## CITY & COUNTY OF CARDIFF DINAS A SIR CAERDYDD

## **COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE**

#### 8 JUNE 2016

## QUARTER FOUR - PERFORMANCE REPORT FOR 2015/16 (UNAUDITED)

#### **Purpose of Report**

- The Community and Adult Services Scrutiny Committee is responsible for scrutinising performance across a range of Directorates in order to facilitate challenge and public discussion and drive improvement. The Committee's terms of reference cover services delivered by the following Directorates: City Operations; Communities, Housing and Customer Services; Economic Development; Resources; and Social Services – Adults.
- 2. This report sets the context for Quarter Four performance for 2015-16. Relevant sections of the performance management report are attached at **Appendix A**. A summary of year-on-year performance, attached at **Appendix B**, shows the overall direction of travel from 2008- 2016 for the indicators reported in the Quarter Four report that fall within this Committee's terms of reference.

#### **Structure of Scrutiny**

- 3. At the Committee meeting in May 2016, Members requested that the Committee's Performance Panel triage the Quarter Four performance report and determine which witnesses to invite to this Committee meeting. The Performance Panel met on 23 May 2016 and agreed to focus scrutiny at this Committee meeting on the following areas:
  - Cllr Derbyshire, Cllr De'Ath, Andrew Gregory, Dave Holland *scrutiny of PSR/004, reported in City Operations section.*
  - Cllr Elsmore, Sarah McGill, Jane Thomas *scrutiny of Communities* & *Housing.*
  - Cllr Elsmore, Tony Young, Amanda Phillips scrutiny of Adult Social Services.
- 4. The structure of the scrutiny therefore reflects the above, with witnesses due to appear in front of the Committee in the order outlined above.

## **Background to Performance Report**

- 5. The Quarter Four Corporate Performance Report, attached at **Appendix A**, starts with a corporate overview section covering:
  - Customer Contact.
  - Staff costs (including overtime and agency spend).
  - Various staffing issues (Sickness absence, PPDR compliance).
  - FOI requests compliance with statutory timescales.
  - Customer Contact.
  - Summary of performance against the basket of measures included in the Welsh Government Outcome Agreement, successful delivery of which triggers release of the £3.3m Outcome Agreement Grant. The financial impact of performance in these measures is such that it is deemed appropriate to draw Members' attention specifically to this suite of indicators.
- 6. The Corporate Performance Report then provides information on the following, by Directorate:
  - Budget overview outturn and variance, savings and variance.
  - Number of Employees, Sickness Absence and PPDR Year End completion.
  - Progress against Corporate Plan commitments and Directorate Plan actions.
  - Progress on challenges identified in Quarter 3.
  - Quarter 4 service delivery.
  - Key performance indicators.
  - Quarter 4 challenges identified and actions being taken.
  - Quarter 4 Risk update.
  - Update on previous Quarters emerging risks.
- Performance reports for Quarter Four have been through 'Star Chamber' sessions where Cabinet Members and Directors will have reviewed and challenged performance and agreed actions that need to be taken to address issues raised in the report.

#### **City Operations**

8. The City Operations section begins on page 11 of 46, Appendix A. The areas within this Committee's terms of reference have been highlighted in yellow and are:

- Page 11 Directorate Delivery Plan Key Commitment Ensure the private rented sector is fit for purpose and homes meet legal standards to protect the health of tenants (Amber rating).
- Page 12 Directorate Delivery Plan Key Commitment Implement the regional service for regulatory Services with the Vale of Glamorgan and Bridgend Council.
- Page 12 National Strategic Indicator PSR/004 (Red rating).
- Page 13 National Strategic Indicator PLA/006b.
- 9. The Committee's Performance Panel reviewed performance for PSR/004, 'The percentage of private sector dwellings that had been vacant for more than 6 months at 1 April which were returned to occupation during the year through direct action by the local authority', and compared it to performance over previous years. There has been a decline in performance this year, falling from 6.5% in 2014/15 to 2.6% in 2015/16. Performance has remained static since Quarter 2. This, coupled with the wording of the narrative for this indicator, led the Chair to decide to invite the relevant Cabinet Members and officers to attend Committee and discuss the issues associated with this indicator. The narrative states that 'responsibility for managing the House into Home scheme and work to achieve the PI is now outside of the scope of the Shared Regulatory Service. Discussions are ongoing to decide how this function is resourced in future and who takes responsibility for this performance indicator for 2016/17.'
- 10. The Committee's Performance Panel considered the results for PLA/006b, 'The number of additional affordable housing units provided during the year as a percentage of all additional housing units provided during the year', since 2010 and were surprised to see a marked upturn in the results for this indicator since 2012/13. Performance Panel Members asked officers for an explanation of this and were informed that indicator PLA/006b is an annual indicator where the data is populated by Welsh Government rather than the Council. The definition for the indicator was amended in 2008 to include all additional affordable housing, rather than all new affordable housing, and now includes existing housing that is acquired as affordable housing. Therefore, the definition now includes acquisitions which will not be represented in the denominator, thus increasing the percentage. As such it is understood that this indicator does not indicate the

