

Cllrs M<sup>c</sup>Garry, Cllr Lomax, Cllr Sanders

**27 July 2015**

**Key Points**

1. Members went through the following papers:
  - a. background briefing on Performance Management framework set by Welsh Government and Cardiff Council;
  - b. details of the National Strategic Indicators, Public Accountability Measures, Wales Improvement Programme Measures, Outcome Agreement Indicators and Local Indicators for Health and Social Care and sections of Communities Directorate that fall within CASSC terms of reference;
  - c. the Council's Benchmarking Strategy;
  - d. the use of the Council's online CIS system; and
  - e. the commitments detailed in the Corporate Plan 2015-2017 and Directorate Delivery Plans.
  
2. Members considered the performance trends for all the National Strategic Indicators, Public Accountability Measures, Wales Improvement Programme Measures, Outcome Agreement Indicators and those Local Indicators which were Red at Quarter 4 2014/15, using the information contained in CIS, quarterly performance reports that had been supplied to CASSC and the Improvement Report 2014.
  
3. Members then considered which areas to prioritise for further scrutiny. Members considered the factors to bear in mind when prioritising areas, including:
  - a. impact on service users, carers and citizens;
  - b. financial impact for the Council;
  - c. reputational risk to the Council;
  - d. financial risk to partners, such as Health; and
  - e. the risk of intervention by regulators, auditors and inspectors.
  
4. To inform their decision making process, and ensure there was no duplication with other on-going work, Members also considered:
  - a. Information supplied during 2014/15 in response to Committee's questions on areas of under-performance;
  - b. Information from Star Chamber re Health and Social Care and Communities
  - c. Information from the Improvement Report 2014
  - d. Information contained in the Corporate Plan 2015-17 and Directorate Delivery Plans
  - e. Comparator information for other Welsh Local Authorities for the national Health and Social Care performance indicators.

5. With regard to Communities, Members focused their consideration on 3 areas: homelessness; voids; and Disabled Facilities Grants.
  - a. Disabled Facilities Grants - Members could see that performance had significantly improved since 2010/11 but had shown declining performance in 2013/14 and 2014/15. However, the information in the Improvement Report 2014 states that Cardiff's performance is still above the Welsh average and explains the reason for the dip in performance in that there have been issues with a new contractor. Members are aware of these issues, having discussed them at Committee, and are aware of the management actions taken to address the issues. Members therefore decided not to prioritise this area for immediate further scrutiny but to keep a watchful eye and prioritise if performance does not improve.
  - b. Homelessness - Members are aware of poor performance showing in HHA/008 and HHA/002, which measure the speed of processing and resolving homelessness applications. Members discussed the introduction of the Housing (Wales) Act 2014 and the changes to homelessness duties flowing from this and the impact this has on performance measures e.g. HHA/013 has been withdrawn by Welsh Government. Members are aware that new indicators are still being agreed at Welsh Government level. Members therefore asked the PSO to speak to officers about whether now would be an appropriate time to carry out further scrutiny.
  - c. Voids - Members are aware of poor performance showing in HLS/014, which has been the case since 2013. Members reflected on discussions at Committee that this has been caused by issues with a new contractor and that management actions have been taken to address the issues. Members could also see that this area was considered at Star Chamber and that performance reports would now include rent loss information. However, given the impact of void management on remedying homelessness, overall lettings and rent loss, Members asked the PSO to speak to officers about the viability of carrying further scrutiny.
  
6. With regard to Health and Social Care, Members focused their consideration on the following areas: Delayed Transfer of Care; balance of care; direct payments; care pathway and care management; and carers.
  - a. Delayed Transfer of Care – Members considered SCA/001 and SCAL2, which look at performance in relation to DTOC caused for social care reasons, both of which show poor performance compared to internal targets and when compared nationally against other Welsh local authorities, with SCA/001 putting Cardiff 19<sup>th</sup> out of 22<sup>nd</sup> Welsh local authorities in 2013/14. Members considered the information supplied at previous Committee meetings and the information contained in the Star Chamber update. Members were aware that CSSIW intend to look at DTOC. Given all of these factors, Members decided not to prioritise for

immediate scrutiny, in order to avoid duplication, but to request the 'DTCO partnership plan' referred to in the Star Chamber update, to keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve.

