

# Public Document Pack



## Rutland County Council

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

**Meeting:** PEOPLE (ADULTS & HEALTH) SCRUTINY PANEL

**Date and Time:** Thursday, 14 July 2016 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](mailto:corporatesupport@rutland.gov.uk)

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**Helen Briggs**  
**Chief Executive**

### 8) QUARTER 4 PERFORMANCE MANAGEMENT REPORT 2015-16

To receive Report No. 104/2016 from the Chief Executive  
(Pages 3 - 52)

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## CABINET

17<sup>th</sup> May 2016

### Performance Management Report – Quarter 4 2015/16

#### Report of the Chief Executive

Strategic Aim:	All	
Key Decision: No	Forward Plan Reference: FP/220416/02	
Exempt Information	No	
Cabinet Member(s) Responsible:	Cllr Terry King, 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 during 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 2015/16.

#### 2. BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 This is the fourth 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

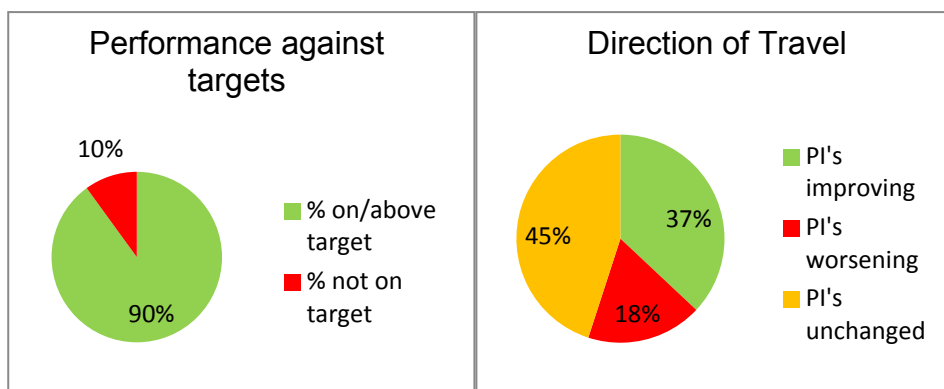
3.1 This report brings together an update on progress across a number of areas:

#### 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. 90% of indicators were on/above target at the end of 2015/16.



#### Corporate Health

3.3 373 Freedom of Information requests were received during Quarter 4, and 89% of them were answered within the 20 day deadline (LI004 % of FOI requests replied to within 20 days). Performance dipped at one stage during Quarter 4 due to sickness absence within the team and a requirement to cover other areas of the service. Interim arrangements were put in place and performance had returned to usual high standard at the end of the quarter:

3.4 During 2015/16 the Local Authority has received a total of 1,454 Freedom of Information requests, with 1,248 (95%) responded to within 20 days. The two tables below show performance across the four quarters of 2015/16 and also the number of FOI requests we've received over the last three years.

Quarter	No of FOI Requests	Completed on time	Quarter %	Cumulative %
4 15/16	373	343	92	96
3 15/16	344	340	99	97
2 15/16	345	338	98	96.5
1 15/16	392	373	95	95

Quarter	No of FOI Requests	Cumulative %
2013/14	846	63
2014/15	1452	95
2015/16	1454	95

The FOI's received during Quarter 4 can be broken down as follows:

Directorate	Number of FOI's	Number/% over 20 day deadline	
People	72	14	19.4%
Resources	85	6	5.8%
Places (Inc. Land Charges)	216	10	4.6%

#### Delivering Council Services within our MTFP

Q3	9	0	2
Q4	7	1	3

- 3.5 During 2015/16, 69 meetings have been held (with 23 held during Quarter 4), 95% of agendas (LI031) and 100% draft minutes (LI032) have been published on time for these meetings. The delayed agendas in Quarter 4 were due to reports being delivered late to the Corporate Support team for inclusion in meeting papers. Managers have been reminded of the timescales for submission and in future, reports will be submitted without allowing additional time.
- 3.6 170 complaints have been received during 2015/16, with 121 (71%) responded to within 10 days. 76% of complaints were responded to within timescales during Quarter 4 which is further improvement on previous quarters (75% in Quarter 3 and 59% in Quarter 2). 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 during Quarter 4 can be broken down as follows:

	Places	Resources	People*
Stage 1 Total	32	4	14*
Number exceeding 10 day response target	9	0	3*
% within 10 day response target	72%	100%	79%*

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

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

	Places	Resources	People*
Stage 2 Total	5	1	0
Number exceeding 10 day response target	1	0	0*
% within 10 day response target	80%	100%	n/a*

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

- 3.7 During 2015/16 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. An annual report which provides more detail about the types of complaints and compliments the Local Authority receives, and the outcomes and lessons we are identifying as part of this process will be produced during 2016/17 and provided to the appropriate panel once complete.

Comments – 28 received during 2015/16

	Places	Resources	People	Quarter total
Quarter 1	4	1	0	5
Quarter 2	6	2	2	10
Quarter 3	5	1	1	7
Quarter 4	5	1	0	6
<b>Total for year</b>	<b>20</b>	<b>4</b>	<b>4</b>	<b>28</b>

Compliments – 123 received during 2015/16

	Places	Resources	People	Quarter total
Quarter 1	8	9	6	23
Quarter 2	25	7	4	36
Quarter 3	17	7	13	37
Quarter 4	20	2	5	27
<b>Total for year</b>	<b>70</b>	<b>25</b>	<b>28</b>	<b>123</b>

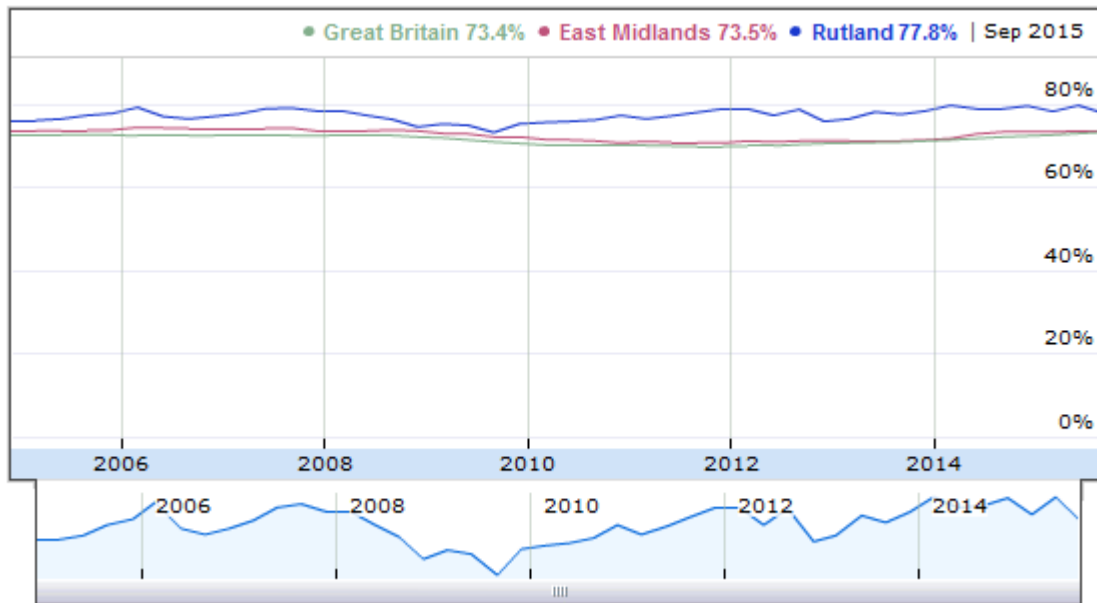
- 3.8 During 2015/16 six priority one calls have been logged with the ICT Service Desk (LI033), of these five have been closed within SLA. The exception, in Quarter 3, was an issue caused by a power outage at Catmose College.

