# Corporate Scrutiny and Performance Panel 6 Month Performance Update 13 December 2007

## 1. Progress against Priorities

Summarise progress against this priority which was identified in start of year presentation

Priority	Progress
Proactively lead and participate in a council wide task team to manage the IIP preparation and assessment processes, including a health check and achieve formal IIP recognition for the council as a whole by 31.12.07.	It was agreed at SLT in May 2007 to co-ordinate a health check of the organisation against the liP standard. The outcome would establish whether it was achievable to meet the standard by 31 December 2007.  The health check was carried out by an external liP assessor out between June and August.  A report was sent to SLT on 1 November 2007. This included a copy of the assessor's report and his recommendations.  The paragraph below is an extract from the health check report:  Risk Management The health check is designed to give the organisation picture of how it is doing against the liP framework. The outcomes of the health check have acknowledged the risks associated with continuing to achieve the standard by 31 December 2007. Taking time to embed the framework will put the organisation in a better position, culturally to achieve liP.  After considering the assessor's report, a revised and more realistic date was set for the achievement of liP. This date is 30 September 2008.
Finalise the business support restructure and deliver the target savings of £930k	Budget savings on target to be achieved. Structures have developed further but some gaps still exist. This is linked to further developments and discussions on the model for service delivery. Plans will be in place to address most of these gaps prior to 31st March.

Turn round all benefits claims within an average of 36 days	For each of the last 10 months (Feb 07 to Nov 07) we have processed new claims within an average of under 30 days. This achieves the top rating of "4 - excellent" from the DWP. Our year to date performance for 2007/2008 is 26.8 days and we are well within target to achieve below 30 days for the year 2007/2008 this compares with performance for the year 2006/2007 of 73.63 days.
Support effective performance management across the partnership by providing advice and support using the CIPPF	The Corporate Performance Management Team have continued to provide support on all elements of the CIPPF and this year are running 14 different training courses for officers, members and partners.
To achieve level 3 of the Equality Standard by 31.03.08	Active progress is being made under the coordination of a steering group for the achievement of the level 3 standard by 31.3.08
To have SLAs in place by 31.03.08 for: Legal Services; Finance; HRD; Performance Management; Business Support	SLA's in Business Support are not yet in place, due to discussions on their application within the future model for the service. Development has also been delayed due to the amount of capacity required to ensure budget savings are achieved. A pilot has been drawn up for Financial Administration with a roll out to be agreed, with the intention to agree further priorities in quarter 4.
Embed case management standards and risk management processes in Legal Services by 31.03.08 & 31.05.07 respectively.	
Deliver all aspects of the 2007/8 transformation programme by 31.03.08	New programme management methodology has been introduced to enable robust monitoring of the programme. Delivery milestones are being tracked through programme boards
Deliver a sustainable financial future and a balanced budget by 12.03.08.	Robustly monitored on a regular basis.
Promptly produce an action plan in response to the H&SE report and implement in its entirety by 31.03.08	

Demonstrate efficiency and vfm and a sustainable financial future and a balanced budget by 12.03.08	Increased vfm score from 2 to 3 in 2006 and this has been further embedded in 2007, the official score is yet to be confirmed although there was strong and positive feedback provided during the onsite inspection.
Prepare for and administer a successful CA and JAR	Preparations for both the corporate assessment and the JAR are progressing well. The CA self assessment is currently being finalised and planning meetings with inspectors have been staged. All those involved are aware of their own responsibilities within the process.
Have succession plans for each of the four service groups and evidence of effective leadership	
Deliver the Lyons action plan by 31.03.08	Stopped

#### 2. Performance Data

A summary of quarter 2 performance date should be inserted here, and a copy of the scorecard annexed (Services to consider use of BVPI PIMS scorecard as 'live' date on the night)

## QUARTER TWO BEACON INDEX AND BEST VALUE PERFORMANCE INDICATOR OUTCOMES

## **Beacon Index**

The Beacon Index (BI) was revised to incorporate the new service pledges for 2007/08 and was approved by cabinet on 18 April 2007. The BI closely monitors the council's delivery of its vision, pledges and corporate health indicators.

Overall quarter 2 performance is summarised in the table below and sets out actual and predicted performance on all BI measures as at 30 September 2007 (i.e. the first six months of 2007/08). Measures that can only be reported annually have been excluded from the analysis shown below. 75.7% of performance indicators (PIs) are on track (Green), 13.5% need close monitoring to ensure performance remains on track (amber), and 10.8% require corrective action (red).

