

*Rydym yn croesawu gohebiaeth yn Gymraeg.
Rhowch wybod i ni os mai Cymraeg yw eich
dewis iaith.*

*We welcome correspondence in Welsh. Please
let us know if your language choice is Welsh.*

**Gwasanaethau Gweithredol a Phartneriaethol /
Operational and Partnership Services**

Deialu uniongyrchol / Direct line /: 01656 643387
Gofynnwch am / Ask for: Mr Mark Anthony Galvin



Dyddiad/Date: 5 July 2016

Dear Councillor,

CORPORATE RESOURCES & IMPROVEMENT OVERVIEW & SCRUTINY COMMITTEE

A meeting of the Corporate Resources & Improvement Overview & Scrutiny Committee will be held in the Council Chamber, Civic Offices Angel Street Bridgend CF31 4WB on **Monday, 11 July 2016** at **2.00 pm**.

AGENDA

1. Apologies for Absence
To receive apologies for absence from Members.
2. Declarations of Interest
To receive declarations of personal and prejudicial interest (if any) from Members/Officers in accordance with the provisions of the Members Code of Conduct adopted by Council from 1 September 2008 (including Whipping declarations)
3. Approval of Minutes 3 - 12
To receive for approval the minutes of a meeting of the Corporate Resources and Improvement Overview and Scrutiny Committee dated 22 March 2016
4. Sickness Absence Report 13 - 124
Invitees:

Cllr Hywel Williams, Cabinet Member - Resources
Andrew Jolley, Corporate Director - Operational and Partnership Services
Sarah Kingsbury, Head of Human Resources and Organisational Development
Ian Vaughan, Workforce Planning Officer
5. Council's Performance Against its Commitments and a Summary of its
Financial Position at Year End for 2015-16 125 - 212

Invitees:

All Members of the Cabinet and Corporate Management Board
All Overview and Scrutiny Committee Chairs
Randal Hemingway, Head of Finance
Lee Jones, Head of Regulatory and Partnership Services
Yuan Shen, Corporate Performance, Partnership and Transformation Manager

- | | | |
|----|--|-----------|
| 6. | <u>Forward Work Programme 2016 - 17</u> | 213 - 222 |
| 7. | <u>Forward Work Programme Update</u> | 223 - 226 |
| 8. | <u>Corporate Parenting Champion Nomination Report</u> | 227 - 230 |
| 9. | <u>Urgent Items</u> To consider any items of business in respect of which notice has been given in accordance with Part 4 (paragraph 4) of the Council Procedure Rules and which the person presiding at the meeting is of the opinion should by reason of special circumstances be transacted at the meeting as a matter of urgency. | |

Yours faithfully

P A Jolley

Corporate Director Operational and Partnership Services

Distribution:

Councillors:

G Davies
GW Davies MBE
E Dodd
CA Green

Councillors

EM Hughes
DRW Lewis
JR McCarthy
D Patel

Councillors

M Reeves
JC Spanswick
G Thomas
RE Young

Agenda Item 3

CORPORATE RESOURCES & IMPROVEMENT OVERVIEW & SCRUTINY COMMITTEE - TUESDAY, 22 MARCH 2016

MINUTES OF A MEETING OF THE CORPORATE RESOURCES & IMPROVEMENT OVERVIEW & SCRUTINY COMMITTEE HELD IN COMMITTEE ROOMS 2/3, CIVIC OFFICES ANGEL STREET BRIDGEND CF31 4WB ON TUESDAY, 22 MARCH 2016 AT 2.00 PM

Present

Councillor M Reeves – Chairperson

| | | | |
|---------------|-------------|-----------|--------------|
| GW Davies MBE | E Dodd | EM Hughes | RC Jones |
| DRW Lewis | JR McCarthy | CL Reeves | JC Spanswick |
| G Thomas | | | |

Officers:

| | |
|-------------|---|
| Gary Jones | Head of Democratic Services |
| Andrew Rees | Senior Democratic Services Officer - Committees |

Invitees:

| | |
|----------------------|---|
| Susan Cooper | Corporate Director - Social Services & Wellbeing |
| Andrew Jolley | Corporate Director Operational & Partnership Services |
| Deborah McMillan | Corporate Director Education & Family Support |
| Yuan Shen | |
| Mark Shephard | Corporate Director - Communities |
| Ness Young | Corporate Director - Resources & Section 151 Officer |
| Councillor M Gregory | Cabinet Member Resources |
| Councillor N Clarke | Chairperson Partnerships & Governance Overview and Scrutiny Committee |
| Councillor EP Foley | Chairperson Children & Young People Overview and Scrutiny Committee |

193. APOLOGIES FOR ABSENCE

Apologies for absence were received from the following Members / Officer:

Councillor MEJ Nott – Leader
Councillor HJ David – Deputy Leader
Councillor CE Smith – Cabinet Member Regeneration & Economic Development
Councillor HJ Townsend – Cabinet Member Children’s Social Services and Equalities
Councillor PJ White – Cabinet Member Adult Social Care & Health and Wellbeing
Councillor HM Williams – Cabinet Member Communities
Chief Executive.

The Committee noted its disappointment that the Chief Executive and Cabinet Members had not been able to attend the meeting.

194. DECLARATIONS OF INTEREST

None.

195. APPROVAL OF MINUTES

RESOLVED: That the minutes of the meetings of the Corporate Resources & Improvement Overview and Scrutiny Committee of 19 January and 9 February 2016 be approved as a true and accurate record.

196. FORWARD WORK PROGRAMME UPDATE

The Head of Democratic Services presented a report which detailed the items to be considered at the next meeting of the Committee to be scheduled following the Annual Meeting of Council and sought confirmation of the information and invitees required.

The Head of Democratic Services also reported on a list of potential items for the 2016-17 Forward Work Programme which would be prioritised and scheduled at the meeting of the Committee following the Annual Meeting of Council.

Conclusions:

The Committee noted the items to be considered at the next meeting to be scheduled at the Annual Meeting of Council and determined the invitees to be invited to attend.

197. DIRECTORATE BUSINESS PLANS 2016-17

The Head of Democratic Services introduced a report which presented extracts of the Council's draft Directorate Business Plans for 2016-17.

The Corporate Improvement and Integrated Partnerships Manager informed the Committee that extracts from each Directorate Business Plan had been produced for the Committee and in each extract, Corporate plan indicators had been highlighted in yellow. For each commitment in the Corporate Plan, Directorates have set out the milestones that will be taken to achieve them and the target date for completion and measures they will use to assess performance with targets set for 2016-17.

The Committee expressed concern at the lack of consistency in the way in which performance data is presented in the Directorate Business Plans as some Directorates were making comparisons on different years. The Corporate Director Resources informed the Committee that the comparisons to be made in the Directorate Business Plans should only relate to the period of the Medium Term Financial Strategy. The Corporate Director Education and Transformation informed the Committee that reports for the education service would vary from other Directorates as school targets are based on academic years while school budgets are based on fiscal years.

The Committee questioned the reason for the budget for the Music Service being zero. The Corporate Director Education and Transformation informed the Committee that the core budget of the Directorate was previously used to subsidise the Music Service, however schools now have a Service Level Agreement to pay for the Music Service it uses without the need for subsidy. She stated that the Music Service had been re-structured with peripatetic teachers now being designated as tutors which allows demand to be met for the teaching of more modern musical instruments in schools. There was now a greater amount of choice offered to pupils to enable whole classes to access musical instruments.

The Committee questioned the reason for the budgets for Transition and Post 14 being zero. The Corporate Director Education and Transformation informed the Committee

that these services were still being delivered but in a more integrated way and are reflected in the Strategy, Partnerships & Commissioning budgets. She stated that she would remove these budget headings from the Learning budget. She informed the Committee that the spend for transition was now under the Support for Children & Learners.

The Committee referred to the proposed housing developments at Parc Afon Ewenny and Brackla North East and questioned how the extra capacity from these developments would be dealt with at schools. The Corporate Director Education and Transformation informed the Committee that the Welsh Government had provided the authority with the opportunity to bid for Band B funding up to 2024 with the authority giving the Welsh Government an indication of its needs for new schools. A scoping exercise was being undertaken based on demand and anticipated pupil numbers from these proposed housing developments. She informed the Committee that it was envisaged that a new primary school would have to be developed somewhere in Bridgend town centre at a location to be determined. She stated that funding from the school modernisation programme would have to be match funded from capital receipts.

In response to a question from the Committee, the Corporate Improvement and Integrated Partnerships Manager informed the Committee that future extracts of the Directorate Business Plans will contain a glossary of terms used.

The Committee questioned whether the targets are national targets. The Corporate Director Education and Transformation informed the Committee that the targets are based on a mixture of Flying Start and foundation phase targets and they conform to national targets. The Committee questioned the lack of targets for performance indicator 1.3.10.3 on consultation on the proposals from the review into the development and rationalisation of the curriculum and school estate for primary, secondary and post 16 education. The Committee also questioned the reasons for the absence of positive targets for the performance indicators on the number of Welsh medium primary schools unable to meet the demand for places at nursery and reception admissions round and the number of English medium primary schools unable to meet in catchment demand for places at nursery and reception admissions round. The Corporate Director Education and Transformation informed the Committee that there are four areas of review, namely, school federations; the sharing of leadership; the curriculum and Band B. She stated that it was too early to comment in detail on this programme which is being project managed but more detail would be known on this project in the autumn.

The Committee questioned the reason for target for performance indicator 3.4.1 relating to analysing and reporting on sickness data being static and the number of days lost due to sickness absence not being challenging. The Corporate Director Resources informed the Committee that it was unlikely that any Directorate would meet its sickness absence targets and the target would remain until Directorates hit the target. The Corporate Director Resources confirmed that the sickness absence targets varied by Directorate with the average target being 9.10 days. In response to a question from the Committee on the need for targets the percentage of school days lost due to fixed-term exclusions during the academic year in primary and secondary schools to be more stretching, the Corporate Director Education and Transformation stated that she would look into these targets.

The Committee questioned the reason for the target for pupils in attendance in primary and secondary schools reducing when the targets should increase. The Corporate Director Resources informed the Committee that targets are set realistically so that they could be attained.