Creating a Brighter Future for All

Q3	11	1	2
Q4	10	2	2

- 3.9 During 2015/16, 66% of single assessments (PI060) have been completed within 45 days against a target of 80%. 72% of single assessments were completed within 45 days during Quarter 4.
- 3.10 There has been continual improvement in performance throughout 2015/16 (from 51% completed within timescales in Quarter 1), but this is still below target at year end. Improving timescales as the year progressed have been achieved against a backdrop of vacancies and sickness in the duty team and increasing workloads. Action has been taken to improve the capacity of the duty service and further work is being undertaken to improve the resilience of duty by examining how duty and the long term team might work more closely together.
- 3.11 In 2014/15 220 single assessments were completed, this rose to 315 in 2015/16, an increase of nearly 43%. There has been a backlog of assessments which has now been cleared with a number of assessments out of timescales as these cases were not judged to be high risk. This significant increase in activity reflects better and more consistent application of thresholds and is leading to a reduction in re-referral activity and children being better protected and safeguarded. With the backlog now cleared, performance is expected to further improve during 2016/17.
- 3.12 Of the 50 children who have become subject to a child protection plan during 2015/16, 6 (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%. Only one of these children had been made subject of a previous plan in the last five years, with two previously subject to plans 10 and 9 years ago respectively. Of the six, three were from the same family.
- 3.13 47 children have ceased to be the subject of a child protection plan during 2015/16, and of these none (0%) have been on a plan for 2 years or more (PI064).
- 3.14 5.6% of the eligible population of Rutland are currently claiming benefits as of latest published figures for August 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%.
- 3.15 77.8% of the working age population of Rutland is currently in employment (PI151). Of these 12% are self-employed.

The graph below shows a comparison of this against the East Midland and National average over a number of years:



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

Q3	2	0	0
Q4	2	0	0

- 3.16 There have been 29 people killed or seriously injured on our roads during 2015/16 (PI047). Our target is to reduce by 40% from the baseline the number of road traffic casualties on Rutland roads by 2020, and we are still on track to achieve this target.
- 3.17 Of the 29 injuries during 2015/16, 7 have been fatalities (with 6 of these occurring in Quarter 3). One child was seriously injured in road traffic accidents (PI048) in Rutland during 2015/16, with no fatal injuries recorded.



### Building our Infrastructure

Q3	5	0	0
Q4	5	0	0

- 3.18 213 homes have been built during 2015/16 against a target of 140, with 61 completed during Quarter 4 (PI154). The table below shows the number of homes completed over the last four years showing a steady increase in those delivered over the period although numbers have dropped slightly compared to last year:

Year	Number of homes provided
2012/13	92
2013/14	137
2014/15	225
2015/16	213

- 3.19 50 affordable homes have been delivered (PI155) during the year, with 3 completed during Quarter 4 and currently a further 12 expected to be completed in 2016/17, against a target of 40. Looking at performance in this area over the last four years it again shows a steady improvement in the number of homes provided. An estimated 59 affordable homes are expected in 2017/18, subject to planning consent.

Year	Number of affordable homes provided
2012/13	26
2013/14	17
2014/15	62
2015/16	50

### Meeting the Health and Wellbeing Needs of the Community

Q3	8	1	1
Q4	8	1	1

- 3.20 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%)
- 3.21 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.
- 3.22 There has been an increase in the average length of temporary stays in B&B accommodation (LI130) to 27 days (from 26 days in Quarter 3) meaning this has

ended the year above target. The delays are primarily due to there currently being a lack of available properties to move people into for permanent accommodation.

3.23 232 service users have been discharged from hospital during 2015/16, and of these 91% (212) were still at home 91 days later (LI182). The table shows the breakdown for the year by age group:

	65 to 74	75 to 84	85 and over	Total
Number of discharges in 2015/16 where the intention is for the patient to go back home	18	90	124	232
Number of the above who were still at home 91 days later	18	84	110	212

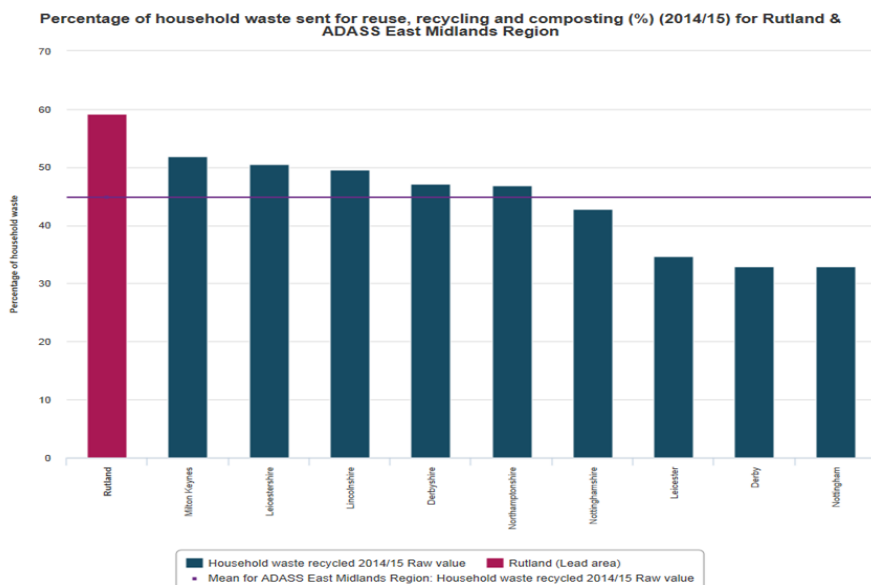
3.24 A dashboard, summarising performance against a number of Public Health indicators is included as **Appendix D**

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

Q3	3	0	0
Q4	3	0	0

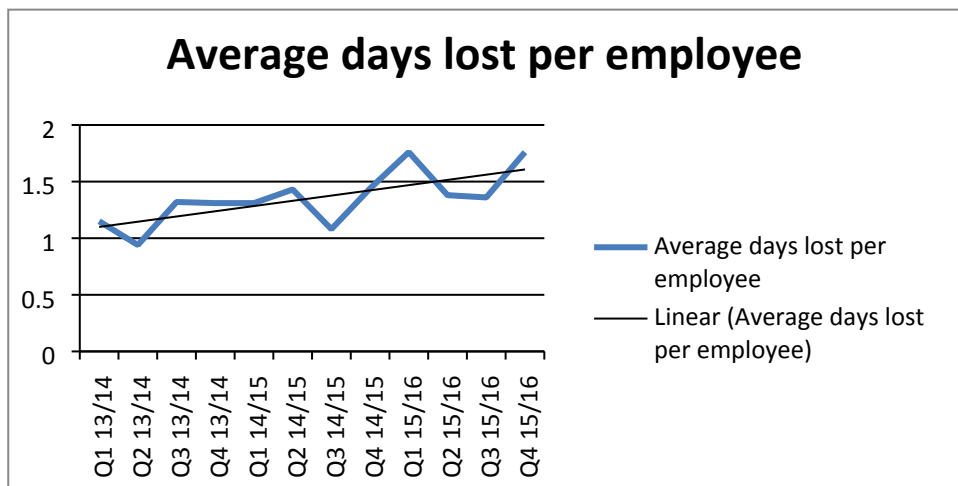
3.25 Estimated recycling rates (PI192) remain above our 59% target at 61% at the end of 2015/16 and although this has fallen from a high of 65.6% in Quarter 2, recycling rates in Rutland remain high in comparison to local and statistical neighbours. The most recently published annual figures (for 2014/15) show recycling rates in Rutland are the highest in the East Midlands:



3.26 Household waste figures (PI191) representing the number of kilograms of household waste collected per household at 117kg per household are below our local target of 130kg and rates from the same period last year when it was 121kg.

Sickness Monitoring

3.27 The chart below shows average days lost per employee over the last three years, and shows a general upward trend in sickness. There has been an increase on the last quarter (up to 1.75 from 1.36 in Quarter 3).



3.28 The increase during Quarter 4 is primarily due to an increase in short term absence, with 95% of the incidences of sickness in Quarter 4 being short term. More detailed information relating to sickness is contained in **Appendix A**.

Customer Services

3.29 Compared to the same time last year call and enquiry volumes reduced across the same period, with emails increasing, especially in March, where the team were receiving an extra 30 emails a day compared to March last year.

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

	Daily Average	
	Q4 2015/16	Q4 2014/15
<b>Calls</b>	300	314
<b>Enquiries</b>	84	104
<b>Emails</b>	68	52

3.30 Comparing key statistics with the same period last year shows that the percentage of abandoned calls has improved slightly, while the percentage of calls being answered within 15 seconds has dropped 10% from 57% last year to 47% this year.

