

# **The Vale of Glamorgan Council**

## **Cabinet Meeting: 11 April, 2016**

### **Report of the Leader**

#### **Quarter 3 Performance Report 2015/16**

##### **Purpose of the Report**

1. To present performance results for quarter 3, 1st April - 31st December, 2015-16.

##### **Recommendations**

1. That Cabinet note service performance results and remedial actions to be taken to address service underperformance.
2. That Cabinet note progress to date in achieving key outcomes as outlined in the Corporate Plan 2013-17, the Outcome Agreement 2013-2016 and the Improvement Plan Part 1 2015/16.

##### **Reasons for the Recommendations**

1. To ensure the Council is effectively assessing its performance in line with the requirement to secure continuous improvement outlined in the Local Government Measure (Wales) 2009.
2. To consider the quarter 3 performance results as at 31st December 2015 in order to identify service areas for improvement.

##### **Background**

2. Service Plans for 2015/16 are designed to focus on the achievement of key objectives within each directorate which in turn contribute towards the achievement of identified outcomes in the Corporate Plan 2013-17, the Outcome Agreement 2013-2016 and the Improvement Plan Part 1 2015/16.
3. Quarterly performance reports have been revised to reflect Service Plans and are designed to ensure the Council reports performance in the context of progress against its objectives.
4. The performance report is structured as follows:
  - An overview provides a quick snapshot of each directorate's progress towards achieving the objectives contributing towards its service outcomes. It highlights progress towards key actions in the Corporate Plan 2013-17, the Outcome Agreement 2013-16 and the Improvement Plan Part 1 2015/16 for which the

directorate has responsibility. The key areas of slippage are identified and the planned remedial action to bring these back on track.

- A brief statement is provided against each service outcome outlining overall progress towards achievement.
- Detailed progress is reported for each service objective looking at all actions and measures.
- Progress is reported for all performance indicators by allocating a performance status symbol, ☺ relates to performance that has met or exceeded target, ☹ relates to performance within 10% of target and ☹ relates to performance that has missed target by more than 10%. A direction of travel arrow is also provided against each measure indicating whether current performance has improved, stayed static or declined on last year's third quarter performance. An upward arrow indicates that performance has improved on the same quarter last year, a static arrow indicates performance has remained the same and a downward arrow shows performance has declined compared to the same quarter last year.

## Relevant Issues and Options

5. Overall, the Council is on course to achieve its priorities for 2015/16 as outlined in the Corporate Plan for 2013-17. Of 86 Corporate Plan related actions, 10% (9) are completed, 76% (65) are on track, and 14% (12) have slipped.
6. Of the 200 quarterly reported measures used to demonstrate progress against our key priorities, 106 (53%) met or exceeded target, 42 (21%) were within 10% of target and 25 (12%) missed target by more than 10% and 27 (14%) were not available this quarter.
7. Of the national dataset, 2 National Strategic Indicators (NSIs) missed target by more than 10%. These related to SCA001, SCC011b both of which are Social Services measures. These measures have missed target by more than 10% since quarter 1 and further detail is provided in paragraph 27 on the reasons for underperformance.
8. The priorities outlined in the Council's Improvement Plan Part 1 (2015/16), are on track to be achieved. Of 13 actions, 92% (12) are on track, 8% (1) has slipped.
9. Of the 4 Outcome Agreement actions, 2 (50%) are complete, and 2 (50%) are on track.
10. Appropriate remedial action has been identified by services in order to ensure underperformance is addressed. A detailed report of the Council's overall performance by directorate for quarter 3 of 2015/16 is provided in the Members room and is available to view on the Council's website via the following link:  
[www.valeofglamorgan.gov.uk/Documents/ Committee%20Reports/Cabinet/2016/16-04-11/Appendices/Quarter-3-Performance-Report-201516-Appendix-1.pdf](http://www.valeofglamorgan.gov.uk/Documents/Committee%20Reports/Cabinet/2016/16-04-11/Appendices/Quarter-3-Performance-Report-201516-Appendix-1.pdf)

## Resources

11. Overall the Resources department is well on track to achieve the objectives contributing to its service outcomes, with 91% of actions either completed or on track. Of 45 actions within the Service Plan, 5 are complete, 36 are on track, 3 have slipped, and 1 are not due to have started this quarter. The Directorate's progress against Corporate Plan actions is also on course, with 85% of actions on track for completion. There are no actions relating to either the Improvement Objectives or the Outcome Agreement.

