Cabinet – 30 Nov 2005

BEACON INDEX – quarter 2 performance 2005/06

Portfolio: Councillor M. Longhi

Service Area: Performance Management – corporate focus

Wards: All

Forward Plan: No

Summary of report:

This report presents Beacon Index performance for the first six months of 2005/6. 63% of Performance Indicators (PIs) in the Index are on track (green), 27% need close monitoring to ensure performance remains on track (amber), and 10% of indicators are red. Corrective action plans are attached for the three indicators which have become red during this period and there is still scope to take corrective action to maximise performance in 2005/06. All amber PIs are being monitored via directorate performance boards with a view to taking positive action.

Recommendations:

(1)   To note and debate the second quarter performance of the Beacon Index.

Signed: ....

Signed: ....

Executive Director: Carole Evans

Portfolio holder: Cllr M. Longhi

Date: 21.11.05

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Resource and legal considerations

The Beacon Index provides a focussed overview of the council's performance to enable continuous improvement and good service provision.

Citizen impact

The Beacon Index is reported quarterly to cabinet and EMT and contains what are considered to be the most important indicators of current performance. These reports are a public demonstration of how the council seeks to ensure continuous service improvement. This data must be used proactively to manage performance, continuously targeting resources to improve outcomes.

Community safety

Several PIs relate to community safety issues. These include 2.3.1, 2.3.2, and 2.3.3 which measure the number of victims of anti social behaviour, all recorded crime and the number of alley-gating schemes implemented respectively.

Environmental impact

Several PIs relate to environmental issues affecting the community. These include 2.1.1 and 2.1.2 which deal with the proportion of household waste recycled and fly-tipping.

Performance and risk management issues

Regular performance monitoring and reporting is part of the performance management framework. This report includes PIs that are used within the scoring process for the Comprehensive Performance Assessment (CPA). Our focus is to improve council performance to benefit our residents and service users. The CPA uses PIs and inspection results to award an overall category to every council. CPA 2005 moves away from service inspections for Housing, Culture and the Environment, placing greater emphasis on PIs and other performance data. In October, the Audit Commission published its service assessment proposals for these areas. Work is currently underway to determine our likely overall service scores based on these proposals. The CPA category is intended to show each council's performance relative to others. These high level PI targets are used to manage performance of services, teams and individuals; with targets set for individual employees through the internal IPM (appraisal) system.

Regular performance monitoring and reporting is used proactively to measure progress towards achieving targets and to compare our services with others. This enables services to take corrective action where necessary to ensure that performance stays on track and improves. PIs are monitored via the service plan review process, EMT and directorate performance boards. The Beacon Index is also monitored via scrutiny and performance panels, forming a key part of their performance management role.

Equality implications

Several PIs monitor generic equality issues. These include 3.1.7 and 3.1.8 which monitor the % of disabled and minority ethnic staff employed by the council respectively. This monitoring enables council services to maintain a clear focus on these important aspects and thereby improve quality in both service delivery and employment matters.

Consultation

Staff and councillors accountable for the performance of the services were consulted on the revised set of strategic indicators.

Vision 2008

The Beacon Index reflects the council's vision, strategic priorities and pledges.

Background papers

- CPA – The Harder Test – Audit Commission Oct 2005
- Service Assessment frameworks – Audit Commission Oct 2005
- Quarterly performance reports to cabinet in 2004/05 & 2005/06
- BVPI guidance 2005/06 – ODPM (February 2005)
- Walsall Council's Performance Plan 2005/06

1.   Beacon Index for 2005/06

The Beacon Index tracks more closely the council's delivery of its vision, pledges and corporate health indicators and is shown in **Appendix 1**.

2.   Summary of performance

Actual and predicted performance at quarter 2 is summarised in **Table 1**. The indicators that can only be reported annually have not been included in the analysis shown below.

Table 1

	Number of measures	Reported	Q2 2005/06		
			RED	**AMBER**	**GREEN**
LEVEL 1	14	7	14%	0%	86%
LEVEL 2	44	34	12%	21%	68%
LEVEL 3	16	10	0%	70%	30%
		Overall	10%	27%	63%

At level 1 there has been increase in the number of indicators predicted to reach their annual target. This is due to continuing improvement across all services which ensure the council remains on track to reach its CPA targets set out in measure 1.10.1. An update has been provided for 1.9.1 (extent to which residents feel the council listens to their concerns) which was reported red in Q1. This annual satisfaction measure will remain red for the remainder of 2005/06.   Indicator 1.10.2 which measures the % of transformational targets delivered by the strategic partnership has not yet gone live as the contract has not yet commenced, and will be included in future reports once it starts.

At level 2, performance remains on track for most PIs/measures to meet their targets (67% green). However, 12% require corrective action to address performance gaps. At level 3, performance remains broadly similar to Q1 with one indicator 3.1.7 (% of disabled employees) moving from green to amber. Corrective action plans are attached at **Appendix 2** for measures 2.5.3b (no. of non decent private sector housing units occupied by vulnerable households made decent), 2.5.5 (no. of adaptations completed for vulnerable living at home), and 2.7.3a (% increase of library opening hours outside 9-5, Mon - Fri). No corrective action plan has been produced for 2.6.3b (no of children registered on Ready Steady Summer scheme mentoring scheme) as this event has taken place. However the learning from this event is being considered by the service to ensure that any similar measure adopted in the future has a better chance of meeting or exceeding its target.

Table 2 shows a detailed breakdown of the relative movement of the indicators between Q1 and Q2.