- b. Balance of care – Members considered the range of indicators for this. Members felt the indicators portrayed the picture they expected in Cardiff, given policy direction and funding pressures. Members noted: that fewer older people are being supported at home (SCA/002a) and that Cardiff is 21<sup>st</sup> out of 22 Welsh local authorities for this measure; that there is a slight increase in the number of older people supported in care homes over the last year (SCA/002b); that there has been a slight decrease in the number of older people supported with home care services over the last year (SCAL11); and that, overall, fewer adult clients have been supported in the community (SCA/020). However, given the work Committee is aware of to reshape adult social care, which will impact on the balance of care, and the poor performance in other areas, Members decided not to prioritise this area for further scrutiny at this stage.
- c. Direct payments – Members are aware that the performance in this area has not met the target set corporately. Members understand the drive to increase usage of direct payments and can see the management actions taken to address this, including the actions detailed in the Star Chamber update. Members therefore decided to keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve.
- d. Carers – Members are aware of the poor performance with regard to Carer Assessments over the last few years, which is why it was prioritised for Inquiry in 2012/13. Members remain concerned about poor performance in this area, both when considered against local targets and when compared nationally with other Welsh local authorities. Members are aware of the management actions taken to address this, including the actions detailed in the Star Chamber update. Members therefore decided to request a copy of the carers' assessment information mentioned in the Star Chamber update and keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve.
- e. Care pathway and care management – Members considered SCA/007, SCA/005a, SCA/015 and SCAL24, which measure performance at key stages of service delivery along the care pathway. Three of these indicators were Red at Quarter 4, with SCA/007 being Amber; this is an outcome agreement indicator and Cardiff was 16<sup>th</sup> out of 22 Welsh local authorities in 2013/14. Members discussed the need to have effective care planning processes, both for service users and their families, for service providers and for the Council, so that information is available to plan and commission effectively and make the right choices going forward. Members could not see that this area was being considered by any other mechanism in the performance management framework or by external agencies. Members therefore wish to recommend to the whole Committee that this area

be subject to further scrutiny and have asked the PSO to speak to the service area about this scrutiny.

7. For both areas, Members also considered sickness absence and customer satisfaction and decided to monitor these through consideration of the quarterly performance reports. Members are aware of the changes to the Attendance and Well Being Policy and that it is hoped that this will improve sickness absence rates. Members were informed that Policy Review and Performance Scrutiny Committee would be monitoring performance on sickness absence corporately and would prioritise for scrutiny if performance results were poor. With regard to customer satisfaction, Members asked the PSO to obtain the annual Health and Social Care Customer Satisfaction report and to find out what information is available for Communities, in addition to the Tenant Satisfaction survey.

**8. Actions required:**

- a. Request DTOC partnership plan
- b. Request Carers Assessments information
- c. Speak to officers regarding whether to prioritise homelessness or void management for scrutiny and appropriate timing for this.
- d. Speak to officers regarding proposed scrutiny of care pathway and care management.
- e. Obtain Health and Social Care Customer Satisfaction Report 2014/15
- f. Obtain Tenant Satisfaction Survey and seek other customer satisfaction information re housing.

**04 September 2015**

**Key Points**

9. Members went through the following papers:
  - a. Notes of 27 July 2015 meeting and actions required
  - b. Corporate Quarter One Performance Report – introductory pages and sections for Adult Social Care and Communities
  - c. Local Government Data Unit ‘Local Government Performance 2014/15’ report
10. Update on Actions arising from 27 July 2015:
  - a. Meetings held with Tony Young, Director of Social Services, and Sarah McGill, Director of Communities, Housing and Customer Services, to discuss potential areas identified for further scrutiny. Tony recommended not undertaking the care pathway performance scrutiny until later on in September, due to staff resources being required for CSSIW inspection. Sarah recommended focusing on voids first and then homelessness, to give time for more information to emerge

from Welsh Government with regard to definitions for new homeless performance indicators.

- b. Requested DTOC partnership plan and Carers Assessments information
- c. Outstanding - Obtain Health and Social Care Customer Satisfaction Report 2014/15 and Tenant Satisfaction Survey and other customer satisfaction information re housing.

11. Members then considered the Corporate Quarter One Performance Report – introductory pages and sections for Adult Social Care and Communities. **Members made the following points for discussion at Committee on 16 September 2015:**

- a. Introductory pages –
  - i. Adult Social Care overtime costs are the highest in the Council.
  - ii. Sickness Absence for both Adult Social Care and Communities is shown as Green.
  - iii. PPDR information is only provided for Social Services overall and is not broken down into Adult Social Care and Children’s Services.
- b. Adult Social Care –
  - i. Sarah McGill is named as the responsible Director for Adult Social Care.
  - ii. Savings information is only provided for Social Services overall in the Children’s Services section of the performance report and is not broken down into Adult Social Care and Children’s Services.
  - iii. The 5 Red indicators are for areas previously showing poor performance, namely: Delayed Transfer of Care; Carers Assessments that have taken place; and support to Older People, both in the community and in care homes.
  - iv. The targets listed have previously been scrutinised as part of the Directorate Delivery Plan scrutiny, apart from SCA/018(b) and SCA015 where no targets were provided at that stage.
  - v. The target for SCA/018(b) is 58% against an outturn in 2014/15 of 26.3%.
  - vi. The target for SCA015 is 4 days against an outturn in 2014/15 of 4.9 days.
- c. Communities –
  - i. Not all the information in this section falls within the remit of CASSC. Of the areas that do, there is 1 Red indicator, which is for DFGs.
  - ii. There are 3 Amber indicators, which relate to preventing homelessness, relet times for voids, and the time taken to process new Housing Benefit claims.
  - iii. Overall, there are only 8 indicators that fall within the remit of this Committee and none relate to housing repairs.