The Committee questioned whether the target for the number of young people and adults gaining employment, education or training was challenging enough. The Assistant Chief Executive Legal and Regulatory Services commented that the target of 200 is a fair benchmark and did not believe that more placements could be achieved.

The Committee requested clarification of the term Wise Board. The Corporate Improvement and Integrated Partnerships Manager informed the Committee that the Wise Board had been established under the Single Integrated Partnership Plan as one of five boards. The Wise Board is linked to schools and is chaired by the Principal of Bridgend College.

The Committee questioned the lack of a target in developing opportunities for innovative ICT based technical mobile working practices and whether delaying it to March 2017 would be a missed opportunity. The Assistant Chief Executive Legal and Regulatory Services commented that this related to the Regulatory Services collaboration with Cardiff and the Vale of Glamorgan and once the targets had been received they would be included in the Business Plan.

In response to a question from the Committee the Assistant Chief Executive Legal and Regulatory Services commented that having webcasting facilities could lead to opportunities to provide income generation by letting out the Chamber for use by outside organisations.

The Committee questioned the target for the percentage of food establishments being broadly compliant with food hygiene standards reducing. The Assistant Chief Executive Legal and Regulatory Services commented that the target had reduced as a result of the work to combine the service but he expected the target to increase. He stated that food establishments also had to comply with many other standards.

The Committee requested clarification as to how reviewing opportunities to purchase additional investment properties would contribute to income generation opportunities. The Corporate Director Resources informed the Committee that one of the objectives is to increase income and there is funding available to purchase properties which had the potential to generate income for the authority.

The Committee referred to the reduction in the number of staff on the establishment in the Human Resources Department and questioned why there was no proportionate reduction in the budget. The Corporate Director Resources informed the Committee that the numbers of staff and budgets would be reconciled.

The Committee questioned whether the 3 new initiatives for income generation were in place. The Corporate Director Resources informed the Committee that there would be more than 3 income generation initiatives developed during the MTFS period. She stated that the Council is embarking on an income generation programme.

The Committee questioned why the Trent system had not been adapted to enable line managers to have direct access to the absence management module and employee training records and to enable employees to update personal details. The Corporate Director Resources informed the Committee that changes were needed to be made to develop the appropriate modules on Trent and are on target for December 2016. She stated that the focus of attention was on bringing the finance system in-house as part of the digital transformation programme. In response to a question from the Committee, the Corporate Director Resources stated that she would provide the Committee with information on the composition of the Digital Transformation Panel and on progress made to date.

The Committee questioned whether the target on agile working would be achieved and whether further targets would be added. The Corporate Director Resources informed the Committee that the target for agile working should be achieved by September 2016 and that the Council was almost in a position to sign the lease for Raven's Court with the proposed lessee. Procurement of devices to enable agile working to happen will take place following the signing of the lease.

The Committee questioned the reason for the numbers of days lost for the targets for 2015-16 and 2016-17 for sickness and injuries being the same. The Corporate Director Resources informed the Committee that the outturn had yet to be reached and this was the first time targets had been for these categories.

The Committee questioned the cost of training employees to improve Welsh Language skills. The Corporate Director Resources informed the Committee £318k had been included in the budget to cover the implementation of the Welsh Language Standards which will also include the training of staff. She advised that the main cost of implementing the Welsh language Standards would relate to translation.

The Committee questioned the plans to increase the number of apprenticeships. The Corporate Director Resources informed the Committee that each Directorate will have a target to offer apprenticeships. She stated that with effect from April 2017 a levy on apprenticeships will be introduced, the detail of which was currently being worked through. There was a need to understand how the levy is paid for the training element of apprenticeships.

In response to a question from the Committee, the Corporate Director Communities would provide detail on the reason for the headcount of staff in Street Scene increasing in 2015/16 and then decreasing in 2016/17.

The Committee questioned the targets for the number of vacant properties in Bridgend, Portcawl and Maesteg town centres being static. The Corporate Director Communities informed the Committee that the target had remained static as it was a reflection of the economic downturn but hoped this would reduce over time as a result of regeneration projects such as the redevelopment of the Rhiw car park which could act as a catalyst for businesses to open up.

The Committee expressed its disappointment at the low target numbers for apprenticeships and traineeships to be offered. The Corporate Director Communities informed the Committee that there is an ambition corporately to increase the number of apprenticeships and traineeships offered but it was difficult to do so when the number of staff on the establishment was reducing. He stated that a "grow our own" approach would be looked at and would be incorporated in the next Business Plan.

The Committee requested clarification of the review of facilities provided by the parks and playing fields service including potential asset transfer. The Corporate Director Communities informed the Committee that there was a need to making savings of £1m in in 2017/18 in line with the requirements of the MTFs which would result in the Council managing less parks and playing field facilities. He stated that if the authority could not afford to continue running these facilities consideration would need to be given as to potential closure or to mitigate that by a community asset transfer process. Concern was expressed by the Committee that some deprived communities may lose much needed facilities and questioned whether an equality impact assessment would be carried out on the loss of such facilities. The Corporate Director Communities informed the Committee that the sum of £1m had been allocated in the capital programme as an

incentive for organisations to pursue a community asset transfer of facilities. Organisations in pursuing asset transfer would be required to develop a business case for the transfer of the asset and the Council would invest in putting the most urgent repairs / works right prior to the transfer taking place. No community asset transfers had yet taken place although there were applications being progressed. The Corporate Director Communities informed the Committee that significant savings would have to be made to the Communities Directorate budget and services in parks and playing fields would have to be cut. The Corporate Director Resources informed the Committee that the community asset transfer process is an opportunity to protect and invest in facilities working in partnership with third parties. The Committee questioned whether clubs would be given incentives to progress a community asset transfer. The Corporate Director Resources stated that each business case would be looked at on its merits and there may be a need for some transition funding to assist the asset transfer process and in order to come up with a sustainable solution. She also stated that in the event of an asset being transferred by way of a lease, there was an opportunity for the asset to be taken back by the Council. She stated that the third sector programme was about developing capacity in communities in order that they become more self-reliant.

The Committee questioned what would happen to an asset transfer in the event that more than sports club used the facilities. The Corporate Director Communities informed the Committee that in such cases there might be a lead club and clubs sharing facilities would be encouraged to form a sports association. He stated that guidelines for community asset transfer are being drawn up. The Cabinet Member Resources provided the Committee with an example of town and community councils taking a lead whereby Pencoed Town Council was taking a lead in an asset transfer and a sports association had been formed. The Corporate Director Communities informed the Committee that the authority would no longer be in a position to manage facilities. He stated that the authority has appointed a CAT Officer to progress and assist clubs with the asset transfer process, however many clubs lacked the capacity to progress applications and a lengthy lead-in process was often needed for clubs to work up their proposals. He informed the Committee that the authority is keen to have town and community councils on board to assist clubs in their community leadership role.

The Committee questioned the variance in the staff headcount with that of the budget. The Corporate Director Resources informed the Committee she would check the accuracy of the employment numbers and the budget figures per Directorate.

The Committee questioned the target for the number of visits to sport and leisure facilities where the visitor will be participating in physical activity not being stretching. The Corporate Director Social Services and Wellbeing informed the Committee that the figures had been affected due to work to facilities being undertaken at the Bridgend Recreation Centre and which had not yet finished, but she would follow the target up.

The Committee questioned the reason for the rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over being set low. The Corporate Director Social Services and Wellbeing informed the Committee that the service had always performed well against this target. She stated that the Social Services and Wellbeing Act had brought about 51 new targets.

The Committee questioned the target for the number of service users who provide feedback as part of contract monitoring arrangements not being stretching enough. The Corporate Director Social Services and Wellbeing informed the Committee that the new target is based on similar indicators which the service has had in the past and she stated that the target should be more stretching.

Conclusions

The Committee recommended that a review of target setting be undertaken. The committee identified that target setting across the business plans raised concerns as many targets had been reduced and were not considered as suitably challenging.

The Committee recommended that the development of the TRENT system in respect of the online management systems for absence training, personnel information and the use of BACS instead of cheque books for schools was progressed as quickly as possible to provide immediate budget and efficiency savings.

The Committee recommended that following clarification of the levy for apprenticeships that all Directorates maximise any opportunities to increase the number of apprentices.

The Committee recommended that a clear plan be developed regarding the ongoing use of Community Facilities, Parks and Playing fields. The funding available for Community Asset Transfer (CAT) required a robust utilisation plan to ensure that the opportunities for CAT were optimised and that any residual funding was used to meet the requirements of the Social Services and Wellbeing and Future Generations Acts.

The Committee recommended and the Corporate Director Resources agreed that HR and Finance would work together to review both HR and Finance data to reconcile the information accordingly.

The Committee requested the following information:

There was little or no detail regarding post 16 education and the indicators relating to Welsh/English primary schools being unable to meet the demand for nursery and reception places. Further information was requested to clarify this indicator.

198. **BUDGET MONITORING - QUARTER 3 2015-16**

The Corporate Director Resources reported on an update on the Council's financial position as at 31 December 2015. She stated that the overall projected position as at 31 December 2015 was a net under spend of £1.165m. She highlighted the status of the budget monitoring proposals which showed 76% of the proposals being green, nine proposals totalling £1.230m are currently red with nine proposals totalling £1.481m being amber.

The Corporate Director Resources also reported on the monitoring of the capital programme which for 2015-16 totals £40.088m of which £24.794m is the Council's resources with the remaining £15.294m coming from external grants. She also informed the Committee on the review of earmarked reserves where Directorates had up until 15 December 2015 drawn down £288k of funding from their Directorate specific earmarked reserves and £940k from Corporate Reserves including the Major Claims Reserve and the Change Fund.

The Committee expressed concern at the under spend of £218k in Schools Based SEN. The Corporate Director Education and Transformation informed the Committee that the under spend had occurred as a result of the need to hold vacancies to meet the savings required in the MTFs. She stated that difficulties had been encountered in recruiting one-to-one support for pupils. She also stated that the Welsh Language Standards had introduced a requirement to employ Welsh speaking support staff and discussions had taken place with the Vale of Glamorgan, Cardiff, Merthyr Tydfil and RCT Councils in

relation to having an arrangement for Welsh speaking support staff in an attempt to avoid a large turnover in staff.