	<b>Q4 2015/16</b>	<b>Q4 2014/15</b>
<b>% abandoned calls</b>	12%	13%
<b>% calls answered with 15 seconds</b>	47%	57%

- 3.31 The CST team have had a vacancy within the team since January which has had a significant effect on call resolution rates during what is historically a busy period.
- 3.32 Performance for % enquiries resolved by Call Centre has not been reported during Quarter 4 due to a new system for coding the enquiries being put in place during the quarter. When calls are resolved CST staff have to enter a code to categorise the type of call received and the set of codes that was being used was resulting in almost 50% of all codes being recorded as out of scope or other. A new list of categories has now been implemented which has involved extending the current list and retraining staff on the correct codes to use. The new categories will give additional information and will be used to:
- Gain a better understanding of why customers are contacting us
  - Significantly reduce the amount of calls that are coded as other
  - Help to gain a better understanding of what is being resolved with CST and what is being transferred to other departments

Reporting against these new codes will begin from the Quarter One 2016/17 report.

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

#### Safeguarding

- 3.33 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

- 3.34 At the end of Quarter 4 there were 8 actions overdue for implementation, one of which were classified as high priority and were due over 3 months ago.
- One recommendation relates to the new Agresso upgrade project. All open actions relating to Agresso have now been consolidated into one 'high' risk action to ensure that all actions are completed as part of the upgrade. Officers are aware of the risks and are managing them where possible, but resources are focused on the upgrade project rather than making short term changes to existing systems and procedures. Internal Audit will review implementation of

the outstanding recommendations as part of the consultancy support on the new system roll out which is included in the 2016/17 audit plan.

#### **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 90% of indicators measured during 2015/16 were on or above target at the end of the year, 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. Moving into 2016/17 the contents of the quarterly performance report will be reviewed to ensure it reflects the objectives as set out in the Corporate Plan.

Overall performance based on activity in the fourth quarter and during 2015/16 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.**

Rutland County Council  
Quarterly Performance Report  
Quarter 4  
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 4, expressed as total days per directorate and days lost per employee.

Directorate	Days lost through Sickness	Headcount as at 1 <sup>st</sup> January 2016	Headcount as at 31 <sup>st</sup> March 2016	Average	Days lost per employee
PEOPLE	465	216	225	220.5	2.11
PLACES	168	151	150	150.5	1.12
RESOURCES	174	91	91	91	1.91
<b>TOTAL</b>	<b>807</b>	<b>458</b>	<b>466</b>	<b>462</b>	<b>1.75</b>

19

In Quarter 4, the average number of days lost has increased to 1.75 (from 1.36 in the previous quarter). For the year 2015/16 this represents an average for the year of 1.56 per quarter. In Quarter 4 we have again seen an increase in the number of short term incidents from the previous quarters (from 123 in Quarter 3 to 134 in Quarter 4) and the overall increase in average days lost is primarily due to short term absence which has represented 95% of Quarter 4 incidents (compared to 91.7% in Quarter 3).

The level of absence for this quarter is only marginally higher than the same quarter for the previous three years and an increase on Quarter 3 figures is expected due to a seasonal rise in absences due to flu and colds (absences recorded as chest/respiratory). Our highest level of absence remains as stress related (although much reduced from Quarter 3) followed by musculo-skeletal.

A number of targeted health promotions are planned for 2016/17, for instance, stress risk assessments building on the work that the Mental Health group is developing. In addition, the HR team will be working with Occupational Health to identify interventions and support that can be offered around our other high absence area, musculo-skeletal injuries.



#### 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	70	64	5	66
PLACES	41	36	1	40
RESOURCES	30	29	2	28
<b>TOTAL</b>	<b>141</b>	<b>129</b>	<b>8</b>	<b>134</b>

#### Comparison

The table below compares the sickness for Quarter 4 of 2015/16 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 2015/16	807	462	1.75	269
Q3 2015/16	626	461	1.36	218
Q2 2015/16	636	461	1.38	212
Q1 2015/16	797	453	1.76	266
<b>QTR AVERAGE</b>	<b>717</b>	<b>459</b>	<b>1.56</b>	<b>241</b>

The table below shows the previous year for comparison:

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
<b>QTR AVERAGE</b>	<b>609</b>	<b>462</b>	<b>1.32</b>	<b>203</b>

## Corporate Health Indicators

2 indicator is currently above target

2 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%	94%	A	97% of invoices were paid during Quarter 4
LI003 - % of audits to be delivered by year end	90%	95%	G	Target achieved for the year, with 95% of audits delivered within agreed timescales during the year.
LI004 - % of FOI requests replied to within 20 days	100%	96%	A	373 Freedom of Information requests were received during Quarter 4, with 344 (92%) 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 in Q4, in one no investigation was undertaken, in the other further information was requested and the investigation is now underway.










18



## Delivering Council Services within our MTFP

8 indicators are currently above target

1 indicators are on target

2 indicator currently not meeting target

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI020 - % of Council Tax received	87.5%	99%		99% of Council Tax received during the year, above target and comparable with the same period last year (98.9% received)
LI021 - % of NNDR received	87.5%	99.2%		Above target, and a small improvement on performance compared to the previous year (98.5% received)
LI022 – Benefits claims – speed of processing	22 days	18 days		All claims made during Quarter 4 were processed within an average of 18 days. Average for 2015/16 is also 18 days.
LI024 – Issue monthly financial reports within 4 days of month end	100%	100%		
LI025 – Statement of accounts produced by 30 <sup>th</sup> June each year	Achieved			
LI029 - % of sundry debt recovered	90%	98%		99.5% of the previous years and 97% of the current years debt has been recovered during 2015/16
LI031 - % of agendas and reports published 5 days before meetings	100%	95%		23 meetings were held during Quarter 4. 19 agendas 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%		23 meetings were held during Quarter 4. All minutes were delivered on time.
LI033 - % of priority 1 faults closed within SLA	95%	100%		So far during 2015/16 there have been 6 priority one faults logged with the Service Desk with all resolved within agreed timescales.





Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI034 - % of stage 1 complaints answered with 10 day response target	100%	71%		<p>170 complaints received during 2015/16, with 121 responded to within timescales.</p> <p>50 complaints were received during Quarter 4, with 38 answered within response time (76%)</p> <p>Further information provided in para 3.4 of the main report</p>
<p>LI035 - % of stage 2 responses issued within 10 working days</p> <p>20</p>	100%	78%		<p>During 2015/16 23 complaints have escalated to stage 2, with 18 responded to within timescales.</p> <p>83% of stage 2 responses were issued within response time during Quarter 4</p> <p>Further information provided in para 3.4 of the main report</p>







# Creating a brighter future for all – Overall Performance





10 indicators are currently above target

2 indicators are on target

2 indicators currently not meeting target

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  21	80%	66%		<p>During 2015/16 315 Single Assessments have been completed. With 210 (66%) completed within timescales. 90 of these were completed during Quarter 4 with 65 (72%) completed within 45 days.</p> <p>Performance has increased throughout the year but is still below target at year end.</p> <p>Further information provided in para 3.10 of the main report</p>
PI062 – Stability of placements for looked after children: number of moves	6%	2.6%		At the end of Quarter 4 there were 39 LAC children, one of whom has had 3 placement moves or more in the last twelve months.
PI063 – Stability of placements for looked after children: length of placement	70%	77%		Out of 39 LAC children, 13 have been in care for 2.5 years or more. Of those, 10 had remained in the same placement for over 2 years.
PI064 – Child protection plans lasting 2 years or more	5%	0%		During 2015/16, 47 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.

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI065 – Percentage of children becoming the subject of Child Protection plans for a second or subsequent time within the previous two years	5%	12%		During 2015/16, 50 children have become the subject of a child protection plan and of these 6 has had previous plans  Further information provided in para 3.12 of the main report
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
PI068 – Percentage of referrals to children’s social care going to assessment	75%	83%		There were 100 referrals made during Quarter 4, with 92 (92%) of them going onto single assessment.
PI109 – Delivery of Ofsted Action Plan for children’s centres	100%	100%		Work ongoing to deliver Action Plan, currently on target.
PI151 – Overall employment rate (working age)	79.7%	77.8%		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)

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI152 – Working age people in receipt of benefits  23	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:  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%	1.6%		Fourteen 16-18 year olds were classed as NEET at the end of March, a small increase (up from 11) on the previous quarter.
LI126 – Youth provision participation	600	518		
LI163 – Percentage of payments by results claimed for targeted Troubled Families	50%	70%		



## 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

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI047 – People killed or seriously injured in road traffic accidents	132	29		For the period 1 <sup>st</sup> April 2015 to 31 March 2016 there have been 29 people killed or seriously injured in road traffic accidents in Rutland.
PI048 – Children killed or seriously injured in road traffic accidents	1	1		Revised figures for Q2 showing that there was one child seriously injured in a road traffic accident in Rutland with no further injuries recorded during the period.