12. Members requested that the scrutiny officer check whether the Corporate Quarter One performance report contained the information for the national strategic indicators, public accountability measures and Outcome Agreement measures for Adult Social Care

and the relevant sections of Communities. The national strategic indicators and public accountability measures 2015/16 are all included<sup>1</sup>, apart from SCA/019 which relates to adult safeguarding and is reported annually. None of the additional Outcome Agreement indicators are included; corporate performance have explained that this is because these indicators are not collected for Quarter One but will be collected for Quarter Two onwards where results will be more meaningful.

13. Members considered the Local Government Data Unit 'Local Government Performance 2014/15' report, focusing on the areas relating to Housing, Disabled Facilities Grants and Adult Social Care.
14. Members then considered whether the evidence provided in the Corporate Quarter One Performance Report or the Local Government Data Unit 'Local Government Performance 2014/15' report necessitated a reappraisal of the proposed areas for prioritisation. Members were of the view that they did not at this stage but that the Quarter Two results would be critical in determining whether or not to reprioritise areas.
15. Members discussed whether to prioritise homelessness, voids or the care pathway as the first area for more detailed scrutiny and **agreed to suggest to Committee that:**
  - a. Voids be prioritised as the first area for more detailed scrutiny, bearing in mind the Directors comments mentioned at point 10a above
  - b. Care Pathway to be prioritised as the next area for more detailed scrutiny, subject to any changes needed as a result of the Corporate Quarter Two performance report.

**16. Actions required:**

- a. Members tasked the Scrutiny Officer to draft a report from performance panel to whole Committee, for CASSC 16 September 2015, to explain the above and to seek a mandate for proposed further scrutiny of voids and care pathway, in that order.

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<sup>1</sup> These are: PSR002, PSR004, SCA001, SCA002a, SCA002b, SCA007, SCA018a and SCA019.

## 17. Summary of Decisions:

Area of Possible Concern	Other Action Being Taken	Proposed Performance Panel Action
Disabled Facilities Grants	Management team taking actions to address poor performance re contractor	<ul style="list-style-type: none"> <li>Keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve in Quarter 2</li> </ul>
Housing Benefits – processing of new claims	Management team taken actions to address poor performance re staff turnover and training	<ul style="list-style-type: none"> <li>Keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve in Quarter 2</li> </ul>
Homelessness	Discussions ongoing with Welsh Government and local authorities regarding new performance measures re Housing (Wales) Act 20104	<ul style="list-style-type: none"> <li><b>Prioritise for further in depth scrutiny – suggest to whole Committee that wait for more appropriate time to carry out further scrutiny.</b></li> </ul>
Void Management	Star Chamber checking performance Management team taking actions to address poor performance	<ul style="list-style-type: none"> <li><b>Prioritise for further in depth scrutiny – suggest to whole Committee that this area be the first in depth scrutiny.</b></li> </ul>
Delayed Transfer of Care	CSSIW undertaking work Partnership Plan in place	<ul style="list-style-type: none"> <li>Request the ‘DTCO partnership plan’</li> <li>Keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve in Quarter 2</li> </ul>
Balance of Care	Reshaping of Adult Social Care, including reablement, ICF and RCF projects, implementation of PROACTIS for domiciliary care and home care packages	<ul style="list-style-type: none"> <li>Keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve in Quarter 2</li> </ul>
Direct Payments	Star Chamber checking performance	<ul style="list-style-type: none"> <li>Keep a watchful eye on performance and prioritise for further scrutiny if performance</li> </ul>

		does not improve
Carers Assessments	Star Chamber checking performance	<ul style="list-style-type: none"> <li>• Request Carers Assessment information</li> <li>• Keep a watchful eye on performance and prioritise for further scrutiny if performance does not improve</li> </ul>
Care Pathway & Care Management	Would be reviewed at internal management meetings but no other external action planned	<ul style="list-style-type: none"> <li>• <b>Prioritise for further in depth scrutiny – suggest to whole Committee that this area be the second in depth scrutiny.</b></li> </ul>