The Committee questioned whether the over spend of £142k in School Improvement related to one school. The Corporate Director Education and Transformation informed the Committee additional funding had to be allocated to Coleg Cymunedol y Dderwen due to it being placed in special measures. Funding had also been allocated to other schools in terms of capacity and leadership and an additional head teacher allocated to Cornelly primary to cover sickness. Funding for School Improvement had been received from Schools Challenge and the Central South Consortium.

The Committee expressed concern at the over spend of £170k on Home to School / College Transport and that the service should be placed in one Directorate and separate to the two existing Directorates to which the functions sat. The Committee referred to recent communications received by parents in relation to their child's eligibility to qualify for Home to School / College Transport only for it to be later withdrawn. The Corporate Director Education and Transformation informed the Committee that the service had suffered a legacy of inconsistencies in management with some inconsistencies in the application of Home to School / College Transport which had affected approximately 150 pupils. The Corporate Director Education and Transformation stated that the software package in use by the Transport Team had thrown up some anomalies. The Corporate Director Education and Transformation commented on the difficulties that had been encountered in managing the service when the budget for the service is held in another Directorate. She stated that she would be holding discussions shortly with the Corporate Director Communities and the two Heads of Service to resolve issues.

The Committee questioned the reason for the over spend of £200k on fleet and whether it was attributed to the outsourcing of ground maintenance. The Corporate Director communities informed the Committee that the savings on the fleet joint venture with the police had yet to be fully realised. However there was a net saving of £132k on ground maintenance.

In response to a question from the Committee the Corporate Director Social Services and Wellbeing stated that she would confirm the position on liability in the event of Halo litigating.

Conclusions

The Committee considered that a sufficient period of time had been provided to address the historic issues relating to Home to School Transport. It was recommended that a service review be undertaken independently or by the Chief Executive to address these ongoing issues and deliver the necessary savings and efficiencies.

The Committee requested additional information regarding the possibility of procuring of Special Educational Needs services for one-to-one educational requirements from other Local Authorities.

Concerns were raised that the income generation target of £1.5m for 3 new initiatives in 2016/17 was similar to that of the budget reductions identified in the financial indicators. It was hoped that there would be more than 3 income generation initiatives this year to mitigate the saving being made in the MTFs. The Committee requested additional information regarding the initiatives that were being planned and the likelihood that they would achieve the necessary budget savings.

Concerns were raised regarding the savings identified for Fleet Services and queried if there was any merit in outsourcing this service.

The Committee requested additional information regarding the benefits of outsourcing any of Fleet Services and the potential impact on the quality of services should this occur.

199. NOMINATION FOR STANDING BUDGET RESEARCH AND EVALUATION PANEL

The Head of Democratic Services submitted a report seeking nominations from the Committee to sit on the Standing Budget Research and Evaluation Panel. The Standing BREP would undertake a review of the process following the setting of this year's budget. The Committee was requested to nominate the Chair of this Committee and one Member of the Committee and additionally a reserve Member to sit on the Standing BREP.

RESOLVED: That the Chairperson of the Corporate Resources and Improvement Overview and Scrutiny Committee and Councillor C Reeves be nominated to represent the Committee on the Standing Budget Research and Evaluation Panel with Councillor E Dodd being nominated as the reserve member in the event that Councillor C Reeves could not attend.

200. URGENT ITEMS

There were no urgent items.

The meeting closed at 5.05 pm

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO CORPORATE RESOURCES & IMPROVEMENT OVERVIEW AND SCRUTINY COMMITTEE

11 JULY 2016

REPORT OF THE CORPORATE DIRECTOR OPERATIONAL AND PARTNERSHIP SERVICES

SICKNESS ABSENCE RESEARCH & EVALUATION PROJECT

1. Purpose of Report.

- 1.1 This report provides the Committee with a position statement with regards levels of sickness in the Council for the year 2015/16 and the work/actions undertaken since the WLGA project conducted in 2015.

2. Connection to Corporate Improvement Objectives/Other Corporate Priorities

- 2.1 The Making Best Use of Resources is one of the Council's three corporate improvement priorities.

3. Background.

- 3.1 The Council's relative position in the rank order of the 22 Councils in Wales worsened in 2014/15 despite increased efforts in some areas. Annual comparative data is attached as Appendix E. At the time of writing the national statistics for 2015/16 had not been published.

- 3.2 In order to assist in finding alternative ways in which sickness absence may be managed the Corporate Director of Resources accessed funding available from the WLGA and a cross-Wales project was commissioned, led by Neath Port Talbot Borough Council.

- 3.3 The findings of this report were presented to CPA on 23rd November 2015 and Cabinet agreed a number of recommendations put forward.

4. Current situation / proposal.

- 4.1 The report from the WLGA project outlines the findings from the research, and draws conclusions for the consideration of the participants. The report is attached as Appendix A.

- 4.2 The BCBC sickness policy was introduced in 2008 and is attached as Appendix B with the accompanying Managers Guidelines which have been updated following the WLGA project, attached as Appendix C. The arrangements in respect of Absence Management and Occupational Health are detailed in these two documents. All documentation and related support mechanisms for absence

management [e.g. Occupational Health] are being reorganised into “toolkit form” which will also include newly developed FAQs, to enable easy access to all the available information and support for line managers.

- 4.3 Sickness absence is rigorously monitored in a number of ways:
- 4.3.1 CMB receive a quarterly report and the latest report, for 2015 / 16, is attached at Appendix D
 - 4.3.2 The sickness absence activity is reported to the Local Government Data Unit on an annual basis.
 - 4.3.4 HR send a non-compliance report to business support managers each month. This identifies those employees who have not been dealt with in accordance with the policy. Business Support Managers escalate the issues as deemed appropriate in their Directorate.
 - 4.3.5 Employee Relations Advisors will attend Directorate DMT meetings to discuss sickness issues specific to that Directorate
 - 4.3.6 HR are involved at each formal stage of the process and the trade unions are also involved in the process
 - 4.3.7 Reports have been prepared using the data presented quarterly by Directorate / Service Unit. These reports provide a three year summary and are detailed at Appendix E
 - 4.3.8. Return to Work activity is monitored and Appendix F details:
 - Headcount by Directorate and Service Unit
 - Identifying those which have been missed [not those awaiting a return ie “open absences”]
 - Warnings issued
 - Number of dismissals
- 4.4 Performance management information is now provided by IMASS with some basic information attached as Appendix G. The effectiveness of the contract is currently being reviewed and analysed by HR.
- 4.5 Care First provide us with quarterly management information and the latest report is attached as Appendix H.
- 4.6 BCBC provides face to face training to managers on sickness absence. The face to face course was reviewed following the WLGA project and the revised courses for both short terms sickness and long term sickness began in February 2016. The data on attendees in the year 2015/16 for both courses is attached at Appendix I. Also documented is the activity in 2016/17 to date, together with detail on the number of courses which will run between June and the end of September 2016.
- 4.7 The Research & Evaluation Panel had previously agreed to scrutinise the sickness absence situation in schools separately. However, we are able to provide the incidence of long and short term sickness by school and this is attached as Appendix J.
- 4.8 Internal audit will commence a piece of work in due course to assess whether or not line managers are consistently applying the policy.
- 4.9 Schools are at liberty to adopt our sickness absence policy, procedure, etc. but the Council has no authority to impose this on them. The activity is not monitored by

HR, and the failure to complete RTW is no longer “chased” [with the agreement of the Corporate Director of Children and Family Support Activity in relation to RTW activity is attached at Appendix K.

- 4.10 Within the parameters of the current policy there have been some amendments to the way sickness absence is managed internally. These include:
 - 4.10.1 All work related stress and mental health cases will be referred to HR in order that “next steps” are appropriately determined
 - 4.10.2 The analysis of the Occupational Health contract has been evaluated and has led to telephone consultations with the Occupational Health Nurse ceasing.
 - 4.10.3 A more formal approach to welfare meetings has been introduced when an employee reports as absent in the long term. A meeting will take place between 21 and 28 days.
 - 4.10.4 Line managers have been instructed to have daily contact with employees who initially report with a short term absence
 - 4.10.5 A further course on “conducting difficult conversations in the context of managing absence” will be offered in parallel with the People Management and Absence Management courses currently on offer.

5. Effect upon Policy Framework & Procedure Rules.

- 5.1 There is no effect upon policy framework or procedure rules in this report.

6. Equality Impact Assessment

- 6.1 There are no negative equality implications to this report.

7. Financial Implications.

- 7.1 There are no financial implications arising from this report.

8. Recommendation.

- 8.1 The Committee receives and considers the information provided in this report.

P A Jolley
Corporate Director Operational and Partnership Services
24 JUNE 2016

Contact Officer: Sarah Kingsbury
Head of Human Resources and Organisational Development

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E-mail: sarah.kingsbury@bridgend.gov.uk

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Brewery Lane
CF31 4AP

Background documents

None.

**All-Wales Local Authority Sickness
Absence Benchmarking Research
Project
Report on Findings**

1.0 Introduction

- 1.1 In January 2015 Bridgend County Borough Council (BCBC) sought financial support from the Welsh Local Government Association (WLGA) for an all Wales local government research project to identify the key aspects of policy, process and practice that leads to the successful management of sickness absence.
- 1.2 This report outlines the key findings of that research and is supported by a comprehensive compendium of current policy, practice and performance from local authorities in Wales. It focuses on the processes and practices of the six top performing Councils in Wales and experiences from these councils and elsewhere in the UK. The compendium is intended for internal use only and permission has not been given to its publication at this point.

