Communities Committee

Item No.

Report title:	Performance management
Date of meeting:	4 July 2018
Responsible Chief Officer:	Tom McCabe – Executive Director, Community and Environmental Services
044	

Strategic impact

Robust performance management is key to ensuring that the organisation works both efficiently and effectively to develop and deliver services that represent good value for money and which meet identified need.

Executive summary

This management report to Committee is based upon the revised Performance Management System, which was implemented as of 1 April 2016. Additionally, this is the first report to provide data against the new 2018/19 vital signs list derived from measures contained within the 'plans on a page' previously presented to and agreed by Committee.

There are currently 15 vital signs indicators under the remit of this Committee.

Performance is reported on an exception basis using a report card format, meaning that only those vital signs that are performing poorly or where performance is deteriorating are presented to Committee. To enable Members to have oversight of performance across all vital signs, all report cards (which is where more detailed information about performance is recorded) will be made available to view upon request.

Of the 15 vital signs indicators that fall within the remit of this Committee, four indicators have met the exception criteria:

- Number of people killed and seriously injured on Norfolk's roads
- Performance against NFRS Emergency Response Standards
- On call (retained) fire station availability
- Successful completion of substance misuse treatment % of adult substance misuse users (opiate, non-opiate and alcohol) that left treatment successfully and did not represent to treatment within 6 months

Recommendations:

Review and comment on the performance data, information and analysis presented in the body of the report and determine whether any recommended actions identified are appropriate or whether another course of action is required - refer to the list of possible actions at Appendix 1.

In support of this, Appendix 1 provides:

- A set of prompts for performance discussions.
- Suggested options for further actions where the Committee requires additional information or work to be undertaken.

1. Introduction

- 1.1. This management report to Committee is based upon the revised Performance Management System, which was implemented as of 1 April 2016. Additionally, this is the first report to provide data against the new 2018/19 vital signs list derived from measures contained within the 'plans on a page' previously presented to and agreed by Committee.
- 1.2. There are currently 15 vital signs indicators under the remit of this Committee.
- 1.3. Work continues to see what other data may be available to report to Committee on a more frequent basis and these will in turn be considered for inclusion as vital signs indicators.
- 1.4. Of the 15 vital signs indicators that fall within the remit of this Committee, four indicators have met the exception criteria.

2. Performance dashboard

- 2.1. The performance dashboard provides a quick overview of Red/Amber/Green rated performance across all vital signs. This then complements the exception reporting process and enables Committee members to check that key performance issues are not being missed.
- 2.2. The vital signs indicators are monitored during the year and are subject to review when processes are amended to improve performance, to ensure that the indicator correctly captures future performance. A list of all vital signs indicators currently under the remit of the Committee is available at Appendix 2.
- 2.3. Vital signs are reported to Committee on an exceptions basis. The exception reporting criteria are as follows:
 - Performance is off-target (Red RAG rating or variance of 5% or more)
 - Performance has three consecutive months/quarters/years of Amber RAG rating (Amber RAG rating within 5% worse than the target)
 - Performance is adversely affecting the council's ability to achieve its budget
 - Performance is adversely affecting one of the council's corporate risks.
- 2.4. Where cells have been greyed out on the performance dashboard, this indicates that data is not available due either to the frequency of reporting or the vital sign being under development. In this case, under development can mean that the vital sign has yet to be fully defined or that baseline data is being gathered.

Key to services on the performance dashboard:

- CIL Community, Information and Learning
- CH Culture and Heritage
- NFRS Norfolk Fire and Rescue Service
- PH Public Health
- 2.5. The performance dashboard for the Communities Committee is as follows:

Communities Committee - Vital Signs Dashboard

In most cases the RAG colours are set as: Green being equal to or better than the target; Amber being within 5% (not percentage points) worse than the target; Red being more than 5% worse than 10% worse t