12. Of 20 performance indicators, 16 have met or exceeded target, 1 was within 10% and 1 has missed target by more than 10%. The measures that missed target relate to:
  - RS/M008: The percentage of employees including teachers and school-based staff who leave the employment of the local authority, whether on a voluntary or involuntary basis. A half year turnover report for Scrutiny will be considered in February 2016.
13. Against Outcome 1 ensuring that 'Residents are confident in accessing our services and are engaged with their local community', we have successfully introduced arrangements for public speaking and public engagement and participation in Council meetings. (RS/A038)
14. The range of services available via mobile apps for promoting and increasing self-service transactions has made further progress. We are currently awaiting the testing of the Welsh language version of the app. Promotional activity is being undertaken with external customers via Vale Connect and internally via Core Brief and StaffNet. (RS/A093)
15. Two actions have slipped this quarter against this Outcome. In relation to the extension of the Podiatry shared telephony service to Cardiff and Vale locality, the final meeting with Podiatry service to agree costs is scheduled for the 9th February 2016. Once cost of the service has been agreed implementation will proceed. (RS/A092)
16. Resource issues within the Communications team have forced the prioritisation of individual public engagement projects over longer term strategic goals during quarter three. These issues are very close to resolution and it is anticipated that the implementation of the Council's Public Engagement Framework will be back on track by the end of quarter four. (RS/A124)
17. Against Outcome 2 ensuring that 'the Vale benefits from the Council's sound and transparent decision-making through effective management of resources', all programmed works on the Penarth Learning Community have been completed, although some snagging items remain. (RS/A106)
18. The Adoption IT system has been introduced by the Swift Consortium and has been in use for two weeks. The application is being used in a live environment and will be fully implemented by the end of quarter four. (RS/A103)
19. One action was reported as having slipped against Outcome 2 during this quarter. Limited progress has been made in implementing the strategy to improve the employment of school, college, university leaders and apprentices. An update report will be presented to Cabinet in February 2016 for their approval, proposing an alternative, internally resourced approach to improving the employment of young people. (RS/A116)

## **Visible Services**

20. Visible Services is on course to achieving the objectives contributing to its service outcomes, with 80% of all service plan actions either complete or on track. Of the remaining 25 actions within the Service Plan, 3 are complete, 17 are on track, and 5 have slipped.
21. Of 14 Corporate Plan actions 71% (10) are either completed or on track for completion, and 29% (4) have slipped. The 1 Outcome Agreement action for the

service has been completed. There are no actions relating to the Improvement Objectives.

22. Of 18 performance indicators, 15 have either met or exceeded target and 3 have missed target by more than 10%. The same three indicators also missed target in Q2 and relate to:
  - WMT/010i: The percentage of Local Authority collected municipal waste prepared for reuse continues to fail to meet target due to the lack of Community Reuse Schemes within the Vale of Glamorgan. Despite our work with local voluntary and other key organisations, limited progress has been made in increasing the number of Community Reuse Schemes in the Vale.
  - STS007: The percentage of reported fly tipping incidents which lead to enforcement activity. Enforcement officers have looked to focus on investigations that involve more fly tipping incidents and actions have increased but more work needs to be done in this area.
  - VS/M007: Whilst the number of dropped crossing points for community use has not met target this quarter, the rate of provision is programmed to increase during the year. The majority of the works will be carried out in quarter 4 to ensure we have a suitable programme of works that is cost effective.
23. Against Outcome 1, 'Residents of the Vale live in safe, healthy, prosperous and sustainable communities', work with trade unions to move away from task and finish arrangements for staff for the collection of residual waste was concluded at the end of November and staff have been working to revised terms and conditions since 1st December 2015.
24. Slippage was reported against a number for actions under Outcomes 1 and 2, 'Residents of the Vale live in safe, healthy, prosperous and sustainable communities' and 'the Vale is a clean, safe, well maintained and sustainable place to live or visit'. Against Outcome 1, the review of the Highways Service as part of tranche of the Council's Reshaping Change Programme (VS/A093) has been delayed due to the Education lead officer being on sick leave. The implementation of a Tree Management Strategy is currently under review as part of the People Too consultancy review (VA/A076). Different electronic tree management systems are being considered as a result of advice from the consultant. Work with residents and landowners to facilitate an increase in the number of allotment plots available throughout the Vale has slipped as the results of the Welsh Government's consultation on allotments are still anticipated (VS/A095). This has also caused (VS/A046), the update and finalisation of the allotment strategy to have slipped. Although progress has been made towards the building of a new disabled facility at Jackson's Bay toilet block, discussions remain ongoing with lifeguards to relocate part of the club to alternative facilities to enable the scheme to proceed (VS/A025).

