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AGENDA

Pwyllgor	PWYLLGOR CRAFFU ADOLYGU POLISI A CHRAFFU PERFFORMIAD	
Dyddiad ac amser y cyfarfod	DYDD MERCHER, 17 IONAWR 2018, 4.30 PM	
Lleoliad	YSTAFELL BWYLLGORA 4, NEUADD Y SIR, GLANFA IWERYDD, CAERDYDD	
Aelodaeth	Cynghorydd Walker (Cadeirydd) Y Cynghorwyr Berman, Bowen-Thomson, Boyle, Cunnah, Mackie, McKerlich a/ac Murphy	
		Tua Amser.
1	Ymddiheuriadau am Absenoldeb	4.30 pm
	Derbyn ymddiheuriadau am absenoldeb.	
2	Datgan Buddiannau	
	Dylid gwneud hyn ar ddechrau'r eitem agenda dan sylw, yn unol â'r Cod Ymddygiad Aelodau.	
3	Cofnodion (<i>Tudalennau 1 - 14</i>)	
	Cymeradwyo cofnodion y cyfarfodydd a gynhaliwyd ar:	
	<ul style="list-style-type: none">• 17 Tachwedd 2017• 6 Rhagfyr 2017	
4	Absenoldeb Salwch – Craffu Byr (<i>Tudalennau 15 - 58</i>)	4.30 pm
	(a) Bydd y Cynghorydd Chris Weaver, (yr Aelod Cabinet dros Gyllid, Moderneiddio a Pherfformiad), yn bresennol ac efallai y bydd yn dymuno gwneud datganiad; Bydd Paul Orders (Prif Weithredwr) a Phillip Lenz (Prif Swyddog Adnoddau Dynol) yn bresennol ar gyfer yr eitem hon;	
	(b) Jonathan Lloyd, (Pennaeth Cyflogaeth, Cymdeithas Llywodraeth Leol Cymru (CLLIC));	
	(c) Cwestiynau'r Aelodau;	

(d) Andy Mudd (Pennaeth Atebion, Cymdeithas Rhagoriaeth yn y Sector Cyhoeddus (APSE));

(e) Cwestiynau'r Aelodau;

(f) Phillip Lenz (Prif Swyddog Adnoddau Dynol) yn bresennol ar gyfer yr eitem hon;

(g) Cwestiynau'r Aelodau.

5 Cynllun Corfforaethol Drafft 2018-21 (*Tudalennau 59 - 90*) 6.00 pm

(a) Bydd y Cynghorydd Huw Thomas (Arweinydd) yn bresennol ac yn gwneud datganiad o bosibl.

(b) Bydd Paul Orders, y Prif Weithredwr, Christine Salter, (Cyfarwyddwr Corfforaethol, Adnoddau) a Joseph Reay, (Pennaeth Perfformiad a Phartneriaethau) a Dylan Owen (Pennaeth Swyddfa'r Cabinet) yn bresennol ar gyfer yr eitem hon;

(c) Cwestiynau'r Aelodau.

6 Y Ffordd Ymlaen 6.45 pm

- Absenoldeb Salwch – Craffu Byr
- Cynllun Corfforaethol Drafft - 2018-21

7 Unrhyw Fusnes Arall a Dyddiad y cyfarfod nesaf 7.15 pm

Dyddiad cyfarfod nesaf y Pwyllgor Adolygu Polisi a Pherfformiad fydd 2.00 pm ddydd Iau 14 Chwefror 2018 (Cyllideb)

Davina Fiore

Cyfarwyddwr Llywodraethu a Gwasanaethau Cyfreithiol

Dyddiad: Dydd Iau, 11 Ionawr 2018

Cyswllt: Gill Nurton, 029 2087 2432, g.nurton@cardiff.gov.uk

This document is available in English / Mae'r ddogfen hon ar gael yn Saesneg

POLICY REVIEW AND PERFORMANCE SCRUTINY COMMITTEE

15 NOVEMBER 2017

Present: County Councillor Walker(Chairperson)
County Councillors Berman, Bowen-Thomson, Boyle, Cunnah,
Jacobsen, Mackie and McKerlich

94 : APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Jim Murphy.

95 : DECLARATIONS OF INTEREST

Councillor Bowen-Thompson declared a personal interest in Item 4 as she is Chief Executive Officer of Community Safety Charity Safer Wales.

96 : MINUTES

The minutes of the meetings held on 20 September 2017 and 4 October 2017 were agreed as a correct record and signed by the Chairperson.

97 : PUBLIC SERVICES BOARD - CARDIFF'S DRAFT WELL-BEING PLAN

The Chairperson welcomed the following witnesses to the committee meeting:

- **Cardiff Council**, Huw Thomas, Leader and Chair of Cardiff's PSB, and Paul Orders, Chief Executive;
- **Cardiff & Vale Health Board**, Maria Battle, Chair, and Fiona Kinghorn, Deputy Director of Public Health;
- **Natural Resources Wales**, Gareth O'Shea, Executive Director of South Wales Operations;
- **South Wales Fire Service**, David Bents, Group Manager.
- **South Wales Police**, Superintendent Stephen Jones;
- **Cardiff Third Sector Council (C3SC)**, Sheila Hendrickson-Brown, Chief Executive.

The Chairperson advised Members that in line with the Committee's statutory responsibility for scrutiny of Cardiff's Public Services Board, this was an opportunity to consider the draft Well-Being Plan for Cardiff, currently out for consultation. The Chairperson reminded Members that all public bodies are subject to new duties under the Well-being of Future Generations (Wales) Act, the purpose of which is to ensure that we take into account the needs of future generations, and pursue a common aim to improve the economic, social and environmental well-being of Wales.

The Chairperson invited all partners to outline the key challenges their organisations face in delivering their contribution to the Well-being Plan, and how collective action would help them to overcome the challenges.

The Leader stated that as Chair of the PSB and Leader of the Council, he sees the PSB and partnership arrangements as fundamental to delivering excellent public services. He added that all partners face challenges such as pressures of growth

and demographic changes as well as continuing austerity, most of which require multi-agency response. To deliver growth, tackle poverty and protect vulnerable people there is a need for increased partnership working. He stated that as Leader to deliver the Capital Ambition programme he sees a need to work with partners, and that the Wellbeing Plan would be closely aligned with this. To deliver these, Governance arrangements need to be in place and the draft plan allows for a review of that governance; it should be closely aligned with internal governance arrangements and the Capital Ambition Plan.

The PSB meeting held in June had been a deep dive into Inequality data in respect of Ely and Caerau and the pressures on respective services from these areas. Each organisation gave their perspective, and it was considered that a change in practice to the previous 10 years was needed and the focus would be on a Children's First Approach. The September meeting saw Natural Resources Wales lead a workshop on population growth, which included a walk around the Greener Grangetown project and a focus on Greener Infrastructure for the future. The Leader stated that the Wellbeing Plan and delivery arrangements are working and are vital to how the Council delivers Public Services in Cardiff.

The Chief Executive added that the PSB rests on a good body of partnership working that has become increasingly strong and gave examples of Community Safety, Education Development Board, PREVENT and Cardiff Commitment and stated that there would be momentum in other areas including Asset Management. He gave assurance that the PSB rests on a good platform of partnership working.

Maria Battle concurred that all partners face similar challenges such as increased demand, population growth, increasing elderly population, increasing advances in technology in medical care and all under financial constraints. She added that there was a real focus on moving services into the Community so that everyone has an equal chance wherever they live. There was close partnership working with bringing Health into the Community via the Wellbeing Plan and Health and Wellbeing Hubs such as those at CRI, Maelfa and Ely which would collocate with the local authority and the Police to provide easy access to services in the community. She considered that the Wellbeing Plan breaks down the barriers to do this and there was genuine commitment from partners to take this forward.

Fiona Kinghorn echoed previous comments of strong partnership working; she added that the Wellbeing Plan had a visionary aim to make access to services fair to the population across Cardiff. Co-working will bring together thinking to shape the strategy, which will include a suite of actions, of which the NHS is just one of the Key influences needed. Joint working enables planning for primary care in conjunction with, for example, the LDP. Further examples of joint working were provided including Apprenticeships and the Older People and Prevention agenda.

David Bents reiterated the strong history of partnership working with examples of Community Safety, Education and Safety for Children leading to Safer Adults; stating that this continuing success was a primary objective. He added that Home Safety Checks are shared with partners. The Challenge of deliberate and accidental dwelling fires remained a priority and partnership working was essential to address this. Involvement in Domestic Violence, Safeguarding and Dementia training was also outlined.

Gareth O'Shea stated that the main challenge was to get NRW central to discussions in PSB and getting NRW and the Environment seen as a service provider rather than a piece in the planning process or even a 'blocker' to getting things done in the City. Another challenge was stated as the ability to work at scale; NRW is not a huge organisation but needs to work across the whole of Wales. He added he was keen that NRW and the Environment was integrated into delivery of the action plan and involved in future development, getting green infrastructure recognised and right and tackled together upfront.

Stephen Jones noted a challenge of 70% of demand on South Wales Police is not crime related, so there was impetus to work with partners to manage that and develop interventions and signposting to the appropriate services. He gave an example of the 18-25 pathway that was seeing real impacts. With reference to vulnerability and deprivation, there was a focus on shaping services, a significant increase in staff in the protecting vulnerable persons department, providing timely interventions, dealing with issues today in a much more joined up approach including co-located services. Another challenge was noted as Strategic Policy requirement with SWP attending over 400 major events a year and the pressures that brings which could be addressed without the support and assistance of partners and colleagues.

Sheila Hendrickson-Brown stated that for the third sector there had been a positive response for the approach the Wellbeing plan creates; there was an ambition to change the way things are done and how the third sector can influence that. There were challenges with regards to funding with increasing population and decreasing resources. It was imperative that the third sector was seen as an equal partner in the arrangements and the delivery of the plan; with its expertise in harder to reach and disadvantaged people being recognised.

The Chairperson thanked witnesses for their contributions and invited questions and comments from Members;

- Members asked how the aspirations of the plan can be made into opportunities and not a burden. The Leader stated that he did not see it as a burden, there was a need to get things right or the delivery of services would be unsustainable and the material outcomes of the people in the City become worse. He saw the plan as an opportunity to reform services and materially improve the quality of life for the people of Cardiff.
- Members asked if there were any examples of new arrangements of service delivery that reflect an integrated approach to delivery of the objectives and how the outcomes would be measured. The Leader gave an example of the Multi Agency Safeguarding Hub (MASH) and how services there are blended together. With regards to measuring progress, he explained that there would be a set of measures against each objective in the plan, adding that not all were in the power of the PSB but it can monitor the direction of travel in the City.
- Members asked if they would see the targets and be part of the public consultation. The Chief Executive explained that it was a sequential process, the plan is set out, then there is an exercise to ensure a delivery partnership is in place and is effective at picking up various objectives. It was difficult to set

some targets at a City Wide Level, such as CO2 emissions and GDA, while others are absolutely measurable and would be set at an early stage. With regards to public consultation, Members were advised that for certain points there was substantial UK evidence that would be used to set targets; there was a statutory timeline to work to, once a complete set of delivery plans and action plans were in place then they can be put out to consultation.

- Members asked if a results based methodology would be used and were advised that this was not formally used but the philosophy of use of data driven approach would be central.
- Members asked how to ensure that the individual organisations are aligning their policy frameworks to the commitments in the Wellbeing Plan. The Leader stated that from a Council perspective there was strong correlation between the Capital Ambition Plan and the Wellbeing Plan, he considered that at the highest level everyone buys into it and has a sense of ownership. This view was echoed by Maria Battle and Gareth O'Shea who considered their respective organisations were well aligned.
- Members asked if the PSB has its own budget or whether each partner deals with the aspirations that are relevant to them. The Leader explained that there was no centralised budget beyond the secretariat, which is why policy alignment is important. He added that it is more about how existing activities are directed to more collaborative working and that more details on the funding would come forward in the budget proposals.
- Members made reference to Objective 1 'A Capital City that works for Wales' and considered there was a slight disconnect between the objective and the commitments with regard to economic development. Members asked how to ensure that economic benefits to Cardiff benefits the whole of Cardiff and can also benefit the rest of Wales. The Leader stated that Objective 1 recognises the economic performance, marketability and campaign role of Cardiff as an economic dynamo for the rest of Wales. He noted that per capita, Cardiff was one of the lowest funded local authorities in Wales; £90 million of its business rates goes outside of Cardiff and 90,000 people commute into Cardiff every day, integrating economies so Cardiff was already working for Wales. He further added that Cardiff plays its part in meeting Wales wide targets set by the Welsh Government such as the number of Welsh speakers. In relation to the whole of Cardiff benefitting, Fiona Kinghorn stated that work was being done on needs assessments in parts of the City and gave the example of Children First in Ely/Caerau. The Leader added that there was work to be done to ensure that all benefit from Major events etc. and also stated that there was a move away from out of town business centres and gave the example of Central Square being at the heart of the City, accessible by public transport for all.
- Members referred to Objective 3 and empowering communities and asked if the PSB would ensure that communities are effectively and meaningfully contributing to the shaping and delivery of the plan and how hard to reach communities would be included. Members were advised that there would be online consultation as well as focus groups based in locations across the City that would feed into the plan. Stephen Jones added that as a service they

recognise that they do not reflect the community they serve, so they have established a Representative Workforce Group, they directly recruit PCSO's from BME communities, they have community cohesion programmes and exploit every opportunity they can to be more representative of other people's views with the help of the third sector who have vast experience in this.

- Members noted the strong history of partnership working and asked for clarification on how this was a big change. The Leader stated that the significant change was the stronger read across between objectives in the Wellbeing plan and the political aspirations of Capital Ambition; the history of partnership working was strong but it was important not to be complacent.
- Members considered there was some confusion between Commitments and Outcome Indicators. Officers advised that these could be reviewed as it was still in the consultation stage.
- With regards to terminology, Members noted the phrase 'manage population growth' and considered this should read 'manage the impact of population growth'. Officers agreed with this change.
- Members were concerned about the omission of Private Sector, Business or Charity in the document and that these needed to be considered in the outcome indicators. The Leader stated that one ambition of Capital Ambition would be partnership with the Private sector, adding that it was not a closed document, the working is there and would progress. Maria Battle added that there was demonstrable commitment to partnership working with all and if this was not clear in the document then it was a drafting issue rather than a working practice. Sheila Hendrickson-Brown added that the partnership with third sector was positive and they would build on what has been achieved so far, adding that examples of initiatives they are involved in have been cited and the commitment is there.
- Members asked in relation to strong partnership working, how this knowledge would be used to inform the delivery of integrated services through partners. The Leader stated that all organisations have a strong track record of looking at best practice.
- Members asked if the Wellbeing Plan would be Health Impact assessed. Fiona Kinghorn stated that yes it would be, there were different levels on which it could be done and it would be welcomed, especially in the planning stage as it informs the target setting process too. The Leader gave his commitment to look at this.

RESOLVED: At the conclusion of the meeting the Committee discussed the evidence presented, following which they tasked the Chairperson of the Policy Review and Performance Scrutiny Committee to write to the witnesses to thank them for attending the meeting and set out the comments made by Members

98 : DELIVERING CAPITAL AMBITION (TO FOLLOW)

The Chairperson invited Councillor Huw Thomas, Leader, and Paul Orders, Chief Executive to present this item.

Members were advised that this was opportunity to inform the Policy Consultation, the item would come before the Committee as a pre-decision item in December.

The Chairperson invited the Leader to make a statement in which he said that he considered this item to be very early pre-decision, there was no report just a presentation but that speaks to the content currently envisaged in that report. He added that the item was very timely and was a good use of scrutiny time.

Members were provided with a presentation which outlined the Realignment of the Corporate Plan and Budget; Alignment with the partnership framework (including the Public Service Board and Wellbeing Plan) and Establishing a 4 year Capital Ambition Delivery Programme.

The Chairperson invited questions and comments from Members;

- Members asked if there was an opportunity to integrate the Corporate Plan, Capital Ambition Delivery Programme and Organisational Development Plan into one Strategic document. The Chief Executive advised that Capital Ambition Delivery Programme would feed into the Corporate Plan which was the key planning document for the authority.
- Members made reference to the headline that committed to providing an excellent school for every child in Cardiff but noted that there were no further details such as dates and which schools were considered to be excellent. The Chief Executive stated that there would be more information in further reports, there needed to be a target setting exercise in the first instance and this needed to be appropriately challenging.
- Members referred to fundamental reviews and noted that previously some service areas such as Waste Management had been excused scrutiny. Members asked if future fundamental reviews would be systematic or selective. The Leader stated that they would be systematic as appropriate to deliver the aspirations contained in the Capital Ambition plan; critical areas would however be prioritised.
- Members considered there appeared to be some disconnect with what had previously happened and made reference to historic under investment in roads and the disbanding of the Cardiff Business Council. The Leader stated that there had been demonstrable performance output with regards to roads but noted that more was needed and that significant investment was needed for this. He stated that he agreed with the disbanding of the Cardiff Business Council, he has met the former Chair to discuss how they could work together in the future. There had been a Business Forum specification from Welsh Government, which Councillor Goodway was working to put in place; this would complement and not compete with the regional work underway to support the City Deal.
- Members asked for more information on a plan to develop a business case for a new County Hall and whether there had been a cost benefit analysis undertaken. The Leader explained that there was not much detail on this at the moment; the current County Hall costs £2.3 million per annum to run, which did not include maintenance costs which were increasing. There was

an opportunity to look at a business case for a new County Hall and how this could complement other Economic Development projects in the City.