2.0 Background

- 2.1 Managing levels of sickness absence is important for every organisation because a healthy workforce is a productive workforce. Data shows that sickness absence rates are higher in the public sector than the private sector and there appear to be a number of factors which may be driving this, including differences in human resources policies, procedures, practices and cultures.
- 2.2 The majority of local government employees in Wales are able to attend work regularly, but like all organisations councils have some sickness absence within their workforce. Over a number of years councils across Wales have been striving to reduce their rates of sickness absence and they have had some, albeit limited, success. In 2008-09 the average rate across Welsh local government was 11.5 days per Full Time Equivalent (FTE) employee and this fell to 9.9 in 2014-15. But in 2014-15 local government in Wales still lagged behind the private sector and the UK public sector rate which have 5.8 and 8.7 days per FTE respectively.
- 2.3 High rates of sickness absence remain a cause for concern for councils for a number of reasons. High levels of sickness lead to reduced productivity and efficiency and are impacting on the quality, quantity and timing of the services councils provide. In some cases sickness absence cannot be absorbed by the rest of the workforce and temporary cover is required bringing with it a cash cost. High rates of sickness absence may also be a sign of low morale and/or an unhealthy organisational culture.
- 2.4 Over the last few years local government has seen a lot of change with a greater emphasis on improving performance with fewer resources whilst continuing to provide a good service to the public. As such it is more important than ever that we strive to maximise the health, wellbeing and productivity of our workforce.
- 2.5 Effective absence management is about creating an organisational culture within which there is an appropriate balance of support to employees who are

genuinely unwell with the consistent and firm action needed for those who are less conscientious to ensure that services are effectively maintained.

3.0 Research Methodology and Scope

3.1 All twenty two councils across Wales were invited to participate in this research project which was conducted by Neath Port Talbot County Borough Council (NPT) and comprised data gathering of policies and the completion of surveys which sought information on:

- Comparison of Policy and Practice
- Composition of Workforce to enable better comparison
- The costs of absence
- Wellbeing Initiatives
- Occupational Health Resources and Practice
- Training Initiatives
- Other initiatives to support the maximising of attendance at work

3.2 Twenty councils responded to the survey.

3.3 As well as considering practices across Wales, the WLGA Workforce Adviser undertook desktop research into practices across the rest of the UK.

3.4 The research project team, comprising of officers from Bridgend County Borough Council and NPT, has reviewed sickness absence management across all council functions and the data gathered therefore includes school based staff. The specific management of sickness absence in schools has not been considered as part of this research project.

4.0 Sickness absence across the UK

4.1 When considering the performance, policy and practice of Welsh local authorities it is worth considering the wider public and private sector and other local authority regions in England. While there are a range of research documents and reports on sickness absence most tend to concentrate on past performance around data and trends. There is some information on causation, but very little on the specific practice of managing absence that could be labelled as best practice. As such the following section highlights some recent reports that can help councils to identify areas for further consideration recognising that direct comparisons between sectors may be difficult. Links to the full research are contained in Appendix 5.

Performance

4.2 Across the UK there has been a downward trend in sickness absence rates for both men and women since 1993 with men consistently having a lower sickness absence rate than women. Absence has also fallen for all age groups since 1993 but has fallen least for those aged 65 and over. There are

lower sickness absence rates in the private sector, but the gap with the public sector has narrowed over the past twenty years.

- 4.3 The 16th annual CIPD absence management survey¹ undertaken in July 2015 shows that the average level of employee absence across all sectors has increased from 6.6 days per employee to 6.9 days in the last year. There is wide variation within and between sectors with the average public sector absence running at 8.7 days compared to 7.9 days last year.
- 4.4 The CIPD survey trend data also shows that levels of absence tend to be higher in larger organisations, regardless of sector and on average manual workers have 1.5 more days' absence per year than non-manual workers.
- 4.5 At a regional level in local government, evidence from the East of England Region survey for 2014-15 shows an average days lost per FTE was 8.43 days, compared to 9.9 in Welsh local government.
- 4.6 Published sickness absence data for the NHS in Wales² shows a sickness absence rate of 5.6% for 2014 and a range of 3.7% to 8.3%. To compare this to local government in Wales it is necessary to translate the percentage into average number of days per FTE employee. Assuming an annual working year of 240 days 5.6% would equate to 13.4 days per FTE, with a range of 8.9 to 19.9 days per FTE). The NHS in England has an average sickness rate of 4.25 per cent in 2014-15 (equivalent to 10.5 days per FTE).

Reasons for sickness absence

- 4.7 The 2015 CIPD survey (based on responses from nearly 600 organisations across the UK) shows that across all sectors minor illness continues to be the most common cause of short term absence, followed by musculoskeletal injuries, back pain and stress. The most common causes of long-term absence are acute medical conditions, stress, musculoskeletal injuries, mental ill-health and back pain. The survey suggests that stress, mental ill-health and musculoskeletal injuries are more likely to be in the top five causes of short and long-term absence in the public sector than the private sector.
- 4.8 These statistics are borne out by the East of England survey which identified minor illnesses as the major cause of short term absence, with the most common cause of long term sickness absence being "stress, depression, anxiety, mental health and fatigue".
- 4.9 Half of the public sector respondents to the CIPD survey report that stress-related absence in their organisation has increased over the past year with workload cited as the most common cause of stress, followed by non-work relationships/family, management style and relationships at work. Organisational change/restructuring continues to be a more common cause of

¹ <http://www.cipd.co.uk/research/absence-management-survey.aspx>

² <https://statswales.wales.gov.uk/Catalogue/Health-and-Social-Care/NHS-Staff/Sickness-Absence/percentageabsent-by-organisation-dates>

stress in public sector organisations than elsewhere and CIPD suggests that further public spending cuts mean this is likely to be an ongoing issue. Public sector organisations are more likely to take steps to identify and reduce stress in the workplace than private sector but despite this stress related absence is increasing. The most common methods used to reduce stress are staff surveys, flexible working and risk assessments. Half of respondents invested in training for line managers to identify and manage stress in their team, but fewer offer stress management training for the whole workforce or training aimed at building personal resilience.

- 4.10 40% of all respondents to the CIPD survey reported an increase in mental health problems (such as anxiety and depression) among employees in the past year, but especially larger organisations. There has been a small increase in those providing training to help managers to spot early warning signs, to signpost employees to support and to be able to talk to employees about mental health issues. Counselling, flexible working and improving work-life balance are commonly used methods to support employees with mental health problems.

Practice

- 4.11 The 2015 CIPD survey confirms that the vast majority of organisations have a written absence/attendance management policy and collect absence data which they use to identify problems so they can take action to address these. Like the previous year, the most common change in approach in 2015 has been a greater focus on developing line manager capability to manage absence. Introducing or revising monitoring procedures was also among the most common changes organisations have made.
- 4.12 Organisations report return-to-work interviews and trigger mechanisms to review attendance as being the most effective methods of managing short-term absence. For long term absence management return-to-work interviews are also the most common method, followed by occupational health involvement (ranked one of the most effective mechanisms for managing long term absence), the provision of sickness absence information to line managers, risk assessments to aid return to work, trigger mechanisms to review attendance and flexible working.
- 4.13 Public sector organisations are more likely than private sector organisations to use flexible working and special leave for family circumstances which may account for the fact they have less instances of illegitimate absence as a cause of absence than the private sector.
- 4.14 The CIPD survey found that organisations that have a target for reducing absence are significantly more proactive in managing absence and they are more likely to use methods to monitor and discourage absence, as well as promote health and facilitate rehabilitation. In addition organisations that managed absence through promoting health and well-being were more likely to achieve their targets than those that did not.

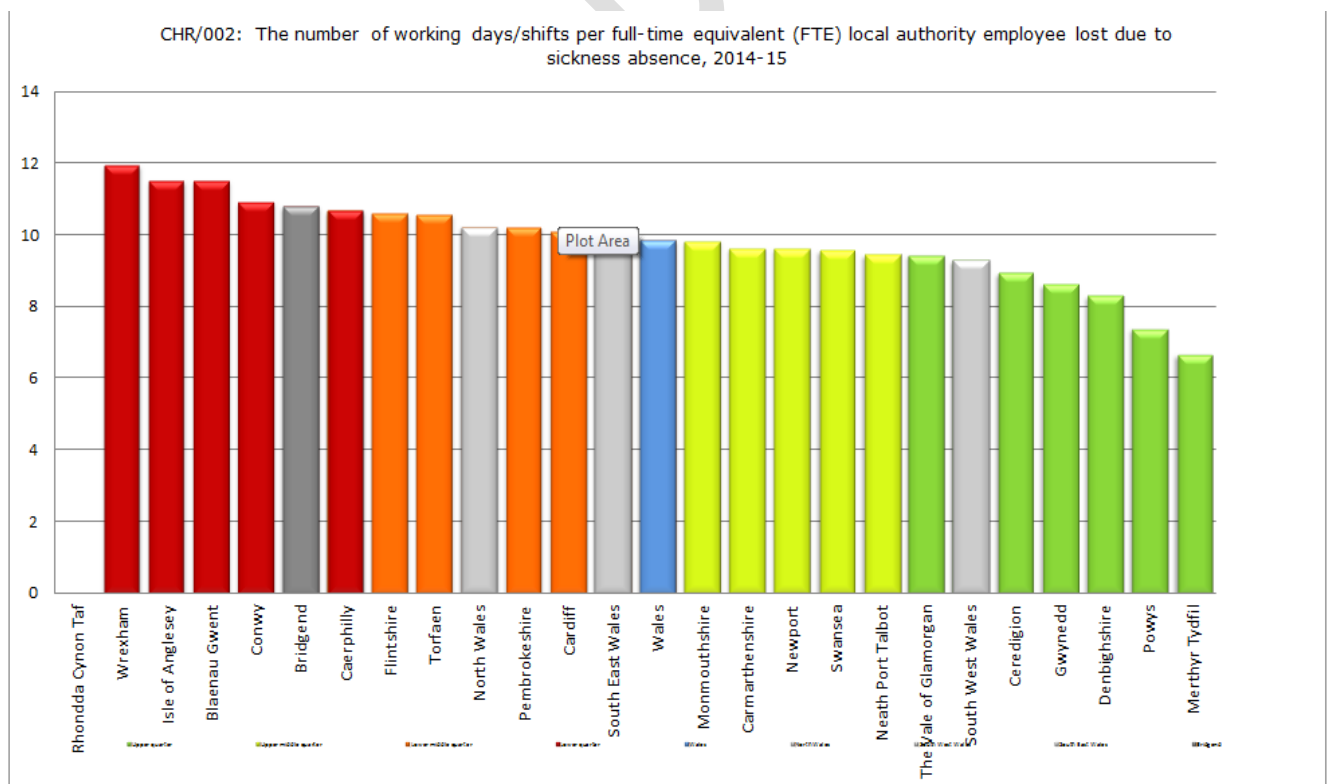
4.15 The East of England survey showed that councils there have made changes in how they tackle sickness absence, by for example:

- Improving sickness data given to managers
- Quarterly absence review panels with the heads of service
- Reduced/ Reassessed sickness trigger points
- Improved line manager training regarding sickness absence and stress management
- Early intervention referrals for stress and musculoskeletal problems
- Employee Assistance Programmes and health and Well-being Campaigns – Flu Jabs, Yoga, Counselling, Positive Mind initiatives.
- Introduction of Mental Health First Aiders

5.0 Sickness Absence across Local Government in Wales

5.1 Sickness absence rates across the twenty two local authorities in Wales have reduced since 2008, at an average high of 11.5 FTE days per employee in 2008-09, to 9.9 FTE days per employee in 2014-15. The average UK public sector sickness absence rate is 8.7 days. This shows that the public sector in Wales' sickness absence rate is 1.2 days higher than the UK average.

