	0	
Could not consent	0	0	0	
Repeat Referrals	Q1	Q2	Q3	Q4
No of Repeat Referrals	5	2	1	

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Public Health performance dashboard						Significantly better than England average* Rank out of 11 aNot significantly different from Englandwith 1 defined asaverageperformSignificantly worse than England averageperform		
Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	Life Expectancy - Male	Annual	2011-13	n/a	81.2	79.4	1	06-08 07-09 08-10 09-11 10-12 11-13
A healthier population with increased life	Life Expectancy - Female	Annual	2011-13	n/a	85.7	83.1	1	06-08 07-09 08-10 09-11 10-12 11-13
expectancy and a reduction in health inequalities	Healthy Life Expectancy – Male	Annual	2011-13	n/a	66.09	63.27	7	09-11 10-12 11-13
	Healthy Life Expectancy – Female	Annual	2011-13	n/a	71.32	63.95	1	09-11 10-12 11-13

Public Health performance dashboard						Not signific average	and average * Rank out of 11 areas om England with 1 defined as best performance and average	
Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	Cardiovascular Disease (under 75) – mortality rate	Annual	2012-14	23	57.4	75.7	3	8608 01,09 08,10 09,11 10,12 11,13 12,14
	Cancer (under 75) – mortality rate	Annual	2012-14	44	110.3	144.4	1	0608 0109 0810 0912 1012 1123 121A
The prevalence	Proportion of children in Reception classified as overweight and obese	Annual	2014-15	84	22.5	21.9	8	01.08 08 08 09 10 10 10 10 10 10 10 10 10 10 10 10 10
of obesity is reduced and people are more physically active	Proportion of children in Year 6 classified as overweight and obese	Annual	2014-15	81	24.5	33.2	2	01.0° 08.0° 09.1° 01.1° 12.1° 12.1° 12.1° 14.5
	Proportion of adults (16+) who are	Annual	2012	63	65.58	63.78	8	No trend data currently available

Public Health performance dashboard						Not signific average	and average * Rank out of 11 areas om England with 1 defined as best performance and average	
Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	overweight and obese							
Smoking prevalence and the harm caused is reduced	Smoking prevalence	Annual	2014	n/a	14.1	18.0	2	2010 2011 2012 2013 2014
The harm caused by alcohol and drugs is reduced	Rate of hospital admissions for alcohol related harm	Annual	2013-14	198.76	521.76	645.13	4	10/11 11/12 12/13 13/14
To help prevent heart disease, stroke, diabetes and kidney disease	Heath Check uptake	Quarterly	Q2 2015/16	467	76.7%	-	1	Q1 Q2 Q3 Q4 Q1 Q2 Q3 Q4 Q1 Q2
To increase					Self-rep	orted Well be	eing	
the level of wellbeing	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	Annual	2011/12	n/a	12.81	20.08	1	No trend data currently available

Public Health performance dashboard						Significantly better than England average* Rank out of 11 aNot significantly different from Englandwith 1 defined asaverageperformSignificantly worse than England averageperform		
Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	score							
	People with a low happiness score	Annual	2011/12	n/a	19.21	29.02	1	No trend data currently available
	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	2013/14	166	1924.11	2064	7	10/11 11/12 12/13 13/14
	Injuries due to falls (aged 65 or over) – males	Annual	2013/14	60	1766.75	1661	11	10/11 11/12 12/13 13/14
	Injuries due to falls (aged 65 or over) – females	Annual	2013/14	106	2081.47	2467	4	10/11 11/12 12/13 13/14

Public Health performance dashboard						Significantly better than England average* Rank out of 2Not significantly different from Englandwith 1 definedaverageperformSignificantly worse than England averageperform		
Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
To increase control of chlamydia	Chlamydia diagnosis adults aged 15-24	Quarterly	2015/16	66	1390	2012	1	No trend data currently available
To improve health outcomes and increase healthy life expectancy	% of children living in households where income is less that 60% of median household income	Annual	2012	455	7.8%	19.25%	1	2007 2008 2009 2010 2011 2012
	Under 18 conception rate	Annual	2013	8	9.2	24.3	1	2003 2004 2005 2006 2008 2008 2009 2011 2011 2011 2013 2013

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37/2016

Appendix E

PROJECT UPDATE

Project	Scrutiny Panel	Status	RAG
Oakham Enterprise Park Business	Places	Available internal floor space has reduced slightly to 96,517 sqft due to a large building (Unit 20) being temporarily taken out of scope to facilitate subdivision works. Tenancy across the site has increased to 95.74% (86 units, totalling 91,376 sqft or 94.7% of floor space) now let or with leases being progressed. There is firm interest in a further 2% (2 units, 1,897sqft or 2% floor space). There are currently 2 units without firm interest due to tenants giving notice very recently. These figures exclude the Active Rutland Hub. An additional 483,270 sqft (approx. 11 acres) of external space is being marketed for development opportunities or other activities. Of this, 152,847 sqft (31.6% / 3.5 acres) is already leased as the Events Zone. We have current speculative interest in a further 153,000sqft (31.7% / 3.5 acres) for new build development. Interest in single offices, storage space and industrial units remains strong with several new enquiries being received weekly. Growing demand for industrial space suggests a robust business case for construction of new units, especially industrial spaces of between 1 k & 5k	
		sqft. A bid for £100k capital funding has been submitted for inclusion in the MTFP to generate annual savings from roof mounted solar panels and is currently pending a decision.	
		With the original capital budget depleted, revenue is being used to fund any remaining and ongoing compliance/capital works. This is the first year the site has operated at anywhere near capacity so the out-turn position may change depending upon a number of factors which are difficult to accurately predict such as energy use & reliability of plant & building infrastructure. However, whilst the projected surplus for 15/16 has been reduced to around £50k (which includes £80k for site-wide compliance works & £7.3k for subdivision of Unit 20), future years look set to see a steadily increasing revenue income once the site has bedded in.	
Oakham Enterprise Park Sport	Places	Active Rutland Hub is now complete and occupied. The Royal visit and opening have taken place successfully. The final budget for construction has been reviewed and was on target with no overspends. Bookings and space	