Members asked if there were any details on potential locations and which Economic Development projects; the Leader explained there were no details at this stage, it would be the same model that led to the development of the current County Hall and would be driven by the agenda which locates staff in less properties and savings seen as a result of this.

- Members noted that there had been support from across the Council for the new delivery programme with staff being on board which seemed very positive, and asked if this would continue and if so how this would develop. The Leader stated that he sees the Council as an organisation that is politically led and professionally managed, the interface with staff is critical and the council's agenda cannot be delivered without them. There had been recent engagement events with staff which had involved all Cabinet Members, this had started a programme of continuing engagement with staff to listen and hear their concerns. He added that it was important to empower staff and find ways of making that happen.
- Members made reference to savings from Digitalisation and asked how this was captured in Capital Ambition, particularly when transformation from digitalisation could potentially be a ten year project and there were the added complexities of translation into Welsh too. The Leader considered this a fair point and noted the Challenges of bilingualism especially for the Council's Planning Portal; he stated it was not a challenge that can be met overnight but a change programme should be built around objectives, milestones set and all informed and mandated by Policy direction. The Chief Executive added that one task was the Medium Term Financial Plan, there was a veneer of digitalisation in place but it was still an overwhelmingly manual process; School Admissions was now online but processes underpinning it were still manual; there were big questions on automating processes end to end and more work was needed.

RESOLVED: At the conclusion of the meeting the Committee discussed the evidence presented, following which they tasked the Chairperson of the Policy Review and Performance Scrutiny Committee to write to the witnesses to thank them for attending the meeting and set out the comments made by Members.

99 : COMMITTEE BUSINESS

Members were advised that there were three sub groups underway and were provided with an update on the progress of these groups as follows;

Managing the Estate and Corporate Landlord Model – the first meeting had provided an opportunity to discuss the scope and the paving report; witnesses who provide political leadership would attend and there would be input to provide key background information. John Dunne would attend the second meeting and advise on best practice. The third meeting would look at the maintenance backlog of the Education Estate and assess how the Corporate Landlord Model could impact on this. The task

and finish group were keen to produce a targeted report with a limited number of focussed recommendations, looking at how this issue genuinely impacts residents.

Customer Leadership – the first meeting had been held at Willcox House and evidence had been provided by the Customer Services Team; it was considered that further internal evidence would be useful. The second meeting would hear evidence from the Chief Executive and Matt Wakelam, with external evidence provided by Mike King, Senior Manager at Admiral, and potentially evidence from British Gas, Dwr Cymru and the welsh Contact Centre.

Performance Panel – this would meet quarterly to look at Corporate Performance, any areas of concern would be escalated to the main committee. Panel members had met with Joe Reay and outlined their expectations and asked for areas of concern to give a lead to start to the process. The first meeting was scheduled for 29 November 2017, panel members will receive training in interpreting the performance reports.

100 : ANY OTHER BUSINESS AND DATE OF NEXT MEETING

The next meeting was scheduled for 6 December 2017 at 4.30pm.

This document is available in Welsh / Mae'r ddogfen hon ar gael yn Gymraeg

POLICY REVIEW AND PERFORMANCE SCRUTINY COMMITTEE

6 DECEMBER 2017

Present: County Councillor Walker (Chairperson).
County Councillors Berman, Bowen-Thomson, Boyle, Cunnah,
Mackie and McKerlich.

101 : APOLOGIES FOR ABSENCE

Councillor Jim Murphy sent his apologies for this meeting.

In addition, it was noted that Councillor Frank Jacobsen had stepped down from the Committee. The vacancy would be filled at the January Council meeting.

102 : DECLARATIONS OF INTEREST

There were no declarations of interests.

103 : DELIVERING CAPITAL AMBITION & CORPORATE PLAN 2018-19

This Committee at its meeting on 15 November (Min No 98) received a progress update and presentation from the Leader on the plans for Delivering Capital Ambition. This item provides an opportunity for the Committee to undertake a pre-decision scrutiny, and have a first look at the Cabinet proposals for delivering the policy aspirations in more detail, and to scrutinise the process for development of the 2018/19 Corporate Plan, and how these two important strategic plans will be aligned. In attendance at the meeting for this item were the Leader of the Council, Councillor Paul Orders, the Chief Executive, Paul Orders, Corporate Director Resources, Christine Salter, Head of Performance & Partnerships, Joseph Reay and Head of Cabinet Office, Dylan Owen.

The Chair invited the Leader, Councillor Huw Thomas, to make an opening statement in which he welcomed the important input of this Scrutiny Committee; set out the approach in delivering the administration's priorities in the Capital Ambition; ensuring change by tackling old ways of working; embedding the Council's policy and performance framework; work to agree targets with the Cabinet Performance and Delivery Group; and the importance of viewing the Corporate Plan in tandem with the budget settings process so that resources are aligned.

The Chairperson invited questions and comments from the Committee. The following key issues and observations were made: -

- Members reinforced the importance of strong alignments between the ambition narrative and quantifiable performance outcomes and the importance of the new change programme dovetailing into ambitions and objectives. Members noted that the Leader was confident that the mechanisms for achieving these alignments are in place and that the Corporate Plan will clearly state the objectives, actions, targets and measures to deliver Capital Ambition.
- The Committee indicated that it would be looking for strong links between the Well-being Plan, the four-year Capital Ambition programme and the Corporate Plan. The Committee would monitor during the period of this work plan;

- Councillors welcomed the proposal for fundamental service reviews and noted there had been in depth analysis of services and external factors, prior to selecting priority areas for review.
- The Committee noted the creation of the Cabinet Performance and Delivery Group, and would welcome a strong link to this new group, to consolidate and support governance arrangements going forward.
- The Committee sought assurance that there had been some tangible action on the City Deal, and clear governance arrangements.
- The Committee was keen to see the setting by all ten Councils of a business plan identifying how the current aspirations will be prioritised and achieved. Members were pleased to receive confirmation from the Leader on the tangible progress being made on the semiconductor project.
- The Committee stressed the importance that organisational culture embraces digitalisation ambitions.
- Councillors were keen that management and staff continued to work together to ensure the citizen remain at the centre of the redesign of Council services. The consistency of customer service delivery organisational-wide was very important.
- The Committee took on board the Leader's view that changing citizen and neighbourhood cultures was also important, and that the 'Total Street' approach was considered to encourage this community and council partnership approach to improving neighbourhoods.
- Councillors once again stressed the importance for this administration to break down directorate silos to support the delivery of seamless council services. The Committee noted that managers understand the benefits of joined up frontline services and that a more open span of management control was being encouraged. It was felt that the example of the 'Total Street' where the organisation is taking steps to align all street scene services will be the test of how effectively Capital Ambition is delivered.
- The Committee has some concerns as to where the Council sits on Welsh Government's programme for local government reform in the shape of regional collaboration on shared services, and supports the view that it is important the Council retain control of key services.
- The Committee would welcome sight of the workforce development toolkit, when it undertakes scrutiny of this topic in March 2018.
- The Committee noted that the Capital Ambition places communities' front and centre with a focus on inequalities, particularly of health and opportunity. However the Committee reminded the Leader that all communities have needs and stressed the importance that Capital Ambition works for the whole City.
- Councillors were very appreciative of the Cabinet's inclusive approach to scrutiny engagement with these important strategic plans whilst in their development stages, and welcomed the Leader's offer of a target setting session for the Corporate Plan 2018-19 with the Chairs of all scrutiny committees in January 2018.

At the conclusion of the meeting the Committee discussed the evidence received and observations made.

RESOLVED – That

1. The Chairperson of the Policy Review and Performance Scrutiny Committee to write on behalf of the Committee to the Leader to thank him and the Officers for

attending and participating the meeting and set out the feedback made by the Committee;

2. The Committee scrutinise the draft Corporate Plan 2018-19 at its meeting 17 January 2018;
3. The Chair with the Principal Scrutiny Officer be requested to discuss with the Leader and officers how the Committee can link in with the new Cabinet Performance and Delivery Group to consolidate performance governance arrangements and avoid duplication going forward;
4. The Principal Scrutiny Officer be requested to arrange a Corporate Plan 2018 -19 target setting scrutiny session later in January with the Committee's new Performance Panel and include the Chairs of all Scrutiny Committees.

104 : BUDGET MONITORING 2017-18 - MONTH 6

The Committee received the Budget Monitoring 2017 – 2018 as at Month 6. The Chairperson welcomed the Cabinet Member for Finance, Modernisation and Performance, Councillor Weaver, Corporate Director Resources, Christine Salter and Head of Finance, Ian Allwood.

The Cabinet Member for Finance, Modernisation and Performance made a statement drawing on the key areas and actions being taken to ensure that the overall financial position will be a balanced position by the end of the financial year. The position had improved since the Month 4 report however more needed to be done to address overspends in key directorates and if necessary adjustments made for future years.

The Chair indicated that the Committee may consider following this scrutiny the need to undertake deep dives in more detail specific areas of the budget and these can be programed into the forward plan. This may involve joint committee scrutiny if appropriate.

The Chairperson invited questions and comments from the Committee. The following key issues and observations were made: -

- Concerns were focussed on the overall savings shortfall of £1.782 million, and unrealistic savings proposals.
- Councillors re-iterated their concerns that the achievement of a balanced position at this stage in the budget year is frequently a result of management action in holding staff vacancies. The Committee was strongly against an approach of making staff vacancies central to budget savings as this would have a significant impact if many posts remain vacant.
- Councillors took the view that the projection of a balanced budget at month 6 would only be achieved at a cost and that there would remain unachieved saving targets being met by other means. The Committee did accept that Directorates have been set stretching income targets, and that the transformation of services and the empowerment of staff to be entrepreneurial carries risks, but assurances were sought that savings were rigorously assessed by Directorates and Senior Management when they are proposed and taken through the budget setting process.

- The Committee noted for example that Children's Services had a £782,000 shortfall on savings carried forward from the 2016/17 budget year, relating to external placements for looked after children which was impacting on the overall deficit. The Committee was therefore wondering whether the budget actually reflected the real costs of the service, or whether a significant realignment of the budget is needed. The Committee noted that the Children and Young People' Scrutiny Committee were currently undertaking a task and finish inquiry on out of county placements which we would inform the 2018/19 budget planning.
- The Committee was concerned at the implications for the Council's budget of the Welsh Government possible reduction in its 3 year rolling budget for the Cardiff Harbour Authority.
- The Committee noted during its consideration of Delivering Capital Ambition earlier in the meeting, that the semi-conductor project is considered a tangible outcome of the Cardiff Capital Region City Deal. Councillors were reassured that providing a short-term bridging loan to secure significant private sector investment in the region until a business plan is in place, is a temporary cash flow solution, and there will be no cost obligation to the Council.
- The Committee noted that there is no limit to the level of external debt the Council can enter into provided it is for the projects and with sound business cases. Councillors would be interested in how many projects the Council has provided seed corn capital and how Cardiff will benefit from those projects.

At the conclusion of the meeting the Committee discussed the evidence received and observations made.

RESOLVED – That the Chairperson of the Policy Review and Performance Scrutiny Committee to write on behalf of the Committee to the Cabinet Member, Finance, Modernisation and Performance welcoming the assessment that at Month 6 of the 2017/18 Budget a balanced budget was projected, but also setting out the committees observations and concerns for response.

105 : COMMITTEE BUSINESS UPDATE

- (a) The Committee had received and noted the email correspondence with the Public Service Board following the 15 November meeting.
- (b) The Committee received a verbal update from the Principal Scrutiny Officer on the three Task and Finish Groups which had met in the previous three weeks.
 - Managing the Estate under a Corporate Landlord Model - (Councillors Boyle (Chair), Mackie, Murphy and McKerlich).
A context setting evidence session and a further meeting had taken place with evidence being sought on work of Facilities Management; Schools position and the maintenance backlog.
 - Customer Leadership - (Councillors Bowen-Thompson, Berman, Cunnah and Walker (Chair)).
The Task Group continues to gather evidence, and received a very interesting presentation from Admiral, with a second presentation at its meeting on 12 December from British Gas. This meeting will be held at Wilcox House.
 - Performance Panel (Councillors Boyle, Bowen-Thompson, Murphy, Mackie, McKerlich and Walker (Chair)). The Task Group had met with the Head of Performance and his team, to gain a better understanding of the Council's

Performance Framework. The Panel has been offered a session in late January to consider draft targets in the Plan. The Panel will concentrate on areas where there are challenges - Sickness Absence and Recycling

106 : DATE OF NEXT MEETING

Wednesday 17th January 2018, commencing at 4.30pm.

(The meeting closed at 18.45)

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**CYNGOR CAERDYDD
CARDIFF COUNCIL**

**POLICY REVIEW & PERFORMANCE
SCRUTINY COMMITTEE**

17 January 2018

Sickness Absence – short scrutiny

Purpose of the Report

1. To undertake a short scrutiny of the Council's approach to tackling sickness absence levels, focussing on local and national trends, an analytical review by the Association of Public Service Excellence (APSE) Solutions, and the Council's action plan to address the review findings.

Structure of the Papers

2. To assist Members' preparation for the scrutiny a range of core papers are attached to this cover report as follows:
 - **Appendix 1: *Cardiff's Attendance & Well-being Policy*** summary leaflet. Here Members can quickly reference the key elements of the Council's Attendance and Well-being Policy.
 - **Appendix 2: *Sickness Absence Action Plan for quarter 1 2017/18***. This action plan was put in place by the Council following publication of the 2016/17 final outturn figures, when it became clear the organisation's sickness absence levels were increasing.
 - **Appendix 3: *Sickness Absence Analysis: Final Report***. This report was prepared by Andy Mudd, Head of APSE Solutions, in October 2017 following focus groups with trade unions, HR officers, head teachers and service managers.
 - **Appendix 4: *Action Plan for Sickness Absence APSE Recommendations***. Following publication of the APSE Solutions findings, this action plan was developed and presented to senior management and Trade Unions. Each recommendation has been assigned actions and

identifies lead officers/bodies. It is this document that the committee will have the option of returning to in the future to monitor progress in tackling sickness absence.

- **Appendix 5: *Sickness Absence report, at Quarter 2 2017/18***

This provides the latest published data, for the number of FTE days lost per person by Service Area, available at this point in the year.

Background

3. The Committee's Terms of Reference includes the scrutiny and review of the effectiveness of the Council's use of human resources. During work programming discussions for 2017/18, the Committee considered sickness absence levels in the Council should remain a focus. However, given that work was underway to review the position, rather than undertake a full task and finish inquiry it would consider the outcome of the review and actions proposed to address sickness in depth at full committee.

Issues

4. The Council's overall sickness absence levels have been falling steadily since 2012/13, until rising to above average levels for Wales in 2016/17. The final outturn for 2016/17 was 10.77 FTE days lost per person. The Council Wide Target for 2017/18 is 9 FTE days lost per person. In 2016/17, the opportunity cost of sickness absence to Cardiff Council was £11million.
5. To assist in establishing the reasons for the recent increase, and identify options for tackling the issue, the Council engaged APSE Solutions, a not for profit local government body that promotes excellence in public services.
6. The Attendance and Well-being Policy was revised in 2015 to focus on management capability and compliance in applying the Policy consistently. Managers are now informed automatically of the requirement to carry out and record a return to work interview, and there are consequences for managers that do not apply the procedures correctly.

7. A series of workshops focussed on the theme of management and process in applying the Policy. The common themes emerging from each can be found in **section 4 of Appendix 3**. Members are particularly referred to 4.3.
8. APSE published their findings and recommendations in October 2017. Conclusions and recommendations in full can be found in **section 7 of Appendix 3**. In summary key findings and conclusions from across the report were:
- The increase in overall sickness rates in 2016/17 is predominately due to an increase in long-term sickness.
 - Some occupational groups are disproportionately likely to take time off sick.
 - Teachers' absence represents the highest number of days lost because they are the largest proportion of the workforce. Nonetheless, even a 1% reduction in absence levels would be a significant benefit to the overall absence levels.
 - Grade 4 and 5 workers, who make up 31% of the workforce, account for 38% of days lost and would be a sensible point for drilling down into sickness absence. The occupational groups represented by these grades include refuse collectors, care workers, teaching assistants, school catering staff and enforcement officers.
 - APSE Performance Networks benchmarking data shows conclusively that manual and front-line staff are more likely to take time off sick than non-manual and back office workers.
 - APSE information looking at the absence trends in English authorities following the onset of austerity indicates that recent reductions in Welsh council budgets should not be expected to fuel an automatic increase in absence.
 - The Sickness absence policy framework needs fine-tuning but is not the problem.
 - Some specific changes to process can emphasise the importance of good management decision making

- Early intervention and support is critical to head off stress and muscular skeletal reasons for absence
- Free up Occupational Health time and resources to use where they will make a difference
- Ensure that initiatives are accessible and relevant to all workforce.
- Multi-disciplinary case work is essential

Scope of the short scrutiny

9. This scrutiny will examine the context in which the Council engaged apse to analyse Cardiff's performance, identify patterns and reasons why sickness absence levels have now risen above average from a low point below average in 2015/16.
10. The scrutiny will consider how Cardiff compares with Local Government levels of sickness absence across Wales.
11. Further, it will consider how the Council intends to tackle sickness levels going forward, in light of the findings of the APSE commissioned data analysis.
12. To achieve the above Members will hear from the Cabinet Member with portfolio responsibility for human resources, Councillor Chris Weaver, Chief Executive, Paul Orders, Chief Human Resources Officer, Philip Lenz, Head of Employment, Welsh Local Government Association (WLGA), Jonathan Lloyd, and Head of Solutions, Association of Public Sector Excellence (APSE), Andy Mudd.

