

AGENDA ITEM:

**REPORT TO EXECUTIVE
SCRUTINY**

2 AUGUST 2011

**REPORT OF CORPORATE
MANAGEMENT TEAM**

YEAR END 2010/11 – PERFORMANCE REPORT

SUMMARY

This report outlines progress against service performance for the fourth quarter of 2010/11. It highlights achievements, areas for improvement, LAA outturn, and consultation activity undertaken, summary of Freedom of Information requests, complaints, commendations and comments, RIPA update and provides details of suggestions from the staff suggestion scheme.

Despite many changes to the national performance framework over the last 12 months performance has remained strong. There has been a 75% achievement of Council Plan objectives, progress against targets in the corporate basket show that 56% of measures have achieved targets, an improvement on last year's 53% achievement. The LAA achieved 42% of the stretching targets agreed. The number of Freedom of Information and Data Protection enquires has seen a steady increase over the last 12 months. The staff suggestions scheme which was introduced this year for the first time has been well received with many suggestions coming forward and being approved. The EIT Review programme has accelerated this year (year 2) with many reviews now completed, savings identified and achieved. We continue to monitor the Complaints, Comments and Commendations with 736 complaints received this year compared to 782 last year and an increase in compliments, commendations and comments.

RECOMMENDATIONS

1. That the levels of performance and proposed actions be noted.

PERFORMANCE UPDATE YEAR END

Changes to the National Performance Framework.

1. All National Indicators (NIs) from the original 198 set ceased on 31 March 2011. This report provides as far as possible the final outturn for this data set. A single data list has been published following a consultation from central government. This is being used to inform the performance framework for the Council and Renaissance for 2011/12.

2. For quarter 4 details of performance against the current indicator set are provided in appendices to this report. Therefore the **Appendix 1** of this report contains:
- **An overall summary of performance** – this includes a high level summary of progress against a streamlined basket of measures covering all 8 themes within the Sustainable Community Strategy.
 - **The summary of performance against the achievement of the Council Plan** objectives in 2010/11 is good with 75% of objectives/ targets achieved or on track. This is an increase on last year's outturn of 70%. The Council Plan contains actions that support the Sustainable Community Strategy as well as actions and success measures on organisational effectiveness. Details of progress and slippage are included in the thematic sections of the report.
 - A final outturn for the 3 year **Local Area Agreement** - This agreement ceased on 31st March 2011.
 - **A Thematic summary** – this includes a summary of performance for each of the 8 themes within the Sustainable Community Strategy. The summary document lists all indicators within the corporate basket that are relevant to the theme. Areas showing good progress and areas where further improvements are required are detailed in this summary report.
 - **Indicator Report Cards.** – A detailed report card has been prepared for each indicator. This includes current and historical performance, target information, definition of indicators, national comparator information. Report cards will only be included in this report if performance is not predicting to achieve the target set. **All appendices and report cards are available for Members to view at www.stockton.gov.uk/yourcouncil/performance/qtrperfmotor**

OVERALL PERFORMANCE OF NATIONAL INDICATOR SET

3. At year end of those national indicator measures in the Corporate Basket, where information is available for monitoring, 56% have achieved targets or are within the tolerance set; this compares to 53% at year end last year. **Further detail is available in appendices.** A key to the performance symbols used on the year end report cards is set out below:
- ★ = year end target achieved
 - = year end target missed/ not achieved
 - N/A = data not available or indicator abolished (e.g. Place Survey)

Freedom of Information Requests

4. A record of Freedom of Information (FOI) and Data Protection (DP) requests received is maintained across Council departments. A total of 563 Freedom of Information requests were received in 2010/11 and 95 Data Protection requests. Numbers have increased quarter by quarter this year with a significant increase in quarter 4. **Appendix 2** identifies the detail of those received in Quarter 4. There was an increase in the number of FOI requests completed in Qtr 4 from 127 to 179. Of the 179 requests, CESC had the most with 79, up from 48 in Quarter 3. Completion of Data Protection access requests increased in Quarter 4 from 24 to 38 again with the largest increase being within CESC. This will continue to be recorded and monitored.