	Red		Red Amber			Green	Total		
	No	%	No	%	No %		No	%	
Level 1	0	0%	0	0%	0	0%	0	0%	
Level 2	2	8%	2	9%	20	83%	24	100%	
Level 3	2	15%	3	23%	8	62%	13	100%	
Total Q2	4	10.8%	5	13.5%	27	75.7%	37	100%	
Total Q1	6	16%	4	10%	28	74%	38	100%	

Cabinet requests that all Scrutiny and Performance Panels consider the BI measures that are currently off target that fall within their remits. Currently the red measures for the Corporate Scrutiny and Performance Panel are:

People			
3.1.1	Employee Satisfaction – Proud to work for Walsall. Agree – tend to agree (survey every two years)	Paul Smith	R
3.1.5	Number of working days/shifts lost due to sickness absence per FTE (BVPI 12)	Paul Smith	R

A Performance Action Plans detailing the corrective action required for 3.1.5 is attached at **Appendix 1**. Please note there is no action plan for BI 3.1.1 as this is a survey measure which takes place every two years and corrective action in this format is not applicable.

## **Best Value Performance Indicators**

Second quarter performance data for all statutory best value performance indicators (BVPIs) for 2007/08 has also been collated. Overall, 73% of BVPIs are on track (green), 15% need close monitoring to ensure performance remains on track (amber), and 12% are red. All amber and red PIs are being monitored via directorate performance boards with a view to taking positive action. The picture for BVPIs within the remit of the Corporate Scrutiny and Performance Panels are:

Table 1 - BVPI Summary at Quarter 2 2007/08

	Total	Number of	F	Red	Ar	nber	G	reen
	number of measures	measures Reported	No	<u>%</u>	No	%	No	%
Corporate Health	15	14	2	14%	2	14%	9	71%
Benefits	9	9	0	0%	2	22%	7	78%

As with the Beacon Index Cabinet has requested that Scrutiny and Performance Panels consider the BVPI measures that are currently off target that fall within their remits. Currently the red measures for the Corporate Scrutiny and Performance Panel are:

**Table 2 - Red BVPIs Q2 2007/08** 

PI Ref	PI Description	2006- 07 Out- turn	Q1 2007-08 update	Q2 2007-08 update	2007-08 annual Target
Corpora	ate Health				
BV 8	Percentage of invoices for commercial goods and services paid by the authority within 30 days of receipt or within the agreed payment terms	90.90%	92.30%	90.80%	100%
BV 12	The number of working days/shifts lost to the Local Authority due to sickness absence	14.53	15.59	14.35	12.50

Performance Action Plans detailing the corrective action required for these indicators are attached at Appendix 1. Please note that action plan for BV 12 is the same as that for 3.1.5.

## PROJECT MANAGEMENT

The Corporate Services Project monitoring tables below identifies that the RAG status for live Strategic projects are; 0% red, 20% amber and 80% green. The overall project monitoring for all projects identifies that the RAG status for all projects are; 0% red, 25% amber and 75% green.

Executive	Directorate	Strategic	Strategic Project Status										
Director		Projects	No I	No RAG		No RAG RE		o RAG RED A		AM	BER	GR	EEN
			No	%	No	%	No	%	No	%			
Tim	Corporate	5	0	0%	0	0%	1	20%	4	80%			
Johnson	Services												
	Total	5	0	0%	0	0%	1	20%	4	80%			

Executive	Directorate	All	All Project Status							
Director		Projects	No RAG RED		RED		AM	BER	GR	EEN
			No	%	No	%	No	%	No	%
Tim Johnson	Corporate Services	8	0	0%	0	0%	2	25%	6	75%
	Total	8	0	0%	0	0%	2	25%	6	75%

The Pay and Grading Review project and the Cannock Chase Charity project are the two projects identified with an amber status.

The Pay and Grading project have resolved issues relating to the questionnaire with the project steering group re-programming the project timescales in November, it is anticipated that the RAG status will be green for the next Corporate Services Performance Board report due in December 07.

The Cannock Chase Charity project have addressed the legal and financial issues which were effecting the delivery of the project and it is anticipated that the RAG status will be green for the next Corporate Services Performance Board report due in December 07.

## 3. Customer Focus

This should be used to answer the 'so what' question, by summarising any customer feedback on performance (e.g. satisfaction survey; comments, compliments and complaints etc.)