Monthly	Bigger or Smaller is better	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct 17	Nov 17	Dec 17	Jan 18	Feb 18	Mar 18	Apr 18	May 18	Target
{PH} Number of people killed and seriously injured on Norfolk's roads	Smaller	407	421	425	419	415	399	405	410	410	428				348
{CIL} Increased literacy and numeracy levels - Under Development	Bigger														
(CH) Increase in the amount of transactional level metadata available and being accessed - (Norfolk Record Office)	Bigger	0.7k	1.0k	2.3k	2.3k	4.5k	5.3k	6.3k	7.5k	8.7k	10.0k	24.0k	24.5k	25.3k	24.7k
(CH) Museums visits – total visitors and school visits	Bigger	36.5k	35.3k	43.3k	64.5k	49.0k	40.0k	25.0k	18.5k	21.7k	26.7k	27.8k	34.9k		30.0k
(NFRS) Performance against NFRS Emergency Response Standards	Bigger	81.0%	81.3%	80.1%	80.3%	76.4%	77.7%	77.2%	79.2%	72.9%	78.8%	76.4%	78.6%	1	80.0%
2 5 5		387 / 478	409 / 503	418 / 522	417 / 519	331 / 433	296 / 381	277 / 359	7/359 389/491 320/439 267/339 308/403 271/345		5				
{NFRS} On call (retained) fire station availability	Bigger	81.8%	79.9%	79.9%	79.6%	82.7%	83.2%	86.4%	82.9%	86.6%	86.1%	86.0%	86.8%		90.0%
	. 11	72.1m / 88.1m	68.3m / 85.5m	70.6m / 88.4m	70.4m / 88.4m	70.8m / 85.5m	73.5m / 88.4m	73.9m / 85.5m	73.3m / 88.4m	76,6m / 88.4m	68.7m / 79.8m	76.0m / 88.4m	74.2m / 85.5m		S
(NFRS) Wholetime fire station availability - Under Development	Bigger												99.3%		
(CIL) % of businesses that are compliant with Trading Standards	Bigger	95.5%	95.5%	94.8%	94.7%	94.9%	95.0%	94.99%	95.2%	95.6%	94.92%	94.7%	97.0%	,	95.0%
		834 / 873	900 / 942	907 / 957	894 / 944	888 / 936	961 / 906	834 / 878	840 / 882	861 / 901	860 / 906	891 / 941	901/929		2.
{PH} Status of Norfolk Resilience Forum plans to where NCC is the lead agency	Bigger	95.8%	95.8%	95.8%	95.8%	95.8%	95.8%	95.8%	95.8%	95.8%	95.8%	95.8%			85%
		23 / 24	23 / 24	23 / 24	23 / 24	23 / 24	23 / 24	23 / 24	23 / 24	23 / 24	23 / 24	23 / 24			S
(CIL) Customer satisfaction (with Council services) - Under Development	Bigger												78.3%	70.6%	
													3631 / 4637	5374 / 7612	

		25												2010 / 5317	
(Culture) Proportion (%) of participants engaged who were inactive	Bigger													37.80%	26.60%
Annual (financial / academic)	Bigger or Smaller is better	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	Target
PH} New STI diagnoses (excluding chlamydia in under 25 year olds) per 100,000 population aged 15 to 64	Smaller	$ \mathcal{H} $	\mathbb{H}	582	\mathbb{H}	\mathbb{R}	$ \mathbb{H} $	536	\mathbb{H}	$ \mathcal{H} $	\mathbb{H}			-22	800
PH} NHS Health Checks received by he eligible population	Bigger	19.9% 52.6k / 264.1k	22.4% 59.1k/254.1k	24.8% 65.0k / 264.1k	27.3% 72.1k/254.1k	29.8% 79.6k / 264.1k	31.8% 83.9k/264.1k	33.9% 89.5k / 264.1k	36.2% 95.6k / 264.1k	38.3% 101.2k / 254.1k	40.5% 106.9k / 264.1k	42.4% 111.9k / 254.1k			42%
Quarterly / Termly	Bigger or Smaller is better	Jun 15	Sep 15	Dec 15	Mar 16	Jun 16	Sep 16	Dec 16	Mar 17	Jun 17	Sep 17	Dec 17	Mar 18	Jun 18	Target
the Health Visitor								1 1			598 / 616	660 / 690			
(PH) Percentage of new-borns that received a 6-8 week assessment from	Bigger	90.6%	89.6%	89.7%	91,3%	96.7%	98.4%	97.2%	97.0%	98.1%	97.1%	95.7%			91.0%
eathert within o months		706 / 4000	705 / 3962	\$6 U.S	733 / 3875	748 / 3826	706 / 3758	ğ							
(PH) Successful completion of substance misuse treatment - % of adult substance misuse users (opiate, non- opiate and alcohol) that left treatment successfully and did not re-present to treatment within 6 months	Bigger	17.7%	17.8%		18.9%	19.6%	18.8%								21.9%