Legal Implications

13. 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

14. 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 evidence presented, both internal and external and agree whether it wishes to report its comments and observations in an extended letter to the Cabinet.
- b) Consider how it wishes to monitor progress in tackling sickness absence going forward.

DAVINA FIORE

Director, Governance & Legal Services

11 January 2018

Mae'r dudalen hon yn wag yn fwriadol

Trigger Points for Persistent Short Term Sickness Absence

There are three formal stages and four trigger points confirming the number of absences required to hit triggers.

Disability related absences will initially be counted for trigger purposes. However, triggers may be relaxed after advice from Occupational Health.

The Stages and Trigger points are:

Trigger Points	Stages
2 absences within a 6 month rolling period	Support Stage
4 absences within a 8 month rolling period (or additional absence of 6 days plus)	Stage 1 Written Caution
6 absences within a 10 rolling month period (or additional absence of 6 days plus)	Stage 2 Final Written Caution
8 absences in any rolling 14 month period (or additional absence of 6 days plus)	Stage 3 Potential Termination

Please note that each stage may also be triggered if an unacceptable pattern of absence is identified which is causing concern.

Addressing abuse of the sickness procedure

Whilst most cases of sickness absence are justified and legitimate, there are cases where some members of staff misuse and abuse the system, which has a direct impact on money and resources. Abuse of the system will not be tolerated and careful monitoring of any trends will be alerted.

Sick pay may be suspended if anyone is found to be:

- Abusing the sickness absence policy
- Fails to provide relevant certification in the stated timescales
- Refuses to attend an OH appointment/ fails to attend OH appointment without prior notice
- Fails to report sickness on the days/times specified by the manager

This list is not exhaustive

More information

The full Policy can be found on the Council's Intranet System – reference number – **1.CM.049** or alternatively, if you don't have access to a computer ask to your line manager.

If you have any concerns or queries regarding your own sickness record, we advise that you speak to your immediate line manager as soon as possible, or alternatively, seek advice from your HR People Service representative on **hrpeopleservices@cardiff.gov.uk** or telephone **2087 2222**.

Cardiff Council

The Attendance and Wellbeing Policy



hrpeopleservices@cardiff.gov.uk



Introduction to the Attendance and Wellbeing Policy

The Council's Attendance and Wellbeing Policy is for all employees and managers. The policy covers the following essential elements:

- Sickness absence procedure
- Special leave scheme
- Critical illness policy
- Terminal illness process
- Guidance in relation to mental health and reasonable adjustments – these are designed to raise awareness as well as support managers and employees

The policy provides a framework for all managers including Head Teachers to fairly, consistently and proactively manage your sickness absence. Your wellbeing will also be more effectively monitored against your sickness absence by your line manager. The policy will be commended to School Governing Bodies.

The full Policy can be found on the Council's Intranet System – reference number – **1.CM.049** or alternatively, if you don't have access to a computer ask to your line manager.

Your wellbeing is important to us

The Council is actively promoting and encouraging wellbeing at work. Any problems directly affecting wellbeing will continue to be addressed, as will a proactive approach to identifying ways in which levels can be improved.

The Council has in place a number of policies, services and initiatives designed to support your wellbeing, including:

- Occupational Health Service
- Employee Counselling Service
- Work Life Balance Policies
- A range of health and wellbeing initiatives are available throughout the year to support employees

Special Leave

The changes made to the Special Leave Scheme are designed to strengthen and provide clarity on the current policy, with important changes being made to:

- Bereavement Leave
- Domestic/ Personal Emergencies
- Personal/ Medical Appointments
- Dependent appointments

Details of these changes are available from the full policy document **1.CM.049**

Sickness Absence – what you need to do if you are on sick leave?

Notify your manager of your sickness

1st day - on the first day of absence, you must contact your manager or nominated representative as soon as possible, by the time stated by your manager. You will need to confirm with your manager the reason why you will be absent, nature of the illness and any outstanding work commitments.

2nd – 5th day you must maintain contact with your line manager for the next 4 working days, although this can be varied by your manager depending on the information received on 1st day.

More than 7 calendar days - a statement of fitness for work will be required from your GP.

The process when you return back to work

Return to Work Interview

Your return to work is an important part of the sickness absence process. No matter how many days you have been absent your manager must meet with you and carry out a return to work interview with you, ideally on the day of return and no later than three days after your return (unless your work pattern states otherwise). The purpose of this return to work interview is to provide you and your manager with the opportunity to:

- Discuss any concerns about your health, wellbeing, recovery or overall attendance
- Bring you up to date on any work related issues and developments that may have occurred during your period of absence
- Consider any reasonable adjustments you may need

This is also an opportunity for you to discuss any concerns you may have, which have had a direct impact on your sickness. The Return to Work Interview will be recorded and signed by both you and your manager during the interview, or the record can be input directly onto DigiGov.

Long Term Absence (continuous absence of 4 weeks or more)

A specialist Central Sickness Management Team within HR People Services will take on the responsibility for the case management of all sickness absence longer than four weeks in duration and for all stress related cases. The team will also arrange appropriate referral to Occupational Health.

Whilst this team will manage the process for these sickness cases, managers/ Head teachers will continue to have responsibility for the employee throughout the absence and must attend contact visits, case conferences and any hearings required.

A contact visit will be arranged by the manager when an employee has been absent for 2 weeks. This may take place at the employee's home, in the workplace, or alternative arrangements can be made to use another venue. After this, visits will be arranged every six weeks by the Central Sickness Management team. A Trade Union representative can be present if the employee wishes.

All long term sickness absences will be referred to the Council's Occupational Health Service following the first contact visit.

Automatic referrals will be made for sickness absences related to work related stress, industrial injury or occupational ill health. The Council's Occupational Health Advisor will give a medical opinion on your fitness for work, estimated return date and any rehabilitation that may need to be undertaken, which could include a phased return.

Sickness Absence Action Plan Q1 2017/18

	ACTION	Action Date
1.	Recognise those who have achieved 100% attendance during 2016/17 (43% attendance)	Cover at SMF and CMF
2.	Focus on reviews of long term cases	Ongoing
3.	Additional temporary resource to mitigate “Did Not Attend” missed OH appointments	Started text message service w/c 17 th July 2017
4.	Quick fixes to recording of sickness - use of “Other” sub-category	Completed
5.	Letter to Managers from CEX emphasising message of maintaining focus on RTW’s and ensuring stages are followed and that sickness is correctly recorded	14 th June 2017 Actioned
6.	Revised RTW form and introduce daily sickness recording form	Actioned from 1 st July 2017
7.	Promote EAP and Employee Counselling services more	Ongoing promotion
8.	Continue with the new Absence Management courses	New dates from Oct 2017
9.	Consider more regular Mental Health Awareness courses for Managers, including development of Mental Health Policy	New Training from Oct 2017 Policy Cabinet Oct 2017
10.	Develop a separate Manager Guide and an Employee Guide	In progress Dec 2017
11.	APSE review of policy, data and focus groups with managers	In progress Oct 2017

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Cardiff Council

Sickness Absence Analysis: Final Report

This report has been
prepared by Andy Mudd
in October 2017

Final version





APSE (Association for Public Service Excellence) is a not for profit local government body working with over 300 councils throughout the UK. Promoting excellence in public services, APSE is the foremost specialist in local authority front line services, hosting a network for front line service providers in areas such as waste and refuse collection, parks and environmental services, leisure, school meals, cleaning, housing and building maintenance.

APSE provides services specifically designed for local authorities, such as benchmarking, consultancy, seminars, research, briefings and training. Through its consultancy arm APSE delivers expert assistance to councils with the overt aim of driving service improvement and value for money through service review and redesign. APSE delivers in excess of 100 projects a year and clients benefit from the consultancy's not for profit ethical approach to consultancy services.

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1. Introduction

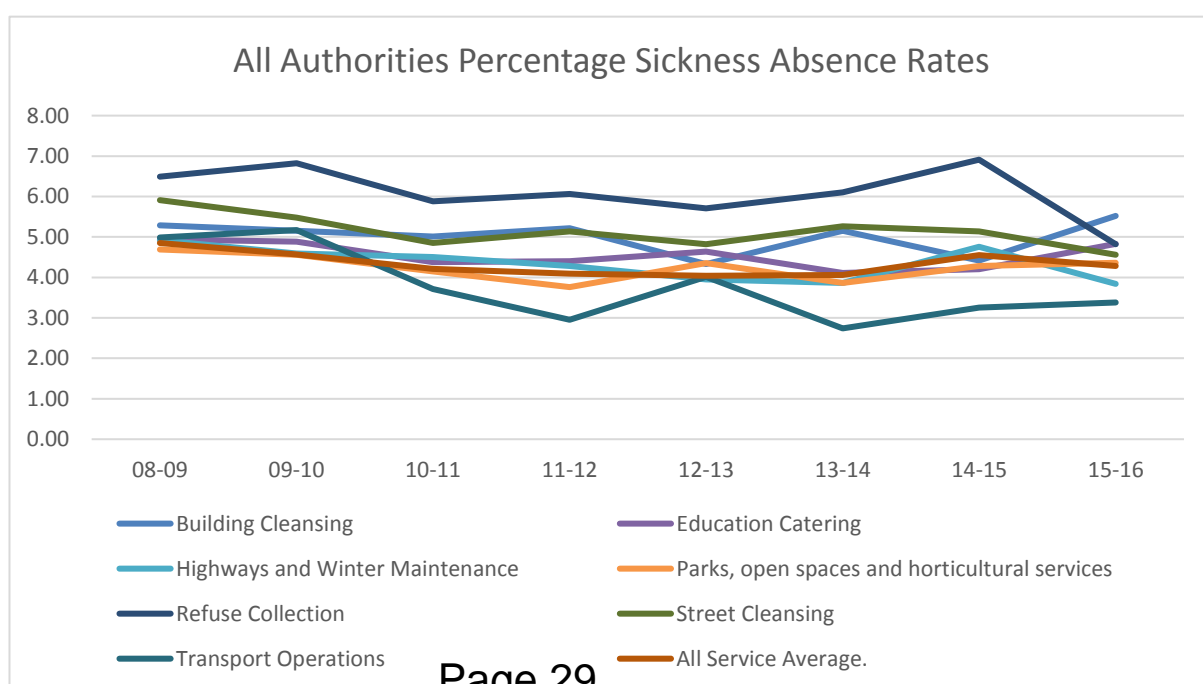
- 1.1 Cardiff Council has engaged APSE Solutions to assist with establishing the reasons for a recent increase in sickness absence amongst the workforce of the council and to identify options for tackling the problem. Given that sickness absence cost the authority over £11m in 2016/17, there is a strong imperative, at a time of budgetary pressure, to keep sickness levels to a minimum.
- 1.2 Policy and practice was revised in 2015 following a report by the Auditor General for Wales in 2013 and a policy review by APSE Solutions in 2014. Both of these reports identified implementation of policy as a bigger issue than the absence management policy itself. The report of the Auditor General found that, 'corporate policies and procedures for the management of sickness absence have improved but are not being applied consistently at directorate level'. The APSE review found that the, 'revised Attendance and Wellbeing policy is in line with good practice and principles' and advised a 'focus on management capability and compliance'.
- 1.3 Along with the revised policy the Council published an Attendance and Wellbeing toolkit to help managers to take a more robust approach to the management of sickness absence. As a result overall absence rates fell sharply in the 2015/16 year, although it is notable that the fall was due almost entirely to a reduction in long term absence. Short term absence rates had already fallen significantly over the previous two years and do not appear to have been impacted further by the initiative.
- 1.4 The revised policy implemented changes to the treatment of trigger elements of the process. Managers are informed automatically by the HR management system of the requirement to carry out and record a return to work interview, or to take other action, depending on what stage is applicable, at the close of a sickness absence. If this doesn't happen the system sends a reminder after 10 days stating that if there is no action after a further 10 days the, 'Stage will be disregarded and DigiGov will be reset to the previous stage'. It also states that the line manager of the manager will be informed. The escalation process is presumably intended to reinforce the importance of early intervention and to ensure that there are consequences for managers that do not apply the procedures properly.
- 1.5 At its lowest point in 2015/16 overall absence was 75% of its 2012/13 level and was below average for Wales. This represented a significant achievement given that the 2012/13 figures were well above average. The increase in absence rates in 2016/17 has left them once again above the Welsh average, as well as above the CIPD average for the public sector, albeit still well below the 2012/13 baseline.

2. Overview

- 2.1 Although there was a small increase in short term absence, the increase in the overall rates in 2016/17 is predominately accounted for by an increase in long term sickness. The data indicate that some occupational groups in the Council are disproportionately likely to take time off sick. Although absence by teachers has the biggest economic impact and represents the highest number of days lost, this is because they make up the largest

proportion of the workforce. It is in fact grade 1, grade 4 and grade 5 staff that are disproportionately likely to take time off sick. Grade 1 staff make up 3% of the workforce but take 6% of the total days lost to sickness. Grade 4 staff at 17% of the workforce take 21% of total sick days and grade 5 make up 14% of the workforce but take 17% of the sick days. Teachers, who make up 27% of the workforce, are actually the least likely group to take time off sick taking 18% of the total days lost.

- 2.2 This analysis suggests that focussing on the grade 4 and 5 workers, who between them make up 31% of the workforce but account for 38% of the days lost to sickness, would be a sensible starting point for drilling down into sickness absence in Cardiff. The occupational groups represented by these grades include refuse collectors, care workers, teaching assistants, school catering staff and enforcement officers. Grade one staff only make up 3% of the workforce and whilst their absences make up 6% of the total, the cost attributed to it is far less significant than that of absences amongst grade four and five workers (£399,000 compared to £3.8m). The most significant grade one occupational group is cleaners.
- 2.3 It is essential to establish why absence amongst these groups is disproportionately high and in particular, whether it is high by comparison with people carrying out similar work elsewhere. APSE Performance Networks benchmarking data shows conclusively that manual and front line staff are more likely to take time off sick than non-manual and back office workers. To this extent then the nature of the work involved is a factor driving disproportionately high levels of absence amongst these sections of the work force.
- 2.4 The graph below plots aggregated data submitted to APSE Performance Networks by authorities throughout the UK for selected front line service areas. It shows that whilst overall levels of absence have fallen over the period since the financial crash (and the subsequent onset of austerity), this has not been in linear fashion and is not consistent across service areas. It is particularly relevant that the very significant early reductions in the budgets of English authorities that took place in 2010/11 were followed by a fall in absence rates, indicating that the more recent reductions in Welsh council budgets should not be expected to fuel an automatic increase in absence.



3. Analysis of Cardiff data

- 3.1 There are a number of patterns discernible in the Cardiff data that can provide a starting point for further analysis and drilling down. These are discussed below.
- 3.2 Long term absence has increased much more sharply than short term absence and accounts for most of the recent increase. It is also apparent that the fall in absence that took place following the implementation of the policy was also accounted for by long term absence.
- 3.3 Absence rates are highest amongst some grades of staff, with grades one, four and five being disproportionately likely to be absent. Grade one includes mostly cleaners whilst grades four and five include many of the Council's front line staff. Teaching assistants make up the largest occupational group.
- 3.4 Stress and muscular-skeletal issues are by far and away the biggest causes of long term absence. Manual workers can be assumed to be prone to muscular-skeletal conditions. Stress can affect anybody within the workforce but it is not unreasonable to expect non-work related stress in particular to impact on some groups more than others. Factors that might be expected to contribute would be low pay, shift working, part time work with multiple jobs and lone working.
- 3.5 Absence rates are notably high amongst some older, but not the oldest, age groups. Those in their fifties and sixties are the only members of the workforce that are disproportionately likely to be absent due to sickness.
- 3.6 A very small proportion of the workforce are subject to the formal process – less than 600 cases got to stage 1 of the absence management procedure. Dismissals stemming from long term absence have fallen by about 23% since 2014/15 but in any event are only a statistically insignificant proportion of the workforce.
- 3.7 Non-schools Education, Social Care and Commercial Services are the council departments that can be identified as making the most significant contribution to overall and long term absence, proportionate to the number of staff they employ. Grade one, four and five staff employed in these departments include: refuse collectors, drivers and other waste operatives (Commercial Services); cleaners and school kitchen staff (Non Education Catering) and home care providers (Social Care).
- 3.8 Analysis at the work group level, comparing the comparative level of absence recorded for different job titles, suggests that the following have a level of absence that is disproportionate to their numbers within the workforce.
 - Refuse collectors
 - Teaching Assistants
 - Higher Teaching Assistants
 - Home carers

- MRF Processors

- 3.9 It is notable that this list does not include cleaners or school kitchen staff who actually record overall levels of absence proportionate to their numbers in the work force. This is surprising for two reasons. Firstly, non schools education, as a department, experiences a higher level of absence than the number of FTE employees would indicate and secondly, because grade one workers who, as discussed above, are also disproportionately likely to be sick, appear to be mostly cleaners. Further drilling down is required to establish why this is the case.
- 3.10 There is no evidence to indicate that the work groups mentioned are more likely than others to claim sickness when they are actually fit to come to work. The nature of some jobs makes genuine sickness more likely and in some cases it is more difficult for a person who is sick to nevertheless attend work. The workshops with service managers explored some of these factors as is discussed elsewhere in the report.
- 3.11 Refuse collectors are the group that is most likely to be absent sick. This is however in line with the experience of other local authorities and there is no evidence that refuse collectors in Cardiff are more likely than refuse collectors elsewhere to be absent. The work is of a heavy manual nature, it is carried on outdoors and is difficult to perform if not fully fit.
- 3.12 Although they only contribute 1% to the total number of days lost to sickness, home carers are the group that is second most likely to take time off sick. As with the refuse collectors this is something that might be expected given the nature of the role.
- 3.13 Teaching assistants are the next most likely group to take time off sick. This is more difficult to understand, particularly in light of teachers being the group least likely to be absent due to sickness. Higher teaching assistants also record a disproportionately high level of sickness absence.
- 3.14 A further set of data that can be used to try and understand why some members of the workforce are more likely to be absent is the rate at which sickness cases are 'discounted'. Discounting is when an absence case does not proceed to stage one or to a later stage when it might otherwise be expected to do so. The policy states that there are certain circumstances when this should happen. These are when an absence is maternity related or when the Equality Act 2010 applies. In fact, the data indicate that far more cases are discounted than would be the case if the policy was being strictly adhered to. This can be seen from the table below:

Reason for discounting	Number
Stage Discount	725
Policy Related (pregnancy)	329

Stage in Progress	171
Manager Request	167
Appeal in Progress	4
Total	1396

3.15 Stage discount is where the absence management system automatically discounts an absence back to the previous stage (or completely if at stage one). This happens where a manager fails to carry out a required action in the required timeframe. It is the most significant reason for discounting, suggesting that proportionately high rates of discounting can be reasonably associated with process failure. Manager request includes Equality Act cases but may also include other reasons, even though this is not supposed to be the case under the policy.