proportion of newly built housing that is affordable. Instead, it gives an indication of the volume of affordable housing delivered in an area, with the overall amount of new building activity in the area used to scale this data for the purpose of comparison between authorities.

## **Communities and Housing Issues**

- 11. The Communities section begins on **page 16 of 46**, **Appendix A**. Members are reminded that not all areas covered by the performance report fall within the terms of reference of this Committee. The areas within this Committee's terms of reference have been highlighted in yellow.
- Progress against the Corporate Plan Commitments shows that, out of the 15 areas where Communities contribution is measured, 14 are Green and 1 is Amber.
- 13. Progress against the Performance Indicators demonstrates that out of 7 performance indicators that fall within this Committee's terms of reference:

4 are GREEN – On target for delivery.

- 1 is AMBER Issues are currently impacting delivery of action/ result.
- 2 are RED Action/ result unlikely to be delivered without significant intervention.
- 14. The following indicators are **RED**:
  - **PSR/002** The average number of calendar days taken to deliver a Disabled Facilities Grant.
  - HLS/014 The average number of calendar days taken to let lettable units of permanent accommodation during the financial year.
  - 15. The table overleaf provides a comparison of the RAG status at Quarter 4 for 2013-14, 2014/15 and 2015/16, for the indicators which are Red this year:

## **Comparison of RAG status**

·	Q4 2013-14	Q4 2014-15	Q4 2015-16
PSR/002	Green	Green	Red
HLS/014	Red	Red	Red

- 16. With regard to sickness absence, the Communities, Housing and Customer Services Directorate had a target of reducing sickness absence to 9.0 days per full time equivalent employee. This target has not been achieved, with a result of 10.42 days per full time equivalent employee.
- With regard to PPDR Year End Completion for permanent staff, as at 11 May 2016, the Communities, Housing and Customer Services Directorate achieved 96.6%, which is the highest level across all Directorates.
- Having considered the performance report and the overall direction of travel from 2008- 2016 for the indicators reported, the Committee's Performance Panel asked officers to provide the following:
  - a. PSR/002 information to evidence the reasons cited in the Quarter 4 report as affecting performance, including increasing demand and a lack of flexibility in contractor arrangements. Members also wish to receive results for PSR/006 'The average number of calendar days taken to deliver low cost adaptation works in private dwellings where the Disabled Facilities Grant process is not used'. This is in order to see performance in this area, given recent comments at Committee that it may be appropriate to fast track applications without following the DFG route.
  - b. **HLS/014** –to receive the figures for Quarter 4 excluding Sandown Court relets in order to show the underlying trend regarding void times in Quarter 4.
  - c. CMS/001 the number of repairs that 4% equates to (as 4% of repairs were not completed within timescale), and how long these repairs took to be completed.
- 19. This information is due to be provided as a presentation at Committee and will be circulated to Members the day before the Committee meeting.

#### **Social Services - Adults**

- 20. The Social Services Adults section begins on **page 37 of 46, Appendix A**. All areas within Social Services Adults falls within the remit of this Committee.
- Progress against the Corporate Plan Commitments shows that, out of the 7 areas where Social Services – Adults contribution is measured, 4 are Green, 2 are Amber and 1 is Red.
- 22. For most indicators, the information provided for Quarter Four means that the outturn information for 2015-16 is provided. However, for two Social Services Adults indicators (SCA/001) and (SCAL23) further information for March is not yet available and needs to be collated before the outturn can be finalised. The Quarter Four performance report states where the above is the case.
- 23. Progress against the Performance Indicators demonstrates that out of 9 performance indicators that fall within this Committee's terms of reference:

**5 are GREEN** – On target for delivery.

- 2 are AMBER Issues are currently impacting delivery of action/ result.
- **1 is RED** Action/ result unlikely to be delivered without significant intervention.
- **1 Not Applicable** against the RAG status.
- 24. The following indicator is **RED**:
  - SCA/001 Rate of delayed transfers of care for social care reasons per 1000 population aged 75 or over.