3. Report cards

- 3.1. A report card has been produced for each vital sign. It provides a succinct overview of performance and outlines what actions are being taken to maintain or improve performance. The report card follows a standard format that is common to all committees.
- 3.2. Each vital sign has a lead officer, who is directly accountable for performance, and a data owner, who is responsible for collating and analysing the data on a monthly basis. The names and positions of these people are specified on the report cards.
- 3.3. Vital signs are reported to Committee on an exceptions basis. The report cards for those vital signs that do not meet the exception criteria on this occasion, and so are not formally reported, are also collected and are available to view if requested.
- 3.4. Provided at Appendix 1 is a set of prompts for performance discussions that Members may wish to refer to as they review the report cards. There is also a list of suggested options for further actions where the Committee requires additional information or work to be undertaken.
- 3.5. The report cards for the indicators that meet the exception criteria are shown below, which include contextual information for the indicator, along with information about current and historical performance:
 - Number of people killed and seriously injured on Norfolk's roads:
 Performance is off-target (Red RAG rating or variance of 5% or more) for February 2018 Red 428 against a target of 348.

 The Committee will be aware that it has established a Member Task and
 - Finish Group to review this indicator and the approach to associated interventions, and the Group will report back to Committee later this year.
 - Performance against NFRS Emergency Response Standards:
 Performance has three consecutive months/quarters/years of Amber RAG rating (Amber RAG rating within 5% worse than the target) for April 2018 Amber 78.6% against a target of 80%; for March 2018 Amber 76.4%; and for February 2018 Amber 78.8%.
 - This report provides the monthly performance figures for this indicator. There is a separate report on the agenda for this meeting that provides end of year performance information for NFRS, including this indicator, along with additional information to enable Members to consider this performance in the context of the wider NFRS service.
 - On call (retained) fire station availability: Performance has three consecutive months/quarters/years of Amber RAG rating (Amber RAG rating within 5% worse than the target) for April 2018 Amber 86.8% against a target of 90.0%; for March 2018 Amber 86.0%; and for February 2018 Amber 86.1%.
 - This report provides the monthly performance figures for this indicator. There is a separate report on the agenda for this meeting that provides end of year performance information for NFRS, including this indicator, along with additional information to enable Members to consider this performance in the context of the wider NFRS service.
 - Successful completion of substance misuse treatment % of adult substance misuse users (opiate, non-opiate and alcohol) that left treatment successfully and did not re-present to treatment within 6 months: Performance is off-target (Red RAG rating or variance of 5% or more) for October 2017 Red 18.8% against a target of 21.9%. It has been agreed at Committee that this measure will not be reported up for a period of

12 months while the new provider processes are embedded – therefore, no report card is provided.

Members previously asked for an update on the new Alcohol and Drug Behaviour Change service processes being embedded.

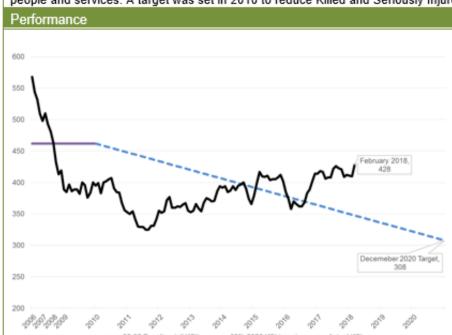
Change, Grow, Live (CGL) have been delivering the new Alcohol and Drug Behaviour Change service since 1st April 2018. On the 1st April the service had successfully transferred all current clients safely while maintaining all treatment regimes and have also started to work with new clients who have self-referred via the drop-in sessions or the telephone support line. They also welcomed all eligible staff from NRP and have recruited new ones to support the new delivery model and who are now accessing relevant CGL training modules.

CGL continue to engage with and build relationships with Primary Care, Acute Trusts and Pharmacists across the county to ensure safe delivery to clients. The service is working hard to ensure the client database is updated with accurate information on current and new clients which in turn will provide a more informed view of the key outcomes to Community Committee as planned.

People Killed or Seriously Injured (KSI) on Norfolk's Roads

Why is this important?

In 2016, 37 people were killed and 377 were seriously injured in road collisions in Norfolk, representing a significant emotional and financial burden to local people and services. A target was set in 2010 to reduce Killed and Seriously Injured by a third – from 462 average in 2005-2009, by the end of 2020 to 308.



