

Improvement Report - Council Scorecard

Derby City Council

30-Jun-2013



Measure Details	Quarterly Target Status	Forecast Status	Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
Directorate : Adult Social Care, Health and Housing						
LPI 52c Percentage of Adult Services complaints responded to within the statutory timescale	Amber	Red	<p>Quarterly data Target 70.0% Actual 67.0%</p> <p>Forecast data Target 95.0% Actual 70.0%</p> <p>Improving</p>	Provisional data based on 9 closed complaint cases that have been logged within the CRM system during quarter one. Processes have been reviewed and officers are working to ensure complaints are responded to in accordance with agreed timescales. It is expected this figure will improve throughout quarters 2 and 3.	Training has been made available on the LAGAN system. A reporting tool has been made available to track complaints processing. Data recording and data quality issues have been identified and these are being addressed.	No further action proposed at this point. Complaints in both Adult Social Care and Housing are being tracked on a monthly basis.
LPI52g Percentage of housing complaints responded to within timescale	Blue	Red	<p>Quarterly data Target 70.0% Actual 75.0%</p> <p>Forecast data Target 95.0% Actual 70.0%</p> <p>N/A</p>	This is a provisional figure based on 4 cases submitted to the CRM system during quarter one. There are 3 other cases on the system which need updating, therefore this figure is likely to change.	Training has been made available on the LAGAN system. A reporting tool has been made available to track complaints processing. Data recording and data quality issues have been identified and these are being addressed.	Complaints in both Adult Social Care and Housing are being tracked on a monthly basis.
PH PM02 Health Checks - uptake	Red	Green	<p>Quarterly data Target 2.3% Actual 2.1%</p> <p>Forecast data Target 11.3% Actual 11.3%</p> <p>Improving</p>	Uptake of health checks is lower than expected in Q1. However, uptake is affected by seasonal variation and improvement is expected as the year progresses. In 2012/13, 11% uptake was achieved and this is expected to be exceeded in 2013/14.	No further actions are required.	No further intervention proposed, this will be reviewed at quarter two.

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YA&H PM06 Number of homelessness acceptances	Amber	Green	Quarterly data Target 75.0 Actual 76.0 Forecast data Target 250.0 Actual 250.0 Deteriorating	Although this figure is exceptionally high for this quarter it was partially a result of a short term alteration in the recording of figures for homeless single households. However, even taking this into account, there is an increase in the number of acceptances which is due to the adverse economic climate and the reduction in Housing Related Support accommodation.	We are hopeful that the reconfiguration of our services will assist us in putting an emphasis on a pro active rather than reactive service.	Performance on this measure is being monitored alongside other homelessness measures on a monthly basis.
Directorate : Children and Young People						
C PM02a To manage sufficiency and promotion of three and four year FEEE places to ensure 90% take up in each locality by eligible children	Amber	Green	Quarterly data Target 92.0% Actual 89.5% Forecast data Target 92.0% Actual 92.0% Deteriorating	Current DfE data indicates Derby's FFE take up is 95%. However if current populations data taken from GP registers is matched against the January 2013 census data this shows an overall FEE take up of 89.5% . Only Locality 3 overall is not exceeding 90% with the wards of Arboretum and Normanton having the lowest overall take up % at 73.9% and 83.2%.	CFIT continue to undertake targeted activities to increase FEEE take up where this is less than 92%, targeting hard to reach families. The strategy linked to the new two year old entitlement means a significant number of new FEEE places will be created for eligibe 2, 3 and 4 year olds to access to support the take up to be greater than 92%.	Review performance at the end of quarter 2 - forecasts indicate that the target will be achieved.
L&I PM23c Percentage of inspected services settings and institutions that are judged as 'good' or 'outstanding' - Maintained schools	Amber	Green	Quarterly data Target 70.0% Actual 69.0% Forecast data Target 80.0% Actual 80.0% Improving	Overall the percentage of maintained schools judged to be 'good' or better has improved from 48% at the end of June 2012 to the current position of 69%.	The performance of schools is a priority for the School Improvement Team who recently implemented the strapline 'every school good or better'. The completion of a self-assessment for an inspection of LA support to schools, accompanying action plan and the introduction of the Educational Development Board ensures that all appropriate actions are being taken to improve performance.	The performance of schools, KS2 outcomes and the capacity across the city to make further improvements has been highlighted as a key line of enquiry for Children's Services regional peer challenge that is scheduled for early November 2013.