## 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	140	213		213 homes have been built during 2015/16, with 61 additional dwellings completed during Quarter 4
PI155 – Number of affordable homes delivered.	40	50		3 affordable homes completed this quarter, with a total of 50 completed during the year.
PI157(a) – Processing of planning applications – Major Applications	60%	67%		75% of major applications have been processed within timescales during Quarter 4.
PI157(b) – Processing of planning applications – Minor Applications	65%	75.6%		A second quarter of improvement in performance, with 86% of minor applications completed within timescales in Quarter 4.
PI157(c) – Processing of planning applications – Other Applications	80%	91.6%		99% completed within timescales during Quarter 4, the best performance recorded for this indicator in 3 years.




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

8 indicators are currently above target

1 indicators is on target

1 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%	88%		During Quarter 4, 163 blue badge applications have been processed, with 142 (87%) completed during timescales.
LI107 – Hospital discharges are safe and effective with patients assessed within timescales	80%	100%		
LI111 - % of carers signposted to developed non-statutory services following carers assessment	80%	76%		34 assessments were recorded during Quarter 4 with 29 signposted, of those 6 declined the offer of signposting to other services.
LI127 – Child poverty in Rutland 26	9%	7.3 %		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	27		An increase in the length of stays from the previous quarter (26 days)  Further information provided in para 3.22 of the main report
LI172 – % of Safeguarding Adults referrals screened within one working day	80%	100%		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%		




Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
LI180 - % of hospital discharges resulting in a fine	5%	1%		There were 68 section 5's during Quarter 4 (compared to 71 in Quarter 3 and 45 in Quarter 2), with 0 resulting in a delays attributable to RCC.
LI181 – Number of Adult Social Care reviews completed within timescales	80%	88%		88% of Adult Social Care reviews have been completed within timescales during 2015/16
LI182 - % of service users who were still at home 91 days after discharge	90%	91%		Of the 232 patients discharged from hospital to rehabilitation where the intention is for the patient to go back home during 2015/16, 212 were still at home 91 days later.

## Creating a sustained environment – Overall Performance

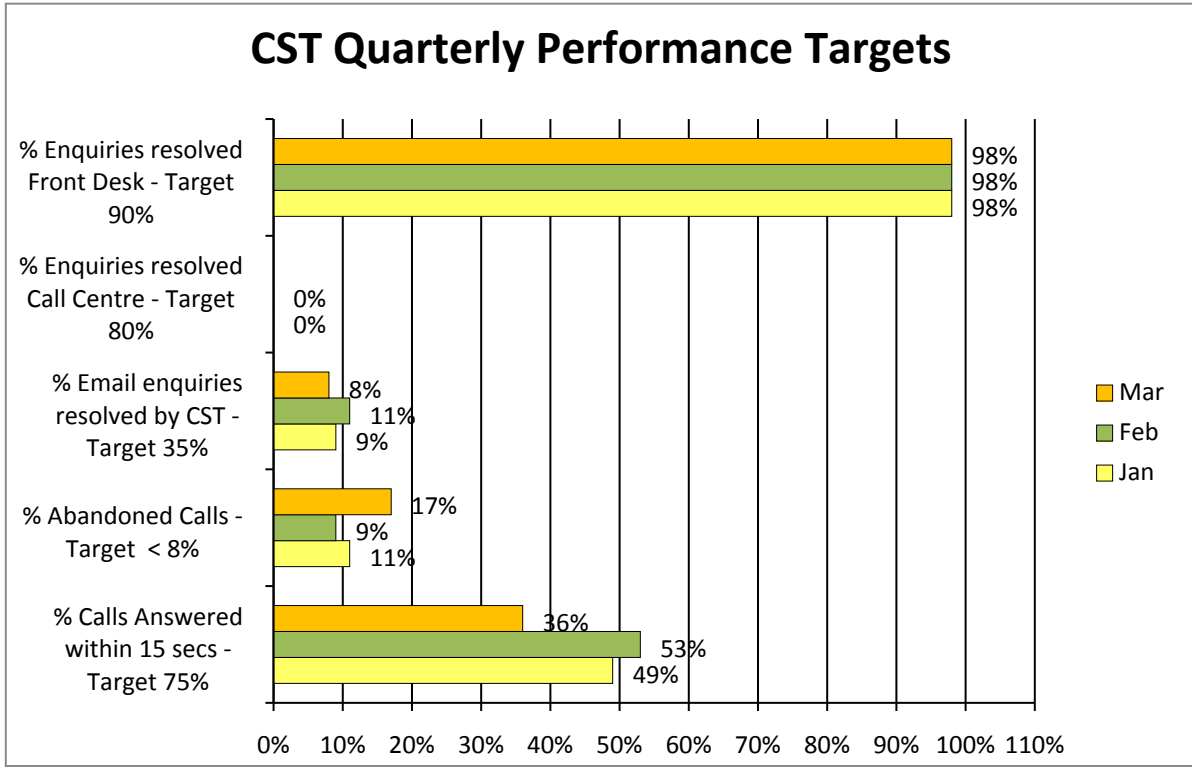
3 indicators are currently above target

0 indicators are on target

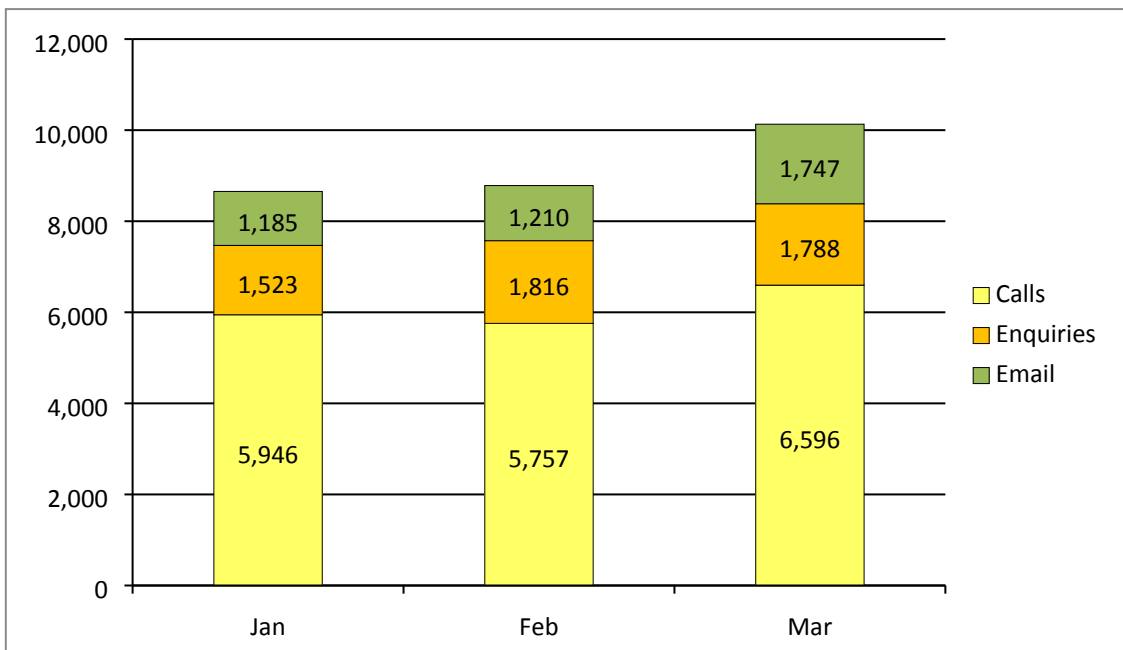
0 indicators currently not meeting target

Indicator	Target	Cumulative Year to Date	RAG Rating	Comments
PI191 – Residual household waste per household	130	117		Based on estimated data
PI192 – Percentage of household waste sent for reuse, recycling and composting	59%	61%		Based on estimated data
PI193 – Percentage of municipal waste land filled	5%	0%		Based on estimated data

