

<b>Subject:</b>	<b>City Performance Plan and Organisational Health Report 2012/13 6 Month Update</b>		
<b>Date of Meeting:</b>	<b>29<sup>th</sup> November 2012</b>		
<b>Report of:</b>	<b>Interim Lead, Chief Executive's Services</b>		
<b>Contact Officer:</b>	<b>Name:</b>	<b>Paula Black</b>	<b>Tel: 29-1740</b>
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<b>Ward(s) affected:</b>	<b>All</b>		

**FOR GENERAL RELEASE**

**1. SUMMARY AND POLICY CONTEXT:**

- 1.1 This report provides updates on the City Performance Plan and the Organisational Health Report for the 6 months from April-September 2012.
- 1.2 There are three appendices to this report:
  - The CPP 2012-13 6 monthly Performance Indicators headline report in **Appendix 1** contains information on key indicators selected from each priority area.
  - The 6 monthly Organisational Health Report 2012-13 in **Appendix 2** provides a six month update on the key organisational indicators agreed by Strategic Leadership Board and Cabinet.
  - The City Performance Plan Headline Performance Indicators Definitions in **Appendix 3**

**2. RECOMMENDATIONS:**

- 2.1 That P&R notes the areas of progress made in the City Performance Plan (CPP) progress report, the Performance Indicators Headline report Appendix 1, and in the Organisational Health Report Appendix 2.
- 2.2 That P&R uses the resources at their disposal to maintain progress and tackle issues of concern highlighted in the CPP and in the Organisational Health Report (OHR).
- 2.3 That P&R notes new lines of accountability in the CPP following the departure of Strategic Directors who were accountable for outcomes across the city.
- 2.4 P&R notes the incorporation of city-wide risk measures into the CPP headline indicator report Appendix 1.
- 2.5 P&R notes that performance improvement work will be undertaken in the three areas highlighted as issues of concern in the CPP annual report (youth employment; alcohol; housing). More details of this process are outlined below.

### 3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

#### 3.1 Performance and Risk Management Framework

3.1.1 The component parts of the Performance and Risk Management Framework (PRMF) are:

- Sustainable Community Strategy
- City Performance Plan
- BHCC Corporate Plan
- Business Plans and Risk Register
- Individual Performance Reviews (all staff)

3.1.2 **City Performance Plan:** This plan reports on how the city is doing in terms of achieving its key objectives. Previously, the Local Area Agreement (LAA) was used as a tool to measure performance on city issues. Following the abolition of the LAA the council and its partners have taken the opportunity to create a new much more localised and outcome driven performance plan. The City Performance Plan is led by the priorities and outcomes defined in the Sustainable Community Strategy (SCS) which was refreshed in 2010. There is no financial reward attached to the City Performance Plan. The Strategic Partnership is not required to report progress against the plan to Government.

Targets for relevant indicators in the CPP were set with responsible officers, thematic partnerships and partner organisations and agreed by Cabinet in January 2012.

3.1.3 The CPP Performance Indicators Headline report (Appendix 1) now incorporates reporting on city-wide risks as identified by the Public Service Board and Thematic Partnerships. This avoids duplicate reporting on a risk register.

3.1.4 Some data is missing from this initial set of reports due to time lags in data being available, or analytical work being carried out on the data. Where this is the case, dates where the data is expected are included.

3.1.5 Clear lines of accountability were allocated in the previous CPP reports. Each Strategic Director and other directors where relevant were named for each outcome area. Given that Strategic Directors held accountability and led on city-wide outcomes, this process was fully in keeping with the Performance and Risk Management Framework. However, given that roles at this level have now shifted in many areas, some of the accountable leads have changed.

3.1.3 **BHCC Organisational Health Report:** This plan reports on how the organisation is doing in terms of key measures around our finance and general organisational management, our workforce and meeting the needs of our customers, and some sustainability measures. It is reviewed by senior management on a monthly basis to identify areas of good and poor performance and monitor how improvement actions are working.

## **3.2 Key Performance Issues in the City Performance Plan and Organisational Health Report**

3.2.1 A range of indicators underpin the outcomes in the CPP. Key headline indicators have been selected from these and are shown in Appendix 1 Headline Performance Indicators report. A more detailed and comprehensive set will be reported to, and discussed with, thematic partnerships whose responsibility it is to oversee their areas within the Sustainable Community Strategy and the CPP.

### **3.2.2 Progress has been made in the following areas:**

The number in brackets refers to the progress update reference shown in Appendix 1 Headline Indicators report. This report highlights performance at 6 months, but much data upon which indicators are based is available annually. For this reason, a limited number of areas will be highlighted here with a fuller report coming forward at year end. Where there is a reference at the end of each paragraph this relates to the longer, narrative update on progress in the area as contained in CPP progress report which was made available in the members room.

