

Areas for improvement exception report

Council Plan Quarter 1 Performance Report

In total there are 10 areas for improvement highlighted within the Council Plan Quarter 1 (April – June 2019) Performance Report. Areas for improvement relate to measures which are off track and direction of travel is worsening, with the exception of the measures identified for priority 2 which are rated amber and the priority 5 measure where DOT is not applicable.

Further information regarding Quarter 1 performance and what action is being taken to address areas of underperformance is provided below.

PRIORITY 1: Every child making the best start in



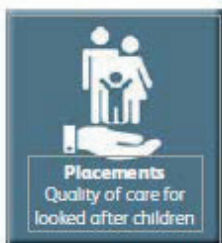
- **(1.A2) The number of children subject to a child protection plan (rate per 10K population under 18) - 94.8 against a target of 90 (lower is better)**

The number of children becoming subject to a plan have been steadily reducing since June 2018 as expected (despite an increase in demand in April/May 2019).

This will be monitored as part of the performance meetings.

- **(1.A5) The proportion of children who are subject to repeat child protection plans (within 24 months) - 10.1% against a target of 7% (lower is better)**

Trend data for the proportion of children subject to repeat plans within 24 months had shown an improving trend with a recent peak in Q1 which is currently being explored via dip sampling within the Safeguarding service.



- **(1.A8) The proportion of looked after children placed within a Family Based setting - 81.7% against a target of 85% (higher is better)**

The numbers of children in a family based setting has remained fairly consistent for much of the past 12 months at circa 82%. The impact of the market management project should have a positive impact with additional foster carers in Rotherham

Corporate Priority 1 – Every child making the best start in life

| Key | Overall status (relevant to target) | | | |
|-----|-------------------------------------|---|---|---|
| | ✓ | Measure progressing above or in line with target set | ✘ | Measure under development (e.g. awaiting data collection or target-setting) |
| | ● | Measure progress has been satisfactory but is not fully reaching target set | □ | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) |
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| Outcome | Lead Accountability (Strategic Director) | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall status | DOT | Annual | | | | Quarterly | | | | | Monthly | | | Data notes (where measure has not progressed in accordance with the target set provide details of what is being done to improve performance) |
|---------|---|--|-------------------|---------|--------------|------------------|------------------------|--------|----------------|-------|--|---|------------------|---|--|-------------------|-------------------|-------------------|--------------------|---------|--------|--------|--|
| | | | | | | | | | | | Year end 2015/16 | Year end 2016/17 | Year end 2017/18 | Year end 2018/19 | Q1 Apr - June 2018 | Q2 Jul - Sep 2018 | Q3 Oct - Dec 2018 | Q4 Jan - Mar 2019 | Q1 Apr - June 2019 | Apr-19 | May-19 | Jun-19 | |
| | | | | | | | | | | | A. Children, young people and families are protected and safeguarded from all forms of abuse, violence and neglect | Jon Stonehouse, Strategic Director Children and Young People's Services | 1.A2 | Early Help – Supporting Children, young people and families at the right time with the right care | The number of children subject to a CP plan (rate per 10K population under 18) | Ailsa Barr - CYPS | low | Monthly | 90 | ✘ | 🔄 | 65.4 | |
| 1.A5 | Children's Social Care Improvement – Ensure that all Child Protection Plan work is managed robustly and that appropriate decisions and actions are agreed with partner agencies | The proportion of children who are subject to repeat child protection plans (within 24 months) | Ailsa Barr - CYPS | low | Monthly | 7% | ✘ | 🔄 | 4.7% | 9.2% | | | 9.5% | 6.5% | 8.2% | 7.2% | 4.7% | 6.5% | 10.1% | 9.4% | 9.5% | 10.1% | Trend data for the proportion of children subject to repeat plans within 24 months had shown an improving trend with a recent peak in Q1 which is currently being explored via dip sampling within the Safeguarding service. |
| 1.A8 | Placements - Improve Quality of Care for looked after children | The proportion of LAC placed within a Family Based setting | Ailsa Barr - CYPS | high | Monthly | 85.0% | ✘ | 🔄 | Not Available | 81.1% | | | 81.0% | 82.3% | 81.0% | 82.3% | 83.8% | 82.3% | 81.7% | 81.7% | 81.8% | 81.7% | The numbers of children in a family based setting has remained fairly consistent for much of the past 12 months at circa 82%. The impact of the market management project will have a positive impact with additional foster carers in Rotherham |

PRIORITY 2: Every adult secure, responsible and empowered



- **(2.B7) All age numbers of new permanent admissions to residential nursing care for adults - 81 All age new permanent admissions to residential nursing care for adults against an annual target of 280 (lower is better)**
- **(2.B8) All age total number of people supported in residential/nursing care for adults - 931 All age people were supported in residential/nursing care for adults against a target of 900 (lower is better)**

Day to day management and oversight of new admission activity is undertaken by managers and quality checked within weekly Wellbeing Forum sessions.