3.16 The table below indicates discounting levels for those job titles that contribute 5% or more to the total amount of sick days recorded. Refuse collectors and home carers are also included.

	Proportion of total workforce	Proportion of total sick days	Discount rate
Teachers	27%	18%	13%
Teaching assistants	11.47%	13%	12%
Midday supervisors	4.75%	5%	11%
Senior teaching assistant	5.2%	5%	11%
Cleaners	5.89%	5%	6%
Refuse collectors	0.66%	1%	10%
Home carers	0.96%	1%	11%

3.17 The highest discount rates, where there are a significant number of absences, i.e. 5% or more of total sickness, are found for teachers at 13%, teaching assistants at 12%, and mid-

day supervisors at 11%. These rates provide a loose indication of where there may be issues in relation to management of the process. However, not all discounted cases imply failure or an absence of proactivity on the part of managers and can, in fact, imply the opposite. This indicator cannot therefore be used on its own. The case of teachers illustrates the point where there is a high discount rate but a proportionately low absence rate. Schools appear to be good at managing absence in relation to teachers – although apparently not so good in relation to teaching assistants where the proportion of sick days is higher than the proportion of teaching assistants in the workforce.

- 3.18 Smaller groups of workers that do not make a significant contribution to the overall total of sick days, are more likely to have high discount rates. 20% of cases were discounted for a range of staff in smaller work groups. In each case this appears to have been only one case out of a very small total number. This might indicate a need for a higher level of HR support/direction to the managers concerned with managing smaller groups of staff.
- 3.19 It is relevant that discounting levels are comparatively high for home carers (11%) and refuse collectors (10%) but low for Cleaners (6%).

4. Initial questions: Management and process

- 4.1 The data indicate a number of possible issues and give rise to questions around management and process as set out below:
- Are managers using the process as frequently as they should be or are cases being discounted without any meaningful (effective) management input?
 - Do managers see the process through?
 - Are the consequences for managers of not using or following the process properly meaningful?
 - What are the incentives for managers to use or follow the process properly?
 - What (human) support do operational managers/supervisors receive from HR?
 - Are return to work interviews always carried out?
 - Is the form completed and filed appropriately?
 - Are the records up to date and accessible?
 - Are some workers exposed to increased risk related to cuts or changes to the way they work?
 - Is support/referral occurring early enough or often enough?
- 4.2 These questions were put to separate focus groups of trade union representatives, HR officers and service managers.
- 4.3 Some common themes were:

- That the sickness absence policy itself is on the whole fit for purpose
- That Occupational Health (O/H) referrals were clogged up with automatic referrals where little value is likely to flow from O/H involvement – e.g. a case where a manual worker had a broken leg. This is creating a backlog of six to eight weeks which in turn delays the implementation of workplace adjustments and in some cases, a return to work.
- There was some discussion about whether the short term absence procedures were leading to some people, presumably with the cooperation with their GPs, taking long term absence rather than risk a series of short term absences leading to disciplinary action.
- There is a need for a multi-disciplinary case management type approach focussed less on the process and more on the individual. It is recognised that HR have a case work team which is well regarded but pointed out that it is very unusual for all parties to meet together to work out strategy in relation to an individual member of staff.
- That whilst policy and process are comprehensive and on the whole effective, many people agreed that its ubiquity can be problematic for a multifunctional organisation. Standardised processes and procedures that may be effective for some members of the workforce were felt to be less effective for others.
- There is a lack of flexibility for front line staff by comparison with management colleagues. Managers of front line workers indicated that they would be reluctant to grant short notice leave – the so called duvet day - and there is little scope for home working amongst these sections of the workforce. It was pointed out by a number of people that managers were more likely to be able to work through a period of sickness by working from home or by taking a duvet day than were front line workers.
- There is a need to look more closely at how policy and process is managed and how it impacts on schools. There was a strong perception that schools operate outside of the system and all groups pointed out that the sanction for failure to take a required action, i.e. an email to the manager's line manager, would have little impact on head teachers. The data on discounting and the high level of absences recorded by teaching assistants tends to support this view.
- There was a widely held, but mistaken, belief that the measure of long term absence had changed from four weeks to two weeks. This may be because the procedure for managing long term absence requires managers to visit or otherwise meet with an absent staff member after two weeks of absence. This may be intended as a preventative measure but this is not entirely clear from the wording of the policy and has created a degree of confusion.
- Most participants agreed that whilst consistency was important, there was also a need for processes to be tailored to the needs of different elements of a diverse workforce. Managers need to be able to use the system as a tool rather than it determining actions for them without regard to individual or work group circumstances.

- All groups spoke in varying ways about what might be termed perverse incentives or unintended consequences in or flowing from the absence management system. This included a potential for managers to avoid having to operate a complicated procedure by not recording absences in the first place and a tendency for long term absence to last for just under six months, this being the point at which pay is reduced.

Trade Unions

- 4.4 There was general agreement amongst Trade Union representatives that the policy, (as distinct from its application), was generally fit for purpose. They raised some specific points about the automatic management system, including that the system uses calendar days rather than working days in relation to trigger points which, it was argued, discriminates against part time workers.
- 4.5 The group was very clear in its view that the policy does not allow discounting other than in relation to maternity and Equality Act cases. They were adamant that cases involving manual workers were rarely, if ever discounted for any other reasons.
- 4.6 The group were clear that the absence management system must be clear and consistently applied. They did not however rule out the potential for absence management to be tailored to the needs of different members of the workforce to recognise differences in the ways that people work. They pointed out that managerial staff were better able to manage their sicknesses by working from home or taking short notice leave to avoid triggering action points than were front line staff who did not have those options.
- 4.7 One member of the group was strongly of the view that absence amongst older women is closely related to them undergoing the menopause and that the policy should recognise this. This led to a wider discussion around gender which identified a wider range of reasons why women may be more likely to be absent than men. These included the fact that women are disproportionately likely to have caring responsibilities.
- 7.1 All groups were asked whether they considered absence management policy and process to be disciplinary or supportive in nature. The trade unions, each to a varying degree, perceive absence management in a generally negative light. This was exemplified at a meeting of the Cardiff Council Works Council where the initial findings of this review were reported. The trade union side expressed a view that referrals to occupational health following a return to work should be disallowed, arguing that the view of the GP that a person is fit for work should never be questioned or as they put it, overridden.
- 7.2 No evidence has been seen to support the proposition that occupational health referrals, (or any other element of the absence management process) are routinely used to the detriment of individual members of the workforce. It is nonetheless of concern that key partners in the overall management of health and safety perceive this to be the case.

HR Officer

- 4.8 HR staff were generally of the view that the sickness absence policy is fit for purpose and effective. They were however critical of some service managers who they perceived to be risk averse and inconsistent in their application of the policy. That said, the group also

recognised a need for the policy to be streamlined and felt it was too prescriptive in places.

- 4.9 It was postulated that the managers of some service areas were inflexible in relation to allowing short notice leave which was likely to lead to an increase in staff taking short term sickness leave.
- 4.10 In relation to specific groups within the workforce there was a clear recognition that the nature of some work is such as to lead to an increased likelihood of sickness and that early intervention to ensure safe working practice and to assist with work place and wider issues would be beneficial. The sort of factors that will increase the likelihood of workers taking sick leave include:
- That work is of a heavy manual nature
 - That work is inherently stressful
 - That work is mostly or entirely front line and cannot be carried out from home
 - That work is carried out in (particularly split) shifts
 - That work is part time and workers are likely to have multiple such jobs
 - That workers work alone with little peer or supervisor contact
 - That work is low paid – a number of people pointed out that the council provides good terms and conditions by comparison with private organisations
- 4.11 All groups were asked whether they considered absence management policy and process to be disciplinary or supportive in nature. The HR group were of the view that it is essentially supportive.

Service managers

- 4.12 Some managers expressed frustration at the process preventing managers from dealing with absence patterns which they believe are indicative of somebody 'playing the system'. This would include people timing absences to avoid being given warnings.
- 4.13 None of the managers who attended focus groups gave any indication that they did not treat sickness absence as a priority. Some did complain that the process can be time consuming and at times 'clunky'. All agreed that it would be helpful if the system facilitated a multi-disciplinary case management approach for some individuals.
- 4.14 The managers of the cleaning workforce were particularly keen to emphasise that they were very proactive in their absence management practice and were surprised to learn that a significant number of sickness cases are discounted for reason other than maternity or the Equality Act. The low level of discounting of cases involving cleaners suggests that there is indeed strict adherence to the policy in this department.

- 4.15 Managers did not agree that they were risk averse although they did indicate that at times they do not take action they believe is warranted because of a belief that the organisation will not support it. Some managers were more confident about their ability to use their own judgements than others saying that they saw HR as an advisory service and always took the lead in decision making. Others felt they could not take action that was not in line with the advice of HR and/or Occupational Health.
- 4.16 A number of managers stated that Occupational Health are prone to taking an uncritical approach to the assessment of a sick employee's condition. It was said that they take what the employee says at face value rather than challenging them.
- 4.17 Managers of front line staff accept that they are inflexible in relation to short notice leave. They pointed out however that this is because the nature of many of the posts concerned means that absences have to be covered through agency staff as changes to work rosters cannot be made at short notice.
- 4.18 It was suggested that some absences were related to the misuse of alcohol and drugs and that this posed issues in relation to the support needs of those affected and has wider health and safety implications. The Council recently agreed an updated drugs and alcohol policy framework which will hopefully assist with this.
- 4.19 A number of councils have implemented revised drug and alcohol policies to allow for testing as a condition of an offer of employment, e.g. West Lindsey DC. Some others have introduced random testing for employees in safety critical roles. This includes Birmingham, Calderdale and Barnsley. In the latter case members were advised in a cabinet report that the revised policy 'had the broad support of trade unions'. Cardiff has not gone down this route.
- 4.20 All groups were asked whether they considered absence management policy and process to be disciplinary or supportive in nature. The managers group were of the view that it can be and is a combination of both.

Head-teachers

- 4.21 The head-teacher group spoke well of the support they receive from HR but in common with the council managers, were very critical of the occupational health service. They were broadly supportive of policy but felt that it could be more robust. By this they meant that it could be more clearly focussed on the goal of securing a return to work and pointing out the consequences of absence. To this end they suggested that the language used in automatically generated letters should be reviewed. For example a warning that 'further absence may lead to....' Could be replaced with 'further absence is likely to lead to....'.
- 4.22 With regard to the data analysis the heads were of the view that it is unhelpful to treat schools as homogenous and that levels and patterns of absence vary from school to school. There was a strongly expressed view that a small number of schools had high absence which skewed the overall figures. None of those present thought that the high level of absence amongst teaching assistants reflected management practice. They thought that the stark contrast between teacher absence levels and that of teaching

assistants might be explained by reference to differences between the two roles as follows:

- 4.23 The teaching assistant role has traditionally been part time and comparatively low paid. Whilst the group thought that the 'mums helping out in the classroom' image of a teaching assistant was increasingly anachronistic, a number of people thought that longer serving members of staff may have come into the service on this basis and had a lower level of professional attachment to the job than teachers and more recently recruited teaching assistants. They suggested that an analysis of absence levels compared to length of service would be useful.
- 4.24 The head-teachers echoed some of the points that the trade union group made around low paid, part time, predominantly female members of the workforce and the pressures they can face in relation to out of work responsibilities. Moreover, whilst the role has been professionalised in recent years, it is still relatively low paid, often part time and unlike teachers, teaching assistants are employed on term time only contracts.
- 4.25 The significance of non-work related stress as a reason for absence tends to support the perception that teaching assistants are an element of the workforce that would benefit from a proactive approach to supporting members of the workforce to cope with both work and non-work related issues.
- 4.26 The group felt that the interests of fairness were not always met by ubiquity. Corporate systems bring benefits but should always be tailorable to the particular circumstances of different work places.
- 4.27 The schools operating environment is very different from mainstream council services and there are legitimate questions around the applicability of a system, designed for the council, to schools. One point originally raised by the trade union and HR groups is that the system is not as effective in prompting action and escalation in relation to school based staff as it is for council staff. Head-teachers do not have line managers as such and there is little point in sending emails to Chairs of Governors in relation to individual cases. The head-teachers themselves said that quarterly reports to governors, pointing out the level and cost of absences at a school level, would be more effective in focussing them on the need to proactively manage attendance.

5. Process workshop

- 5.1 A further workshop was held to drill down further into process and to establish how the different groups of people involved with them add value to sickness absence management. The analysis took the form of a SIPOC (suppliers, inputs, outputs and customers) which attempted to identify and value the input to the process of different groups. The analysis is intended to reflect the perception of the managers and may differ from how the process is intended to operate.
- 5.2 The workshop listed the suppliers as follows:
- The staff member who is sick

- Colleagues of the staff member who are impacted by their absence
 - The line or designated manager of the staff member
 - More senior operational managers
 - Trade unions
 - GPs and other external health professionals
 - HR
 - Occupational health
 - Top management
- 5.3 Within the time available it was not possible to map the contribution to the process of all of these groups. The group was asked to focus on the absent staff member, the designated manager, HR and Occupational Health. The results are appended and can be summarised as follows.
- 5.4 The process begins with the absence of a staff member. They are required to make a telephone call personally to a designated manager. Clearly there will be a degree of non-compliance with this requirement in which case the manager is required to initiate direct contact themselves.
- 5.5 Once contact is established the manager is required to gather certain information around the nature of the sickness, the likely length of absence and details of work duties to be covered. Information is recorded on the Digigov system.
- 5.6 If the staff member does not return after seven days the system will prompt the manager to arrange a contact visit. This is likely to take place one week later. At the meeting the staff member must be informed of their obligations and the consequences that can flow from excessive levels of absence. They are also provided with advice and guidance about support that is available to them.
- 5.7 Absence of less than 4 weeks duration is categorised as short term and will only result in further action – other than a routine return to work interview, if it triggers action in accordance with stages set out in the policy or there are ongoing concerns over the relationship between an employee's health and their work duties. Action stages were not process mapped. Ongoing concerns could lead to a referral to occupational health.
- 5.8 Absent staff are referred to occupational health via the Digigov system after 4 weeks of absence. In theory managers can ignore a prompt to refer but none of those present said that they would and did not feel that the policy explicitly identified them as having a positive duty to make a considered judgement about the value that might be added by the involvement of occupational health. Given that they all had anecdotal evidence of cases where no or little value had been added, there seems to be an opportunity to introduce a more proactive approach to the referral of cases to the occupational health service. Aside from ensuring that only cases that would benefit from occupational health

involvement are referred this would also go some way to reducing the imbalance between the number of referrals and the capacity of the service to deal with them.

- 5.9 This is an important point in the process as in many cases it is the only opportunity for the manager to provide occupational health with detailed information about the nature of the job of the staff member. The manager of the occupational health service has stated that the quality of referrals is poor and that managers seem to be unaware that they are able to provide and ask for specific information at this stage in the process.
- 5.10 The group stated that referrals to occupational health can be self-referrals from staff members themselves. They were not entirely clear what process they need to follow to do this but the group were of the view that neither they (service managers) nor HR were in a position to act as gatekeepers in relation to self-referrals. This apparent inability for the authority to control demand emanating from self-referrals for the service may be a contributory factor to its inability to cope with the numbers of referrals it receives. However, it has subsequently been established that the process actually requires self-referrals to be redirected to managers for a referral through the normal process and are very low in numbers indicating that there might be a communication or training issue.
- 5.11 The group reported that, following referral, occupational health arrange a consultation with the staff member concerned from which a report is produced. Before the report is uploaded to Digigov it is agreed with the member of staff. Where agreement is not forthcoming the report does not become available to the manager of the person concerned. This is clearly a point in the process that is likely to create delay and where managers can be denied important information needed to make sound judgements.
- 5.12 This understanding of the process is at odds with a recently circulated process map created by the service itself. The diagram, which is attached as an appendix, clearly shows that reports that are not agreed are sent to managers after five days, regardless of whether the content has been agreed.
- 5.13 There may be some confusion about how the process is intended to work which should be addressed. It does however allow for a member of staff to refuse permission at the outset for the report to be released. Where this happens the medical report is prepared and filed but not forwarded to management who are provided instead with a 'standard report' which presumably records the fact that a consultation has taken place but that permission to release it has not been provided.
- 5.14 On the face of it preparing a report that is not to be released seems to be a waste of time and effort which contributes little to the aim of facilitating a return to work. Further exploration has established that such a report may be used at a later stage, e.g. at a tribunal. Nonetheless it would be better to try and avoid a situation where the report does not add value at a much earlier stage.
- 5.15 It has been pointed out that the General Medical Council guidance on confidentiality indicates that the employee will be able to access their medical reports and will need to understand the purpose of the report. Given that this is a legal requirement it must be adhered to in policy and practice but does not seem to preclude a presumption that the report will be provided to managers whether or not consent is forthcoming, albeit

possibly in a revised or redacted form to maintain medical confidentiality where required. Consideration could be given to whether it is possible to provide a report to a manager focussed on the capacity of an employee to carry out their duties without any reference to the medical condition itself.