## **Social Services**

25. The Social Services directorate is on track to achieve the objectives contributing to its service outcomes, with 86% of actions currently either completed or on track. Of 9 Corporate Plan actions, 11% (1) has been completed, 66% (6) are on track, and 22% (2). There are 6 actions relating to the Improvement Objectives, of 5 are on track, and 1 has slipped this quarter.
26. Of 58 performance indicators, 38 have met or exceeded target, 10 are within 10% of target, and 9 have missed target by more than 10%. No data was reported for 1 PI.

27. The PIs that have missed target relate to:

- SCA001: The number of delayed transfers of care for social care reasons per 1,000 population was 22 in the first quarter, 11 in the second quarter and 13 in the third quarter. Though this is an improvement, this is a cumulative indicator and the projected performance for the year is 5.34.
- SS/M004: Whilst the percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by a worker missed target this quarter, it must be noted that there will be situations where it is not always appropriate for a child to be seen during the initial assessment. Therefore, performance is satisfactory in this context.
- SS/M0011b: The percentage of initial assessments that were completed during the year where there is evidence that the child has been seen alone by the social worker. Although this target was missed, there will be situations where it is not always appropriate for a child to be seen during the initial assessment. 60 children were seen alone at initial assessment by a Social Care Officer. Performance is satisfactory in this context.
- SS/M019a and SS/M019b: Both the rate per 1,000 of population of over 65s who have had a Unified Assessment and Occupational Therapy assessment have missed target this quarter. Both indicators are local cumulative indicators; the full year estimate for SS/M019a is 44.3. The full year estimate for SS/M019b is 26.82; it is a challenge to meet the target due to the increase in population in +65 years age group (additional 579 people).
- SS/M024: Although the percentage of reviews of child in need plans carried out in accordance with the statutory timetable has slipped this quarter, it does show an improvement in performance compared to quarters one and two. This indicator has been deleted from the Welsh Government returns for 2015-16, in preparation for the measuring of performance under the Social Services and Wellbeing Act. In 2015-16, the performance data is being monitored under local management information and will be deleted from the framework in 2016-17.
- SS/M027: The average time taken to complete initial assessments that took longer than 7 working days missed target for this quarter, 4 initial assessments have skewed performance due to families not engaging with Social Workers, had this not been the case performance would be 15 working days This indicator has been deleted from the Welsh Government returns for 2015-16, in preparation for measuring of performance under the Social Services and Wellbeing Act. In 2015-16, the performance data is being monitored as local management information and will be deleted from the framework in 2016-17.
- SS/M029: The average time taken to complete those required core assessment that took longer than 35 working days has missed target this quarter, One family, three children, were avoiding contact with Social Services this delayed the completion of the Core Assessments. The Core Assessment took a total of 445 days to complete, had this not been the case the performance would have been an average performance of 60 delays. This indicator has been deleted from the Welsh Government returns for 2015-16, in preparation for the measuring of performance under the Social Services and Wellbeing Act. In 2015-16, the performance data is being monitored as local management information and will be deleted from the framework in 2016-17.