Monthly performance is discussed by the senior managers accountable and reviewed against existing on-going performance clinic actions.

Note – the status of these measures is ‘amber’ satisfactory progress made, not red.

Corporate Priority 2 – Every adult secure, responsible and empowered

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| Outcome | Lead Accountability (Strategic Director) | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall status | DOT | Annual | | | | Quarterly | | | | Monthly | | | Data notes (where measure has not progressed in accordance with the target set provide details of what is being done to improve performance) | |
|---------|--|---------|--------|---|---|------------------|------------------------|--------|----------------|-----|---|---|------------------|--|--|---|-------------------|-------------------|-------------------------|--------|--------|--|---|
| | | | | | | | | | | | Year end 2015/16 | Year end 2016/17 | Year end 2017/18 | Year end 2018/19 | Q1 Apr - Jun 2018 | Q2 Jul - Sep 2018 | Q3 Oct - Dec 2018 | Q4 Jan - Mar 2019 | Q1 Apr - Jun 2019 | Apr-19 | May-19 | | Jun-19 |
| | | | | | | | | | | | B. Individuals and carers are supported to be safe, independent and resilient within a personalised model of care and support | Anne Marie Lubanski, Strategic Director Adult Social Care and Housing | 2.B7 | Commission services effectively, working in partnership and co-producing with users and carers; use resources effectively. | All age numbers of New permanent admissions to residential nursing care for adults | Ian Spicer - Assistant Director of Independent Living and Support | Low | Monthly | 280 (Cumulative target) | ● | 🔄 | | 432 |
| | | 2.B8 | | All age total number of people supported in residential/nursing care for adults | Ian Spicer - Assistant Director of Independent Living and Support | Low | Monthly | 900 | ● | 🔄 | 1,288 | 1,111 | 1,023 | 933 | 998 | 975 | 943 | 933 | 931 | 941 | 939 | 931 | <p>As per actions for 2.B7 the short stay reviews have also impacted on Qtr 1 overall number supported in residential care (as more become permanent than usual trend). However, the in Q1 1 trend is positive, from April high of 941 reducing to 931 by June and is 2 better than year-end total of 933. The Service will continue to monitor alongside actions for 2B.7 to provide assurance that year end target will be met.</p> |

PRIORITY 3: A strong community in a clean, safe environment



- **(3.A4b) 73% of vehicles and 77% drivers found to be compliant with licensing requirements during in the spot inspections against a target of 85% (higher is better)**

Action is taken against license holders found to be non-compliant. Those found to be non-compliant are given a verbal/written warning. All local trade representatives have been made aware of the reasons for failure and have been asked to inform drivers.



- **(3.B3) Total number of customer contacts by service area and overall total i) Official complaints, ii) Compliments received, iii) Service Requests - 72 complaints against a target of 10% reduction (190 cumulative for year) in the number of official complaints received (lower is better)**

The waste team are working with residents and collection crews to bring the performance in line with the previous levels.



- **(3.B4) 113 missed bins per 100,000 collections against a target of 50 (lower is better)**

The waste team are working with residents and collection crews to bring the performance in line with the previous levels.