5.2 The table below shows the average number of working days that were lost per FTE across local government in Wales in 2014-15.



5.3 The table below shows the average number of working days that were lost per FTE across local government in Wales each year since 2012-13.

| | Sickness absence: Average working days lost per FTE | | | |
|-----------------------|---|------------------|------------|------------------------|
| | 2012-13 | 2013-14 | 2014-15 | % change Since 2012-13 |
| Merthyr Tydfil | 6.1 | 6.9 | 6.7 | -10.40% |
| Powys | 9.1 | 6.6 | 7.4 | 18.70% |
| Denbighshire | 9.0 | 8.5 | 8.3 | 7.80% |
| Gwynedd | No data supplied | | 8.6 | |
| Ceredigion | No data supplied | | 8.9 | |
| Neath Port Talbot | 9.6 | 12.7 | 9.4 | 2.10% |
| The Vale of Glamorgan | 7.8 | 8.8 | 9.4 | -20.50% |
| Carmarthenshire | 10.8 | 10.6 | 9.6 | 11.10% |
| Swansea | 11.4 | 9.0 | 9.6 | 15.80% |
| Newport | 9.3 | 9.1 | 9.6 | -3.20% |
| Monmouthshire | 11.9 | 11.4 | 9.8 | 17.60% |
| Cardiff | 11.7 | 10.2 | 10.1 | 13.70% |
| Pembrokeshire | 11.7 | 9.2 | 10.2 | 12.80% |
| Flintshire | 11.0 | 10.7 | 10.6 | 3.60% |
| Torfaen | 11.6 | 11.4 | 10.6 | 8.60% |
| Caerphilly | 10.6 | 12.1 | 10.7 | 0.90% |
| Bridgend | 10.5 | 10.2 | 10.8 | -2.80% |
| Conwy | 10.2 | 9.8 | 10.9 | -6.70% |
| Isle of Anglesey | 14.5 | 12.4 | 11.5 | 20.70% |
| Blaenau Gwent | 9.0 | | 11.5 | -27.80% |
| Wrexham | 9.9 | 11.6 | 11.9 | -20.20% |
| Rhondda Cynon Taf | 8.3 | No data supplied | | |
| Wales | 10.3 | 10.1 | 9.9 | 3.90% |

- 5.4 The data above shows that sickness absence rate for Welsh local government improved by 3.9% or 0.4 days per FTE since 2012-13. However, of the nineteen councils which have comparable data twelve show an improved position while seven show a reduction in performance in that time. The councils highlighted in blue are the six that had the lowest sickness rates in 2014-15. Those shown in green show the three councils with the most improved performance since 2012-13 and those in red the three councils which have seen the greatest increase in sickness levels in that period. Details of the practices and processes of the six top performing councils are detailed in Appendix 1.
- 5.5 Unfortunately data is not available to explain the key reasons for sickness across Welsh local government in 2014-15 as absence reasons were not collected for that year. In 2013-14 the key reasons for short term absence were “infections” (19%) followed by “stomach/liver/kidney” (17%). The key reasons for long term absence were: “stress and mental health” (30%)

followed by “musculoskeletal” (28%). These causes are consistent with the CIPD national survey results.

- 5.6 Fifteen respondents to the project survey identified Social Services, including Residential and Domiciliary Care, as one of the departments with the highest level of sickness absence. Other common hotspots included the former “manual” workforce in Environment, Waste and Highways departments, with five councils also reporting high absence figures in Education and Schools departments.
- 5.7 Whilst the responses to the survey suggest there is no clear correlation between the outsourcing of services and sustained improved performance in sickness absence levels, it is worthy of note that both Merthyr and Powys, the two best performing Councils in 2014-15, have outsourced their domiciliary care services. On average absence rates are lower (8.9 FTE) in councils that have indicated that a proportion of their social services department has been outsourced.

6.0 Terms and Conditions

- 6.1. The sickness scheme for the majority of local government employees is set out in the National Joint Council (NJC) for Local Government Service National Agreement or Green Book, Part 2. The scheme is intended to supplement statutory sick pay in order to maintain normal pay during periods of absence. Employees’ entitlement to sick pay will form part of their contract of employment and is connected to their length of service.
- 6.3 Under NJC terms and conditions, the entitlement to sick pay is calculated on a rolling 12 month period (as distinct from Teachers’ terms and conditions where the entitlement is calculated for each financial year).
- 6.4 A confidential survey amongst the 10 regional Employers’ Organisations in England and Wales showed that just a handful of over 370 authorities have made changes to Part 2 terms and conditions on sickness absence. These varied in both type and size of authority. Details of the changes that have been made were not available at the time of presenting this report and as such there is no information on the impact these changes may be having.
- 6.5 In Wales the three recognised Trade Unions (Unison, GMB and Unite) have all made it clear that they are not willing to negotiate over Part 2 terms and conditions. Against that background such changes are not considered in this report and none of the authorities surveyed have made any variations to this scheme.

7.0 Sickness absence policies and process

- 7.1 From the policy documents provided by the twenty Councils who participated in the project, it is apparent that there are a number of consistent approaches across Wales. Formal policies are, more often than not, supplemented by “Guidelines” for managers to assist in their management of absence. All

policies incorporate a three stage process of warnings and an appeal procedure.

- 7.2 Sixteen respondents have policies which deal separately with short and long term processes, including notably five out of the top six performing authorities. While practice does vary, Most commonly, HR and Occupational Health advice and support is available to assist in the management of longer term absences.
- 7.3 All but two of the 20 respondents use trigger points to manage short term or recurrent absence. Only one of these Councils utilise the Bradford factor approach to identify absence reviews, whilst other Councils all use variations on number of absences over 6-12month periods, number of days over period or discernible pattern of absence. The two Councils who do not have formal trigger points do use absence patterns/levels to inform absence review meetings, although these are not prescribed triggers. Out of the top six performing authorities five have formal trigger points and one uses informal trigger points, not specified in the policy.
- 7.4 All Councils surveyed use Occupational Health services and offer counselling services to their employees. The nature of these services vary between in house and external provision, self or manager referral. All except for one Council offer paid time off to attend counselling sessions, although the majority limit this to 6 sessions before reviewing further attendance
- 7.5 The top six performing authorities all have specific information within their policies and processes to ensure regular communication between the manager/employee. Five of the six top performing authorities have set timescales within their policy/processes which assists them in managing sickness absence.
- 7.6 Whilst there are areas of common practice across Wales, there is also evidence of enhanced practices which appear to positively impact upon absence levels;

Short Term Absence

- 7.7 One Council (Merthyr) stipulate that employees must contact their line manager on each of the first 5 days of absence and then maintain contact as appropriate, but at least weekly for the duration of the absence.
- 7.8 The 2 best performing councils require employees to personally complete a Self-certification form to cover any absences lasting up to 7days. Completion of the Self Certification process represents compliance with the absence process – non-compliance can result in non-payment of occupational sick pay.
- 7.9 One Council's policy gives managers the option to prevent employees from self-certifying for future absences as one outcome of an absence review meeting.

Long Term Absence

- 7.10 There are a number of examples of Councils operating automatic immediate Occupational Health referrals for stress and/or MSD absences. Both regional and national absence surveys commonly show that Stress and MSD

absences account for the highest number of days lost and automatic referrals may assist in the timely resolution of absences.

- 7.11 The two top performing Councils have implemented an absence review meeting for any absence that lasts for more than 3 months. The purpose of the meeting is to agree a plan for the resolution of the absence with the employee offered the opportunity to; identify a return to work date; apply for redeployment; or offer their resignation/agree mutual termination. The process allows for the Council to instigate disciplinary proceedings should the employee refuse to participate in the absence review process.
- 7.12 A number of Councils are reporting improvements in absence management by increasing HR input and operating a case management approach to long term sickness cases. Although the approach does not reduce the number of long term absences, evidence suggests a reduction in the average length of absence.

8.0 Managers' views on sickness absence management

8.1 Managers within each local authority were also surveyed as part of the project and were asked to identify and rank the top three criteria they considered to be most critical to managing sickness absence. The criteria they were provided with were:-

- Training
- Return to Work Interview
- Early intervention
- Occupational Health Unit advice
- Trade Union involvement
- Counselling service
- Elected member scrutiny
- Sickness data monitoring reports
- Senior management support
- HR advice and support
- Policy and Procedure
- Communication with employee
- Consistency of approach
- Fairness in decision making
- Line manager intervention
- Other – please state

8.2 A total of 56 managers responded to this survey and the numbers of employees they managed varied from 4 employees to 750 employees. These managers were responsible for a diverse range of areas within each local authority so were a representative sample. The processes that the majority of managers considered to be most critical to managing sickness absence (rated as their number 1 preference) were:-

- Communication with employee
- Early intervention
- Policy and Procedure
- Return to Work Interview
- Sickness data monitoring reports
- Training

8.3 In addition to the above, the managers were also asked if there was anything else that would help them to manage sickness absence which is not currently available. A total of 14 managers responded to this question. Three managers suggested the non-payment of sick pay for the first three days, with one manager suggesting to pay only statutory sick pay for the first week of absence. Full details of all the responses are provided in Appendix 2.