25. The table below provides a comparison of the RAG status at Quarter 4 for 2013-14, 2014/15 and 2015/16, for the indicator which is Red this year:

	Q4 2013-14	Q4 2014-15	Q4 2015-16
SCA/001	Red	Red	Red

#### **Comparison of RAG status**

- 26. With regard to sickness absence, the Social Services- Adults had a target of reducing sickness absence to 13.0 days per full time equivalent employee. This target has not been achieved, with a result of 14.36 days per full time equivalent employee.
- With regard to PPDR Year End Completion for permanent staff, as at 11 May 2016, Social Services - Adults achieved 80.5%, which is the second highest level across all Directorates.
- 28. Having considered the performance report and the overall direction of travel from 2008- 2016 for the indicators reported, the Committee's Performance Panel asked officers to provide the following:
  - a. PPDR an up to date figure as the one in the v0.9 Q4 performance report available for scrutiny are as at 11 May 2016 and more will have been completed since then.
  - b. Sickness Absence the short term and long term sickness absence rates, and the main reasons for sickness absence.
  - c. Delayed Transfer of Care a copy of the 'Home First action plan' mentioned in the Q4 narrative, as well as a copy of the 'Partnership Joint Action Plan', mentioned in Q1 narrative.
  - d. Delayed Transfer of Care a breakdown of the Q4 Delayed Transfer Of Care by social care categories (community care assessment and community care arrangements) to show the reasons for these using the Welsh Government codes i.e. housing related issues, home care related issues, capacity restrictions, home adaptation/ equipment issues, care home place arrangements, funding related issues etc.
  - e. SCA/002(a) an explanation as to why the Q4 report states that a target is not applicable in the RAG column when a target has been set as part of the corporate plan process, and is included in the Q4 report.
  - f. SCA/007 the longest time that a service user has waited to have a review that was due.
  - g. SCAL23 the volume figures for 2014/15 and 2015/16 in order to understand trends. This is because the Q4 performance report shows the result for 2014/15 as 78% and for 2015/16 as 73%; the Performance Panel

Members were surprised by this result given the additional work this year to support independence.

29. This information has been provided and is attached at Appendix C.

### Year on Year Performance

- 30. At **Appendix B**, Members will find a summary of year-on-year performance, which shows the overall direction of travel from 2008- 2016 for the indicators reported in the Quarter Four report that fall within this Committee's terms of reference. Members will see that, of these, two indicators were introduced in 2010-11 and two indicators were introduced in 2013-14, so it is not possible to show previous performance. The shaded rows in the summary indicate where the performance in 2015-16 has not met the target set for 2015-16.
- 31. For those indicators where end of year results are shown, there is an overall improvement in performance for most of the indicators for 2015/16 when compared to 2014/15.

#### **Previous Scrutiny**

32. Over the course of scrutinising performance in 2015-16, Members have focused on a number of areas of concern. These are detailed below, along with responses received, shown in italics.

#### Structure and Content of Corporate Performance Reports

- Recommended that information on PPDR's and Savings be available for Adult Social Care and Children's Services separately, from Quarter 2, rather than being shown together as Social Services; this is to enable transparency in understanding performance in these different sections and enable year on year comparison.
  - Recommendation accepted and report altered accordingly.
- Requested an explanation regarding how performance indicator intervention levels are set for Adult Social Services indicators and Communities & Housing indicators.

- Regular monitoring of performance enables managers to intervene to get performance back on course or otherwise revise the status of the target in light of factors impacting on performance.
- Requested an explanation regarding how the RAG status of each indicator is determined.
  - Determined by analysis of the data in respect of the target, using both that quarter's performance and any underlying trends. It is discussed and challenged at various meetings prior to the final report being presented to scrutiny. In advance of the Quarter Three report, the Council's improvement and Information team have consulted and issued guidance to ensure that there is a more consistent approach to the setting of RAGs.
- Recommended that the Communities Directorate include performance indicators for Council Housing Repairs from Quarter 2 onwards, to enable Members to scrutinise performance in an area of key importance for council tenants.
  - Recommendation accepted and report altered, to include CMS/001.
- Asked what performance information is being kept regarding homelessness, in the absence of Welsh Government guidance.
  - Provided a list of the operational performance information collected by Communities, Housing and Customer Services Directorate.
  - The service is working towards some key indicators which will best reflect good performance under the new arrangements... The Welsh Government is also working on a better understanding of the figures and it is anticipated that further guidance will be introduced in due course.