- SCC033: The percentage of initial child protection conferences due in the year which were held within 10 working days of the initial child protection conference. The out of timescale initial core group meetings in quarter 3 were completed 1 day out of timescale. This indicator has been deleted from the Welsh Government returns for 2015-16, in preparation for measuring of performance under the Social Services and Well-being Act. In 2015-16, the performance data is being monitored as local management information and will be deleted from the framework in 2016-17.
28. Against Outcome 1, 'People in the Vale of Glamorgan are able to request support and receive help in a timely manner', in terms of ensuring a full exchange information between Child Health and Disability team, the Continuing Healthcare Transition policy has been completed, and clearer more timely arrangements are now in place for the University Health Board Assessment of the health needs and ongoing support of young people who meet the criteria. The standing Transition Review Implementation group is now more focused on those cases where there is dispute over adult social services; the group now also includes representatives from adult mental health services. (SS/A058)
  29. As part of work to implement new service models to support individuals to access a wider range of inclusive opportunities, the Day Opportunities Strategy has been approved and work continues with reviews of current day care arrangements are being adjusted to facilitate work, training and leisure activities as part of universal services. (SS/A059)
  30. The multi-agency Families First and Flying Start Board has reviewed its meeting schedule and now meets quarterly and termly to oversee the delivery of the programmes. All programmes are targeted with the intention of reducing longer term higher level statutory interventions. Board members are actively involved in the preparation for the implementation of the Social Services and Well-being Wales Act. The commissioned independent review of Families First projects and services is reaching a conclusion and will be reported back to the management board in February 2016. The review will seek to explore the programmes ability to be fit for purpose and value for money. Flying start continues to meet targets set within the 2015-16 delivery plan including completion of final roll out of expansion. (SS/A007)
  31. Slippage was reported for three actions under Outcome 1:
    - In relation to the development of a wide range of options for older people requiring support and the preparation of a feasibility study for the provision of an older people's village has slipped, a workshop was held on the 7th January 2016 (SS/A010).
    - Limited progress was made during the quarter to increase the take up of assistive technologies such as Telecare. An additional post will be appointed and the current working arrangements are now being reviewed SS/A011 [(CP/HSCW5) (IO2)].
    - A workshop was held on 7th January 2016 as part of the work to examine how best to secure an increased range of service providers in social care, especially those who use a social entrepreneurial approach has slipped. [SS/A015 (CP/H2)].
  32. Against Outcome 2, 'The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion', in terms implementing and raising awareness of the Mental Health Capacity Act 2005 and the Deprivation of Liberty Safeguards remains a high priority for the Directorate. We are ensuring that the hospital discharges and University Health Board choice policy is compliant with the requirements of the Mental Health Capacity Act through training and advice to relevant teams. No actions were reported slipped against Outcome 2.

33. Against Outcome 3, 'Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals', we have worked to complete the Cardiff and Vale Together for Mental Health Delivery Plan which has been forwarded to the Welsh Government, and continue to promote services that reduce stigmatisation and promote mental health well-being.
34. Slippage was reported for one action under Outcome 3. This work was being undertaken on a regional basis, involving the Local Health Board and Cardiff Council, as part of steps towards joint commissioning. Our partners have found it difficult to commit to the strategy but the approach has been redesigned. An Assistant Director, appointed recently by the three organisations, is implementing a work programme for fast-track integration which includes consideration of ways to introduce joint commissioning. Having a brokerage hub for residential care and nursing home placements will form part of this work. Until the issue is resolved, the action should be deleted (SS/A043).

### **Housing and Building Services**

35. Housing and Building Services is on track to achieve the objectives contributing to its service outcomes, 76% of all service plan actions were either completed or on track to be completed. Of the 10 Corporate Plan actions, 10% (1) has been completed, and 90% (8).
36. There are no remaining actions relating to the Improvement Objectives as all 4 were completed in quarter 1.
37. Of 12 performance indicators, 6 have met or exceeded target, 3 were within 10% of target and 2 have missed target by more than 10%. A performance status was not available for one measure.
38. The PIs that have missed target relate to:
  - HS/M005: Although the average number of days to let an empty property is shown as missing target, this is a spot target and improvement continues; it is anticipated that the target will be met by the end of year. The review group met on the 26th January 2016 to finalise any changes needed to the process in order to secure further improvements. Monthly strategic meetings have been introduced and it is anticipated that the 30 day target will be met by the end of the year.
  - HHA017b: The average number of days that all homeless households spent in other forms of temporary accommodation. Alternative suitable permanent housing solutions continue to be identified. This has resulted in the average number of days further reducing between quarters.
39. Against Outcome 1, 'Everyone has a home that they can afford that meets their needs', a texting facility to inform tenants of appointments has been successfully developed and implemented, the outcome of which is more customer focused service.
40. The revised HRAS Business Plan has been put in place which has built into its projections the impact of Welsh Government policies on rent (HS/A115). The outcome of which will be the ability to provide new Council housing, regenerate estates and meet our commitments in terms of the Welsh Housing Quality Standard.
41. A significant proportion of the Building Services Change Plan has been delivered (HS/A070). The restructure has crystallised the client and contractor functions in