- 5.16 Further delays to the resolution of a given long term absence can also flow from occupational health officers arranging further or periodic review meetings with the member of staff. The impact of this is that assessments in these cases are always essentially interim, making it less likely that a final conclusion will be reached within a reasonable time frame. In the view of the managers this is one reason why long term absences often extend to just before the 6 month stage where the next decisive point in the process takes place, i.e. a reduction in pay. The occupational health service has pointed out that review appointments are only arranged where a diagnosis is not confirmed or where the results of medical investigations are awaited and that it is therefore NHS timeframes that create the problem.
- 5.17 Whilst limited in scope due to time constraints, this analysis indicates that some changes of emphasis in the process to reinforce the need for managers to make considered judgements could have a positive impact on the management of long term absence. In particular, automatic referral to occupational health, without any consideration of whether it will add value, should be positively discouraged. This could be achieved by introducing a requirement for a) a management decision to be made and b) the reasons for it to be recorded. Allowing an automatic referral would then constitute non-compliance. This would reduce the number of referrals to the occupational health service thus relieving the current backlog and also ensure that value is added in all cases where a referral does take place.
- 5.18 There is also scope for clarifying and emphasising the primary role of occupational health which is to prevent work related ill health. Early referral where there is good reason to believe that this will add value should be encouraged; referral at all stages should be avoided where there is no identifiable benefit. In this way the service can be focussed on health surveillance and avoid purely process driven involvement in sickness absence management. In turn this will emphasise the need for informed management judgement to be at the nub of absence management policy and practice.

6. Examples of initiatives from other UK local authorities

- 6.1 The issues faced by Cardiff in trying to minimise absence levels are the same as those facing every other local authority in the UK. Many have introduced initiatives that go to some of the points brought out in this report. The need for early intervention and support to staff experiencing the two major causes of absence – stress and muscular-skeletal issues are stressed by South Lanarkshire Council for example. Wigan and Stockton Councils are both focussed on recognising and rewarding the positive contribution made by committed members of the workforce.
- 6.2 Several years ago South Lanarkshire adopted a 'Holistic Approach to Employee Assistance', underpinned by a recognition that 'one size doesn't fit all' and a need for 'a culture of early intervention'. Managers are trained and encouraged to take a pro-active approach to support staff to remain at work on a case by case approach. A range of

interventions such as physiotherapy, counselling and financial advice are available at as early a stage as possible through an employee support team. Physiotherapy appointments are made available within five days and counselling within two weeks. Other elements of the Holistic Employee Assistance Programme include Occupational Health support, discounted complementary therapies, workplace mediation and cognitive behavioural therapy.

- 6.3 Wigan gained a CIPD Highly Commended award in 2016 for their Be Wigan initiative. The initiative is aimed at building a happy, engaged workforce through a number of reward and recognition programmes, including an attendance and loyalty reward scheme. The initiative includes high profile involvement from the council's Chief Executive who fronts an informal agreement with members of the workforce setting out what they can expect from the council alongside the council's expectations of them.
- 6.4 Stockton, inspired by the maxim often attributed to Peter Drucker that, 'Culture eats strategy for breakfast', has also focussed on the culture of the organisation. The workstream entitled, Shaping a Brighter Future Programme, concentrates on creating a workforce culture that helps the council, 'to attract talented employees who are the right fit for our organisation', 'drives employee engagement and staff retention', 'supports happiness and satisfaction at work' and 'leads to strong performance'.
- 6.5 These initiatives all operate on the principle that prevention is better than cure. Dealing with the reasons for absence before they become problematic is expected to have a positive impact on sickness levels and contribute to improved overall performance.
- 6.6 It should be stressed that Cardiff Council is itself highly regarded for its people management practice and has been short listed for the 2017 CIPD Best Employee Engagement Initiative for the Employee Voice project. It is progressing to Silver Level in the Corporate Health Standard - a Welsh Government initiative aimed at supporting employee health and wellbeing. The Council also has a partnership with the Local Health Board to fast track Mental Health referrals which includes CBT as well as EAP service. The challenge, as for all authorities, is to make these initiatives accessible and customised to ensure that the positive engagement culture reaches all sections of the workforce.

7. Conclusions and recommendations

- 7.3 The data indicate that the nature of sickness absence issues and therefore, the solution to them, is different for different service areas. All three of the focus groups recognised this.
- 7.4 Absence amongst teachers is particularly significant because of the high proportion of this group within the workforce. Notwithstanding the (unsubstantiated) suggestion made by some that teacher absence may be under-reported, they are statistically the group least likely to take time off sick, indicating that an initiative focussed on them in particular would be unlikely to succeed. Nonetheless, even a 1% reduction in absence levels would be a significant benefit to the overall absence level. The main point arising from the head-teacher focus group in relation to teacher absence was a need to tighten up language used in policy statements and standard letters. The example discussed was

a letter which uses the term 'may lead to...' which would be stronger if it said 'is likely to lead to...'.

- 7.5 In so far as the rest of the school workforce is concerned, teaching assistants are significantly more likely to be absent than teachers. This may reflect school management priorities or may be related to the nature of the job and needs further exploration. Some people were of the view that teachers are more vocationally attached to their jobs, feel a high degree of responsibility in relation to not letting their pupils down and also have a great deal more to lose than teaching assistants. This was confirmed to an extent by the head-teachers who also pointed out that the nature of the teaching assistant role has changed over recent years to become more professional and for many a step towards becoming a teacher. It is not known whether this is reflected in the data and further drilling down should take place to test this hypothesis.
- 7.6 A number of participants in the focus groups expressed doubts as to the efficacy of the policy framework in relation to schools, suggesting that some head-teachers may be acting outside the corporate absence management system. The data appear to support this view and some of the head-teachers confirmed that they sometimes made a positive decision to not follow prescribed process. It should also be pointed out that teacher absence is managed differently in some important respects than that of the council staff to reflect differences in national terms and conditions of service.
- 7.7 Non-school education staff are the departmental workforce that is most likely to take long term sick. This is not however reflected in the overall absence data for the school catering or cleaning workforce, indicating a disproportionate propensity for these groups to take long term, rather than short term, sick leave. The cleaning managers in particular report a very high level of compliance with corporate procedures and this is reflected in the discount data and the comparatively low level of short term absence. It is possible that the disproportionately high level of long term absence also reflects this, supporting the view of a number of people that inflexible management of short term absence is fuelling the increase in long term absence.
- 7.8 The focus groups threw up some common themes but also some contradictory views. HR officers were of the view that managers are risk averse and inconsistent. Managers felt constrained by process and claimed at times to be unsupported when they thought disciplinary action was warranted. They were of the view that it is HR and the council's senior management that are risk averse. Both groups indicated that a closer, more partnership oriented, approach would be helpful.
- 7.9 Trade union input to the review has been particularly useful in establishing how policy and processes are perceived by the council workforce. The insight of representatives into the real life experiences of staff members helps to contextualise the sickness absence data and in particular to understand why it is that some occupational groups are inherently more prone to sickness absence than others. Targeting supportive, early intervention initiatives at these groups can have a positive impact on their well-being and help drive down the level of absence.
- 7.10 The negative perception expressed by some trade union representatives and in particular the view that managers are prone to using the absence management system to the

detriment of individual members of the workforce, is not necessarily supported by evidence. Nonetheless, it indicates a pressing need to emphasise the positive part that the effective management of sickness absence plays in meeting wider obligations with respect to health and safety at work.

- 7.11 The suggestion, referred to earlier in this report, that managers should be disallowed from making referrals to occupational health following a return to work on the basis of a GP opinion that a person is fit, illustrates how what should be a supportive mechanism could be undermined if these negative perceptions are not allayed.
- 7.12 Employers are in fact under a positive duty to actively consider whether a person's work is a contributory factor to ill health and must determine whether changes are required. They are also, unlike GPs, required to consider the wider impact on the health and safety of others where the performance of a member of staff is affected by their health. A referral to occupational health can be an important aspect of fulfilling these duties. The Management of Health and Safety at Work Regulations (MHSWR) 1999 (NI MHSWR 2000) refer to this, as guidance from the Health and Safety Executive makes clear¹:

These regulations set out broad general duties that apply to almost all kinds of work. They place a number of requirements on employers that include:

- making a suitable and sufficient assessment of the risks to the health and safety of employees in the workplace that could harm the health and safety of their employees and others who may be affected by the work activities;
- introducing preventive and protective measures to control risks identified by the risk assessment;
- reviewing and if necessary modifying that assessment and the preventive and protective measures if circumstances change, eg if work could affect the health of an employee returning following sick leave or an employee's health affects the way they perform tasks at work;
- providing employees with a level of health surveillance (ie watching over their health by various methods) that is appropriate to any risks to their health and safety that are identified by the risk assessment.

- 7.13 The issue of whether and to what extent managers misuse occupational health referrals should not be allowed to fetter the proper use of this, or any other legitimate management tool. This is not to diminish the importance of tackling poor management practice, indeed it is vital to the integrity of the process that any misuse or abuse of process is identified and dealt with through the appropriate procedures.

¹ Managing sickness absence and return to work: An employers' and managers' guide, Health and Safety Executive <http://www.hse.gov.uk/publications/nced/msg249.pdf>

- 7.14 All focus group participants agreed that there was a backlog in referrals to occupational health and that this was a contributory factor in the increased level of long term absence. There may be a case for increasing occupational health resources but a number of people felt that the automatic referral of cases, regardless of whether occupational health involvement was likely to be of benefit, meant that resources were unnecessarily stretched. This points to a need for a more targeted approach, driven by the judgement of managers rather than automatic referral triggers.
- 7.15 A limited process mapping exercise indicates that some specific changes in emphasis and process are required at the stage of referral to occupational health. It must however be pointed out that feedback and a meeting with the relatively newly appointed occupational health manager indicate that many of the issues raised through the workshops are being actively addressed. Changes to the way the service works have already been implemented to counter the perception that it adds little value and there is a renewed emphasis on the pro-active, preventative side of occupational health activity.
- 7.16 The groups all identified negative, unintended consequences of the policy and procedure. It might be considered inevitable that any attempt to systemise absence management will lead to some instances of 'playing the system' and that trigger points will become ceilings in some instances, e.g. long term absence lasting just under six months or short term absence patterns just avoiding trigger points. It is not possible to establish at this stage how significant these are and therefore not possible to come to a definitive view as to the balance between the cost of these and the benefits of operating a systemised, corporate approach. It does however seem that there is some scope for adjusting the balance between adherence to process and the application of informed managerial judgement to ensure that action is not solely driven by the absence management system.
- 7.17 The analysis suggests the following recommendations:
1. Target and tailor HR support to those managers who most need it – the data and feedback from the focus groups indicate that this could be those managing smaller workforce groups who rarely use the system and find it onerous.
 2. Ensure that operational managers understand and are able to follow policy and process consistently and that this is reflected in the performance management process. This will include clarifying the difference between long term and short term absence and ensuring that managers are aware of the advice and support that is available to assist them to make informed decisions.
 3. Identify work groups where early intervention and support is most likely to be effective and tailor this to suit specific needs, e.g. early referral to physiotherapy for heavy manual staff and easy access to advice and support for low paid/part time/shift working staff.
 4. Further explore the possible relationship between the (over) compliance with process driven short term absence management systems and the increase in long term absence. If there are cases where workers, in conjunction with their doctors, are in effect, choosing long term absence as the least risky option, there may be a case for greater discretion in the way the system operates to ensure that there are no perverse incentives in individual

cases. There may also be potential for strategic level contact with local GPs to ensure awareness of the council's willingness to make adjustments to allow them to choose the 'may be fit' for work option rather than signing people off.

5. Ensure that ubiquity does not create anomalous application of policy and process. Schools in particular would benefit from a tailored approach that emphasises the role of informed, reasonable decision making in the management of both short and long term absence. A positive, evidenced decision to discount an absence for example should not be treated as non-compliant and at certain stages in the process managers should be required to exercise judgement. On the other hand, the reasons for decisions must be recorded and managers held to account where their judgement is flawed or otherwise lacking.
6. The need for supportive management practice should be emphasised and blind process compliance discouraged. Managers should be encouraged to demonstrate in their practice that effective absence management is an important aspect of meeting duty of care requirements as well as compliance with the law governing workplace health and safety.
7. Any allegations of misuse of process by managers should be investigated and dealt with via appropriate procedures.
8. School governors should be provided with regular reports showing levels of absence at the school for which they are responsible, along with comparator data and an estimate of the cost to the school of the absence. This would be an effective way of holding head-teachers to account.
9. The absence data for school based staff should be analysed on a school by school basis to establish whether, as the head teachers believe, there are a small number of schools contributing disproportionately to the overall figures. This would enable support to be targeted at those schools that most require it.
10. Ensure that occupational health resources are available and targeted at cases where they will make a genuine difference. This may mean ending automatic referrals in cases where medical evidence, or the view of service management, indicates that adjustments are unlikely to be feasible or conversely, where they are obvious and do not require the involvement of occupational health. Specifically it is recommended that:
 - A specific requirement be imposed on managers to proactively consider whether referral to occupational health will contribute to the definitive conclusion of a long term absence case before the referral is made. Automatic referral should be regarded as non-compliant.
 - If possible, remove any de facto or actual veto by the subject member of staff on the provision of occupational health reports to managers.
 - Redefine or clarify the mission statement of occupational health to ensure that it is clear to all stakeholders that the primary focus of the service is prevention of ill health.

- Actively discourage follow up reviews where these delay medical redeployment or dismissal by placing a positive requirement on the service to provide definitive advice as soon as is reasonable practicable.
 - Ensure that the process for self-referral is fully understood and that managers are aware of the need for them to play a proactive part in ensuring that Occupational Health Resources are not wasted on referrals that will not benefit from the involvement of the service.
11. Early intervention, based on a multi-disciplinary approach, should be accommodated within the policy framework, including where patterns of absence or behaviour are of concern to managers, whether or not these are picked up by the absence management system. Swift and appropriate referrals to a range of support services should aim at helping staff to cope with issues leading to stress and to avoid muscular-skeletal conditions, before these lead to problematic absence levels.
 12. Consider what further training is appropriate to assist managers to offer early stage support to workers. As in the South Lanarkshire example, the aim would be to refer to appropriate support, on a case by case basis, with the aim of avoiding the need for later process driven action in response to absence triggers.
 13. Further explore potential and options for limiting the impact of non-work related stress. This will require detailed further analysis of complex issues and the establishment of measures capable of demonstrating the impact of workplace initiatives on the wider well-being of those within the workforce who are most at risk. Further information about the impact of the Wigan and Stockton examples may assist with ensuring that the Cardiff Employee Voice Project penetrates the culture of the entire organisation.
 14. Investigate work systems and conditions for some members of the workforce to establish whether changes could be made that would reduce propensity for LT sickness. This might include identifying unsafe working practices, revising shift patterns and taking action to ameliorate the impact of lone working, for example.
 15. Introduce a case management approach whereby all relevant parties are involved in seeking solutions. Formal, case conference type meetings should be used to implement a positive, solutions focussed approach to difficult cases, with an expectation of multi-disciplinary attendance.
 16. Monitor the application of the updated drugs and alcohol policy to ensure that it is effective in supporting staff. A number of authorities, including the UK's largest, Birmingham, have implemented testing regimes, alongside awareness raising, in an effort to eliminate the threat to public safety that affected staff can pose. APSE is able to offer training and access to specialist support in relation to this critical issue if this becomes necessary in the future.