Staff Suggestion Scheme

5. The scheme is designed to encourage a culture in which staff feel they can 'make a difference' by making positive suggestions that will lead to improvements and contribute to the success of the Authority. This is the first year that the scheme has been introduced with a total of 111 suggestions received over the year. During the 4TH quarter 20 suggestions were received (compared to 49 at quarter 3). Of these 1 was accepted, 5 were suggestions where a project is already in progress, 3 were still being investigated and 11 were rejected or not accepted. Reasons for non-acceptance and rejection vary. For example, in one case it was not feasible to implement the suggestion at that particular point in time; in other cases similar staff suggestions have already been implemented. Further details about the scheme can be found at the 'Hot Topics' section on the front page of the Council's intranet site.

Regulation of Investigatory Powers

6. It was reported to Cabinet on 20 May 2010 that new duties and responsibilities relating to the Regulation of Investigatory Powers (RIPA) legislation had been introduced. In particular, the new provisions included the requirement that Councillors in a local authority should review the authority's use of RIPA and set the policy at least once a year, and that Councillors should consider reports on the use of RIPA on at least a quarterly basis, to ensure that it was being used consistently with the authority's policy and that the policy remained fit for purpose. Cabinet, therefore, agreed that members should receive information on the use of RIPA in the quarterly Finance and Performance reports to Cabinet. Attached at **Appendix 3** is a summary of all investigations undertaken during quarter 4 of 2010/11.

EIT Review Update

7. Monitoring the implementation of Year 1 reviews has continued. Year 2 EIT reviews have all been completed with the exception of Highways Management which will roll forward into Year 3 and work will also continue of the Building Asset review, The Council has implemented or are in the process of implementing the completed Year 1 and Year 2 EIT review recommendations. All reviews are on target to deliver the planned savings, the main exceptions being the FACS and child placement reviews. The FACS review was delayed due to the extensive consultation exercise undertaken and the Child Placement due to the time taken in developing the in house children's homes and the recruitment of the marketing officer to promote in house fostering arrangements

COMPLAINTS, COMPLIMENTS & COMMENDATIONS AND COMMENTS

Complaints

8. The Council has received 736 complaints in total for the year end 2010/11. This compares to 782 in 2009/10. During quarter 4 the council received 190 complaints. This compares to 179 complaints received in the same three month period last year. Of the 190 complaints, 15 are at stages 2 and 3 and of the Stage 1 complaints, 89% (156) overall were responded to within timescales. The corporate timescale for responding to Stage 1 complaints is 10 working days. However, the timescales within Health and Social Care differ from the corporate timescale. For Children's Services the response timescale is 10 working days plus a further 10 working days given the complexity of some of the complaints. For Adults' Services, new regulations introduced on 1 April 2009 place a requirement on Council's to agree a timescale for a response with each individual complainant.

Compliments and Commendations

9. A total of 2,131 compliments and commendations were received in 2010/11 this compare to 1,906 for 2009/10. During quarter 4, 541 compliments and commendations were received in the three month period to 31 March 2011, representing 479 compliments and 62 commendations. This compares to a total of 541 compliments and commendations in the same three month period last year.

Comments

10. A total of 540 comments from customers were received in 2010/11 compared to 488 in the previous year. In quarter 4 98 comments were received. This compares to 147 comments received in the same three month period last year.

11. This report highlights some of the main messages from the analysis.

- The main trend from the three month period identifies that 78% of complaints are in relation to the 3 service areas Children, Education and Social Care (CESC), Development and Neighbourhood Services (DNS) and Tristar, with DNS receiving approximately 30% of total complaints, and Tristar and CESC receiving approximately 25% and 23% respectively of total complaints.
- Of the total compliments and commendations 87% were received for 3 service areas CESC, DNS and Resources with 63% of these were compliments and commendations for DNS.
- Of the overall 11% of complaints which were not responded to on time the main areas are DNS and Tristar with an approximate failure to respond rate of approximately 9% and 11% respectively.
- The main areas of complaint by category for the above service areas are shown in the table below:

Complaints		
Service Group/ main area of complaint	Q4 2010/11 Number of complaints	Q3 2010/11 Number of complaints
CESC		
• Service quality	35	25
• Staffing issue	11	12
• Limited information	16	17
DNS		
• Service quality	15	19
• Staffing issue	13	19
• Disagree with decision	10	11
Tristar		
• Service quality	27	30
• Staffing issue	7	4
• Disagree with decision	4	4