This graph represents the 12-month rolling figure for the number of KSI.

What is the background to current performance?

- Local authorities are required by statute to promote road safety, to undertake collision/casualty data analysis and devise programmes including engineering and road user education, training and publicity that will improve road safety.
- The vital sign reports the actual figure of killed and seriously injured, not performance measures for services. It is also not expressed as a rate.
- Factors which positively impact numbers include in-car safety standards, greater compliance with speed limits, and economic decline which suppresses casualty numbers by limiting access to certain modes of transport.
- The general rise in the number of KSI from early 2011 is greater than national figures. Norfolk KSIs have risen 6.2% compared with 2.9% nationally (to September 2016)
- Norfolk has a lower KSI rate per 100,000 people, and per billion vehicle kilometres than its statistical neighbour authority Lincolnshire, but is outperformed in both measures by other neighbours Somerset and Suffolk
- Future performance cannot be accurately predicted due to the number of factors which influence collisions on the road.
- Changes to police accident recording methodology will mean that national 2016 data will include certain metrics will not be directly comparable to previous years, due to data quality issues.
- Norfolk ranked 6th (out of 31 peers) for Road Safety Education within the Highways and Transport survey

What will success look like?

- A downward trend in recorded KSI casualties against increases in vehicle kilometres and population increases;
- A saving to the local economy and local services of around £1.8 million per fatal casualty prevented, and around £206,000 for every serious casualty prevented.

Action required

- . Continue with targeted local interventions and work with stakeholders
- Continue regular monitoring of sites which experience higher than expected collision numbers in order to identify remedial schemes
- Continue regular Safety appraisal of new highway improvement schemes
- Member Task and Finish group to inform new strategy development

Responsible Officers

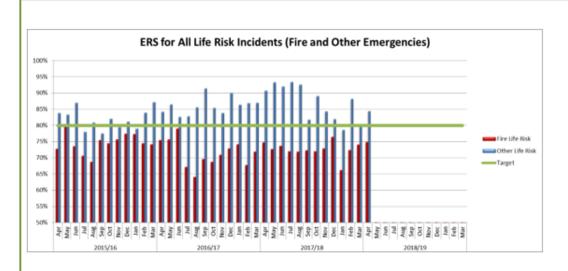
Lead: Diane Steiner – Deputy Director of Public Health
Data: Nile Pennington – Analyst Road Casualty Reduction

Emergency Response Standards for NFRS

Why is this important?

Responding quickly to an emergency can reduce the impact of the incident and save lives. We aim to get to a fire engine to 80% of 'Fires where life may be at risk' within 10 minutes and for 'Other emergencies where life may be at risk' within 13 minutes.

Performance



What is the background to current performance?

- The combined ERS had been in steady decline as shown by the annual average data until the last financial year that had a 0.9% increase:
 - o 2013/14 78.8%
 - o 2014/15 78.7%
 - o 2015/16 77.5%
 - 2016/17 78.4%
 - o 2017/18 78.8%
 - 2018/19 78.6% (Financial Year to Date)
- The nature and location of calls we attend is changing.
 We have successfully reduced the number of false fire alarms (classified as Fires where life may be at risk) we attend, meaning our resources are ready to respond to genuine emergencies. This means we get fewer calls in urban areas which are quicker to get to.

What will success look like?

- We will consistently reach life risk calls within our emergency response standards (above the 80% of life risk calls) across Norfolk
- The economic cost of fire in Norfolk will reduce as we will get to emergencies quickly, reducing the impact of the fire/emergency in terms of damage caused and fewer casualties and fatalities.

Action required

- We are currently reviewing the calls we classify as "life may be a risk" to make sure we are recording the right information.
- We are working to improve the availability of our retained firefighter resources to ensure we are available to respond quickly when needed.

Responsible Officers

Lead: David Ashworth, Chief Fire Officer

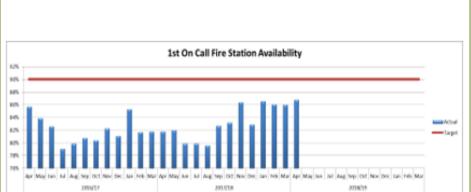
Data: Stephen Maxwell Intelligence and Performance Analyst

On Call (Retained) Fire Station Availability

Why is this important?