LOCAL SERVICES
LOCAL SOLUTIONS

Action Plan for Sickness Absence APSE Recommendations

Recommendation	Actions	Who
1. Target and tailor HR support to those managers who most need it - the data feedback from the focus groups indicate that this could be those managing smaller workforce groups who rarely use the system and find it onerous.	<p>Central Attendance and Manage Teams to work with Directorates / Head Teachers to target support.</p> <p>Gather information on those managing smaller workforce groups to establish common causes, and identify remedies including wellbeing approaches.</p> <p>Specifically provide Management Information and support for those managers / Head Teachers where compliance has not been met in relation to triggers or stages and provide targeted training.</p> <p>Escalate this information as required.</p>	Central Sickness and Manage teams Headteachers / Directorate Managers
2. Ensure that operational managers understand and are able to follow policy and process consistently and that this is reflected in the performance management process. This will include clarifying the difference between long term and short-term absence.	<p>Continue additional Sickness Absence Management training that covers both policy and practice.</p> <p>Ensure that compliance to the Attendance and Wellbeing Policy is a part of performance management process.</p> <p>Review training provision, consider including case studies and outcomes to provide tangible understanding of decision-making. Look at different approaches to training.</p> <p>Refresh e-learning module to provide additional support for managers</p> <p>Ensure tailored support as identified above supports managers with the policy and process requirements.</p> <p>Develop Manager's Guides and Quick reference Guides (flow charts), with videos, FAQ's and What If information on the intranet. Include hyperlinks to websites so managers can self-help (e.g. ACAS).</p> <p>Introduce an induction session with new managers.</p>	<p>Academy</p> <p>Directorates</p> <p>HR & Academy</p> <p>Academy & HR</p> <p>HR & Managers</p> <p>HR</p> <p>Academy & Managers</p>
3. Identify work groups where early intervention and support is most likely to be effective and tailor this to	Work with key directorates and the staff groups identified in the report to provide early interventions	HR , Relevant Directorates

<p>suit specific needs e.g. early referral to physiotherapy for heavy manual staff and easy access to advice and support for low paid/part time/shift working staff.</p>	<p>OH evaluate OH and sickness data combined. Identify cases where physio would benefit, including those jobs where muscular skeletal is more likely to occur.</p> <p>Increase physio sessions for muscular skeletal cases (not where NHS appointments already given). Inform clinical staff to refer for physio *</p> <p>Continue with Health Surveillance work – will reduce numbers as these will be picked up earlier</p> <p>Improve the OH website to include FAQ's, SOPs, Guidance, What if's and self-help guides for physical activity etc. Also provide examples of completing referrals</p> <p>Develop a Wellbeing Directory to sign post all support available. Available in Intranet, posters, leaflets, links on intranet to outside agencies</p> <p>Provide further training on DSE and Risk Assessments</p> <p>Complete the Guidance for Managers on Health Surveillance, so quality information is passed to OH from managers</p>	<p>OH, Support from HRPP and Attendance Team</p> <p>OH</p> <p>OH, H&S, Managers</p> <p>OH</p> <p>HR</p> <p>H&S and Academy</p> <p>H&S, Managers</p>
<p>4. Further explore the possible relationship between the (over) compliance with process driven short-term absence management systems and the increase in long-term absence.</p> <p>If there are cases where workers, in conjunction with their doctors, are in effect, choosing long-term absence as the least risky option, there may be a case for greater discretion in the way the system operates to ensure that there are no perverse incentives in individual cases.</p>	<p>Investigate further through data research, as well as looking at some individual cases, which are within the 4 to 12 week category.</p> <p>Review cases with OH to identify if there is a correlation and whether there is any evidence of this.</p> <p>Develop Manager and Employee Guide</p> <p>Consider liaison with Health Authority to share what the council offers e.g. Wellbeing Directory as a positive initiative. Meet with GP clusters.</p> <p>Attendance and Wellbeing (A&W) Policy– review for 'perverse incentives'. Allow areas for discretion for management.</p> <p>Re-visit educating managers on how to interpret Fit Notes and Medical Reports</p>	<p>HR</p> <p>HR & OH</p> <p>HR</p> <p>HR</p> <p>HR</p> <p>OH & HR</p>

<p>5. Ensure that ubiquity does not create anomalous application of policy and process. Schools in particular would benefit from a tailored approach that emphasises the role of informed, reasonable decision making in the management of both short and long-term absence. A positive, evidenced decision to discount an absence for example should not be treated as non-compliant and at certain stages in the process managers should be required to exercise judgement. On the other hand, the reasons for decisions must be recorded and managers held to account where their judgement is flawed or otherwise lacking.</p>	<p>Review A&W Policy –</p> <p>Consider removal of punitive language and move from ‘warnings’ to ‘improvement notice’.</p> <p>Remove automatic referrals at four weeks to OH</p> <p>Consider discretionary decisions as each case is different, e.g. ‘linked cases’</p> <p>Consider the value added by referral to OH – again discretion to not refer</p> <p>Consider possibility of ‘auto’ issue of ‘improvement notice’ with opportunity for appeal. Would remove need for meetings to consider and issue warnings.</p> <p>Consider transferring the Special Leave provision from the A&W policy to the Leave policy</p> <p>Consider the RTW interview process as ‘review meetings’ that focus on early intervention initiatives for improved attendance.</p>	<p>HR, Directorates, Managers, Headteachers, TU’s Members</p>
<p>6. The need for supportive management practice should be emphasised and blind process compliance discouraged. Managers should be encouraged to demonstrate in their practice that effective absence management is an important aspect of meeting duty of care requirements as well as compliance with the law governing workplace health and safety.</p>	<p>As above, Review the A&W Policy</p> <p>Lack of value added where referrals are made unnecessarily to OH.</p> <p>Where fit note are received indicating RTW. Some cases must be reviewed before a return. Manager knows the role, risks and ailment, so opportunity to ensure Duty of Care covered.</p> <p>Provide the up to date Job Description for OH when referral made</p> <p>Introduce Fast Track appointments to OH for the above cases.</p> <p>Produce Guidance on Phased Returns. More pro-active approaches to phased returns. For example Introduce a Light Duties Policy, Procedure and Guidance</p>	<p>HR, Directorates, Managers, Headteachers, TU’s Members</p>

	Identify GP partnerships with the Council	
7. Any allegations of misuse of process by managers should be investigated and dealt with via appropriate procedures.	Where the A&W Policy is not being adhered to, action is taken in line with Councils policy and procedures.	All
8. School governors should be provided with regular reports showing levels of absence at the school for which they are responsible, along with comparator data and an estimate of the cost to the school of the absence. This would be an effective way of holding head-teachers to account.	<p>Benchmarked data reports already issued and improved for Q1 and Q2 2017/18 – issued in October 2017.</p> <p>Explore possibility of including costs of absence.</p> <p>Share reports with Education Management team</p> <p>Provide training on how to identify patterns and trends</p>	<p>HR</p> <p>HR & Schools</p> <p>HR</p> <p>HR & EMT</p>
9. The absence data for school based staff should be analysed on a school by school basis to establish whether, as the head teachers believe, there are a small number of schools contributing disproportionately to the overall figures. This would enable support to be targeted at those schools that most require it.	<p>HR to review data using Q1 and Q2 2017/18 onwards.</p> <p>Produce more informative data, broken down by school, number of sicknesses and length</p> <p>Target the schools identified above. Provide additional advice and training</p>	<p>HR</p> <p>HR</p> <p>HR & Academy</p>
10. Ensure that occupational health resources are available and targeted at cases where they will make a genuine difference. This may mean ending automatic referrals in cases where medical evidence, or the view of service management, indicates that adjustments are unlikely to be	<p>Currently analysing data to identify demand on OH and where resources should be placed (supply). Health Surveillance will continue to place a higher demand on OH, but should reduce number of muscular skeletal cases being referred (prevention).</p> <p>Meetings being held on a regular basis with OH Physicians and OH Nurses to bring an organisational perspective to some recommendations.</p>	<p>OH</p> <p>OH, HR</p>

<p>feasible or conversely, where they are obvious and do not require the involvement of occupational health. Specifically it is recommended that:</p> <ul style="list-style-type: none"> • A specific requirement be imposed on managers to proactively consider whether referral to occupational health will contribute to the definitive conclusion of a long term absence case before the referral is made. Automatic referral should not be regarded as non-compliant. • If possible, remove any de facto or actual veto by the subject member of staff on the provision of occupational health reports to managers. • Redefine or clarify the mission statement of occupational health to ensure that it is clear to all stakeholders that the primary focus of the service is prevention of ill health. • Actively discourage follow up reviews where these delay medical redeployment or dismissal by placing a positive requirement on the service to provide definitive advice as soon as is reasonable practicable. 	<p>OH and Council Physician to hold a number of forums, which will provide an outline of OH and the opportunity for question/answer sessions.</p>	OH, Managers
	<p>Review the A&W Policy – four week automatic referral and value added for referrals. Allow discretionary decisions on referrals and record reasons. Include in Managers Guide</p>	HR & OH
	<p>Removal of de facto or actual veto of OH reports is not possible. It is a clinical legal obligation. OH have to have signed consent to release the report (which will include medical information). Not all employees wish to see the report. A paper outlining timescales has been distributed.</p>	HR
	<p>Will consider a Mission Statement, but possibly more relevant would be an understanding and education of the functions and limitations of OH. Clinical staff instruct the employee to discuss matters outside their medical condition, to the manager.</p>	OH
	<p>If an issue raised by an employee relates to the medical condition, then this is referred to in the report as it may relate to the manager's decision.</p>	OH
	<p>The phrase 'Management issue' are often referred to as the matter is not a medical issue, but a management decision.</p>	OH
	<p>Reviews are currently being monitored. They have been reduced in the last nine months, but some reviews will be necessary for extreme cases.</p>	OH, Managers
		HR, OH

<ul style="list-style-type: none"> Ensure that the process for self-referral is fully understood and that managers are aware of the need for them to play a proactive part in ensuring that Occupational Health Resources are not wasted on referrals that will not benefit from the involvement of the service. 	<p>Self referrals are very few, but due to the demand, these cases are usually referred to the GP and or manager and or EAP (Care First) /ECS. Possibility of reviewing the A&W Policy.</p>	<p>OH , Managers</p>
<p>11. Early intervention based on a multi-disciplinary approach, should be accommodated within the policy framework, including where patterns of absence or behaviour are of concern to managers, whether or not these are picked up by the absence management system. Swift and appropriate referrals to a range of support services should aim at helping staff to cope with issues leading to stress and to avoid muscular-skeletal conditions, before these lead to problematic absence levels.</p>	<p>All LTS cases over 6 months - reminder to apply multi-disciplinary approach to Case management involving all parties</p> <p>Review Guidance for Managers on Patterns and Trends. Educate managers on how to use DigiGov to do this and factors to consider.</p> <p>As above, encourage the use of EAP (CareFirst) and ECS.</p> <p>As above, continue with Health Surveillance</p> <p>Consider provision of fitness equipment in certain buildings.</p> <p>Support managers to become confident in making the correct decisions and the right approach on cases.</p> <p>Use Case Conference (OH, Manager, TUs & employee) to discuss more complex cases.</p> <p>Direct Managers to standard procedures and templates for managers to use when writing to and recording events. Make easier access through SharePoint</p>	<p>HR & Managers</p> <p>HR, Academy, Managers</p> <p>HR, Managers, OH</p> <p>OH</p> <p>SMT</p> <p>HR, Academy</p> <p>HR & OH, Managers, Academy</p> <p>Manage, Managers, Academy</p>
<p>12. Consider what further training is appropriate to assist managers to offer early stage support to workers. As in the South Lanarkshire example, the aim would be to refer</p>	<p>Research and explore good practice such as the South Lanarkshire example.</p> <p>Continue to reinforce Health & Wellbeing agenda</p>	<p>HR</p> <p>HR & OH, Managers</p>

<p>to appropriate support, on a case-by-case basis, with the aim of avoiding the need for later process driven action in response to absence triggers.</p>	<p>Research other organisations for preventative measures e.g. additional stress control programmes (Mindfulness), use of technology to remind staff of exercises, faster turnaround for Employee Counselling services, as above increase physiotherapy sessions and target cases etc.</p> <p>Ensure that preventative measures are being taken such as manual handling, training and regular checks to ensure that work is being carried in accordance with these requirements</p>	<p>HR & OH</p> <p>Managers, H&S, OH, HR</p>
<p>13. Further explore potential and options for limiting the impact of non-work related stress. This will require detailed further analysis of complex issues and the establishment of measures capable of demonstrating the impact of workplace initiatives on the wider well-being of those within the workforce who are most at risk. Further information about the impact of the Wigan and Stockton examples may assist with ensuring that the Cardiff Employee Voice Project penetrates the culture of the entire organisation.</p>	<p>Explore findings from Health & Well-being survey.</p> <p>Further investigate ways of providing anonymised support services to front line staff that provide advice and links for employees who have non-work related and personal issues.</p> <p>Research Wigan and Stockton examples for good practice in terms of support groups, policies, initiatives etc. for front line staff.</p> <p>Use new and refreshed approaches to the Health & Wellbeing of front line staff, which support them through change.</p> <p>Evaluate approaches and impact</p>	<p>HR</p> <p>HR</p> <p>HR</p> <p>HR</p>
<p>14. Investigate work systems and conditions for some members of the workforce to establish whether changes could be made that would reduce propensity for LT sickness. This might include identifying unsafe working practices, revising shift patterns and taking action to ameliorate the impact of lone working for example.</p>	<p>Conduct a work-study of some roles within directorates and work with managers and trade unions to improve work systems and conditions.</p> <p>Continue to improve Health Surveillance throughout the Council to assist.</p> <p>Further education on determining what is reasonable or not when requiring an employee to return to work.</p>	<p>H&S with support of HR & OH, Directorates</p> <p>OH and H&S</p> <p>OH and H&S</p>
<p>15. Introduce a case management approach whereby all relevant parties are involved in seeking</p>	<p>This is already in place, but needs to be publicised throughout the Council and its use should be encouraged.</p>	<p>HRPP, OH, Managers, employees, Tus</p>

<p>solutions. Formal, case conference type meetings should be used to implement a positive solutions focussed approach to difficult cases, with an expectation of multi-disciplinary attendance.</p>	<p>Produce a specific Guidance for Managers and Employees on case management approach</p>	<p>HR</p>
<p>16. Monitor the application of the updated drugs and alcohol policy to ensure that it is effective in supporting staff. A number of authorities, including the UK's largest, Birmingham, have implemented testing regimes, alongside awareness raising, in an effort to eliminate the threat to public safety that affected staff can pose.</p>	<p>Keep policy under review.</p> <p>Research other LA's on practices used and successes/lessons learnt.</p> <p>Seek advice and guidance from OH & H&S</p>	<p>HR</p> <p>HR</p> <p>Managers, HR, OH & H&S</p>

Sickness Absence FTE days lost per person - Target per Service Area 2017/18

Final Outturn for 2016/17 = 10.77 FTE days lost per person

Council Wide Target 2017/18 = 9.00 FTE days lost per person

2017/18 Target				2017/18 Cumulative Data												
	Service Area/Division	Average FTE staff No.s (Forecast)	FTE target	Target FTE days lost	Q1 FTE days lost	Forecast based on Q1 x 4.30		Q2 FTE days lost	Forecast based on Q2 x 2.20		Q3 FTE days lost	Forecast based on Q3 x 1.4		Q4 FTE days lost - final	Final Difference	
	Snr Mgt (Cex, CD & CD Support)	4	5.8	23	-	-	-	-	-	-		-	-			
	Energy and Sustainability	9	8.0	72	5.88	25.28	+	6.42	14.12	+		-	-			-
	Infrastructure and Operations	27	8.0	216	1.85	7.96	-	6.64	14.61	+		-	-			-
	Neighbourhood Services	342	13.0	4,446	4.32	18.58	+	9.04	19.89	+		-	-			-
	Parks Sports and Harbour	310	13.0	4,030	2.48	10.66	-	5.47	12.03	-		-	-			-
	Planning	80	8.0	640	0.39	1.68	-	1.23	2.71	-		-	-			-
	Resources and Technical Support	3	8.0	24	-	-	-	16.40	36.08	+		-	-			-
	Transport Planning Policy and Strategy	69	8.0	552	1.29	5.55	-	3.28	7.22	-		-	-			-
	CITY OPERATIONS	840	11.9	9,980	2.94	12.64	+	6.41	14.10	+		-	-			-
	Communities and Customer Services	300	9.0	2,700	1.84	7.91	-	4.25	9.35	+		-	-			-
	Housing and Communities	890	10.5	9,345	3.27	14.06	+	6.72	14.78	+		-	-			-
	COMM HSG & CUSTOMER SERVICES	1,190	10.1	12,045	2.90	12.47	+	6.10	13.42	+		-	-			-
	Commercial Services	740	13.1	9,694	3.35	14.41	+	6.99	15.38	+		-	-			-
	Economic Development (other sections)	200	8.1	1,620	2.55	10.97	+	5.11	11.24	+		-	-			-
	ECONOMIC DEVELOPMENT	940	12.0	11,314	3.21	13.80	+	6.65	14.63	+		-	-			-
	EDUCATION & LL - CENTRAL	590	9.5	5,605	2.72	11.70	+	4.91	10.80	+		-	-			-
	EDUCATION & LL - SCHOOLS	5,470	7.3	39,931	2.20	9.46	+	3.88	8.54	+		-	-			-
	Childrens	415	13.0	5,395	4.24	18.23	+	6.63	17.14	+		-	-			-
	Adults	515	15.5	7,983	3.91	16.81	+	8.58	18.88	+		-	-			-
	SOCIAL SERVICES	930	14.4	13,378	3.77	16.21	+	7.71	16.96	+		-	-			-
	Total Directorate	9,960	9.3	92,253	2.62	11.27	+	5.04	11.09	+		-	-			-
	GOVERNANCE & LEGAL	95	5.8	551	3.00	12.90	+	4.54	9.99	+		-	-			-
	RESOURCES DIRECTORATE	676	5.8	3,921	2.06	8.86	+	3.89	8.56	+		-	-			-
	COUNCIL WIDE GRAND TOTAL	10,640	9.0	96,197	2.59	11.14	+	4.97	10.93	+		-	-			-

Note:
Data as at 9th October 2017

Short-term
Long-term

30%
70%

Short-term
Long-term

29%
71%

Short-term
Long-term

Short-term
Long-term

*** Forecasting methodology**

Based on historic data, sickness increases throughout the year due to seasonal fluctuations. There are also fluctuations in FTE numbers which also affect forecasting calculations.