- The main areas of compliments and commendations by category for CESC, DNS and Tristar are shown in the table below:

Compliments and commendations		
Service Group/ main area of compliment and commendation	Q4 2010/11 Number of compliments and commendations	Q3 2010/11 Number of compliments and commendations
CESC		
• Quality of service	27	37
• Specific help/ service offered	13	21
• High standard of care	27	5
DNS		
• Quality of service	255	257
• Specific help/ service offered	60	33
• Staff performance	21	20
Resources		
• Quality of service	21	5
• Specific help/ service offered	8	10
• Staff performance	15	7

- The main areas of comments for DNS are shown in the table below:

Comments		
Service Group/ main area of comment	Q4 2010/11 Number of comments	Q3 2010/11 Number of comments
DNS		
• Policy/ procedure	19	24
• Service quality	16	35
• Facilities	11	6

Complaints by the six diversity strands - respondents who gave details

- The table below shows the numbers of residents who provided details of their age, gender, disability, race, faith and belief and sexual orientation in Quarters 3 and 4 of 2010/11.

Diversity strand	Q4 2010/11 number	Q3 2010/11 number	Year to 31.3.11 number
Age	58 – 30.5%	52 – 29%	205
Gender	80 – 42%	90 – 50%	310
Disability	36 – 19%	29 – 16%	123
Race	47 – 25%	45 – 25%	178
Faith and belief	30 – 16%	26 – 14%	113
Sexual orientation	24 – 13%	18 – 10%	71

Age

12. Of those that provided the detail, most complaints during the fourth quarter of 2010/11 came from the age ranges 25 – 54 (a total of thirty eight), the majority of these went to Tristar. Similarly, for the 12 months to 31 March 2011, these age ranges generated the most complaints (137), with the majority (72) going to Tristar.

Gender

13. Of those that gave details, 41 were female and 39 male. The majority of both male and female complaints (47) were made against Tristar. For the whole of 2010/11, most complaints were from females (170), with 140 complaints from males. The majority of male and female complaints (161, of which 92 were female) went to Tristar.

Disability

14. Of the 36 who provided details, 24 declared they had a disability; of these 21 complaints were made to Tristar and three to CESC Health and Social Care. For the 12 months to the end of March 2011, 123 provided details with 74 declaring they had a disability. The majority (38) of these complaints went to Tristar.

Race

15. During quarter four, of those who provided details of their race, the majority (a total of 46) stated that they were white. Of these complaints in particular, 69% were made to Tristar, 20% CESC Health and Social Care, 9% to DNS and 2% to Resources. For 2010/11, a total of 178 residents provided details, the majority (171) stating they were white. Most of these complaints went to Tristar (90), followed by 51 made to CESC.

Faith and belief

16. The majority (11) of complainants were Christian and the majority of complaints made by those residents (a total of four) were made to CESC Health and Social Care. This was a similar pattern for year to March 2011, where the majority (51) providing details were Christian with most complaints ((26) going to CESC, followed by 18 to DNS.

Sexual orientation

17. Of the 24 who provided details, 22 were declaring themselves heterosexual/ straight. And 2 declared they were gay/ lesbian. The majority of these complainants (19) went to Tristar. For the 12 months to 31 March 2011, 71 residents provided details; again the majority (69) stating they were heterosexual/ straight. The majority of those complaints (40) went to Tristar.

FINANCIAL AND LEGAL IMPLICATIONS

There are no financial implications to the performance elements of this report. EIT review savings are linked and managed through the MTFP.

RISK ASSESSMENT

This review of the MTFP and projected outturn report is categorised as low to medium risk. Existing management systems and daily routine activities are sufficient to control and reduce risk.

SUSTAINABLE COMMUNITY STRATEGY IMPLICATIONS

The report supports the Sustainable Community Strategy.

EQUALITY IMPACT ASSESSMENT

The report was not subject to an Equality Impact Assessment. The report does not seek approval for a new policy and an assessment was taken on the MTFP report submitted as part of the 2009/10 budget cycle.

CONSULTATION, INCLUDING WARD COUNCILLORS

Not applicable.

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