Table 2

	RED			AMBER			GREEN		
	Q1	Q2	Difference	Q1	Q2	Difference	Q1	Q2	Difference
LEVEL 1	25% (1)	14% (1)	-11%	0%	0%	none	75% (3)	86% (6)	+11%
LEVEL 2	3% (1)	12% (4)	+9%	21% (7)	21% (7)	none	76% (25)	68% (23)	-9%
LEVEL 3	0%	0%	none	60% (6)	70% (7)	+10%	40% (4)	30% (3)	-10%
Overall	4% (2)	10% (5)	+6%	28% (13)	27% (14)	-1%	68% (32)	63% (32)	-5%

Data presented in brackets represents the actual number of measures in each RAG/Level/Quarter

Table 3 sets out those PIs currently identified at risk of not achieving their target and those which have dropped from green to amber. These must have proactive correction action to recover the position. This table is split to show those PIs where there is still an opportunity for robust corrective action to be taken and those where final performance data has been reported for 2005/06 and will therefore continue to be categorised as red for the rest of 2005/06.

Table 3

Ref. No.	Vision Priority	Measure Description	Q1 RAG	Q2 RAG
Corrective action capable of improving 2005/06 annual figures				
2.3.3	Ensure all people are safe and secure	We will work with Local Neighbourhood Partnerships to install up to 10 alley gating schemes in crime hotspots across the borough where there is community support for this	G	A
2.5.3b	Make Walsall a healthy and caring place	The number of non-decent private sector housing units occupied by vulnerable households made decent (HL 3)	A	R
2.5.5	Make Walsall a healthy and caring place	We will support more vulnerable people to live in their own homes. PI Measure - LPI aim to increase the number of adaptations completed compared to 2004/05 (52) by at least 100%	G	R
2.7.2	Make it easier to access services	We will create a new, easy-to-use web site that will help local people access services around the clock	G	A
2.7.3a	Make it easier to access services	Percentage increase of Library opening hours outside 9–5, Mon–Fri (LLC 13)	G	R
3.1.7	Corporate Health - People	Percentage of employees declaring they meet the Disability Discrimination Act 1995 disability definition (BVPI 16a)	G	A
Corrective action not capable of improving 2005/06 annual figures				
1.9.1	Listen to what local people want	LPI – Extent to which residents feel the council listens to the concerns of local residents (tracker survey).	R	R
2.6.3b	Encourage everyone to feel proud of Walsall	No. of children registered on the Ready Steady Summer mentoring scheme (as mentees) (LLC 10)	n/a	R

Table 4 shows those indicators where the RAG status has improved from Q1 to Q2. This demonstrates that effective monitoring, reporting and robust corrective action can lead to improved performance levels.

Table 4

Ref. No.	Vision Priority	Measure Description	Q1 RAG	Q2 RAG
2.3.1	Ensure all people are safe and secure	We will work with partners to use the range of legal powers available to prevent and tackle anti-social behaviour (CRS 12)	R	A
This measure has improved since Q1, resulting in a move from red to amber RAG rating. Key influencing factors for this are: targeted police activity in the town centre at weekends; targeting of hot-spot areas via the Borough Resource Allocation Group tackling crime, disorder and anti-social behaviour; more funding via Safer Stronger Communities Fund, Neighbourhood Renewal Fund etc. targeted at specific interventions/projects; 2 crack house closures; detainment of persistent prolific offenders.				
2.4.2	Make our schools great	We will complete the construction of six new school sport and community facilities	A	G
All facilities have received permission to proceed from NOF. Construction of 5 facilities completed end of Sept. Build programme commenced at remaining facility remains on schedule to open by Feb 06.				
2.5.6	Make Walsall a healthy and caring place	We will complete the build of three new young people's fitness centres (LLC 7)	A	G
Build programme commenced at the end of September on all 3 young people's gyms. Completion on schedule for December 2005.				

As the Beacon Index has been substantially revised for 2005/06 to make it more strategically focussed and more aligned with our corporate vision, aims and objectives, it is not possible to make any meaningful comparison with performance from previous years. However, year on year comparisons are routinely made for individual BVPIs and local indicators throughout the council, to aid learning, sharing of best practice and service improvement.

The CPA performance management score of 3 out of 4 recognises improvements already made and the procurement and implementation of the recently acquired performance management information system will enhance the monitoring and reporting capabilities within the Council.

Interpreting the data

The information in **Appendix 3** is set out as follows

Type	No.	Description	Accountable officer	Six month update 2005/06	6mth 2005/06 performance compared to		RAG	05/06 Target	06/07 Target
					1st Qtr 2005/06	6 mth 2004/05			
Buildings	3.3.1	% of council buildings open to the public in which all areas are suitable for and accessible to disabled people (BVPI 156)	Keith Stone	21.1%	⬆	⬆	G	25%	30%

No. – identifies the unique Beacon Index reference number.

Description – What the PI is and also highlights the priority or pledge being monitored.

Six month update 2005/06 - the actual performance for the first six months of 2005/06.

6mth 2005/06 performance compared to:

Q1 2005/06 - compares 6 month performance with that in Q1 of 2005/06.

6mth 2004/05 – compares 6 month performance with the 6 month performance in 2004/05.

⇧	Indicates improvement against those figures
⇔	Indicates performance is the same as those figures outturn
⇩	Indicates declining performance against those figures

RAG status – The traffic light system indicates if the 2005/06 target is likely to be met.

Green – Performance on track to meet the 2005/06 target

Amber - Performance may not reach the 2005/06 target, and therefore requires close monitoring and corrective action.

Red - Performance not on track and the target at risk of not being met, so immediate corrective action is required. These will be closely monitored within directorates to ensure that performance improves.

05/06 & 06/07 & 07/08 Targets - For level one measuring vision delivery, 3 year forward target are set to measure the vision of reaching excellence by 2008. For levels 2 and 3 targets are only shown for 2005/06 as these levels measure the delivery of annual pledges and key corporate health indicators.

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