## 4. Corrective Actions

Identify what key actions you will be taking over the coming months to address any shortfalls identified in previous sections. What will be your focus\priorities for the next 6 months?

## 5. Assessment Predictions

**Current Score** 

Include overall CPA score as a minimum but also any more specific findings from inspections or returns that are relevant

**Predicted Score** 

Based on current performance what score do you predict for the next round judgements.

## PERFORMANCE ACTION PLAN

	PI INFORMATION AND ACCOUNTABILITY									
lden	,	Pledge Number 3.1.5 (BV12) Title: The number of working days/shifts lost due to sickness absence								
CEDVICE	Human Resources & Development	DIRECTORATE	Regeneration							
OFFICER	Sarah Homer, AD	CABINET MEMBER	Cllr Griffiths							

PERFORMANCE DATA										
	LAST YEA	\R		THIS YEAR					NEXT YR	
Target	Outturn	Quartile	Target	arget Q1 Q2 Q3 Q4 Est'd outturn						
8	12.53	7.93	12.5	15.59	14.35			14.35	11.5	

## WHY IS CURRENT/PROJECTED PERFORMANCE NOT ON TARGET?

Briefly explain the reasons. List the most significant reasons first. Be clear and up-front. Mention targets, resources, environment, change, other issues.

- Short-term absence has increased by 13% above the level for the same period last year, while long term absence increased by 5%. Two thirds of days lost are attributable to long term sickness.
- The major causes of absence are stress, depression, mental health and fatigue syndrome (long term); infections (short term) and back, neck and other muscular / skeletal causes (long and short term).
- There has been no major outbreak of influenza, or other significant societal cause. A poor summer weather-wise may have contributed to increased absence in July and August, which is contrary to usual expectations.
- Compliance with return to work arrangements in the Absence Management policy is patchy and low compliance correlates broadly with high absence levels.
- Detailed data from the Trent system continues to be challenging. It's accuracy is
  often questioned by managers, potentially obscuring the issues. Data accuracy
  requires managers to actively engage in the process of checking and confirming
  their service structures through HRD Direct and ensuring that all sickness
  documentation is completed.
- Responsibility for the proactive management of absence is with line managers. Use
  of the HRD online system to monitor sickness is inconsistent by managers across
  the Authority.
- Targets are not set at directorate and service level to be achievable in the context of high absence rates, or challenging in areas of low absence. A differentiated approach is needed that encourages good performers to do better still as well as focussing the efforts of the poor performers on improving and which, if all deliver to target, add up to the overall BVPI target

## PLEASE COMPLETE PAGE 2

## WHAT ARE YOU DOING TO IMPROVE PERFORMANCE?

What has already been done? To what extent has it worked? What else is planned? What else needs to happen? Exactly how and why will these actions make a positive difference? When will we see a difference and by how much?

- This issue is now a high priority within the Authority. SLT, Directorates and Members
  are focussing on the impact and the actions necessary to reduce absence levels as a
  matter of urgency
- The new absence policy will be reviewed, particularly in relation to triggers for management intervention in frequent short spells of absence and to look at the possible benefits of health promotion activity.
- Analysis is being undertaken to identify trends in sickness and to target any problem areas or periods of the year.
- HRD currently provides Directorate performance boards with sickness data. However, with immediate effect the following will also be supplied:
  - o breakdowns of more detail on their sickness absence
  - o compliance rates in issuing NOCs / FNOCs,
  - o compliance with Return to Work arrangements

where the policy is not being complied with performance boards are urged to take the appropriate action with the relevant managers.

- HRD direct provides managers with direct access to current information on sickness levels within their teams to ensure constant monitoring.
   Areas of low take up of HRD Direct will be reported to SLT.
- HRD will cross refer records of long and frequent short term absences with live casework and contact managers where there are queries.
- Additional resource is being recruited into the occupational health team and particular activity around stress management is being targeted where stress levels are known to be high
- Longer term work to address the main causes of absence through pro-active health measures and training for staff are currently being scoped.
- A focussed task team under Sarah Homer is also considering what additional interventions may be required, particularly in relation to long term sickness.
- While short-term absence may reduce with the introduction of new triggers long term absence will take longer to turn around. As this constitutes two thirds of all days lost it is likely that positive results will be slower to realise.

## WHAT ARE THE RISKS AND OPPORTUNITIES?

What issues/factors may adversely impact on performance and stop you achieving your targets? What are you doing to reduce this risk? What else needs to happen e.g. a change in council policy? Why? When? By whom?