Corporate Priority 3 – A strong community in a clean safe environment

| Key | Overall status (relevant to target) | |
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| Outcome | Lead Accountability (Strategic Director) | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall status | DOT | Annual | | | | | | | | | | | | Quarterly | | | Monthly | | | Data notes (where measure has not progressed in accordance with the target set provide details of what is being done to improve performance) |
|---|--|---------|---|--|--|------------------|------------------------|--|----------------|-----|------------------|------------------|------------------|------------------|---------------------------------|--|--|--|--|--|--|--------|--|---|---|---------|--|--|--|
| | | | | | | | | | | | Annual | | | | Quarterly | | | | Monthly | | | | | | | | | | |
| | | | | | | | | | | | Year end 2015/16 | Year end 2016/17 | Year end 2017/18 | Year end 2018/19 | Q1 Apr - June 2018 | Q2 Jul - Sep 2018 | Q3 Oct - Dec 2018 | Q4 Jan - March 2019 | Q1 Apr - June 2019 | Apr-19 | May-19 | Jun-19 | | | | | | | |
| A. Communities are strong and help people to feel safe | Paul Woodcock, Strategic Director Regeneration and Environment | 3.A4(b) | Ensure an robust, effective and efficient licensing service | The proportion of a) licensed vehicles b) drivers found to be compliant with licensing requirements during in the spot inspections | Tom Smith - Regeneration and Environment | High | Quarterly | 85% (Vehicles and drivers) | ❌ | 🟦 | | | | | 75% | 57% (vehicles) | 79% (vehicles) (Cumulative: 64%) | 88% (vehicles) (Cumulative: 70%) | 76% (Vehicles) | a) 73% (Vehicles) b) 77% (Drivers) | | | | No. of inspections classed as 'minor' is on target to exceed cumulative target for drivers but slightly down on target for vehicles. 6 vehicles were not compliant, due to display plate, condition of fire extinguisher and windscreen wipers. All 5 non-compliant drivers were not wearing their ID badges as required by their licensing conditions. All issued with written warnings. Licence holders that are found to be non-compliant are given a verbal/written warning. The warning is placed on the driver's record - if he / she is found to have committed the same misdemeanour in future then the fact that they have been warned previously will be taken into consideration when determining the most appropriate course of action that should be taken. In most cases, a similar transgression following a previous written warning will lead to either a final written warning or a review of | | | | | |
| | | 3.B3 | Deliver a cleaner, greener Rotherham to ensure that it is a safe and attractive place to live, work and visit | Total number of customer contacts by service area and overall total. Service areas measured are a) Street Cleansing, b) Grounds Maintenance, c) Litter, d) Waste Management. Contacts measured are: i) Official complaints ii) Compliments received iii) Service Requests | Tom Smith - Regeneration and Environment | Low | Monthly | 10% reduction (target around 190 cumulative for year) in the number of official complaints received. | ❌ | 🟦 | | | | | | No of customer contacts for A) 1,301 B) 6,115 C) 452 D) 716 Complaints 79 | Grounds Maintenance i) Compliments 19 ii) Compliments 11 iii) Service Requests 761 Street Cleansing i) Compliments 7 ii) Compliments 0 iii) Service Requests 8315 Litter i) Compliments 4 ii) Compliments 1 iii) Service Requests 1227 Waste Management i) Compliments 64 ii) Compliments 29 iii) Service Requests 35,358 Total cumulative complaints figure= 84 | Grounds Maintenance i) Compliments 14 ii) Compliments 1 iii) Service Requests 408 Street Cleansing i) Compliments 4 ii) Compliments 0 iii) Service Requests 1702 Litter i) Compliments 3 ii) Compliments 0 iii) Service Requests 286 Waste Management i) Compliments 43 ii) Compliments 6 iii) Service Requests 9118 Overall number of complaints Q2 = 49 Total cumulative complaints figure= 101 | Grounds Maintenance i) Compliments 3 ii) Compliments 0 iii) Service Requests 219 Street Cleansing i) Compliments 2 ii) Compliments 0 iii) Service Requests 2086 Litter i) Compliments 1 ii) Compliments 0 iii) Service Requests 173 Waste Management i) Compliments 48 ii) Compliments 21 iii) Service Requests 10,057 Overall number of complaints Q3 = 49 Total cumulative complaints figure= 150 | Grounds Maintenance i) Compliments 1 ii) Compliments 0 iii) Service Requests 49 Street Cleansing i) Compliments 4 ii) Compliments 4 iii) Service Requests 2682 Litter i) Compliments 0 ii) Compliments 0 iii) Service Requests 451 Waste Management i) Compliments 54 ii) Compliments 12 iii) Service Requests 11943 Overall number of complaints Q4 = 59 Total cumulative complaints figure= 209 | Grounds Maintenance i) Compliments 3 ii) Compliments 0 iii) Service Requests 278 Street Cleansing i) Compliments 2 ii) Compliments 0 iii) Service Requests 2216 Litter i) Compliments 1 ii) Compliments 0 iii) Service Requests 202 Waste Management i) Compliments 66 ii) Compliments 0 iii) Service Requests 10,756 Overall number of complaints Q1 = 72 Total cumulative complaints figure= 72 | | | | Complaints have risen in comparison to Q4, although it should be noted that of the 72 complaints only 31, (43%), were either partially or wholly upheld. 92% of complaints are about the Waste Service which is still affected by the significant changes implemented over the 3rd and 4th Quarter of last year. The waste team are working with residents and collection crews to bring the performance in line with the previous levels. NB- DOT is assessed against the same quarter on the previous year to reflect on seasonal impacts generating complaints. | | | | |
| B. Streets, public realm and green spaces are clean and well maintained | Paul Woodcock, Strategic Director Regeneration and Environment | 3.B4 | Ensure an efficient and effective waste and recycling service | Number of missed bins per 100,000 collections | Tom Smith - Regeneration and Environment | Low | Quarterly | 50 | ❌ | 🟦 | 62.7 | 46.92 | 42.21 | 69.51 | Q1 43.01 Overall YTD - 43.01 | Q2 44.27 Overall YTD - 43.64 | Q3 67.45 Overall YTD - 51 | Q4 146.09 Overall YTD - 69.51 | 113 Overall YTD - 113 | | | | The new Waste Service is starting to embed following the significant changes implemented over the 3 rd and 4 th Quarter of last year. missed bins are continuing to reduce however remain higher than Q1 last year, the waste team are working with residents and collection crews to bring the performance in line with the previous levels, indeed performance for June19 was 91 missed bins per 100,000 collections, in May the figure was 124. DOT based on Q1 18/19 due to seasonal factors. | | | | | | |