Responding quickly to an emergency can reduce the impact of the incident. To do this the service needs its response resources to be available. This measure records the combined availability of the first on call fire engine from each station. The aim is to have these available 90% of the time.

Performance



What is the background to current performance?

- On call (retained) firefighters are employed on a contract to provide a set number of hours "availability". They must be located within 5 mins of their station and are paid to respond to emergencies. They often have alterative primary employment.
- Retained availability has been in decline so the service is taking action to improve this.
 - o 2013/14 88%
 - o 2014/15 85.4%
 - o 2015/16 86.1%
 - o 2016/17 82.1%
 - o 2017/18 83.1%
 - o 2018/19 86.8% (Financial Year to Date)
- Challenges for RDS availability include recruitment and retention (finding people who are prepared to be firefighters and stay within 5 minutes of station and primary employment pressures). Efforts put into addressing these issues through a task and finish project are showing positive early signs with the overall establishment increasing.

What will success look like?

- Consistent performance improvement to achieve the 90% target
- The first fire engine responds to an emergency when they are needed (avoiding the need to send the next closest available fire engine).
- Wholetime (full-time) firefighting resources are almost always available so they have not been included in this data. They provide a level of resilience and support for surrounding RDS stations.

Action required

- Currently recruiting on-call firefighters at a number of stations, a media campaign has recently been run with significant interest
- Outwell as an example has had significant issues with availability in recent months. As a result of publicity and efforts by local managers their performance has increased significantly from a low of less than 10%.
- Managers regularly review the availability provided by on call firefighters to ensure they comply with their contracted arrangements and performance manage this where required.

Responsible Officers

Lead: David Ashworth, Chief Fire Officer

Data: Stephen Maxwell Intelligence and Performance Analyst

4. Recommendations

4.1. Committee Members are asked to:

Review and comment on the performance data, information and analysis presented in the body of the report and determine whether any recommended actions identified are appropriate or whether another course of action is required – refer to the list of possible actions at Appendix 1.

In support of this, Appendix 1 provides:

- A set of prompts for performance discussions.
- Suggested options for further actions where the Committee requires additional information or work to be undertaken.

5. Financial Implications

- 5.1. There are no significant financial implications arising from the performance management report.
- 6. Issues, risks and innovation
- 6.1. There are no significant issues, risks and innovations arising from the performance management report.

Officer Contact

If you have any questions about matters contained in this paper or want to see copies of any assessments, eg equality impact assessment, please get in touch with:

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Email address: andrew.brownsell@norfolk.gov.uk



If you need this report in large print, audio, braille, alternative format or in a different language please contact 0344 800 8020 or 0344 800 8011 (textphone) and we will do our best to help.

Appendix 1 – Performance discussions and actions

Reflecting good performance management practice, there are some helpful prompts that can help scrutinise performance, and guide future actions. These are set out below.

Suggested prompts for performance improvement discussion

In reviewing the vital signs that have met the exception reporting criteria and so included in this report, there are a number of performance improvement questions that can be worked through to aid the performance discussion, as below:

- 1. Why are we not meeting our target?
- 2. What is the impact of not meeting our target?
- 3. What performance is predicted?
- 4. How can performance be improved?
- 5. When will performance be back on track?
- 6. What can we learn for the future?

In doing so, Committee members are asked to consider the actions that have been identified by the vital sign lead officer.

Performance improvement – suggested actions

A standard list of suggested actions has been developed. This provides members with options for next steps where reported performance levels require follow-up and additional work.

	Action	Description
1	Approve actions	Approve actions identified in the report card and set a
		date for reporting back to the Committee.
2	Identify alternative or	Identify alternative/additional actions to those in the report
	additional actions	card and set a date for reporting back to the Committee.
3	Refer to Departmental	DMT to work through the performance issues identified at
	Management Team	the Committee meeting and develop an action plan for
		improvement and report back to Committee.
4	Refer to Committee	Member-led task and finish group to work through the
	Task and Finish Group	performance issues identified at the Committee meeting
		and develop an action plan for improvement and report
		back to Committee.
5	Refer to County	Identify key actions for performance improvement and
	Leadership Team	refer to CLT for action.
6	Refer to Policy and	Identify key actions for performance improvement that
	Resources Committee	have 'whole Council' performance implications and refer
		them to the Policy and Resources Committee for action.