Building Services. Further work by the client function is needed to develop a Housing-Asset Management Strategy. Work on a growth/value for money for the in-house contractor will be developed in 2016/17.

42. Both Community and Investment officers are now in place and are delivering a range of projects against the Tenant and Leaseholder Engagement Strategy and associated operational plan (HS/A112). Project work is underway to address a number of the priorities in the Strategy, including addressing rural poverty. Meetings have taken place with funders to explore opportunities for accessing Welsh Government Grants to improve digital inclusion in sheltered housing complexes.
43. Slippage was reported for two actions under Outcome 1:
  - The development of an Asset Management Strategy (HS/A076) has been delayed in order to enable the impact of the Housing Revenue Account (HRA) buy out to be taken into account and for the financial impact of the external WHQS works to be validated before developing the full report. This strategy is now planned to be drafted over the next six months before being presented to Cabinet in the first quarter of the 2016/17 financial year.
  - In relation to the development of a Tenant and Leaseholder Engagement Strategy, the strategy will be submitted to Scrutiny Committee in March 2016 (HS/A048).
44. Against Outcome 2, 'Every customer is highly satisfied with the service we directly provide', the development and delivery of a new mobile working solution and asset management IT system is well on track. Whilst the mobile working solution has been implemented and is now in operation, some minor working issues are yet to be resolved by the supplier. The Asset management system continues to be updated to ensure all information received from Welsh Housing Quality Standards work is entered correctly. A mobile working solution gives an improved level of customer service as tenants are fully aware of when responsive repairs works will be carried out.
45. Limited Progress was made against one action under Outcome 2. This slippage related to the review of internal stores (HS/A105). Work on the identification of cost saving processes has commenced within the service to eliminate waste from the procurement and processing of materials.
46. Against Outcome 3, 'All citizens in the Vale live and work in safe and secure communities', significant progress has been made in the delivery of the key Community Safety Partnership strategies for domestic abuse, substance misuse and community cohesion. A successful white ribbon campaign was held with partners to raise awareness of domestic abuse in the Vale of Glamorgan. The Cardiff and Vale of Glamorgan Substance Misuse Area Planning Board and Safer Vale Partnership have worked in collaboration to launch a breathalyser pilot across the Vale.

## **Development Services**

47. The service is well on track to achieve the objectives contributing to its service outcomes, with 93% of actions currently either completed or on track. Of 22 Corporate Plan actions in the service plan, (91%) 1 is complete, 19 are currently on track and 2 have slipped. There is 1 action relating to the Improvement Objectives and this is on track for completion.
48. Of 25 performance indicators, 11 have met or exceeded target, 9 are within 10% of target and 5 have missed target by more than 10%. The measures that missed target relate to:

- DS/M008b: The average number of calendar days taken to deliver a non-agency Disabled Facilities Grant. This represents the 10% of DFG's which are delivered other than through the Council's Agency Service. Performance is considerably behind that of the Council's own service. The major provider used is being encouraged to follow the Council's framework approach rather than tender for each project.
  - DSM/009a: The average number of calendar days taken from Occupational Therapist (OT) 1st contact to recommendation in the delivery of a Disabled Facilities Grant has missed target as one OT post has been vacant since June 2015. The post has now been filled with the post holder commencing in November 2015.
  - DS/M032b: The percentage of building control applications that are submitted online. While this target has not been met, the Council has no control over how applicants submit applications and has limited resources to place adverts in the local press, however we encourage local businesses to apply online.
  - PPN/001i: The percentage of high risk businesses that were liable to a programmed inspection that were inspected for trading standards. The three remaining premises due for inspection are high risk Food Standards. These are carried out by the Food Safety Team and will be inspected at the same time as the Food Hygiene Inspection. Two inspections will be carried out in quarter 4 and one during quarter 1 of the new financial year.
  - PPN001ii: The percentage of high risk businesses that were liable to a programmed inspection that were inspected, for food hygiene has missed target. This quarter has seen a loss of a number of Food Officers as a result of restructure and plans are in place to recruit new Food Safety officers to address this slippage.
  - PSR009a: The average number of calendar days taken to deliver a Disabled Facilities Grant for children and young people has missed target. Improvement has been made against this target, although 1 Of the 3 cases certified this quarter hitting 268 days due to complexities.
49. Against Outcome 1, 'Residents in the Vale live in safe, healthy, prosperous and sustainable communities', good progress continues to be recorded in terms of increasing physical activity levels. The recent independent schools sports survey showed a growth in the Vale's performance of 8% over the last two years, this has maintained our top 3 position in Wales.
50. The Vale Sport Plan continues to be on track and is delivered with a variety of partners. Projects are moving into their final quarter and a full end of year report will be available in April/ May to identify the full impact of the Vale Sport Plan for 2015/2016. There is continued emphasis on identifying funding opportunities to support the delivery of play activities in the Vale through for example, Section 106 funding and links with Town and Community Councils.
51. Twenty-one long-term unemployed individuals have found jobs during the quarter through the Council's delivery of the Work Programme. We continue to aim to maintain our minimum service standard and minimum performance levels, the minimum numbers of job entries and outcomes, set by our Prime contractor JobFit; referrals are reducing however, as a result of increased levels of employment.
52. The Rural Development Plan delivery team has now been fully recruited and is exploring priority projects. The team is also supporting Council departments and external groups to gain access to the new Rural Community Development Grant

53. Slippage was reported for 2 actions under Outcome 1.
- A preferred bidder had been identified for a new cinema in Barry; however they subsequently have withdrawn their bid. Work continues to identify a possible replacement (DS/A079).
  - Work with partners to enhance and regenerate the Penarth Esplanade and ensure sustainable and convenient links with the Town Centre and Penarth Haven has slipped due to the volume of work in Highways.
54. There were no slipped actions reported against Outcome 2 for this quarter.

## **Learning and Skills**

55. Overall, Learning and Skills is considerably on track to achieve the objectives contributing to its service outcomes, with 90% of actions currently either completed or on track. Of the 11 Corporate Plan actions within the service plan, 2 have been completed, 7 are 8 are on track, and 2 have slipped. There are 2 actions relating to Improvement Objectives, both of which are on track for completion. There are 3 Outcome Agreement actions for the service, 1 is complete and 2 are currently on track to be completed.
56. Of the 67 performance indicators, 20 have met or exceeded target, 19 are within 10% of target and 5 have missed target by more than 10%, 23 performance indicators had no status applicable this quarter.
57. The five indicators that have missed target relate to:
- LS/M008: In relation to the percentage of youth workers holding relevant youth work qualifications; new staff have recently been appointed to the Youth Work team and are currently undertaking relevant training.
  - LS/M011: The number of accredited outcomes achieved by learners through the Youth Service is awaiting moderation of awards. It is expected that this target will be exceeded.
  - LS/M022b: Whilst the number of pupils in secondary schools is reducing, the percentage of pupils who have school meals has increased compared to quarter 3 of 2014/15. An ambitious target was set for 2015/16 and work will continue to promote school meals to ensure performance improves.
  - LS/M044: Contact made with NEET young people through the mobile provision has declined in line with a reduction in the numbers of NEETs. The provision continues to be accessed by young people who are in employment, education or training.
  - LS/M049b: The number of NEET young people increases during the third quarter of the year as a result of young people dropping out of courses. The early identification system will be extended to school 6th forms in February to identify those who are at risk of becoming NEET. It is expected that the number of year 12 and 13 (16 to 18 year old) pupils who are NEET will reduce in quarter 4 as they enrol on to new courses or move into employment.
58. Against Outcome 1, 'Learners achieve their full potential in order to maximise their life opportunities', it was noted in the Estyn monitoring report of January 2015 that we have made sufficient progress in relation to the recommendations to no longer require Estyn monitoring. The authority was adjudged to have made very good and strong progress against the 6 Estyn recommendations.