PRIORITY 4: Extending opportunity, prosperity and planning for the future



- **(4.B1a) 8 new homes delivered via direct Council intervention against an annual target of 175 (higher is better)**

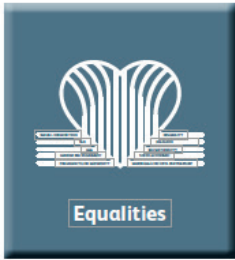
Plans are in place to accelerate growth throughout the remaining quarters and it is anticipated the year-end target of 175 new homes will be met.

Corporate Priority 4 – Extending opportunity. Prosperity and planning for the future

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| | | | | | | | | | | | Annual | | | | Quarterly | | | | | Monthly | | | | |
| | | | | | | | | | | | Year end 2015/16 | Year end 2016/17 | Year end 2017/18 | Year end 2018/19 | Q1 Apr - Jun 2018 | Q2 Jul - Sep 2018 | Q3 Oct - Dec 2018 | Q4 Jan- March 19 | Q1 Apr - Jun 2019 | Apr-19 | May-19 | Jun-19 | | |
| B. People live in high quality accommodation which meets their need, whether in the social rented, private rented or home ownership sector | Anne Marie Lubanski, Strategic Director Adult Social Care and Housing (Commenced 8th August 2016). | 4.B1(a) | Implement the Housing Strategy 2019-2022 to provide high quality accommodation | Number of new homes delivered during the year via direct Council intervention | Tom Bell - Adult Social Care and Housing | High | Quarterly | 175 | ✘ | 🔄 | | | | | | | | | | | | | | Numbers of new homes built directly as a result of the Councils intervention in quarter 1 are lower than for the same quarter last year 18/19. Plans are in place however to accelerate growth throughout the remaining quarters and it is anticipated the year end target of 175 new homes will be met . The DOT rating for the indicator is based on comparisons in performance between quarter 1 of 2019/20 and quarter 4 of 2018/19 |

PRIORITY 5: A modern, efficient council



- **(5.D6) 44.4% of Cabinet reports where an Equality Analysis Screening Assessment has been completed against a target of 100% (higher is better)**

A new process in relation to Equality Analyses was introduced in May/June and a presentation regarding the revised Equality Analysis process was provided at the Wider Leadership session in May. The steps taken along with a revised report checklist and checks during the report approval process should improve performance from Quarter 2.

Note – this is a red measure but DOT is not applicable.

Corporate Priority 5 – A modern, efficient Council

| Key | Overall status (relevant to target) | |
|-----|-------------------------------------|---|
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| | ✘ | Measure has not progressed in accordance with target set |

| Outcome | Lead Accountability (Strategic Director) | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall status | DOT | | | | | | | | | | | | | Data notes (where measure has not progressed in accordance with the target set provide details of what is being done to improve performance) | |
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| | | | | | | | | | | | Annual | | | | Quarterly | | | | Monthly | | | | | |
| | | | | | | | | | | | Year end 2015/16 | Year end 2016/17 | Year end 2017/18 | Year end 2018/19 | Q1 Apr - June 2018 | Q2 Jul - Sep 2018 | Q3 Oct - Dec 2018 | Q4 Jan - Mar 2019 | Q1 Apr - June 2019 | Apr-19 | May-19 | Jun-19 | | |
| D. Effective members, workforce and organisational culture | Shokat Lal, Assistant Chief Executive | 5.D6 | The Council complies with good practice in equalities | The proportion of Cabinet reports where an Equality Analysis Screening Assessment has been completed | Jackie Mould, Assistant Chief Executive's Directorate | High | Quarterly | 100% | ✘ | | | | | | | | | | | | | | | Of the 24 reports presented to Cabinet during the Quarter 1 period 8 had Initial Equality Screening Assessments attached and 8 had full EAs attached which meant they did not require a screening. Therefore in total 16 reports required Initial Screening Assessments and only 8 where completed. The proportion completed equates to 44.4%. A new process in relation to Equality Analyses was introduced in May/June and this is supported by an Equality Screening and Analysis Guide, Initial Equality Screening Analysis form and revised Equality Analysis form. A presentation regarding the revised Equality Analysis process was also provided at the Wider Leadership session on 22nd May. The steps taken during Quarter 1 along with a revised report checklist and checks during the report approval process is expected to improve performance from Quarter 2 onwards. |