(CPP 3.3) Stability of placements of looked after children: % of children with three or more placements

The percentage of children placed three or more times during the year is 10.1% as at September 2012. This is an improvement from 12.7% as at March 2011 and 11.5% at March 2010. Current performance is now better than the national average for 2010/11 (10.7%) and our statistical neighbour average (10.5%).

(CPP 4.7) % social care clients receiving Self Directed Support

Target 75% at year end, 75.9% result at 6 months. This is a significant increase in the percentage of social care clients being offered self directed support. We are required by the Department of Health to offer self directed support to 100% of social care clients by 2013/14. *(see ref 3.2.2 of the CPP progress report)*

(CPP 5.1) % council homes that meet the Decent Homes Standard

There has been consistent improvement in the number of council homes meeting the Standard. The target for 2012/13 is 95% (current performance 91.9%), rising to 100% by December 2013. *(see ref 5.2.3 of the CPP progress report)*

(CPP 5.3) Total households where homelessness was prevented by BHCC and partner agencies through housing advice case work.

Result 1,071 households helped at six months. This is ongoing good performance, preventing significant numbers of households from becoming homeless. There is ongoing high demand in this area for the council and its partners, Brighton Housing Trust and the Youth Advice Centre. The annual target of 2200 was set in Brighton & Hove's Housing Strategy 2009-2014. *(see ref 5.3.3 of the CPP progress report)*

### **3.2.3 Areas for possible concern and performance improvement:**

Whilst progress has been made on key activities some issues remain of concern despite the positive work which is on-going. Three issues of concern were

outlined in the 2011-12 annual CPP report: Youth Employment and those Not in Education, Employment or Training (NEETs); Housing; Alcohol.

Youth Employment and those Not in Education, Employment or Training (NEETs) was highlighted as an issue of concern in the annual CPP for the following reasons:

- Youth unemployment is rising in Brighton & Hove
- Recent increases in worklessness have been fastest among young people under the age of 24
- unemployment in this group was rising prior to the recession
- 1,630 people aged 18-24 years old are claiming out-of-work benefits.
- 7.9% of young people aged 16-18 who are not in education, training or employment (NEET) (8.4% are NEET in our statistical neighbouring authorities)

Housing:

- Work to prevent homelessness and rough sleeping: While the work to prevent homelessness in the city continues to help significant numbers of households and is an example of good performance, barriers to future progress are evident. The numbers of rough sleepers around the country are rising, and the changes to the Local Housing Allowance are expected to impact on housing affordability for those receiving benefits (see 5.3.3 of *the CPP progress report*).
- Pressures on availability of housing in the city. The supply of affordable rented accommodation in the city is significantly off track, due to the economic downturn and consequent lack of new house building (see 5.1.1 of *the CPP progress report*).

Alcohol:

- The number of people admitted to hospital for alcohol related reasons continues to rise. Projections for the coming year are based on lowering the rate of increase. There is significant activity in the city, led by the Partnership's Alcohol Programme Board, to address the issues around alcohol misuse and alcohol-related disorder (see 2.1.1 of *the CPP progress report*) but many of the problems faced by the city relate to national challenges and embedded social norms.

Following a discussion at Public Service Board in September 2012, a piece of performance improvement work is planned in these areas, starting with youth employment. A report to PSB in December will set out the context to the issue and provide an analysis of why this is a key area of concern for the city and also highlight work already underway in the area. It will present the outcome of a 'performance challenge' process. This will involve an initial workshop with key stakeholders to map what activity is currently underway and which client groups are being focused on. The workshop will also give agencies with responsibility in this area an opportunity to share information on their current activity and future plans. A second more focused meeting will be chaired by the chair of the Brighton and Hove Strategic Partnership in order that those with key accountabilities may agree on an action plan for going forwards which addresses the issues raised in the first meeting, and others identified through the performance challenge process. This will then be discussed by PSB who will hold

responsibility for overseeing the priority actions identified. PSB will also address their own accountabilities in relation to what is brought to them.

### **3.2.4 Key Performance Issues in the BHCC Organisational Health Report BHCC**

#### *Areas of possible concern:*

The pattern in the areas of poor performance remains consistent with previous monthly reports (Top 5% of earners who declare they have a disability; Spend on and numbers of agency staff; and stage 1 complaints) and work continues to support improvement.

#### *Areas to monitor:*

Average days lost due to sickness is an area of concern that may not achieve target if previous years patterns of sickness are repeated. This will be monitored closely in the coming months.