9.0 Role of Occupational Health

9.1 Councils required the services of an independent Occupational Health provider when dealing with sickness absence cases which are classified as ill-health retirements [at whatever level]. This enables the Council to be assured that access to the LGPS is in compliance with the regulations, constituting an appropriate use of public money.

9.2 In dealing with all other absence cases Councils may choose whether or not to employ an in-house service or buy-in a service. The research clearly confirms that there is no correlation between where the provision of Occupational Health is sourced or invested and its impact on sickness absence levels

9.3 Some form of service will always be necessary to ensure, eg that where health surveillance is required these employees are properly monitored and referred, the Council's duty of care is satisfied, eg in complex rehabilitation plans.

9.4 Counselling or Employee Assistance programmes are generally sourced externally as the market now offers a range of 24/7 services providing a guaranteed and consistent level of expertise and service at a low unit cost. There is no evidence that these accelerate an employee's return to work

9.5 A small number of Councils manage long term sickness cases by means of a "case conference" where in attendance are the employee (and TU representative if required), the line manager, HR and the Occupational Health practitioner.

9.6 Where there is a more formal approach to providing information to the Occupational Health practitioner, line managers register a high satisfaction rating of that service than where arrangements are more casual.

10.0 Health and Wellbeing initiatives

10.1 Only nine of the twenty councils surveyed indicated that they promote at least one health and wellbeing initiative. The majority of these initiatives are run in

partnership with the Local Health Board or Occupational Health providers. Two authorities have established Corporate Health Groups who oversee the events.

- 10.2 The nature of Health and Wellbeing initiatives is varied, with examples of Councils focusing on mental health and wellbeing, through workshops and awareness sessions, and physical health through health checks, physiotherapy and exercise referrals.
- 10.3 All Councils who have referred to Health and Wellbeing initiatives offer staff paid time off to attend events that have been promoted corporately.
- 10.4 Whilst no Council has specifically linked health and wellbeing initiatives to improved sickness absence figures, one Council in the upper quartile has identified wellbeing initiatives, including quarterly themes on Women's and Men's health, as one of the most effective processes in managing sickness absence.

11.0 Training

- 11.1 Eighteen councils responded to the survey question regarding the provision of sickness absence training. With one exception, all are providing training to managers, however, the scope and range of this varies considerably.
- 11.2 Where training is provided, this is undertaken in all cases, on a face to face basis with e-learning also provided by six councils and in one completion is mandatory. Powys the second best performing council provides training via a video link.
- 11.3 The nature of the face to face training differs in terms of identification of need and timing of provision. In addition to the standard absence training, provision includes:
 - staff briefings undertaken or training implemented when a new policy was launched
 - refresher training and informal coaching
 - induction training and quarterly training
 - generic people management skills training and specific absence management training where there is a perceived need
- 11.4 The training is mandatory in two councils, Powys and Swansea, while Wrexham intend to implement on this basis when they amend their policy. Other arrangements are generally demand led.
- 11.5 With the exception of one council (Bridgend), where the training compliments other face to face training on people management skills, all provision is delivered in house, although another council (Conwy) has used an external provider to meet demand. Only 10 councils specified how the in house training was facilitated, namely 7 by HR, 1 HR and Training and 2 by Corporate Training.

11.6 The data collected is limited and may not necessarily provide the range of relevant training available. There is no data available on the learning outcomes and therefore it is not known whether the training is policy based or has a focus on equipping managers with wider people management skills to manage difficult situations.

12.0 Sickness absence data

12.1 The collection and dissemination of sickness absence data is useful to help identify 'hotspots' in the organisation where certain issues are prevalent and take action to address these. It can also be used to inform well-being activities and to help understand the cost and productivity of the workforce. Sickness absence data can also inform workforce planning and can be combined with other information such as staff surveys to enable managers to explore trends and issues.

12.2 Welsh councils also provide sickness absence data to the Welsh Government and the Local Government Data Unit in the form of 'The number of working days/shifts per full time equivalent (FTE) local authority employee lost due to sickness absence (including teachers)'. This is a national indicator for 2015-16 and the majority of authorities surveyed have confirmed they report internally on FTEs (19) while one uses headcount. Data consistency is a common concern that emerges when discussing data comparisons, but seventeen respondents confirmed that their data included industrial injury and maternity related absence. Only two authorities do not include industrial injury and one authority does not include maternity related absence.

12.3 The value of sickness absence data is recognised across Welsh local government and all responding authorities provide sickness absence data to their managers. The type and frequency of this data varies as is the way it is collected and there is no standardised approach. Two of the top six report to Member Scrutiny Boards and demonstrate how they are going to implement improvements.

13.0 Sickness absence improvement measures

13.1 The survey identified a number of examples of councils trying different methods in an effort to reduce sickness absence rates, including:

- Introduction of a Cognitive Behaviour Therapy online 7 step counselling support therapy process. Included with this is an absence line for employees and managers managed by 'Carefirst'. Appointments for physiotherapy and muscular skeletal conditions are provided on the day
- Attendance at Work Procedure to be launched to schools
- Review of Policy
- Case management of long term sickness by HR Officers x 2 authorities and review of Policy if absence doesn't reduce
- Work closely with schools to reflect practice in place corporately
- Launch an absence management system to create a 12 month benchmark and centralise HR
- Change in sickness reporting for refuse service

- Purchase OH nurse provision to supplement in house OH provision to speed up assessment
- Provision of private sector referrals for diagnosis or treatment where NHS waiting list exists, subject to business cases
- Central team to monitor triggers and send letters to employees to achieve consistency
- Review policy and forms, targeting high levels of absence and being braver about decision making
- HR Officer recruited to contact every employee on the third day of absence. Task and finish group to be set up to look at other initiatives
- Profile each service area, use a strengths questionnaire to map this back to Job Evaluation
- Introduce an additional annual leave purchase scheme
- Health and wellbeing events. Workshops with Academy Wales which focus on wellbeing at work, motivation and engagement

14.0 Conclusion

- 16.1 There is evidence to show that local government in Wales is working hard to reduce its rates of sickness absence and it is following the broad trend of an overall reduction in sickness absence across the UK workforce as a whole. However, on average Welsh Councils' performance in 2014 was not as strong as than the private sector or the public sector across the UK as a whole. While comparisons with councils in East of England region paint a similar picture the average performance of the Welsh and English NHS appears weaker than Welsh local government.
- 16.2 Stress and mental health problems continue to be a common cause of long term sickness absence across all sectors, but the CIPD survey suggests that half of all public sector respondents had seen an increase in stress related absence in the last year. This chimes with situation in Welsh local government. Similarly in line with the CIPD results, Welsh respondents identified higher absence rates within the manual workforce. Fifteen of the nineteen respondents also identified social services as a sickness absence hot spot, particularly for residential and domiciliary care services. Interestingly the two best performing councils have outsourced the latter.
- 16.3 The sickness absence trend data across Wales when combined with the research findings shows that while organisations are continually introducing new ways to try and reduce sickness absence levels, not all of them have the same impact. The reasons for this are not clear, but may relate to the particular combination of mechanisms in place, the effectiveness of training for managers, a natural increase in genuine cases and/or the culture of the organisation. The research also suggests that organisations need to keep trying new approaches to avoid sickness rates plateauing.
- 16.4 Looking at practices, both the CIPD survey and the national research project found that return to work interviews and trigger mechanisms are deemed to be effective mechanisms in the management of sickness absence, with occupational health involvement being important in the management of long term cases. Set timescales for communication between manager and employee and formal trigger points for interventions were apparent in five of the

six top performing councils. In addition, the introduction of return to work planning meetings involving the employee, the manager, HR and occupational health appears to be having a positive impact on sickness absence rates. Increased HR input and case management also appear to be having a positive effect in some councils.

- 16.5 All councils have some level of counselling service and occupational health support, but there is no evidence to suggest that a particular delivery model (ie internal/external) gives better results. Occupational Health Services provide important information in managing sickness absence and while the type of service varies within the top six performing councils, there is a consistent message that regular discussions and timely advice and support assist greatly in managing long term sickness absence. Moreover more formal approaches register a higher satisfaction rating with managers than more casual arrangements.
- 16.6 Seventeen councils reported providing training for managers in managing sickness absence and the CIPD survey suggested that developing line manager capability was the most common change in approach for organisations in 2015. The training being provided by Welsh councils varies widely both in content and delivery and is an area worthy of further consideration recognising that line manager capability is key to successful sickness absence management. Training in respect of managing stress and mental health problems appears to be an area for particular focus.
- 16.7 The CIPD survey shows that organisations place different levels of importance on the well-being of their employees, but those that seek to enhance well-being appear to be more likely to achieve their sickness absence targets. Only nine Welsh Council respondents indicated that they promote health and well-being initiatives and the majority of these do so in partnership with the Local Health Board or Occupation Health providers. Interestingly no respondents claimed that well-being initiatives had driven down sickness absence levels and only one of the six top performing Councils has identified having initiatives in place. As such, this may be an area for further exploration.
- 16.7 This report seeks to help councils in their ongoing mission to reduce sickness absence. However, the research clearly shows that what works in one Council does not necessarily work in another, depending on culture, employee relations, resources available, etc. So while a number of areas for possible exploration have been identified, there is no silver bullet. Against that background, a detailed compendium of the research findings for all respondents is provided to enable HR Directors to follow up with key contacts on actions of interest and to encourage information sharing and learning across Wales. This report and appendices will not provide all the answers, but rather signpost areas for further investigation and consideration.