Mae'r dudalen hon yn wag yn fwiadol

CYNGOR CAERDYDD
CARDIFF COUNCIL

POLICY REVIEW & PERFORMANCE
SCRUTINY COMMITTEE

17 January 2017

DRAFT CORPORATE PLAN 2018-21

Reason for the Report

1. To provide Members with an opportunity for pre-decision scrutiny of the draft Corporate Plan 2018-21, attached at **Appendix 1**. The Corporate Plan will be presented to Cabinet for consideration on 15 February 2018 and full Council alongside the Budget on 22 February 2018.

Background – Previous Scrutiny

2. In December 2017, Members received a briefing on the structure and planned approach to delivering the Corporate Plan 2018 -21. As part of this process, the Committee would be given an opportunity at its January 2018 meeting to consider an early draft of the Plan, which would include the proposed objectives and Key Performance Indicators (KPI's). The Leader informed Members that he welcomed early engagement with the Plan and would return to Committee for pre-decision scrutiny on the final draft of the Plan at the Committee's meeting on 14 February 2018. Following the meeting, the Committee relayed its comments and observations in a letter to the Leader, attached at **Appendix 2**.
3. Members will recall that in July 2017 the Council's new Administration set out a policy programme and associated delivery commitments entitled 'Capital Ambition' establishing the Cabinet's key priorities for the municipal term, and outlining a programme of action to continue to drive the city economy forward, whilst ensuring that the benefits of success are felt by all residents. It focussed on four main areas:

- **Working for Cardiff** – Making sure that all citizens can contribute to, and benefit from, the city's success.
 - **Working for Wales** – A successful Wales needs a successful capital city.
 - **Working for the Future** – Managing the city's growth in a sustainable way.
 - **Working for Public Services** – Making sure public services are delivered efficiently, effectively and sustainably in the face of rising demand and reducing budgets.
4. Today's consideration of the draft Corporate Plan 2018-21 offers Members an opportunity to inform the development of the Plan. The Committee will have a further opportunity to consider the final draft when it meets to consider the 2018/19 budget on 14 February 2018, before its presentation to formal Cabinet.
5. For clarity, the Committee's Terms of Reference confer two roles in considering the Corporate Plan:
- Firstly, to scrutinise the overall structure and direction set out in the Corporate Plan and the process for its development, as the Council's key strategic document linking the Priorities set out in the Delivering Capital Ambition Report, the Public Services Board Well-being Objectives, Directorate Delivery Plans and individual officers' objectives.
 - Secondly, to scrutinise the linkages between the Corporate Plan and delivery of the specific services under its remit.
6. The scope of today's scrutiny will focus on the first of those roles, as the second will be more effectively undertaken alongside budget proposals in February.
7. At this stage in the process, policy officers have clarified that, in sharing an early version of the draft Corporate Plan 2018-21 with the Committee, the Plan is by definition incomplete. The Ambitions, Well-being Objectives, Steps to make progress,

and Performance Measures are set out for consideration at this stage, but are subject to ongoing work and approval by the Cabinet. Members are also advised that target setting is underway and will be appended to the Plan in its final draft.

8. From **Appendix 2** Members will recall welcoming the Leader's offer to engage with the Committee's Performance Panel, focussing particularly on the target setting process in late January - early February 2018. This will present an opportunity to understand in some detail the target setting process, and crystallise understanding of how the targets are arrived at. All Scrutiny Chairs have been invited to participate in this additional informal session, which has been offered to support effective scrutiny of the Corporate Planning process.

Issues

9. The document attached at **Appendix 1** is the skeleton of the Delivering Capital Ambition Corporate Plan 2018-21. In its final published form it will include more extensive narrative and contextual information.
10. The Plan links Cardiff's four Capital Ambition Priorities to the Well-being Objectives of Cardiff's Public Services Board, setting out the steps and actions the Council will take to make progress in achieving these objectives. It also sets out the Performance Measures that will enable the Council, and its scrutiny committees, to monitor how effectively the objectives are being delivered.
11. For example,
 - **Capital Ambition Priority:** Working for Public Services (p20)... *links to*
 - **Well-being Objective:** Modernising and Integrating Our Public Services (p21)...*will be delivered by*
 - **Steps/Action:** Progress the Council's Digital First Agenda (p21)...*will be measured by*
 - **Performance Measure (KPI):** The number of customer contacts to the Council using digital channels. (p22)

Scope of the Scrutiny

12. This item will give the Committee the opportunity to make recommendations and observations that contribute to Cardiff's final draft *Corporate Plan 2018- 21* before it is presented to formal Cabinet. Members are invited to scrutinise the overall structure and direction set out in the Corporate Plan, as the Council's key strategic document linking the series of Ambition's set out in the Delivering Capital Ambition report, Directorate Delivery Plans and individual officers' objectives. Members may wish to consider whether there are any actions or performance measures missing.
13. It will also allow the Committee to familiarise itself with the contents of the Corporate Plan in good time for budget scrutiny on 14 February 2018, when the Committee will use the final draft to test the Budget Proposals against the Cabinet's stated Capital Ambition priorities.

Way Forward

14. The Leader of the Council, Councillor Huw Thomas; the Chief Executive, Paul Orders; Corporate Director Resources, Christine Salter, Head of Performance & Partnerships, Joseph Reay; and the Head of Cabinet Office, Dylan Owen, will attend to present the Plan and answer Members' questions.

Legal Implications

15. 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

16. 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

To review Delivering Capital Ambition, Cardiff's draft Corporate Plan 2018-21 and agree any recommendations or observations to inform the final draft, which will return to Committee alongside the budget proposals on 14 February 2018, prior to Cabinet's consideration.

DAVINA FIORE

Director of Governance and Legal Services

11 January 2018

Mae'r dudalen hon yn wag yn fwriadol

Delivering Capital Ambition

Cardiff's Corporate Plan 2018-21

Capital Ambition Priority 1: Working for Cardiff

- Cardiff is a Great Place to Grow Up
- Cardiff is a Great Place to Grow Older
- Supporting People out of Poverty
- Cardiff has Safe, Confident and Empowered Communities

Capital Ambition Priority 2: Working for Wales

- A Capital City that Works for Wales

Capital Ambition Priority 3: Working for the Future

- Cardiff's Population Growth is managed in a Resilient Way

Capital Ambition Priority 4: Working for Public Services

- Modernising and Integrating Our Public Services

Capital Ambition Priority: **Working for Cardiff**

DRAFT-NO STATUS

Well-being Objective:

Cardiff is a great place to grow up

Steps: The actions we will take to make progress	Lead Member	Lead Directorate
Promote Children's Rights by delivering the Child Friendly City initiative.	Cllr Sarah Merry	Education & Lifelong Learning
Every School in Cardiff is a Great School		
Work in partnership to support schools to introduce the new 'Successful Futures' curriculum to promote high achievement and engage the interest of all children and young people to help them reach their potential by 2022.	Cllr Sarah Merry	Education & Lifelong Learning
Reshape and enhance specialist provision and services for pupils with additional learning needs to ensure sufficient, high quality places are available to meet the current and projected need from 2017 – 2022.	Cllr Sarah Merry	Education & Lifelong Learning
Highlight and transfer best practice in the use of the Pupil Deprivation Grant in Cardiff schools throughout the academic years 2017/18 and 2018/19 to improve the educational attainment of pupils eligible for free school meals.	Cllr Sarah Merry	Education & Lifelong Learning
Increase provision and the range/ suitability of academic and vocational qualifications offered to learners 'Educated other than at School' incrementally throughout the academic years 2017/18 and 2018/19.	Cllr Sarah Merry	Education & Lifelong Learning
Complete the schemes within the Band A investment model of Cardiff's School Organisation Programme, including the opening of: <ul style="list-style-type: none"> New schools for Ysgol Glan Morfa, Ysgol Hamadryad, Gabalfa, Howardian and Glan Ceubal Primary Schools by Autumn 2018 The new Cardiff West Community High School site by Spring 2019. 	Cllr Sarah Merry	Education & Lifelong Learning
Deliver the new schemes within the Band B investment model of Cardiff's School Organisation Programme by 2024.	Cllr Sarah Merry	Education & Lifelong Learning
Strengthen the management of the existing education estate through the implementation of an improved Asset Management Programme that prioritises projects that address condition and suitability issues by March 2019.	Cllr Sarah Merry	Education & Lifelong Learning
Deliver the Cardiff Commitment and promote junior apprenticeships ensuring that every child has access to training, employment or further education opportunities when leaving school.	Cllr Sarah Merry	Education & Lifelong Learning
Support Vulnerable Young People		
Embed the Corporate Parenting Strategy across the Council and partners by March 2019 to secure the same positive outcomes for children in care that every good parent would want for their own children.	Cllr Graham Hinchey	Social Services
Embed the Disability Futures Programme by March 2023 to develop and implement remodelled services for disabled children, young people and young adults aged 0-25 across Cardiff and the Vale of Glamorgan to improve effectiveness and efficiency of services and outcomes for disabled young people and their families.	Cllr Graham Hinchey & Cllr Susan Elsmore	Social Services
Work with partners to intervene early to support children and families before their needs escalate to the point that they require statutory interventions by reviewing the implementation of the Early Help Strategy during 2018/19.	Cllr Graham Hinchey	Social Services
Pilot a 'Children First' approach during 2018/19 to join up multi-agency preventative services and funding in order to improve early help to children and families in Ely and Caerau.	Cllr Graham Hinchey	People & Communities, Social Services and Education & Lifelong Learning

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

- TBC: The percentage of schools designated as Rights Respecting Schools in Cardiff

Every School in Cardiff is a Great School

- The percentage of schools categorised as 'Green' (Primary, Secondary, Special)
- The average Capped Nine Points Score achieved by Key Stage 4 pupils
- The percentage of pupils achieving the Level 2+ threshold at the end of Key Stage 4
- The percentage of pupils achieving the Level 1 threshold at the end of Key Stage 4
- The percentage of pupils achieving the Core Subject Indicator at the end of Key Stage 2
- The eFSM and nFSM attainment gap in the Core Subject Indicator at the end of Key Stage 2
- The eFSM and FSM attainment gap in the Level 2+ threshold at the end of Key Stage 4
- The percentage of children securing one of their first three choices of school placement (primary and secondary)
- The percentage of Year 11 leavers making a successful transition from compulsory schooling to education, employment or training
- The percentage attendance (Primary and Secondary)
- The percentage of Children Looked After by Cardiff Council that achieve the Level 2+ threshold at the end of Key Stage 4

Support Vulnerable Young People

- The percentage of children receiving support from the Adolescent Resource Centre (edge of care) who are receiving 12 or more hours of education provision
- The percentage attendance of looked after pupils whilst in care in secondary schools
- Percentage of all care leavers in education, training or employment 12 months after leaving care
- TBC: Multi Agency Safeguarding Hub (Increasing appropriate referrals and reducing the need for intervention)

Well-being Objective:

Cardiff is a great place to grow older

Steps: <i>The actions we will take to make progress</i>	Lead Member	Lead Directorate
Empower people to remain independent at home by: <ul style="list-style-type: none"> Working through the Integrated Health and Social Care Partnership (IHSC) to: <ul style="list-style-type: none"> Develop a first point of contact within University Hospital Wales prevent unnecessary hospital admission and enable people to leave hospital at the weekends. Developing community connection services in partnership with 3rd and private sector. 	Cllr Susan Elsmore	People & Communities
Work with partners to reduce adults' reliance on intensive interventions by developing new models of service by 2022/27 with a particular focus on strengthening re-ablement and extending Direct Payments to more people.	Cllr Susan Elsmore	Social Services
Improve the housing offer for older people to promote independent living by fully understanding the housing needs and aligning work between Communities, Health and Social Services.	Cllr Lynda Thorne	People & Communities
Consolidate Cardiff's status as a recognised Dementia Friendly City during 2018/19 to support those affected by dementia, enabling them to contribute to, and participate in, mainstream society. This will include: <ul style="list-style-type: none"> Establishing a specialist dementia day service in partnership with the University Health Board, and Refurbishing existing day centres to provide dementia support. 	Cllr Susan Elsmore	Social Services
Address social isolation and enhance quality of life of older people by developing intergenerational working within schools, community groups, leisure centres and private sector partners.	Cllr Susan Elsmore	People & Communities

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

- Adults who are satisfied with the care and support they received
- Adults reporting that they felt involved in any decisions made about their care and support
- The percentage of adults who completed a period of re-ablement and have a reduced package of care and support 6 months later
- The percentage of new cases dealt with directly at First Point of Contact (FPOC) with no onward referral to Adult Services
- The average number of calendar days taken to deliver a Disabled Facilities Grant (from first contact to payment date)
- The percentage of Telecare calls resulting in an ambulance being called out
- The percentage of people who feel reconnected into their community through intervention from day opportunities
- The percentage of people who experienced successful outcomes through the Homelessness Reconnection Service
- The percentage of people who were able to live independently in their homes following support from the Independent Living Services

Well-being Objective: Supporting people out of poverty

Steps: The actions we will take to make progress	Lead Member	Lead Directorate
Act as an advocate for the Real Living Wage initiative and promote its adoption by the city's employers.	Cllr Huw Thomas	Resources
Better support people into work by integrating employment support services. This will include: <ul style="list-style-type: none"> • Developing a new gateway into employment and mentoring services accessible across the city, • Ensuring that Into Work Advice Services and Adult Community Learning fully aligns with the new employability service, • Providing effective employer engagement and assistance into self-employment, and • Promoting and extending volunteering opportunities. 	Cllr Lynda Thorne	People & Communities
Ensure support is available to mitigate potentially negative consequences associated with the roll-out of Universal Credit by: <ul style="list-style-type: none"> • Providing digital access and assistance across the city, • Working with private landlords to identify how the Council can help them with the change, • Working with Jobcentre Plus, Registered Social Landlords and other partners to ensure that vulnerable individuals get the budgeting support they need, and • Developing an advice telephone line for customers. 	Cllr Lynda Thorne	People & Communities
Create more opportunities for apprenticeships, work placements and jobs within the Council by March 2019.	Cllr Huw Thomas & Cllr Chris Weaver	Resources
Launch a Social Responsibility policy to ensure that local people and local communities benefit from the money the Council spends on goods and services by March 2019.	Cllr Chris Weaver	Resources
Use the new funding flexibilities to better target funding and resources including recommissioning accommodation and support services for young people by early 2019.	Cllr Huw Thomas	People & Communities, and Education & Lifelong Learning
Deliver the Rough Sleeper Strategy to address rough sleeping in the city by: <ul style="list-style-type: none"> • Adopting a 'No First Night Out' policy, • Piloting new approaches, including a 'Housing First' model which moves rough sleepers straight from the streets into a home, and • Delivering the Give DIFFerently campaign 	Cllr Lynda Thorne	People & Communities

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

- The number of people receiving into work advice through the Gateway
- The number of clients that have been supported into volunteering / work placements / employment
- The number of employers that have been supported by the service
- The number of opportunities created for apprenticeships, work placements and jobs
- The number of customers supported and assisted with their claims for Universal Credit
- Additional weekly benefit awarded to clients of the City Centre Advice Team
- The number of rough sleepers assisted into accommodation
- The percentage of cases where a duty to prevent homelessness was accepted and where homelessness was prevented (including those ended by customer's action)

Well-being Objective:

Cardiff has Safe, Confident and Empowered Communities

Steps: <i>The actions we will take to make progress</i>	Lead Member	Lead Directorate
Supporting Vulnerable People		
Ensure children and adults are protected from risk of harm and abuse by: <ul style="list-style-type: none"> Revising the Child Sexual Exploitation Strategy by March 2019 to encompass new and emerging themes of child exploitation. Raising awareness among public and professionals safeguarding issues for the duration of the plan. Implementing the Signs of Safety Approach. 	Cllr Susan Elsmore & Cllr Graham Hinchey	Social Services
Ensure that the Council's Corporate Safeguarding Strategy is implemented .	Cllr Chris Weaver	
Focus on the strengths of individuals when assessing for care and support by ensuring an appropriately skilled and qualified workforce is in place to deliver Strengths Based Approaches as the established operating model for adults and children Social Services by March 2022.	Cllr Susan Elsmore & Cllr Graham Hinchey	Social Services
Continue to implement a sustainable finance and service delivery strategy across Children's and Adult Services throughout 2018/19, where the commissioning and delivery of services is evidence-based, outcome-focused and commercially sound .	Cllr Graham Hinchey & Cllr Susan Elsmore	Social Services
Implement the requirements of the Regulation and Inspection of Social Care (Wales) Act 2016 to ensure that all relevant professionals are appropriately qualified by 2020.	Cllr Susan Elsmore	Social Services
Work with partners to reduce adults' reliance on intensive interventions by: <ul style="list-style-type: none"> Developing new models of service by 2022/27 with a particular focus on strengthening re-ablement and extending Direct Payments to more people. Empowering people with a learning disability to be more independent by launching a Regional Learning Disabilities Day Opportunities Strategy in March 2019. 	Cllr Susan Elsmore	Social Services
Safe and Inclusive Communities		
Help prevent violence against women, domestic abuse and sexual violence by developing a regional strategy, implementing the newly-commissioned services for female victims and exploring a regional service for male victims.	Cllr Susan Elsmore	People & Communities
Support the integration of newcomers in the city by delivering the Inclusive Cities Project in partnership with Oxford University and other major cities.	Cllr Lynda Thorne	Performance & Partnerships
Implement the National Community Cohesion Action Plan 2017/2020 , and undertake a review of the Local Delivery Plan in April 2018.	Cllr Lynda Thorne	Performance & Partnerships
Tackle substance misuse in the city by undertaking a review of the risk factors, with a focus on supporting young people.	Cllr Lynda Thorne	Performance & Partnerships
Deliver the Night Time Economy Strategy – working with Public Services Board partners – launched in April 2018.	Cllr Lynda Thorne	Performance & Partnerships