### CST Quarter 4 Performance



### Volumes

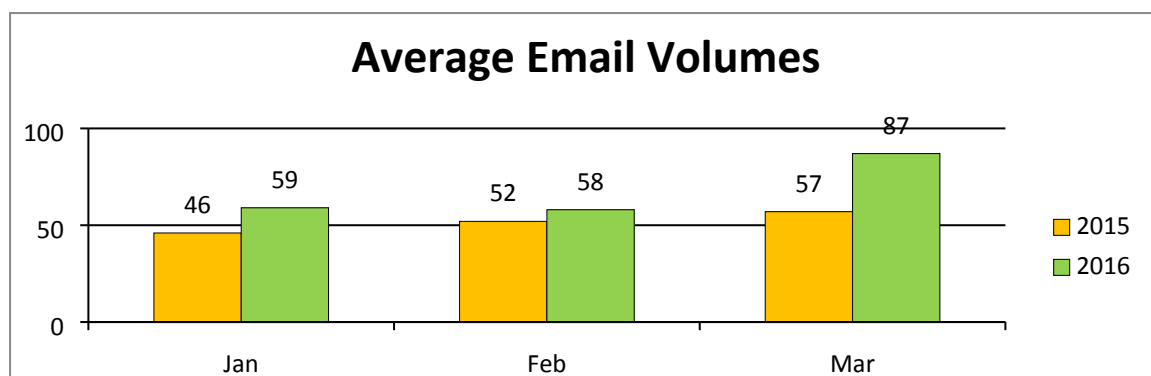
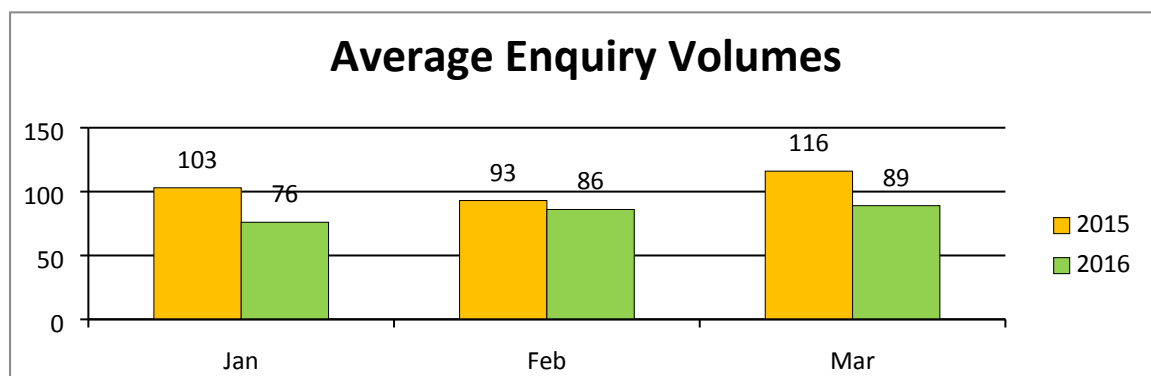
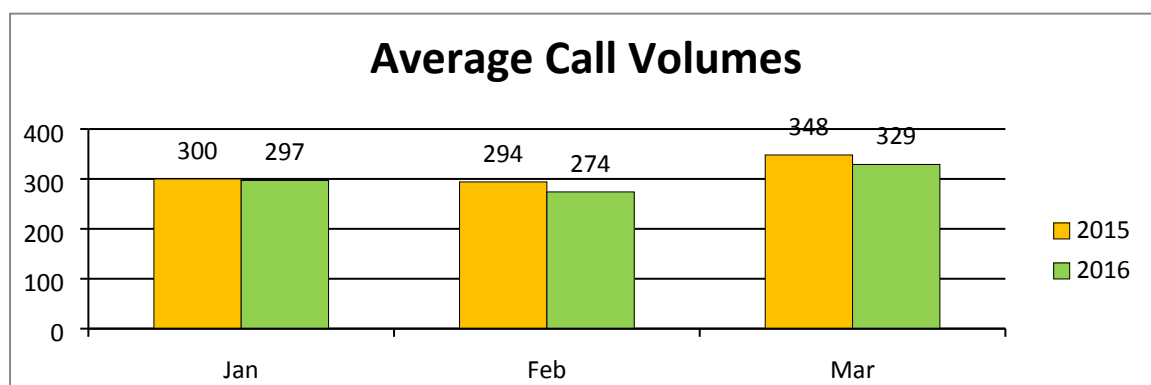


## Volumes – Daily Average

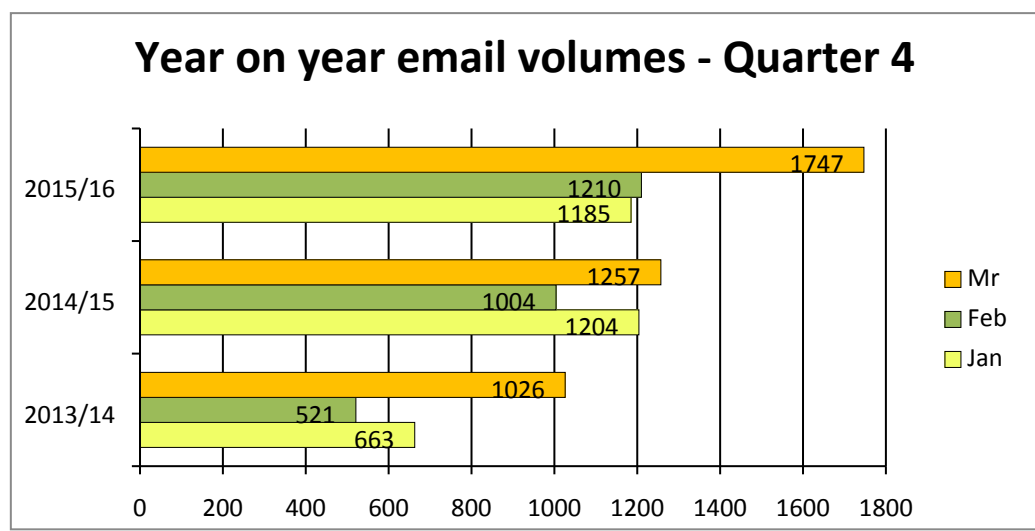
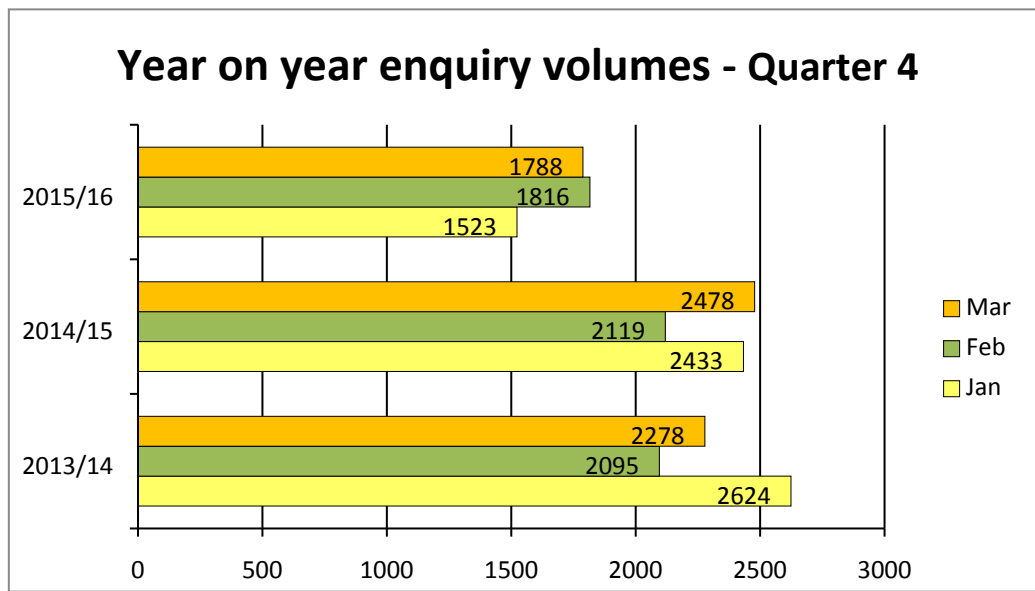
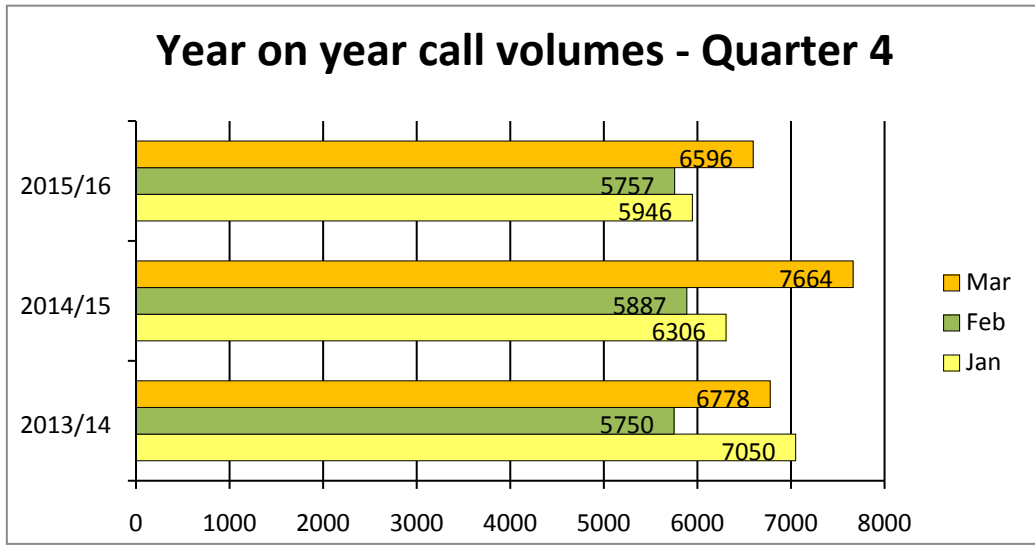
Compared to the same time last year (see below) there has been a reduction in call and enquiry volumes throughout Quarter 4, with email volumes increasing, especially in March where 87 emails on average were received daily, compared to 57 during the same month last year.