#### Targets

 SCA/018(b) - requested an explanation of the target setting process, given that the target set for 2015/16 is 58% whereas the outturn for 2014/15 was 26.3%.

- Accept that this looks a very challenging target given the performance in previous years; however, this is a key area for improvement... recently approved the recruitment of 4 temporary Carer Assessment workers for the remainder of this financial year.
- SCAL23 requested an explanation of why the 2015/16 target is 65% when outturn 2014/15 was 78.04%.
  - The target was set at this level to allow for the change of focus for the re-ablement service to target those people with more complex needs, and it was anticipated that a higher percentage would not achieve independence.

#### Specific Indicators

- PSR/002 With regard to 2015/16 DFG budget, did this include additional monies to deal with the backlog from 2014/15? How much of this year's budget is already spent or committed? Are we suspending cases this year due to budget shortfall and, if so, how many cases?
  - Close monitoring of the budget raised predicted an overspend; therefore action was taken to right a business case that immediately authorised the additional £700k of general fund and HRA of £250k. In addition to the agreement to use up to £700k from next year's allocation should the need arise. Whilst cases are being processed as quickly as possible there has been some issues with the capacity of the contractors. However, the contractors have advised the Service Manager that works will be completed by March 2016.
- PSR/002 note that:
  - post inspections are carried out to ensure quality is maintained whilst the quantity of works increases.
  - an additional indicator is required to capture alternative works undertaken to fast-track adaptations which do not fall into the category of Disabled Facilities Grant work.
  - comments that performance may decline as resources are directed toward fast-track works to assist other policy aims, such as reducing delayed transfers of care.

- HLS/014 clarify whether the RAG status for Quarter 2 is correct, as Members would have expected it to be marked as Red given that Q2 performance is 94 days against a Q2 target of 80 days.
  - Rationale for the Amber rating was based on the result showing improvement on the previous quarter... recent guidance issued by the Council's Improvement and Information team will be used in future to help assess the RAG status and therefore a PI not making the target or likely to make the target would be given a Red rating.
- HANR/01 and HLS/014 note there have been more voids than normal in quarter three, due to the impact of recent Welfare Reform announcements and tenants transferring to different properties to mitigate the impact, and that this has affected performance but that work is underway to improve performance.
- SCA/001 note the following:
  - new governance arrangements, with the new Regional Partnership Board replacing the Integrating Health and Social Care Board, covering all aspects of integration including Delayed Transfers of Care.
  - the leadership group aims to get to the root of the issues causing these, with a need for a whole systems approach.
  - that Councillor Elsmore has met with the Minister for Health and Social Services and has raised concerns about the domiciliary care market with them.
  - that the locality-based services pilot may find solutions that could be of assistance to improving the operation of the domiciliary care market in Cardiff.

#### Way Forward

- 33. At the meeting, the following witnesses will be present to answer questions that Members might have:
  - a. Councillor Derbyshire (Cabinet Member Environment), Councillor De'Ath (Cabinet Member – Skills, Safety, Engagement and Democracy) Andrew Gregory (Director of City Operations) and Dave Holland (Head of Shared

Regulatory Services) - for scrutiny of PSR/004 performance, reported in *City Operations section.* 

- b. Councillor Susan Elsmore (Cabinet Member Health, Housing and Well Being), Sarah McGill (Director of Communities, Housing and Customer Service) and Jane Thomas (Assistant Director – Communities and Housing) – for scrutiny of Communities & Housing performance.
- c. Councillor Susan Elsmore (Cabinet Member Health, Housing and Well Being), Tony Young (Director of Social Services) and Amanda Phillips (Assistant Director Social Services Adults) for scrutiny of Social Services Adults performance.
- 34. Members will have the opportunity to question the Directorates regarding performance in Quarter Four and the management actions being taken to address performance issues.

#### **Legal Implications**

35. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

#### **Financial Implications**

36. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this

report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

## RECOMMENDATION

The Committee is recommended to:

- a. Consider the contents of the report, appendices and evidence presented at the meeting;
- b. Report any comments, observations or recommendations to the Cabinet.

# DAVID MARR Interim Monitoring Officer 1 June 2016