Appendix 2 – Communities Committee Vital Signs Indicators

A vital sign is a key indicator from one of the Council's services which provides members, officers and the public with a clear measure to assure that the service is performing as it should and contributing to the Council's priorities. It is, therefore, focused on the results experienced by the community. It is important to choose enough vital signs to enable a good picture of performance to be deduced, but not so many that strategic discussions are distracted by detail.

There are currently 15 vital signs performance indicators that relate to the Communities Committee. The indicators in bold (on the Table below) are vital signs indicators deemed to have corporate significance and therefore will also be reported to the Policy and Resources Committee.

Key to services:

- CIL Community, Information and Learning
- CH Culture and Heritage
- NFRS Norfolk Fire and Rescue Service
- PH Public Health

Service	Vital Signs Indicator	What it measures	Why it is important	Data	
PH	Road safety	Number of people killed and seriously injured on Norfolk's roads	Road casualties are a significant contributor to the levels of mortality and morbidity of Norfolk people, and the risks of involvement in KSI injuries are raised for both deprived and vulnerable groups in the Norfolk population.	Rolling twelve months	
CIL	Literacy and numeracy levels	Increased literacy and numeracy levels	Increased literacy and numeracy improves people's life chances and potential to succeed, thereby contributing more to areas such as the local economy.	Monthly	
CH	Norfolk Record Office – Increase in Metadata on NRO Catalogue	Increase in the amount of transactional level metadata available and being accessed (Norfolk Record Office)	The most significant means of access to the Record Office Collection is via metadata provided in its catalogue. The better the metadata, the better the outcomes from the use of the Record Office.	Monthly	
СН	Museum use	Museum visits – total visitors and school visits	Demonstrates contribution to Excellence sub outcomes and improvement curve.	Cumulative monthly	
NFRS	Response to emergencies	Emergency Response Standards	Responding quickly to an emergency can reduce the impact of the incident and save lives. We aim to get to a fire engine to 80% of 'Fires where life may be at risk' within 10 minutes and for 'Other emergencies where life may be at risk' within 13 minutes.	Monthly	

Service	Vital Signs Indicator	What it measures	Why it is important	Data
NFRS	Response to emergencies	On call fire station availability	Responding quickly to an emergency can reduce the impact of the incident. To do this the service needs its response resources to be available. This measure records the combined availability of the first on call fire engine from each station. The aim is to have these available 90% of the time.	Monthly
NFRS	Response to emergencies	Wholetime fire station availability	Responding quickly to an emergency can reduce the impact of the incident. To do this the service needs its response resources to be available. This measure records the combined availability of the wholetime fire engine from each station. The aim is to have these available 100% of the time.	Monthly
CIL	Business compliance with trading standards	% of businesses that are broadly compliant with trading standards	Helps ensure that poor business practice is corrected and consumers and legitimate businesses are protected.	Monthly
PH	Response to emergencies	Status of Norfolk Resilience Forum plans where NCC is the lead agency	Ensure that plans and procedures are in place to prepare, respond and recover from emergencies.	Monthly
CIL	Customer satisfaction	Customer satisfaction with council services	Helps to improve the service that we provide to our customers.	Monthly
PH	Engagement and retention of adult substance misuse clients	% of adult substance misuse users that left substance misuse treatment successfully and who do not represent to treatment within 6 months.	Poor parental mental health, exposure to domestic abuse and alcohol/drug abuse by parents strongly affect children's outcomes.	Monthly

Service	Vital Signs Indicator	What it measures	Why it is important	Data
PH	New born babies 6-8 week assessment	% of new-borns that received a 6-8 week assessment from the Health Visitor	It supports early identification of families needing further health and social support, empowering parents to develop effective strategies that build resilience, support and information on feeding, healthy weight and nutrition.	Monthly
PH	NHS Health checks received by the eligible population	% of eligible population aged 40-74 who received an NHS Health Check	To measure Norfolk's delivery against that of England's % of NHS Health Checks received by the eligible population.	Quarterly
PH	Sexually Transmitted Infection (STI) diagnoses	New STI diagnoses per 100,000 population aged 15 to 64	Reducing the transmission of HIV and STIs results in a healthier population.	Quarterly
CH	Active Norfolk participants engaged who were inactive	% of participants engaging in Active Norfolk commissioned activities (for the purpose of reducing inactivity) who report a total of 30 minutes or less of at least moderate intensity activity a week	Demonstrates whether services are reaching those who need them most with regards to physical activity.	Annually