### 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 – Q4 2015/16







## GovMetric Q4 2015/16

### GovMetric Summary

<b>Face to Face</b>				Overall Rating
No. of respondents	379	32	39	 Good
%age of respondents	84%	7%	9%	

<b>Telephone</b>
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.

<b>Web</b>				Overall Rating
No. of respondents	91	18	95	 Average
%age of respondents	45%	9%	47%	



## 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 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

#### Contact referral and assessment

- There was a 5% increase in contacts this quarter (212 as opposed to 202 in Quarter 3). Of those contacts, 47% (100) went on to referral compared to 45% (91) last quarter.
- 72% of all single assessments closed during Quarter 4 were closed within timescales (45 days)
- There were 51 section 47 enquiries during Quarter 4.

	Q1	Q2	Q3	Q4	Total/ Cumulative	Reporting Frequency
Number of contacts to Children's Social Care (include referrals)	255	234	202	212	<b>903</b>	Quarterly
Number of referrals to Children's Social Care	100	78	91	100	<b>369</b>	Quarterly
Number of referrals made by EDT/Out of Hours Team (including those that were recorded as contacts only)	20	3	0	0	<b>23</b>	Quarterly
Number of single assessments started during Quarter	84	74	54	100	<b>312</b>	

No. of single assessments closed, and % closed within 45 days	82	78	65	90	<b>315</b>	Quarterly
	51%	64%	82%	72%	<b>66%</b>	
Number of S47 enquiries	28	17	53	51	<b>149</b>	Quarterly

## Child Protection

- There were 29 child protection plans at 31<sup>st</sup> March 2016. This is a 14% decrease on Quarter 3.
- The largest category of abuse for CP plans at end of March 2016 was emotional, which represented 45% of all plans.
- Of the children with a CP plan for 3 months or more at 31<sup>st</sup> March 2016, 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	29	n/a	Quarterly
<b>Number/Rate in each Category of Abuse</b>						
Neglect	5	7	12	11	n/a	Quarterly
Physical	0	0	0	0	n/a	
Emotional	17	14	19	13	n/a	
Sexual	1	1	1	1	n/a	
Multiple*	9	4	2	4	n/a	
<b>*Breakdown of Multiple:</b>						
Phys/Neglect/Emotional	1	1	0	0	n/a	Quarterly
Phys/Sexual	1	0	0	0	n/a	
Phys/Emotional	7	3	2	3	n/a	
Sexual/Emotional	0	0	0	1	n/a	
Unborn	0	0	0	0	n/a	Quarterly
0 - 4	15	8	14	7	n/a	
5 - 9	7	6	12	8	n/a	
10 - 15	9	8	6	12	n/a	
16+	2	4	2	2	n/a	

Male	17	14	17	13	n/a	Quarterly
Female	16	12	17	15	n/a	
Unborn	0	0	0	1	n/a	
Percentage of CP cases which were reviewed within required timescales	100%	100%	100%	100%	<b>100%</b>	Quarterly Target - 100%
Number of CP cases allocated to a Social Worker	100%	100%	100%	100%	<b>100%</b>	Target - 100%

### Looked After Children

<b>Rutland</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Cumulative</b>	<b>Reporting Frequency</b>
Number of Looked After Children	34	31	34	39	n/a	Quarterly
<b>Ethnicity of LAC</b>						
White	32	29	31	36	n/a	Quarterly
Mixed	2	2	3	2	n/a	
Asian					n/a	
Black					n/a	
Other				1	n/a	
Undetermined					n/a	
0 - 4	9	7	10	10	n/a	
5 - 9	8	6	7	9	n/a	
10 - 15	10	11	11	14	n/a	
16+	7	7	6	6	n/a	
Male	18	18	18	22	n/a	
Female	16	13	16	17	n/a	
Percentage of LAC at period end with 3 or more placements	0%	0%	0%	2.6%	<b>2.6%</b>	
LAC cases which were reviewed within required timescales			100%		<b>100%</b>	
Stability of placements of LAC: length of placement					<b>77%</b>	

### ADULTS UPDATE

#### Safeguarding Adults Data Collection

60 alerts/enquiries were received in Q4. This represents a decrease from Q3. A breakdown into alerts/enquiries per month sees an average of 20 alerts/enquiries per month with no indications that there are any significant issues for this decrease.

Alerts/enquiries from the community remain on a par with residential sources and provide assurance that the promotion of safeguarding awareness in the community remains active.

8 of this number resulted in alerts meeting the threshold for the formal implementation of the Safeguarding Adults Procedures.

Location of alleged abuse	Q1	Q2	Q3	Q4	Total	Reporting Frequency
Community	34	45	47	29	<b>155</b>	Quarterly
Residential	24	34	53	31	<b>142</b>	Quarterly
Unknown	0	0	0	0	<b>0</b>	Quarterly
Source of Referral for all Alerts	Q1	Q2	Q3	Q4	Total	
Primary Health Care	2	0	3	2	<b>7</b>	
Secondary Health Care	4	7	3	0	<b>14</b>	
Adult Mental Health Setting	0	0	0	0	<b>0</b>	
Residential	13	23	40	17	<b>93</b>	
Day Care	1	0	2	1	<b>4</b>	
Social Worker/Care Manager	12	22	23	9	<b>66</b>	
Self-Directed Care Staff	0	0	0	1	<b>1</b>	
Domiciliary	4	4	10	7	<b>25</b>	
Other Care Workers	0	0	0	0	<b>0</b>	
Self	0	1	0	1	<b>2</b>	
Family Member	8	0	2	3	<b>13</b>	
Other Service User	0	0	0	0	<b>0</b>	
Friend/Neighbour	0	8	0	1	<b>9</b>	
Care Quality Commission	2	0	1	0	<b>3</b>	
Housing	3	3	4	8	<b>20</b>	
Education	0	0	0	0	<b>0</b>	
Police	2	4	0	1	<b>7</b>	
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	Other local authority – 1 CHC– 1 Arriva patient transport - 1 EMAS – 4 Voluntary agency – 1	<b>29</b>	
Not Known				Anonymous -1	<b>1</b>	

## Closed Cases in Quarter 4

Safeguarding Adults performance data is obtained when a case is closed at the end of the Safeguarding Adults process. 15 cases were closed in Quarter 4.

One of the cases closed is on a domiciliary care provider which explains why there is no age recording for one case and the service user group is recorded as not known.