Regenerating local communities and citizen-centred services		
Invest in the regeneration of local communities by: <ul style="list-style-type: none"> Completing a new retail parade of 9 shop units as part of the Maelfa redevelopment by Spring 2019. Completing the extended St Mellons Community Hub by Summer 2018 and work with partners to investigate other Hub projects. Launching a further round of the Neighbourhood Renewal Schemes programme by Autumn 2018. 	Cllr Lynda Thorne	People & Communities
Drive up standards in the private rented housing sector by hosting the Welsh Government's Rent Smart Wales scheme – an all-Wales registration and licensing scheme which works to prevent rogue agents and landlords letting and managing properties.	Cllr Lynda Thorne	People & Communities
Work at community level to deliver strategic service integration across Council and partner services, and better integrate effective citizen engagement activity , giving people a voice in shaping Council services and helping connect people with local service providers and activities in their neighbourhoods.	Cllr Lynda Thorne	People & Communities, and Resources
Maintain a network of accessible library services and further develop the Community Hub and Well-being programme in collaboration with the University Health Board and other partners.	Cllr Lynda Thorne & Cllr Susan Elsmore	People & Communities
Support the Welsh language in communities by delivering Cardiff Council's commitments to the city-wide Bilingual Cardiff Strategy 2017-2022.	Cllr Huw Thomas	Governance & Legal Services
Supporting Sports, Leisure, Culture and Green Spaces		
Develop a programme for allocating Section 106 contributions to improve parks-based facilities and the local environment.	Cllr Peter Bradbury	
Deliver sport and physical activities through the six Neighbourhood Sports Boards and continue to encourage participation of children in sport through the Cardiff Games.	Cllr Peter Bradbury	

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

- The percentage of Council Staff completing Safeguarding Awareness Training
- Council staff completing the Level 1 online module of the National Training Framework on violence against women, domestic abuse and sexual violence as a percentage of all staff
- Total number of children and adults in need of care and support using the Direct Payments Scheme (local)
- The percentage of customers satisfied with completed regeneration projects
- The number of visitors to libraries and Hubs across the City
- The percentage of customers who agreed with the statement “Overall the Hub met my requirements/I got what I needed”
- The percentage of volunteers happy with their volunteering experience
- The number volunteer hours generated
- The number of Green Flag Parks and Open Spaces

Capital Ambition Priority: **Working for Wales**

DRAFT-NO STATUS

Well-being Objective: A Capital City that Works for Wales

Steps: <i>The actions we will take to make progress</i>	Lead Member	Lead Directorate
Bring forward a new Economic Vision for the future development of Cardiff by launching a White Paper in 2018.	Cllr Russell Goodway	Economic Development
Begin work on a new Bus Station in 2018 as part of an Integrated Transport Hub.	Cllr Russell Goodway	Economic Development
Prioritise the delivery of a new Multi-Purpose Indoor Arena in the best possible location to ensure it can attract premier national and international events.	Cllr Russell Goodway	Economic Development
Grow the city centre as a location for businesses and investment by completing a new business district delivering an additional 300,000 ft ² of Grade A office space at Metro Central by 2020.	Cllr Russell Goodway	Economic Development
Agree the business plan for the regeneration of Central Station by 2018 and begin construction by 2019.	Cllr Huw Thomas	Economic Development
Develop a plan for a new mixed-use development at Dumballs Road by 2019.	Cllr Russell Goodway	Economic Development
Launch a new Industrial Strategy for East Cardiff by 2019, aligned to the completion of the Eastern Bay Link.	Cllr Russell Goodway	Economic Development
Develop a new vision and masterplan for Cardiff Bay , including the International Sports Village, by the end of 2018.	Cllr Russell Goodway & Cllr Peter Bradbury	Economic Development
Develop a business plan to protect the city's historic assets by the end of 2018.	Cllr Russell Goodway	Economic Development
Develop a Live Music Strategy to promote the city as a live music destination by 2018.	Cllr Peter Bradbury	Economic Development

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

- New and safeguarded jobs in businesses supported by the Council, financially or otherwise
- The amount of 'Grade A' office space committed to in Cardiff (sq. ft.)
- Number of staying visitors
- Total visitor numbers

DRAFT-NO STATUS

Capital Ambition Priority: **Working for the Future**

DRAFT-NO STATUS

Well-Being Objective:

Cardiff's Population Growth is managed in a Resilient Way

Steps: The actions we will take to make progress	Lead Member	Lead Directorate
Waste & Recycling		
Develop options for long-term regional partnership recycling infrastructure arrangements by December 2018.	Cllr Michael Michael	Planning, Transport & Environment
Consult and deliver amendments to the waste collections to meet new Welsh Government blueprint for increasing recycling.	Cllr Michael Michael	Planning, Transport & Environment
Increase performance of recycling centres through education initiatives and targeted education campaigns in communities commencing in September 2018.	Cllr Michael Michael	Planning, Transport & Environment
Continue to build on the partnership with British Heart Foundation to support re-use in the city.	Cllr Michael Michael	Planning, Transport & Environment
Explore opportunities for a New Household Waste Recycling Centre by reviewing all site options in Local Development Plan allocated areas as well as established communities	Cllr Michael Michael	Planning, Transport & Environment
Develop a 'Total Street' approach to keeping streets and public spaces clean and well maintained by joining-up Council services and aligning resources to deliver added value services such as deep cleansing, patching and local active travel improvements for delivery in 2018/19.	Cllr Michael Michael	Planning, Transport & Environment
Develop and implement a strategy and action plan for education and enforcement based on legislative powers that tackle fly-tipping, littering and highway licensing using technology and citizen engagement by April 2018 for delivery in 2018/19.	Cllr Michael Michael	Planning, Transport & Environment
Explore and develop a commercial and collaboration strategy for key services by looking at how Cardiff can work in partnership to deliver services providing positive outcomes by December 2018.	Cllr Michael Michael	Planning, Transport & Environment
Deliver a strategy to enhance the 'Love Where You Live' campaign in partnership with Keep Wales Tidy to implement Ward Action Plans during 2018/19.	Cllr Michael Michael	Planning, Transport & Environment
Develop a City Food Strategy by July 2018.	Cllr Michael Michael	Planning, Transport & Environment
Transport		
Develop and launch a new Transport & Clean Air Vision for the city by September 2018 – following the Green Paper consultation – which will include consideration of Clean Air Zone models.	Cllr Caro Wild	Planning, Transport & Environment
Develop a transport masterplan to create new shared spaces for pedestrians, cyclists and vehicles throughout the city centre by 2018/19.	Cllr Caro Wild	Planning, Transport & Environment

Support the delivery of the Council's Active Travel agenda by establishing an Active Travel Advisory Group involving key external stakeholders by December 2018.	Cllr Caro Wild	Planning, Transport & Environment
Make Cardiff roads safer by implementing 20mph speed limits through a phased programme of delivery during 2018-19.	Cllr Caro Wild	Planning, Transport & Environment
Improve the cycling and walking network in Cardiff by delivering prioritised routes within the Active Travel Integrated Network Map, including phase 1 of the Cycle Super Highway by 2022.	Cllr Caro Wild	Planning, Transport & Environment
Develop a comprehensive Civil Enforcement and Pavement Parking Strategy.	Cllr Caro Wild	Planning, Transport & Environment
Launch the On-Street Bike Hire Scheme in Spring 2018.	Cllr Caro Wild	Planning, Transport & Environment
Ensure every school in Cardiff has been supported by an Active Travel project through the active travel partnership initiative.	Cllr Caro Wild	Planning, Transport & Environment
Improve the condition of the highways and address issues such as potholes by delivering active programmes of work from minor road repairs through to full scale resurfacing works.	Cllr Caro Wild	Planning, Transport & Environment
Housing		
Support the delivery of high-quality and well-connected communities – as described by the Council's Master Planning Principles – by using the Planning, Transport & Place-making services to secure Section 106 Agreements on Local Development Plan strategic sites.	Cllr Caro Wild	Planning, Transport & Environment
Increase the delivery of new houses to meet housing need through the development of Local Development Plan strategic sites.	Cllr Caro Wild	Planning, Transport & Environment
Provide at least 1,000 new council homes by May 2022, of these at least 150 will be from 'innovative solutions.	Cllr Lynda Thorne	People & Communities
Approve an outline business case for the District Heat Network proposal , subject to National Government Capital Grant award and Capital Budget approval from the Council, by Spring 2018.	Cllr Michael Michael	Planning, Transport & Environment

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

Waste

- The percentage of municipal waste collected by local authorities and prepared for re-use and/or recycled, including source segregated bio-wastes that are composted or treated biologically in another way
- The maximum permissible tonnage of biodegradable municipal waste sent to landfill
- TBC: waste collections / enforcement actions for incorrect presentation

Transport & Clean Air

- Modal split for all journeys by 2026: the proportion of people travelling to work by sustainable transport modes
- The percentage reduction in carbon dioxide emissions in the non-domestic public building stock
- TBC: Clean Air Measure

Housing & Planning

- The number of Council homes commenced on site in year:
 - Cardiff Living
 - Additional Build programme
- The number of Council homes completed and handed over in year:
 - Cardiff Living
 - Additional Build programme
- The percentage of householder planning applications determined within agreed time periods
- The percentage of affordable housing agreed at completion stage to be provided in a development on greenfield sites
- The percentage of affordable housing agreed at completion stage to be provided in a development on brownfield sites

Clean Streets

- Percentage of principal (A) roads that are in overall poor condition
- Percentage of non-principal/classified (B) roads that are in overall poor condition
- Percentage of non-principal/classified (C) roads that are in overall poor condition
- The percentage of highways inspected of a high or acceptable standard of cleanliness
- The percentage of reported fly tipping incidents cleared within 5 working days
- The percentage of reported fly tipping incidents which lead to enforcement activity

Capital Ambition Priority: **Working for Public Services**

DRAFT-NO STATUS

Well-being Objective: Modernising and Integrating Our Public Services

Steps: <i>The actions we will take to make progress</i>	Lead Member	Lead Directorate
<p>Progress the Council's Digital First agenda by undertaking a service review of ICT by December 2018. This will include:</p> <ul style="list-style-type: none"> Assessing the Council's ICT infrastructure to identify opportunities for Cloud-Based solutions. Mapping businesses processes to identify opportunities for simplification, integration and automation. 	Cllr Chris Weaver	Resources
<p>Assets and Property: Modernise the management and operation of the Council's estate to achieve fewer but better buildings:</p> <ul style="list-style-type: none"> Complete the comprehensive review of the Council's estate by the end of 2018. Fully establishing the new Corporate Landlord delivery model to ensure all of the Council's estate is compliant by the end of 2018. 	Cllr Russell Goodway	Economic Development
<p>Improve the health and well-being of our employees by reducing sickness absence by March 2019 through continued monitoring, compliance and support for employees and managers.</p>	Cllr Chris Weaver	Resources
<p>Support staff development by further improving the Personal Review scheme by March 2019 so that every employee has the opportunity to have a conversation about their development and performance.</p>	Cllr Chris Weaver	Resources
<p>Get people and communities more involved in decisions</p>	Cllr Huw Thomas	Governance & Legal
<p>Ensure that the Council's consultation and engagement work is as representative as possible through reviewing and refreshing the Council's citizen engagement tools, including the citizen panel, by June 2018.</p>	Cllr Chris Weaver	Resources
<p>Champion equality and diversity, making sure that citizens' rights are protected in any changes to our public services by implementing year three of the Council's Strategic Equality Plan 2016-2020.</p>	Cllr Huw Thomas	Governance & Legal

Performance Measure:

*Operational measures which tell us if the Council is delivering effectively
(KPIs with targets)*

Assets and Property

- Reduce the gross internal area (GIA) of buildings in operational use
- Reduce the total running cost of occupied operational buildings
- Reduce the maintenance backlog
- Capital income generated

Digital First

- The number of customer contacts to the Council using digital channels

Workforce

- The percentage of staff that have completed a Personal Review (excluding school staff)
- The number of working days/shifts per full-time equivalent (FTE) local authority employee lost due to sickness absence

Citizens

- Maintaining customer/citizen satisfaction with Council Services

Democracy

- The percentage of draft committee minutes published on the Council website within 10 working days of the meeting being held.
- *TBC: voter registration*

Welsh Language

- Number of Council employees who have undertaken Welsh Language Awareness training
- Number of Council employees who have undertaken Welsh Language training

Mae'r dudalen hon yn wag yn fwriadol



Date: 11 December 2017

Councillor Huw Thomas,
Leader
Cardiff Council,
County Hall,
Cardiff
CF10 4UW

Dear Councillor Thomas,

Policy Review & Performance Scrutiny Committee: 6 December 2017

Thank you for attending the above committee. On behalf of the Members, this letter captures the committee's agreed comments and observations in respect of the Delivering Capital Ambition report and preparations for delivering the Corporate Plan 2018 -19.

Firstly, the Committee wishes to record its appreciation for the Cabinet's inclusive approach to scrutiny engagement with these important strategic plans whilst in their development stages. We look forward to sight of the draft Corporate Plan and an opportunity to scrutinise the structure and content of the Plan, including smart objectives and Key Performance Indicators (KPI's) at our meeting on 17 January 2018. May I remind you that papers for this meeting will be published on 10 January 2018. In respect of the Corporate Plan 2018-19, the Committee's new Performance Panel particularly welcomes your offer of a target setting session later in January and will consider sharing this session with the Chairs of all scrutiny committees.

Members wish to reinforce the importance of a strong alignment between all planning documents that comprise the performance framework. We note you are confident that the mechanisms for achieving this are all in place and that the Corporate Plan will clearly state the objectives, actions, targets and measures to deliver Capital Ambition. As a Committee, we will be looking for strong links between the Well-being Plan, the four-year Capital Ambition programme and the Corporate Plan.

The Committee welcomes the proposal for fundamental reviews and notes there has been in depth analysis of services and external factors, prior to selecting priority

areas for review. We note the creation of a Cabinet Performance and Delivery Group, and would welcome a strong link to this new group, to consolidate governance arrangements going forward. I would welcome a conversation as to what shape this might take and whether it would be full Committee or the Performance Panel that upholds such a link.

Members were looking for reassurance that there had been some tangible action on the City Deal in addition to the setting up of governance arrangements. We note a business plan is required for the City Deal setting out all ten Councils' aspirations, and that £500m over 20 years is perhaps less transformational than all would aspire to, however an example of demonstrable progress to date is the semiconductor project.

We would welcome sight of the workforce development toolkit, and we will programme scrutiny for March 2018, as indicated on the Cabinet Forward Plan

All Members consider it is important that organisational culture embraces digitalisation. We note you agree it is important management and staff work together to ensure the citizen remains central to the design of Council services. We wish to re-iterate that consistency of customer service organisation-wide is key. Similarly, we take on board your view that changing citizen and neighbourhood cultures is also important, and that the 'Total Street' approach (paragraphs 48 and 49) is considered to encourage this rather than burdening citizens with improving their neighbourhoods.

Closely aligned to organisational culture, we consider breaking down directorate silos is critical to delivering a seamless council service. We note managers understand the benefits of joining up frontline services and that you are encouraging a more open span of management control. The example of Total Street where the organisation is taking steps to align all street scene services will be the test of how effectively Capital Ambition is delivered.

The Committee has some concerns as to where the Council sits on Welsh Government's programme for local government reform in the shape of regional collaboration on shared services (paragraph 35). Given that Local Authorities are very different across Wales Members consider Cardiff should benefit from the

regional aspirations of Welsh Government, and agree with you it is important the Council retain control of key services.

Finally, Capital Ambition places communities front and centre. We acknowledge you consider the focus should be on inequalities, particularly of health and opportunity. However all communities have needs and we would therefore urge that Capital Ambition works for the whole City.

To recap, in addition to the above observations, the Committee:

- Will programme scrutiny of the 2018-19 draft Corporate Plan on 17 January 2018, and requests that papers are made available in time for statutory publication on 10 January 2018;
- Welcomes your offer of a Corporate Plan 2018 -19 target setting scrutiny session later in January with the Committee's new Performance Panel, which we will consider sharing with the Chairs of all scrutiny committees;
- Has asked me to discuss with you what shape the Committee's link with the new Cabinet Performance and Delivery Group might take, to consolidate performance governance arrangements going forward;
- Will programme scrutiny of the workforce development toolkit for March 2018, as indicated on the Cabinet Forward Plan.

Once again, on behalf of the Committee, please pass my sincere thanks to all who attended PRAP Scrutiny Committee for the consideration of Delivering Capital Ambition. We look forward to your response and wish you all the best in drafting the Corporate Plan 2018-19 to deliver your Capital Ambition.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'David Walker', with a stylized, cursive script.

COUNCILLOR DAVID WALKER

CHAIR, POLICY REVIEW AND PERFORMANCE SCRUTINY COMMITTEE

cc Members of the Policy Review & Performance Scrutiny Committee
Paul Orders, Chief Executive
Christine Salter, Corporate Director Resources
Joseph Reay, Head of Performance & Partnerships
Dylan Owen, Head of Cabinet Office
Debi Said, Cabinet Support Officer
Joanne Watkins, Cabinet Office Manager