Sickness absence management in six Welsh councils with lowest absence rate in 2014-15

| | |
|---|---|
| Local Authority | Merthyr Tydfil |
| PI Value | 6.7 |
| FTE Employees | 2065.70 |
| Highest area/s of sickness absence | <ul style="list-style-type: none"> • Children's Services/Family Centres • Accommodation /Residential Care |
| Services Not in House | Home Care |
| The role of OHU | <ul style="list-style-type: none"> • Joint role of Lead OHA / HR Officer • External OHA • Lead OHA in regular contact with manager and external OHA. |

1. Short term and long term absence are dealt with separately within the Policy.
2. There are triggers within the Policy.
3. For short term absence employees are required to contact their manager every day to provide an update. After 7 days of absence, the employee/manager will agree a contact method and contact will be made once a week, followed by a welfare visit, if required.
4. For employees who have been absent for 4 months, a meeting is convened and their continued employment reviewed. In the majority of cases where a return to work is not realised, employees will agree 'mutual termination' or face dismissal by 6 months (usually at 4 months).
5. Managers are expected to examine the regular information provided to them on individual staff sickness records. Non-compliance by the supervisor / manager to record the sickness absence, keep in contact or refer to Occupational Health could result in a disciplinary investigation against the supervisor / manager.
6. Referrals made for stress and muscular/skeletal cases after 4 weeks.
7. The main processes identified for managing sickness absence successfully:- keeping in touch, RTW interviews, OH advice.

| | |
|---|--|
| Local Authority | Powys |
| PI Value | 7.4 |
| FTE Employees | 5220.70 |
| Highest area/s of sickness absence | Social Services |
| Services Not in House | Domiciliary Care |
| The role of OHU | <ul style="list-style-type: none"> • External OH service • Initial assessment by telephone before referral made • Contact between Mgr/OHU |

1. Short term and long term absence are dealt with separately within the Policy.
2. There are triggers within the Policy.
3. Manager / employee to retain regular contact during the period of the absence. For long term absence (over 28 days) employees informed that they are able to take annual leave. Fortnightly contact to take place by an agreed method of communication. Welfare visits to take place every 6 weeks. Throughout the first 5 months of any absence managers will make efforts to facilitate and support a return to work (where medical evidence demonstrates this is acceptable).
4. At 6 months or as soon after, when the necessary medical information is received either an action plan to return to work is agreed or an ill health capability hearing will be arranged to consider the absence. Consideration will be given to potential redeployment options or making reasonable adjustments required to facilitate a return, where appropriate.
5. Automatic referral after 4 weeks of sickness absence. Managers refer and employees can self-refer. Employees self-refer for counselling.
6. The main processes identified for managing sickness absence successfully:- triggers, clarity of the process, data, increased accountability spot checks on cases.
7. Going forward a review will be taking place of the Policy and the associated forms and paperwork.

| | |
|---|--|
| Local Authority | Denbighshire |
| PI Value | 8.3 |
| FTE Employees | 3831.00 |
| Highest area/s of sickness absence | <ul style="list-style-type: none"> • Social Services - Children and • Adults Highways and Environment |
| Services Not in House | None |
| The role of OHU | <ul style="list-style-type: none"> • In House OH Service • Have own counsellors via a contracted service provider. |

1. The Policy does not differentiate between long and short term absence. There are triggers within the Policy.
2. When an employee rings in to notify their sickness absence, if the manager is not available to the employee, the employee should expect a return call from the manager to seek further understanding of the absence. Employees are expected to make and maintain regular contact for the duration of the absence with their manager. Failure or refusal to maintain this contact and or the provision of any supporting documentation if requested is considered a conduct issue and may result in disciplinary processes being taken.
3. Once a trigger point is hit and a minimum of 1 Informal Attendance Capability Review Meeting has been carried out then a first formal Absence Capability Meeting is held to review the employee's level of sickness absence, determine if there is an underlying cause, examine what actions have been taken to date to reduce their level of sickness absence, ascertain the nature of current absence for those off sick in the process and if and when they are likely to return to work and If appropriate, issue the employee with a warning and alter them to the consequences if their level of sickness absence does not improve. Also at this stage decisions are made after considering evidence provided on whether to issue formal warning or confirm no further action. This is put in writing to the employee and includes set targets and monitoring period and the right of appeal. The same process applies for a second Formal Absence Capability Meeting. At the third Formal Absence Capability Meeting, carried out by the Head of Service, again all options are conducted to see if there is an improvement, redeployment options, extension of stage 2 for a determined period, or the end of absence process - no further action at this time or dismissal on grounds of capability absence related.
4. Managers have ready access to absence data on their teams through the Absence Dashboard and ITrent in order for them to review sickness absence within their area.
5. Managers refer employees for counselling. Managers refer employees to OH after 4 weeks or more sickness absence. For stress and muscular/skeletal issues, an immediate referral takes place.
6. The main processes identified for managing sickness absence successfully:- triggers, regular contact between manager/employee and advice from OH.

Going forward the Attendance at Work Policy is going to be rolled out to schools.

| | |
|---|--|
| Local Authority | Gwynedd |
| PI Value | 8.6 |
| FTE Employees | 5189.60 |
| Highest area/s of sickness absence | <ul style="list-style-type: none"> • Residential Care • Home Care • Leisure • Refuse |
| Services Not in House | None |
| The role of OHU | <ul style="list-style-type: none"> • In house OH Service • Medra used for Counselling • Quarterly review meetings with OH, HR and Mgrs • HR approve all referrals. |

1. Short term and long term absence are dealt with separately within the Policy.
2. There are triggers within the Policy.
3. Employee to report absence on day 1 and on day 4 to update manager.
4. For short term absence a Formal Sickness Absence Review Interview will take place and if attendance does not improve, the line manager will agree a date for a **Formal Review Meeting** to monitor and review progress. The Formal Review will not be held for at least six weeks but no later than six months following the Sickness Absence Review Interview. It is possible to conduct the Formal Review at an earlier stage if problems arise during the period agreed upon. A decision can be made at this meeting to review, disciplinary proceedings or the ill health capability procedure.
5. For long term absence the line manager will contact the employee as soon as possible or at the very latest within 2 weeks of the first day of absence in order to enquire as to his/her wellbeing. The line manager will offer appropriate support and arrange to maintain regular contact with the employee in order to keep up to date with his/her progress.
6. Line Managers receive an e-mail every month of sickness absences where triggers are highlighted, and managers receive advice from HR and OHU.
7. OHU Reports are detailed and practical, reports are received within 2 days of an employees' appointment with OHU. OHU advice provided over the telephone at all stages.
8. The main processes identified for managing sickness absence successfully:- all their processes including OH advice, wellbeing initiatives (quarterly themes), HR and Managers working together and the Ill Health Capability Panel.

| | |
|---|---|
| Local Authority | Ceredigion |
| PI Value | 8.9 |
| FTE Employees | 2794.10 |
| Highest area/s of sickness absence | <ul style="list-style-type: none"> • Highways – road workers • Residential Care |
| Services Not in House | Housing Stock |
| The role of OHU | <ul style="list-style-type: none"> • External – 2 different services used. • Managers refer and this is sent to HR. • HR contact OHU on manager's behalf with queries. |

1. Short term and long term absence are dealt with separately within the Policy.
2. There are triggers within the Policy.
3. For short term absence if one trigger point or a combination of trigger points is reached, an absence review meeting is convened to further investigate the absence and a remedial strategy. If no improvement a second absence review meeting is arranged and attended by a Head of Service. If still no improvement a Final Absence Review meeting is arranged and a decision is made by the Chief Officer.
4. For long term absence an OHU referral is made within 7 weeks and an initial absence review meeting within 10 weeks. An intermediate review meeting takes place at 16 weeks with HR and the Head of Service. If a recommendation to terminate is made at this meeting, the employee is given the opportunity to challenge the medical opinion. By 35 weeks a Final Absence Review meeting is convened where the Chief Officer considers the Head of Service decision to terminate. The Chief Officer will then decide the course of action.
5. Heads of Service attend Members panel for Corporate Performance scrutiny each quarter. As part of this scrutiny members ask how they are going to implement improvements.
6. The main processes identified for managing sickness absence successfully:- RTW interviews, triggers, OH advice and counselling.
7. Going forward a new absence management system is being launched to standardise reporting and create 12 month benchmark. In addition to this HR is to be centralised 3 HR Officers in each service area.

| | |
|---|--|
| Local Authority | Neath Port Talbot |
| PI Value | 9.4 |
| FTE Employees | 5595.00 |
| Highest area/s of sickness absence | <ul style="list-style-type: none"> • Schools • Community Care and Commissioning • Access Managed Services |
| Services Not in House | <ul style="list-style-type: none"> • Housing Stock • Residential Care |
| The role of OHU | <ul style="list-style-type: none"> • Internal OH Unit. External contract for OH Physician services. • Communication between manager and OHA • Advice on referrals. • Case Conferences. |

1. Short term and long term absence are dealt with separately within the Policy.
2. There are no formal triggers within the Policy, however with regard to short term absence if employees have had 3 instances of sickness absence in a year or a pattern of continued intermittent sickness then employees will be called in and a caution issued.
3. Some service areas carry out monthly reviews with employees who have been off sick even for one day.
4. No HR support provided for informal sickness absence meetings.
5. The trigger for managing long term absence is to carry out an informal Return to Work plan meeting with the employee within 28 days from the first day of absence. This a pilot across the whole authority (excluding schools) – see below.
6. Since January 2015 in relation to long term sickness absence, cases are being case managed by HR Officers in conjunction with Managers. Managers are still accountable for the management of the absence; however the case management creates a consistency of approach across the authority.
7. This pilot involves early intervention, informal return to work plan meeting within 28 days from first day of absence, effective communication between the employee and the manager. Stress risk assessment completed for work related stress cases. Medical advice from the Occupational Health Doctor when required. Timescales are shown below:-
8. Within 28 days an informal meeting is planned.
9. Within 6 weeks of this, a Stage 1 meeting is planned.
10. Within 8 weeks of this meeting, the next Stage 2 meeting is planned
11. In exceptional circumstances a Stage 2 Review meeting is held within 4 weeks of initial stage 2 meeting
12. Within 8 weeks of the formal Stage 2, a Formal stage 3 meeting takes place where a decision is made on employment. Process should end within 26 weeks.