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LPI 52b Percentage of CYP complaints responded to within the statutory timescale	Red	N/A	<p>Quarterly data Target 80.0% Actual 0.0%</p> <p>Forecast data Target 80.0% Actual N/A</p>	This information is still being updated in Lagan CRM, currently there are no response dates entered to calculate this measure.	Training has been made available on the LAGAN system. A reporting tool has also been made available to track complaints processing. Data recording and data quality issues will be identified.	Monthly reports will be taken to DMT meetings and actions identified to improve complaint recording.
SS PM07 - Children in Care per 10,000 population aged under 18 (EIISS PM05)	Amber	Amber	<p>Quarterly data Target 79.00 per 10,000 population Actual 80.40 per 10,000 population</p> <p>Forecast data Target 79.00 per 10,000 population Actual 80.10 per 10,000 population</p> <p>Improving</p>	<p>The total number of looked after children has reduced slightly from the position of 81.6 per 10,000 reported at the end of March 2013 to the current result of 80.4 per 10,000.</p> <p>The target for 2013/14 was reduced from 90.4 to 79 per 10,000, which is impacting on the classification of this measure.</p>	<p>A quarterly monitoring report for Children in Care has been developed and is reported through the Children in Care Commissioning Group to ensure all elements of looked after children are considered.</p> <p>The total number of looked after children is monitored on a weekly basis and there are a number of strategies in place to support an improvement in this measure (including the updated Keeping Families Together Strategy and Looked After and Adopted Children and Young People Strategy)</p>	No action proposed at this point - review performance on a monthly basis.
SS PM13 (L&I PM24) Percentage of looked after children with a current PEP	Red	Red	<p>Quarterly data Target 90.0% Actual 80.0%</p> <p>Forecast data Target 90.0% Actual 85.0%</p> <p>Deteriorating</p>	<p>Performance in relation to the total number of looked after children with a current PEP has fallen from 93.6% at the end of March 2013 to the current result of 80%.</p> <p>A similar deteriorating trend was recorded at the same period in 2012 and it should be noted that this measure is impacted by seasonal factors including school holidays.</p>	<p>The percentage of children with a current PEP was reviewed at a Performance Surgery in June 2013, which included a review of current performance and proposed actions to improve performance.</p> <p>It was agreed that the focus needed to be on sustainable performance as this measure is subject to considerable variation.</p>	This measure will be reported back through CYP Overview and Scrutiny Board for a follow-up to the Performance Surgery in September 2013.

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SS PM26 Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days)	Red	Red	<p>Quarterly data Target 275.0 Actual 432.0</p> <p>Forecast data Target 275.0 Actual 400.0</p> <p>Deteriorating</p>	Progress in practice is improving as care planning processes look to move children quickly into permanency. However there continues to be a national shortage of adoptive families, and for some children they are difficult to place. For example a sibling group of 3 may wait over 21 months for a match and then have a successful adoption, but this is 10% of this cohort and will negatively impact on the statistic.	An improvement plan has been developed following the adoption diagnostic in June 2013.	Key actions to be taken over the next month include; the completion of a turning the curve session on the recruitment of adopters to inform the development of a wider carers pathway with supporting performance information and the development of up to date marketing and recruitment information.
Directorate : Neighbourhoods						
EaRS PM14 Number of dwellings and shared houses improved to acceptable standard after statutory or informal action	Amber	Green	<p>Quarterly data Target 55.0 Actual 52.0</p> <p>Forecast data Target 220.0 Actual 220.0</p> <p>Improving</p>	<p>Quarter 1 figure is slightly below target. However, we are confident that we will achieve the year end forecast.</p> <p>Performance during the quarter was impacted by the three prosecutions of landlords that was undertaken. The time officers spent on the preparation of the prosecution file was considerable and did impact on workloads. Due to this there was a reduction in the number of inspections carried out and ultimately the number of dwellings that were improved.</p> <p>Prosecutions may increase over the coming months as certain rogue landlords are being targeted.</p>	No actions are planned at this time due to the target only being missed by 3 dwellings.	Review performance at end of Quarter 2 as forecasting to achieve target. If the number of prosecutions increases then actions will be put in place.
EaRS PM02a Number of reportable accidents within the Council	Red	Green	<p>Quarterly data Target 7.0 Actual 11.0</p> <p>Forecast data Target 30.0 Actual 30.0</p> <p>Deteriorating</p>	<p>There were 11 RIDDOR reportable accidents recorded during Quarter 1. This compares with seven reportable accidents recorded for the same period last year. The annual average number of reportable accidents for our comparator group was 39 in 2012/13.</p> <p>Managers have been attending mandatory training which has raised awareness and increased reporting.</p>	All accident reports are reviewed by our H&S Advisers and follow-up action taken as necessary. Quarterly statistics are taken to Directorate Management Team, DiMT, and Joint Consultative Committee (JCC) meetings.	Review performance at end of Quarter 2 as forecasting to achieve year-end target.