#### *Positive trends and good performance:*

Invoice payments to all and smaller organisations continue to show positive year to date performance levels and other financial indicators are on track.

More detailed figures will be released from the 2011 census between November and February. These will give us new baseline figures for BME groups within the city population and may therefore impact upon the targets set for Organisational Health Report indicators in this area.

## **4. COMMUNITY ENGAGEMENT AND CONSULTATION**

Each thematic partnership was responsible for contributing and confirming the outcomes and indicators for their relevant parts of the City Performance Plan. In addition, BHCC Lead Commissioners and Heads of Delivery were given opportunity to contribute and clarify the outcomes and indicators relevant to their responsibilities. Discussion was also held with the Third Sector Reference Group for Intelligent Commissioning and the three political groups within the council. The outline Plan was also discussed at the Overview and Scrutiny Commission. Data for each area in the report has been provided by the responsible officer.

- 4.1 All members of the Corporate Management Team were given the opportunity to comment on the indicators for inclusion in the Organisational Health Report during it's development. In addition, individual meetings were held between the corporate performance team and officers across Resource and Finance Units to challenge and clarify the indicators for inclusion in the OHR. All three political groups within the council also had opportunity to comment on the OHR. The OHR was also discussed by an Overview and Scrutiny Commission.

## **5. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications:

- 5.1 The City Performance Plan is part of the Performance & Risk Management Framework and enables progress against targets to be reviewed with strategic partners. It supports the identification of all potential financial impacts of risks which need to be considered in the development of budget strategies and medium term financial plans for the Council and partners.

*Finance Officer Consulted: Anne Silley*

*Date: 22/10/12*

Legal Implications:

- 5.2 There are no legal implications arising from this progress report. The annual City Performance Plan is one of the plans and strategies the Council has agreed should be approved by full council.

*Lawyer consulted:*

*Elizabeth Culbert*

*Date: 22/10/12*

Equalities Implications:

- 5.3 An underlying principle of the city performance plan is that it focuses on the significant issues for the city, some of which are about tackling the inequality experienced by of our residents. The Organisational Health Report includes indicators on equalities measures for the organisation. These have been advised and recommended by the commissioner for equalities and communities.

Sustainability Implications:

- 5.4 The City Sustainability Partnership contributed to the sustainability outcomes and indicators for inclusion in the City Performance Plan. These are most notable in the section 'Living within Environmental Limits'. However, as reported in the Sustainable Community Strategy sustainability issues are embedded across the strategy's priorities and as such are reported across various parts of the City Performance Plan i.e. transport and the economy.
- 5.5 The BHCC Organisational Health Report includes specific sustainability indicators that will measure the organisation's performance on sustainability. These have been advised by relevant officers in the Finance and Resource Units.

Crime & Disorder Implications:

- 5.6 The City Performance Plan includes a specific section on outcomes and indicators for crime and disorder. These have been suggested and confirmed with the Crime and Disorder Reduction Partnership.

Risk and Opportunity Management Implications:

- 5.7 Accompanying the City Performance Plan a city risk register has been developed. Reporting of these citywide risks has been incorporated into the CPP.

Corporate / Citywide Implications:

- 5.8 The City Performance Plan is a partnership document. It is owned by, and the responsibility of, the Local Strategic Partnership and the Public Service Board. Therefore, CPP progress reports have implications for all public sector partners in the city.

5.9 Performance reporting on the council's Organisational Health Report will have specific implications for the council's target operating model as well as for specific teams within Resource and Finance Units as well as Delivery Units and the Commissioning Unit.

## **6. EVALUATION OF ANY ALTERNATIVE OPTION(S):**

6.1 Through consultation with CMT and SLB the proposed Performance and Risk Management Framework was deemed to be the most suitable model. This was agreed by Cabinet and the Public Service Board.

6.2 Possible alternative options to developing the City Performance Plan included not developing a plan. This was deemed unsafe and unwise by the PSB.

6.3 Possible alternative options to developing an Organisational Health Report for the council included not developing a plan. This was deemed unsafe and unwise by the Corporate Management Team.

## **7. REASONS FOR REPORT RECOMMENDATIONS**

7.1 The council needs to ensure that it has a robust performance and risk management framework that meets the needs of its structure and model of working.

7.2 The reports contain performance information upon which the recommendations are based.

## **SUPPORTING DOCUMENTATION**

### **Appendices:**

1. The CPP annual Performance Indicators headline report
2. The 6 monthly Organisational Health Report 2012-13
3. The City Performance Plan Headline Performance Indicators Definitions in

### **Documents in Members' Rooms**

CPP progress update report

### **Background Documents**

None