- The recent changes to the sickness absence policy removed the trigger point around short term absences. This is being reviewed as this may have led to some increase in short periods of absence, although this is difficult to prove.
- The engagement of managers in bringing down absence rates in their own services by following procedures is vital – clear and sustained focus on the issue from senior management, supported by HRD will help to achieve this.
- A working group has been established within HRD to maintain focus on the issue and ensure that a coherent package of information, advice and support is provided to managers, including targeted support and challenge. Additional interventions are under consideration with Sarah Homer the SLT and Portfolio Member, Cllr Griffiths.
- Work continues with managers to amend and confirm team data on Trent so that sickness is accurately recorded. HRD also continues to promote the use of the HRD Direct portal so that managers can access current information, to assist their proactive management of this issue.

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PLEASE EMAIL THIS FORM TO: Andy Field or Angela Walker

## PERFORMANCE ACTION PLAN

PI INFORMATION AND ACCOUNTABILITY						
PI NUMBER & TITLE		PI Number - BVPI8  Title - Prompt Payment of Invoices				
SERVICE	Financial Administration & Support Services	DIRECTORATE	Corporate Services			
OFFICER	Iain Horan	CABINET MEMBER	Cllr Arif			

	PERFORMANCE DATA								
LAST YEAR			THIS YEAR				NEXT YR		
Target	Outturn	Quartile	Target	Q1	Q2	Q3	Q4	Est'd outturn	Target
100%	89%	4 <sup>th</sup> Quartile	100%	94.56%	90.08%			92.32%	100%

<sup>\*</sup> based on 04/05 all England quartile data

## WHY IS CURRENT/PROJECTED PERFORMANCE NOT ON TARGET?

Briefly explain the reasons. List the most significant reasons first. Be clear and up-front. Mention targets, resources, environment, change, other issues.

The target for paying all invoices within 30 days of receipt to the council is 100%. This is a former national statutory target set by national government which was subsequently adopted by the council as a local target to drive up performance for this measure.

During 2006/2007, Strategic Transformation saw a period of considerable change where invoice payment teams that were previously managed by their respective services were consolidated into the Financial Administration & Support Service structure within Corporate Services.

Despite this period of change, the outturn figure for 2006/2007 indicates the process has been successfully managed, only showing a negligible drop in performance of 0.3% against the previous financial year's outturn figure.

The council's performance to quarter 1 of 2007/2008 in respect of prompt payments is reported as 94.56%, already showing signs of an improvement, with an increase of 3.3% on the outturn figure for 2006/2007.

However the performance in quarter 2 of 90.08% has slightly worsened due to the standardisation of the recording processes for payment information. Previously, some services areas were recording the invoices according to the date that the invoice was received and authorised as correct for payment. However, as part of the overall plan to standardise processes within the division, September 2007 saw the process change within Business Support Services to record the date the invoice was first received into the Authority which is in accordance with CIPFA and national government guidelines.

## PLEASE COMPLETE PAGE 2

## WHAT ARE YOU DOING TO IMPROVE PERFORMANCE?

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Achieving 100% is extremely challenging and following the full implementation of the restructure and consolidation of the creditors payment function, the whole process of dealing with invoices will be reviewed using Business Process Re-engineering techniques.

Work is on-going to identify and target specific areas that are of the most concern and offer alternative methods of operating, re-designing and streamlining current processes to make them more efficient and cost effective.

Alongside the BV8 indicator which records the date the invoice is first received into the Authority to the date the invoice was paid, we are also looking to develop a local performance indicator which will allow us to record the date the invoice was received as authorised and correct for payment against the date the invoice was paid. This should highlight specific services and areas where there is a delay in the turnaround of authorising invoices and allow us to target those areas as a need for improvement.

The ultimate aim will be to speed up the process and achieve future targets, producing a more responsive delivery of service to improve customer satisfaction and have a positive impact on overall performance in 2007/2008.

## WHAT ARE THE RISKS AND OPPORTUNITIES?

What issues/factors may adversely impact on performance and stop you achieving your targets? What are you doing to reduce this risk? What else needs to happen e.g. a change in council policy? Why? When? By whom?

SIGN OFF					
YOUR NAME	lain Horan	YOUR 🕿	Ext 2707		
ED's SIGNATURE	James Walsh	DATE	23.10.07		

PLEASE EMAIL THIS FORM TO: Andy Field or Angela Slattery