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.

One of the cases involves a learning disability residential provider.

The Senior Practitioner and a social worker from the Long term and Review team worked in partnership with this Provider's service manager and the outcomes were extremely positive for the residents. Staff members within the service were replaced thus reducing the risk of abusive institutional practices remaining prevalent.

The Prevention and Safeguarding Team have been focussing on Making Safeguarding Personal. MSP aims to facilitate a shift in emphasis in safeguarding from undertaking a process to a commitment to improving outcomes alongside people experiencing abuse or neglect.

The key focus is on developing a real understanding of what people wish to achieve, agreeing, negotiating and recording their outcomes. It is anticipated that when Liquid Logic is live the adult safeguarding module will support the principles of MSP.

Outcome	Q1	Q2	Q3	Q4	Total
Substantiated - fully	3	4	3	7	17
Substantiated - partially	0	0	0	2	2
Not Substantiated	3	4	5	4	16
Inconclusive	2	1	0	2	5

Primary Client Type	Q1	Q2	Q3	Q4	Total
Older Person	3	5	7	10	25
Mental Health	0	1	0	1	2
Learning Disability	4	3	2	3	12
Physical Disability	0	0	0	0	0
Not recorded	1	0	0	1	2
Primary Age Group	Q1	Q2	Q3	Q4	Total
18-64	4	2	2	4	12
65-74	1	2	2	1	6
75-84	1	2	3	6	12
85-94	2	3	2	3	10
95+	0	0	0	0	0

Type of Abuse*	Q1	Q2	Q3	Q4	Total
Physical	2	1	3	1	7

Sexual	0	1	0	0	1
Psychological&Emotional	4	0	0	1	5
Financial & Material	0	3	1	0	4
Neglect & Acts of Omission	2	4	5	10	21
Discriminatory	0	0	0	0	0
Institutional	0	0	1	3	4
Not Known	0	0	0	0	0

\*Cases may include more than one category

Source of Referral	Q1	Q2	Q3	Q4	Total
Primary Health Care	0	0	1	0	1
Secondary Health Care	1	1	0	1	3
Adult Mental Health Setting	0	0	0	0	0
Residential	4	0	1	1	6
Day Care	0	0	0	1	1
Social Worker/Care Manager	1	2	6	4	13
Self-Directed Care Staff	0	0	0	1	1
Domiciliary	0	3	1	0	4
Other Care Workers	0	0	0	0	0
Self	0	0	0	1	1
Family Member	1	1	0	2	4
Other Service User	0	0	0	0	0
Friend/Neighbour	0	0	0	0	0
Care Quality Commission	0	0	0	0	0
Housing	0	1	1	0	2
Education	0	0	0	0	0
Police	1	1	0	1	3
Other	0	0	0	3	3
Not Known	0	0	0	0	0

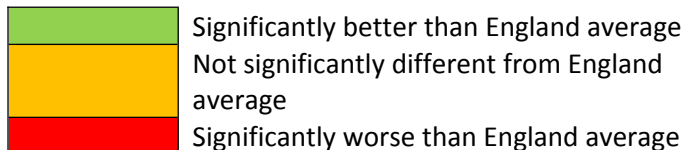
Protection Plans	Q1	Q2	Q3	Q4	Total
Adult Protection Plans accepted by either the service user or the agencies involved	0	0	2	2	4
Adult Protection Plans not accepted	0	0	0	0	0
Could not consent	0	0	0	0	0

<b>Repeat Referrals</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Total</b>
No of Repeat Referrals	5	2	1	0	8

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Public Health performance dashboard

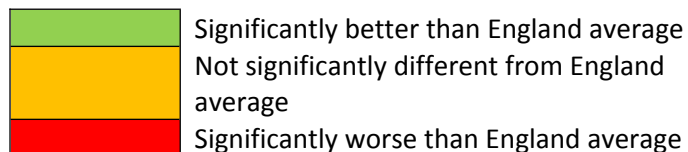


\* Rank out of 11 areas with 1 defined as best performance

Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
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	1	
	Healthy Life Expectancy - Male	Annual	2011-13	n/a	66.09	63.27	7	
	Healthy Life Expectancy - Female	Annual	2011-13	n/a	71.32	63.95	1	

41

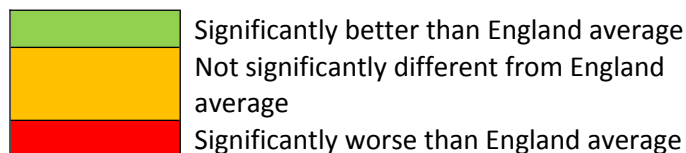
Public Health performance dashboard



\* 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
	Cardiovascular Disease (under 75) – mortality rate	Annual	2012-14	23	57.4	75.7	3	
	Cancer (under 75) – mortality rate	Annual	2012-14	44	110.3	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	2014-15	84	22.5	21.9	8	
	Proportion of children in Year 6 classified as overweight and obese	Annual	2014-15	81	24.5	33.2	2	
	Proportion of adults (16+) who are	Annual	2012	63	65.58	63.78	8	No trend data currently available

Public Health performance dashboard

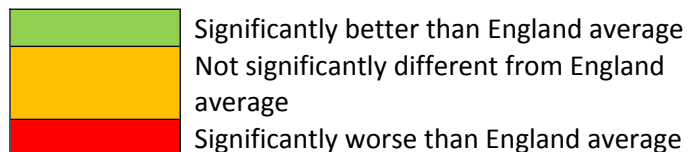


\* Rank out of 11 areas with 1 defined as best performance

Outcome	Indicator	Frequency	When was data last published.	Number per year	Current Value	National Average	Rank* (in comparison to statistical neighbours)	Trend - Rutland
	overweight and obese							
Smoking prevalence and the harm caused is reduced	Smoking prevalence	Annual	2014	n/a	14.1	18.0	2	
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	
To help prevent heart disease, stroke, diabetes and kidney disease	Heath Check uptake	Quarterly	Q3 2015/16	424	73.1%	-	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	Annual	2011/12	n/a	12.81	20.08	1	No trend data currently available

43

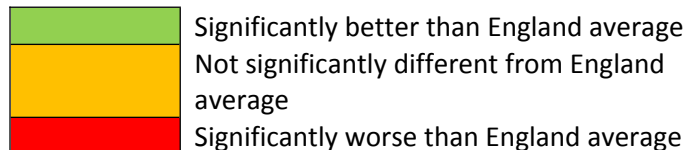
Public Health performance dashboard



\* 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
	score				19.21	29.02	1	No trend data currently available
	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	2015/16	159	1724.0	2125	7	
	Injuries due to falls (aged 65 or over) – males	Annual	2013/14	60	1766.75	1661	11	
	Injuries due to falls (aged 65 or over) – females	Annual	2013/14	106	2081.47	2467	4	

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
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 than 60% of median household income	Annual	2012	455	7.8%	19.25%	1	
	Under 18 conception rate	Annual	2013	8	9.2	24.3	1	

45

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## Appendix E

### PROJECT UPDATE

Project	Scrutiny Panel	Status	RAG
Oakham Enterprise Park Business	Places	<p>Total available floor space is currently 96,443sqft (103 units). Tenancy across the site has increased to 96.12% of this (99 units, totalling 95,101sqft or 98.6% of floor space) now let or with leases being progressed. There is firm interest in a further 3.88% (4 office units, 1,342sqft or 1.4% floor space). These figures exclude the Active Rutland Hub. An additional 11 acres of external space is being marketed for development opportunities or other activities. We also have 152,847sqft which is already leased as the Events Zone which again is excluded from the figures above.</p> <p>Interest in office units has stabilised but strong interest in storage space and small industrial units remains strong with new enquiries regularly being received. Growing demand for industrial space suggests a robust business case for construction of new units, especially industrial spaces of between 1 k &amp; 5k sqft and a report to Cabinet is proposed in June 2016 to address this.</p> <p>Due to critical infrastructure limitations with the electricity supply to the Oakham area, the proposed solar generation project has had to be put on hold until at least 2019 when it is hoped that Western Power Distribution will upgrade the distribution network to enable additional power generation.</p> <p>In order to meet emergency fire-fighting requirements, four large water storage tanks have had to be provided around the site. Additionally, a new fire access road has had to be constructed at the eastern end of the site where access was very restricted. The costs for this work are being met from the OEP revenue budget.</p> <p>Projected income for 2016/17 is £523.1k with a projected net surplus of £171k. These figures are expected to increase year on year with a projected total income of £589.8k and surplus of £222.1k in 2018/19. These figures exclude business rates with around £100k currently being collected. With the proposed further commercial development of the site, the income generation potential of the site will grow over time.</p> <p>Recommendations from the internal audit report earlier this year have now been implemented with the exception of the formal process flows which are still being finalised.</p>	