59. Overall, performance at Key Stage 2 and 3 has shown a consistent improvement. In 2015 the majority of schools are now in the higher 50% of the Key Stage 2 Welsh Government's free-school meals benchmark. The percentage of pupils achieving the Key Stage 3 Core Subject Indicator has improved at a faster rate than the Wales average.
60. Since the inspection, we have worked well with head teachers, governors and the Central South Consortium to secure improvements. This has led to targeted improvements in leadership, provision and standards in many of the authority's schools.
61. We have used our powers well to improve schools that are underperforming and planning for improvement at both the service and team level is carried out systematically, coherently and consistently. A clear link between strategic and budget priorities is now being demonstrated by the directorate. The Well-being in Education Strategy is now well embedded and has been revised to provide updated direction for 2015-18.
62. To date, 16 fixed penalty notices have been issued by Education Welfare Officers. This is part of a suite of measures in place which is contributing towards improved attendance at schools.
63. Four actions were reported as slipped under Outcome 1:
  - In relation to undertaking initial skills assessments/diagnostics with learners enrolling onto courses over 10 hours (LS/A150), the Welsh Government has delayed its implementation of the initial essential skills assessments hours. This delay has also been the cause of slippage against (LS/A151), the tracking, monitoring and recording of outcomes for adult learners using initial assessment data as baseline.
  - The complexity of five different local authorities agreeing regional HR policies and practice and Governor Support services in the Central South Consortium Joint Education Service has resulted in a slower rate of change than desired (LS/A194a). Consultation on regional HR policies such as recruitment/selection process for head teachers continues.
  - The implementation of the National Model of Regional Working, including the transfer of specialist HR, governor support and 14-19 functions has progressed at a slower rate of change than desired (LS/A194b). The new 14-19 lead meets/communicates regularly and is beginning to impact on practice. Whilst specialist functions have been taken on by the Central South Consortium, much remains within local authorities.

### **Resource Implications (Financial and Employment)**

64. There are no additional budgetary implications arising from this report although underperformance in some areas may have a negative impact on external assessments of the Council and could put certain funding opportunities at risk.

### **Sustainability and Climate Change Implications**

65. Underperformance issues relating to crime and disorder will be given due consideration both corporately and within the relevant service areas.

## **Legal Implications (to Include Human Rights Implications)**

66. The Local Government Act 1999, the Wales Programme for Improvement and the Local Government (Wales) Measure 2009 require that the Council secure continuous improvement across the full range of local services for which it is responsible.

## **Crime and Disorder Implications**

67. Underperformance issues relating to crime and disorder will be given due consideration both corporately and within the relevant service areas.

## **Equal Opportunities Implications (to include Welsh Language issues)**

68. Underperformance issues relating to equalities will be given due consideration both corporately and within the relevant service areas.

## **Corporate/Service Objectives**

69. The Corporate Plan 2013-17 outlines community leadership as a priority for the Council. Improving how the Council evidences and reports achievement of its outcomes and objectives contributes towards effective community leadership.

## **Policy Framework and Budget**

70. This is a matter for Executive decision.

## **Consultation (including Ward Member Consultation)**

71. The information contained within the report is based on quarterly returns provided by service directorates. Quarterly performance reports are reported to all Scrutiny Committees.

## **Relevant Scrutiny Committee**

72. All

## **Background Papers**

Appendix 1 - Quarter 3 Service Performance Reports for Resources, Development Services, Visible Services, Housing & Building Services and Learning & Skills

## **Contact Officer**

Julia Archampong, Performance Manager.

## **Officers Consulted**

Corporate Management Team  
Huw Isaac, Head of Performance and Development  
Tom Bowring, Operational Manager Performance and Policy

## **Responsible Officer:**

Rob Thomas, Managing Director