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L&C PM05 Increase in attendances in leisure centres	Red	Blue	<p>Quarterly data</p> <p>Target 322,798.0</p> <p>Actual 276,080.0</p> <p>Forecast data</p> <p>Target 1,291,195.0</p> <p>Actual 1,406,259.0</p> <p>Improving</p>	<p>Overall attendances for quarter 1 were 12,000 down compared to the same period last year. However, Moorways Stadium was delayed in opening until June 2013 which meant that a number of events did not take place. Originally the works were due to be completed in April 2013 and so we expected to have attendances for these events when we set this year's target.</p> <p>One centre did not record all coaching and club attendances. This has now been rectified.</p>	<p>All the leisure centre's have reviewed their processes for recording attendances to ensure that they are capturing all attendances.</p> <p>Attendance targets have been broken down further and will now be monitored and reported on a monthly basis. Any variations will be scrutinised.</p>	<p>No action proposed at this time as forecasting to achieve year end target. Review performance on a monthly basis.</p>
SP PM11 (NI 192) Percentage of household waste recycled, composted or reused	Amber	Green	<p>Quarterly data</p> <p>Target 48.0%</p> <p>Actual 46.4%</p> <p>Forecast data</p> <p>Target 48.0%</p> <p>Actual 48.0%</p> <p>Improving</p>	<p>We narrowly missed our target by 1.6 %. This was due to the pro-longed severe weather conditions experienced during February and March. This impacted on the quantity of garden waste that could be and was collected. On a positive note we have seen an increase in the amount of recycling material following the rollout of the blue bin during Quarter 1.</p>	<p>Implemented the blue bin co-mingled domestic dry recycling collection service. This has replaced the orange bag and should make it easier for households to re-cycle.</p> <p>The team have been actively promoting the new blue bins and the 'Wash-it and squash it' campaign visited several schools and supermarkets.</p>	<p>No action proposed at this point but will review at the end of quarter 2 as forecasts indicate that the target will be achieved. However, the chargeable garden waste collection scheme will also begin in mid September and this may have a negative impact on performance.</p>
PH PM06 B-You outcome - smoking cessation	Red	Green	<p>Quarterly data</p> <p>Target 576.0</p> <p>Actual 264.0</p> <p>Forecast data</p> <p>Target 2,400.0</p> <p>Actual 2,400.0</p> <p>Deteriorating</p>	<p>The stop smoking service officially transferred from the NHS to the b-You service on 1st April 2013. A protracted transition of the service to the LA has clearly had an impact on the performance of the provision.</p> <p>This is coupled with establishing new systems and protocols for the new provider. The b-You service will now have access to 4 times the number of smokers than that of the previous service, so there is every confidence that the Q1 performance issues will be resolved very quickly.</p>	<p>No further action or intervention required.</p>	<p>Will be reviewed at Q2.</p>

Directorate : Resources

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CP 08f Average working days per employee (full time equivalents) per year lost through sickness absence - Excluding Schools	Red	Red	Quarterly data Target 1.7 Actual 2.4 Forecast data Target 7.5 Actual 10.7 N/A	The June outturn figure of 0.72 days is marginally above the BV12 figure of 0.69 days. If sickness absence stayed at this rate throughout the financial year, the final outturn figure would be substantially over target.	Detailed analysis by Directorate has been requested and will be shared with DMT's. Action Plan (Performance Surgery) has been updated and circulated.	Action Plan to be reviewed at performance surgery.
F&P PM28 Achieve a Balanced Revenue Outturn	Red	Blue	Quarterly data Target 0.0% Actual 2.2% Forecast data Target 0.0% Actual 0.0% N/A	Directorate pressures are being managed in order to achieve a balanced position by the year end, however, the latest forecast position shows a variance of +2.2% against the budget requirement.	Detailed actions that the Directorates are undertaking is included in the Cabinet Report 'Revenue Budget Monitoring 2013/14 Quarter 1 Report' that went to Cabinet on 14 August 2013.	No action proposed at this point as forecast to achieve and of year target and achieve a balanced revenue budget.