Project	Scrutiny Panel	Status	RAG
		allocation are progressing well.	
Broadband	Places	Phase 1 of the Digital Rutland project has completed to provide fibre infrastructure to 9416 premises. Rutland has seen the highest take up rate in the country for these new fibre based services.	
		Phase 2 detailed planning and surveys are now underway to bring about an increased speed to circa 900 premises within the project intervention area. Deployment of this second phase is expected over the summer of 2016.	
		A further change request form has been issued to BT to model how much further fibre can be deployed on a value for money basis to the remaining premises in the intervention area. The outcome of this initial desk top modelling is expected in Mid-February 2016. Through change request (CR011) a satellite voucher scheme has been introduced from December 2015, details of which are available on the RCC/ Digital Rutland webpages. RCC are operating a soft launch of the scheme pending the outcome of CR010 which will identify more fully the extent of infill required to be met by a satellite solution beyond the numbers currently identified.	
Castle Restoration Project	Places	Castle Site has been handed over to contractors to undertake the construction and repair works, completion is scheduled for the end of April 2016. Majority of trees on the site have been felled in line with planning permission, and restoration works on the bank are underway.	
Community Infrastructure Levy	Places	The Community Infrastructure Levy charging scheduled was adopted at the Council meeting on 11 th January 2016 and will be implemented by 1 st March 2016. The process for implementing this new levy will need to be in place by March 2016	
Welfare Benefit Reform	Resources	Local Council Tax Support Scheme, Discretionary Fund and Crisis Loans will all be reviewed in 2016.	
Corporate Website Development	Resources	An Officer Working Group is gathering and analysing data on customer contacts to inform the design specification and project plan. Procurement options are being assessed along with a project timeline and resource requirements. A report will be presented to Cabinet to approve the procurement and the establishment of a formal project board at the appropriate time	
School Place Planning – To monitor the continued growth within the County	People (children)	Latest Primary applications are now in and awaiting further data on Out of County placements. Analysis currently indications that there will be sufficient provision in both Oakham and Uppingham. Secondary places are showing over subscription in Uppingham and Oakham but ample space at Great Casterton.	
balanced		Brooke Hill extension has been completed and car park	

Project	Scrutiny Panel	Status	RAG
against the number of pupil places required at all		currently being built. English Martyrs will be built by date required and has been factored into school place planning.	
levels within the education system		Harington free school due for completion December 2016. Children's Centre relocation to provide additional secondary places at Catmose in hand.	
		Barleythorpe Primary School free school bid is currently out for consultation	
Liquidlogic Implementation	People (children and adults)	 The Case Management Transformation Programme (CMTP) has progressed significantly over this last period. Having completed the planning in the previous period, the focus was very much on training the staff to become competent with setting the system up, as well as on the technical aspects of the data currently being held in RAISE. This data has now been migrated over to Liquidlogic successfully for both children's and adults data. This task has highlighted the risk of making sure the data is reflected correctly in the new system and so further time is needed to do this properly. As a result, the go-live dates of the Liquidlogic system have been amended accordingly: Children's and Early Years Modules to be implemented for May 2016 Adults and Adults Finance Modules to be implemented for April 2016 Customer Portal Module will be implemented for phase 2 of the implementation Now that the data has been migrated, the next tasks are about checking this data (quality assurance) as well configuring the system, so that it reflects RCC business processes. 	
Care Act Implementation	People (adults and health)	 processes. The requirements and principles of the Care Act, introduced in April 2015, are now embedded into the adult social care teams practice as 'business as usual'. We are on track to complete all of the annual reviews by the end of March. Members agreed to consult for a period of 12 weeks on a number of charging options at Cabinet on 15th December 2015, the consultation process was also approved. Officers are yet to commence the consultation. The Accessible Information Standard is a new 'information standard' for implementation by 31st July 2016 for all organisations that provide NHS and / or adult social care. The Standard aims to ensure that people 	
		who have a disability or sensory loss receive information that they can access and understand, for example in large print, braille or via email, and professional	

Project	Scrutiny Panel	Status	RAG
		communication support if they need it, for example from a British Sign Language interpreter. We are confident we can comply with this requirement.	
Better Care Fund	People (adults and health)	The 2015-16 Better Care Fund programme continues to progress well overall, with most of the schemes making good progress and contributing towards achievement of the anticipated impacts. Proactive governance continues and the Partnership Board is continuing to effectively manage the S75 pooled budget agreement.	
		The programme is amber rated currently as there are some areas needing close management to sustain performance and because the underlying emergency admissions and falls statistics are challenging, in spite of the contribution made to date by programme activities. That said, performance is very good currently in terms of residential admission levels and reablement helping people to stay at home after hospital. We will have a fuller picture of Quarter 3 performance when December's emergency admission and delayed transfer of care statistics are released at the end of January.	
		The 2016-17 BCF plan is being developed in parallel with sustaining the momentum on the current programme. This work is progressing at a good pace, but has been affected by delays to the publication of national guidance.	
		An interim evaluation of the current programme was carried out to inform plan development and this has helped scheme leads and stakeholders to take stock of progress to date and to generate a range of ideas for how the plan can be evolved to sustain the pace of change going forward.	
		An initial outline of the provisional draft 2016-17 BCF plan is being presented to the Integration Executive and Health and Wellbeing Boards for discussion. This will form the basis for the first formal plan submission on 8 February.	