Project	Scrutiny Panel	Status	RAG
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 allocation are progressing well.	
Broadband	Places	<p>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, over 50% (March 2016), for these new fibre based services.</p> <p>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 has started and Braunston is now live. A number of other villages are expected to be live in the next two months and work is progressing in advance of contracted deadlines.</p> <p>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. This has been delayed by a European Commission and Broadband Delivery UK requirement for a public consultation. The aim of which is to reconfirm the remaining project intervention area. The consultation is now live and the deadline for responses is the 9<sup>th</sup> May. The outcome of the CR10 initial desk top modelling is then expected in Mid-June 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.</p>	
Castle Restoration Project	Places	Castle site restoration is almost complete and on track for ceremonial opening on Monday 30 <sup>th</sup> May.	
Community Infrastructure Levy	Places	Now implemented and being used on new applications.	
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. Several content management systems demonstrations have been undertaken and procurement options are being assessed, along with a project timeline and resource requirements.	
School Place Planning –	People (children)	Primary places have been allocated for 2016 entry. Seven primary schools were oversubscribed. 93% of pupils were allocated their first choice.	



Project	Scrutiny Panel	Status	RAG
To monitor the continued growth within the County balanced against the number of pupil places required at all levels within the education system		<p>Secondary places are showing over subscription in Uppingham and Oakham but ample space is available at Casterton.</p> <p>Brooke Hill extension has been completed. English Martyrs extension is complete and has been factored into school place planning.</p> <p>Harington free school is due for completion end 2016. Catmose continues to provide additional secondary places in 2016 above its PAN.</p> <p>The bid for a free school in Oakham (Barleythorpe) has not yet been made to EfA.</p>	
Liquidlogic Implementation	People (children and adults)	<p>The Case Management Transformation Programme (CMTP) is now at the latter stages of the implementation process. The Adults module (LAS) will be going live on the 3<sup>rd</sup> May, together with the community finance module (ContrOCC). Arrangements are on-going, but we are confident that the installation of the Adults &amp; Finance Liquidlogic modules will go live as planned. Respective service areas have begun planning for the shutdown of RAISE in preparation for the introduction of the Liquidlogic system.</p> <p>Implementation of the Children's (LCS) and Early Help (EHM) modules is planned for June – the delay was introduced as these modules are extremely complicated and to ensure we get a system that is reflective of our business processes, extensive testing is required across each of the service areas.</p> <p>Setting up of the customer portal has begun through some joint planning with Liquidlogic. It is envisaged that the customer portal will be introduced after the initial four modules have gone live.</p>	
Care Act Implementation	People (adults and health)	<p>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'.</p> <p>On 15 December 2015 Cabinet approved a proposal made by the People Directorate to go out to consultation on changing the Council's adult social care charging policy to take up charging options enabled by the Care Act 2014. The proposals aim to establish a charging policy which is more consistent between service users in the same circumstances and which is more financially sustainable.</p> <p>The ASC charging consultation is intended to set out a number of new charging options that are allowed under the Care Act 2014, and to seek views on which of these should be introduced to help social care charging to become fairer and more sustainable.</p>	

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		<p>To date (26/04/16) 215 responses have been received.</p> <p>The consultation will end on 29<sup>th</sup> April 2016</p> <p>The Accessible Information Standard is a new 'information standard' for implementation by 31<sup>st</sup> 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 communication support if they need it, for example from a British Sign Language interpreter. We are confident we can comply with this requirement.</p> <p>Communication needs will be captured using standard NHS checklists which will be added to LiquidLogic at an appropriate point in the go-live process. Some work is also underway to confirm the route to deliver the various types of communications support should they be requested.</p> <p>The Operational Delivery Manager- Integration &amp; Care Act is now in place with a remit to ensure that strategic decisions taken in both areas are embedded into practice. This role will also enable a conduit to feed back issues faced by teams to Senior managers.</p> <p>The Operational Delivery Manager will act as a liaison between health and social care organisations, including the voluntary sector.</p> <p>It is anticipated this will allow Rutland County Council to identify any obstructions to discharge pathways/ Service User/Carer support and work in partnership to remove those obstructions.</p> <p>A Quality Assurance Framework, (QAF), is being compiled which includes an assessment audit tool. This will allow line managers to review performance of staff against the core principles of the Care Act.</p>	
Better Care Fund	People (adults and health)	<p>BCF activity in Q4 was focussed on continuing to deliver existing BCF activities against 2015-16 BCF plan whilst defining and agreeing the BCF plan for 2016-17.</p> <p>The 2015-16 Better Care Fund programme has performed well overall, with most of the schemes delivering well and the desired evolution in metrics being achieved, particularly in terms of reducing admissions to permanent residential care and the success of reablement. Non elective admission targets were met in the first three quarters, albeit with declining margins,</p>	

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		<p>against an underlying wider trend of increasing admissions, meaning that we met the Rutland pay for performance targets. Final figures have not yet been released for Q4 performance. The programme is amber rated currently, however, due to late Q3 and Q4 performance on delayed transfers of care (DTOCs), with delays on an upward trend, particularly out of Peterborough City Hospital. Social care-related delays are now consistently negligible, but cross border disjoints between health authorities meant that health related delays have been on an upward trend. Relevant BCF partners are working proactively on necessary change. This will be followed through into the 2016-17 programme in a formalised way via a DTOC Action Plan.</p> <p>The 2016-17 programme has four priorities (hospital inflow and outflow, long term condition management, unified prevention and enablers) and has been sent to the Health and Wellbeing Board for final approval by 3 May, before a final stage of national moderation in May/June. The plan has a similar value to last year's (£2,061k core allocation, plus an increased allocation to Disabled Facilities Grants (£186k) and £200k of funds carried forward from last year's programme). Carry forward has largely arisen from schemes that achieved their outcomes at a lower than anticipated cost, from a number of recruitment delays during the year, and from some new schemes taking time to gain initial momentum.</p> <p>The Better Care Fund 2016-17 was approved by the Health and Wellbeing Board by correspondence prior to its final submission to the national Better Care Team on 3<sup>rd</sup> May 2016. Locally, the final stage remaining is to adjust and sign off the associated Section 75 agreement between the Council and ELR CCG (deadline 30<sup>th</sup> June 2016). At the national level, finally, all BCF plans will go through a national moderation process in May to ensure that approaches across the country have been broadly consistent.</p>	
Agresso Upgrade and transfer to Herefordshire Council	Resources	<p>The Agresso project kicked off towards the end of March. The first phase of the project involved workshops with Hoople to focus on two key issues: systems design and service specification.</p> <p>The <b>Systems design</b> workshops have now been completed. They involved looking at how Hereford use Agresso and process transactions to assess whether the Council wishes to simply replicate the Herefordshire system (that is the ideal scenario) or make some changes.</p>	

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		<p>In broad terms, the Council will be replicating the Herefordshire model but this will involve some changes to the way we work which will bring about efficiencies and make better use of the system. For example, some manual forms will no longer be needed as information can be directly input to the system.</p> <p>We are currently awaiting the system design document which we will sign off so Hoople can proceed with the build and we can then undertake a full impact analysis – what is different about the new version, what is the impact on staff and users, how will change be managed and training provided.</p> <p>Whilst the workshops are ongoing, work is being done in parallel to on the systems specification – effectively our <b>Service Level Agreement</b> with Hoople. Discussions have been had re expected content (e.g. pricing, response times, KPIs) and we are waiting for a first draft to review.</p> <p>Once the SLA and system design are agreed, then a detailed project plan will be created and a provisional Go Live date agreed. This has not been set thus far as it will depend on two key factors a) the systems design and the extent to which we require changes to the Herefordshire model; and b) our view of the time needed to train staff and others given the summer holidays looming and other workload commitments.</p> <p>Officers are working on various related matters including training plans, business change processes, data cleansing etc.</p>	