13. The main processes identified for managing sickness absence successfully:-
Managers being pro-active, two way communication and consistency of approach
14. Council has piloted in conjunction with UNISON the 'Busy Lives, Health People' initiative which provides information on managing stress in all aspects of life.
15. Council will implement a staff lottery which, when up and running will provide finance for wellbeing initiatives across the council in addition to employees winning monetary prizes.

FINAL DRAFT

Views of managers on sickness absence management

Responses from Managers asked if there was anything else that would help them to manage sickness absence which is not currently available.

“A better understanding of how other local authorities approach the management of sickness absence”.

“Improved Occupational Health intervention, with closer scrutiny of both medical and management information and more objective feedback, with specific emphasis on possible actions, rather than more nebulous suggestions such as "management support beyond the norm””.

“It would be useful on occasion’s spot test for alcohol/drugs, it is difficult to gain evidence of alcohol/drugs misuse. When an employee’s are off with diarrhoea and vomiting, they have to reframe from work for 48 hours, it would be useful if they were able to send a sample for analysis to safeguard the vulnerable adults that they are caring for”.

“Informal discussions with employees to discuss sickness absence levels”.

“We have reduced sickness, however we will only really manage it if we accept that staff take advantage of our over generous policy. No private company would allow such nonsense”.

“Full pay should be given for only the first 3 months and then 3 months half pay. Stop paying for the first 3 days regardless. so even then if they take a week off they won’t get the first 3 days. Offer staff an option to buy first 3 days sick with a small amount paid in each week from wages. We know they abuse situation as when we look at summer holidays sickness increases. We offer staff to buy additional leave, but this just demonstrates we know that was not true sickness previously. Put forward to Government that child care and maternity costs should be paid for by both mother and fathers company. This would prevent inequality in work place towards women”.

“Greater number of staff to assist with meeting staff. The occupational health department is very busy and covers the entire local authority”.

“No pay for the first 3 days of sickness/absence”.

“Non payment for the first 3 days of sickness absence”.

“Further guidance on the range of flexible working arrangements that could be put in place to manage different situations in order to facilitate more efficient and speedier returns to work”.

“Pay only statutory sick pay for first week of absence”.

“Resources. To do probably it takes time”.

“Sickness policies and the approach the Authority takes is skewed towards the individual. There is very little thought or support for the teams that are left to continue providing services with a depleted workforce. This puts added pressure on already stretched resources. Given the environment that Local Government is now working in, is it time to revisit our sickness policies?”

“The ability to contribute to the overall policy would be beneficial . As a service manager I feel that I am not able to contribute to developing /reviewing the Policy . The policy has been set and service Managers are expected to work to that Policy . This Council uses the Bradford Factor, It is my view for example that the triggers for action are too generous and that individuals are not kept in the "live stages " for long enough”.

“Waiting time to see Occ health to be reduced”.

FINAL DRAFT

Appendix 5

National Context and Experience in Other Sectors and Regions

Source Reports

Source: Office National Statistics.

Full report: Sickness Absence in the Labour Market, February 2014

<http://www.ons.gov.uk/ons/rel/lmac/sickness-absence-in-the-labour-market/2014/rpt--sickness-absence-in-the-labour-market.html>

Source: Local Government Association

Local Government Workforce Survey 2013/14. Research report March 2015

<http://www.local.gov.uk/documents/10180/11535/Workforce+Survey+2013-14/0e22a2d1-8406-4343-a49b-83e01cd9813e>

Source: Welsh Government

<http://gov.wales/statistics-and-research/sickness-absence-nhs/?lang=en>

Source Health and Social Care Information Centre

English NHS Sickness Absence Rates January 2015 to March 2015

<http://www.hscic.gov.uk/catalogue/PUB17903>

Source: CIPD Absence Management 2015 Annual survey Report Public Sector Summary.

CIPD members only.

<http://www.cipd.co.uk>

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BRIDGEND COUNTY BOROUGH COUNCIL
CYNGOR BWRDEISTREF SIROL PEN-Y-BONT AR OGWR

**ABSENCE MANAGEMENT
POLICY AND PROCEDURE**

SCOPE

This policy will apply to all employees of Bridgend County Borough Council except:

- **Those under probation with the exception of the procedure for reporting sickness absence.**
- **Those employed under the JNC for Chief Officers Conditions of Service.**
- **Those employed by Governing Bodies in educational establishments under delegated powers.**

MARCH 2010

1. Introduction

This policy is designed to assist with the management of absence and to ensure that the Authority meets its responsibility with regards to health and safety. All absence issues will be treated with care, sensitivity, confidentiality and on an individual basis. It is also to enable employees and managers to implement supportive measures that may be of assistance.

The policy is not designed to cover issues which are performance or capability related or are covered by another policy, eg, harassment, discipline, capability, grievance, etc.

All correspondence in respect of the formal procedure must be issued from the Human Resources Service Unit.

2. Payment

Entitlement to sickness absence pay is dependent upon the employee's length of continuous local government service, as laid out in the National Agreement on Pay and Conditions of Service.

Payments will not be made for injuries caused by sporting events, non-essential surgery, participation in professional sport or for injuries incurred whilst working for another employer. Additionally, the Authority will claim back any sickness payments made in cases where there is a third party claim in relation to an accident.

3. Non-Compliance

Failure to follow any aspect of this policy will result in payment of salary being withheld in cases of non-attendance at medical appointments if sufficient notice is not provided i.e. 48 hours, then the employee will be charged for the cost of the appointment. In addition, the Council's disciplinary procedure may be followed.

4. Representation

Employees are entitled to be accompanied at all meetings to discuss attendance management issues by either a work colleague or a trade union representative, with the exception of return to work interviews.

5. Reporting Procedure

5.1 First Day of Absence

When an employee is absent from work due to sickness, he/she must notify their line manager before the start of the working day, other than where staff are working in a front-line service, where contact has to be made no later than 2 hours before the start of the shift, and advise them of :

- the reason for and the likely duration of the sickness absence
- if there has been an injury, how it was caused and whether it is work related

5.2 Fourth Consecutive Day of Absence

If the sickness continues for four consecutive days, the employee must contact their line manager on the fourth day to provide an update on their absence.

5.3 Absences Longer Than Seven Consecutive Days

If the absence continues beyond the seventh consecutive day the employee must provide a medical certificate from their GP/hospital and further medical certificates must be submitted promptly to their manager to cover the absence. Employees need to ensure that their medical certificates provide continuous cover for the full duration of their sickness absence to avoid payments being withdrawn.

5.4 Returning to work

When the employee has been signed as fit to return to work, they must notify their line manager of the return date. In front line services, notification is required at least one day (24 hours) before the return to work date.

6. Management of absence continuing for more than seven consecutive days

6.1 Occupational Health

Absences continuing beyond three weeks (21 calendar days) will generate a referral to the Occupational Health Advisor. This process may also take place when there are shorter periods of absence if there are specific concerns.

Employees are contractually required to attend appointments with Occupational Health as appropriate. Following a referral, all employees will be sent forms to complete to authorise consent to obtain GP/Specialist information in relation to their health.

6.2 Meetings With Staff Who Are On Long Term Sickness Absence

Managers will maintain regular contact, ordinarily every two weeks, with employees during periods of long term sickness absence (ie, absences in excess of three weeks). Employees will be required to attend meetings with their manager at their place of work to discuss the reasons for their continued absence and to identify any supportive measures that may be necessary at that time. An alternative venue can be agreed in circumstances where the reason for the absence justifies this change.

6.3 Return to Work Meeting

When an employee returns to work from any period of absence, the line manager is responsible for ensuring that a meeting with the employee takes place on the day of the return.

Prior to the employee's return to work following an extended period of absence, or in cases where there are concerns in relation to an employee's fitness to undertake the full range of duties, it is the responsibility of the manager to liaise with an Occupational Health Advisor to ascertain whether workplace adjustments are necessary.

6.4 Disability Discrimination Act 1995

Where an employee has a condition, that has been medically confirmed as meeting the criteria of the Disability Discrimination legislation, it is their responsibility to notify their manager, in writing.

Once the Authority has been made aware that an employee has a condition as defined by the Act, a referral will be made to the Authority's Occupational Health provider for advice and guidance on reasonable adjustments, which will be tailored to each individual so as to ensure that the support provided is appropriate. This could include redeployment of such employees into vacant posts.

6.5 Inability To Return To Work

In circumstances when the Occupational Health Physician has determined that the employee is unlikely to return to work on either a permanent basis or for a protracted period of time the Authority may terminate the employee's contract of employment. Prior to any such termination taking place, a meeting will be arranged with the employee to explain the process to be followed prior to the termination of employment.

In all cases where a dismissal is being considered the three step process has to be followed:

- **Step 1** - Employee to be advised in writing of the circumstances of the meeting.
- **Step 2** - Meeting takes place with the employee to determine the options.
- **Step 3** - Employee to be advised in writing of the outcome of the meeting.

6.6 Appeal to an Independent Occupational Health Physician

In cases where an employee has been terminated on the grounds of permanent ill health and they do not accept the medical advice they have the right to appeal to an independent Occupational Health Physician.

Should an employee wish to exercise this right they must write to the Human Resources Service Unit within seven days of written notification and arrangements will be made for an appointment with an independent Occupational Health Physician.

7. Management of absence levels

7.1 Step 1 – Informal Stage

An absence review meeting with the employee will be prompted by the pattern of an employee's sickness absence. The "triggers" will be :

- four separate periods of absence in a rolling twelve month period; or
- ten days absence in a rolling twelve month period; or
- a discernable pattern of sickness e.g. days following weekends or rest days;
- where there are concerns in relation to the overall level of absence

At this meeting, the employee will be advised that their attendance needs to be improved and that improvement sustained and that failure to do so will lead to sanctions being invoked, which could have an effect upon the employee's future employment contract with the Authority. The underlying cause of the absences will also be explored and a referral made to Occupational Health if appropriate.

7.2 Step 2 – Formal Stage

Where absence levels continue to hit the triggers, a meeting with the employee will be arranged to discuss the reasons for the absence and a determination will be made which could mean a sanction being invoked. These sanctions fall into three categories and will remain "live" for the following periods :

- First written warning – 6 months
- Second written warning - 12 months
- Final warning – 18 months
- Dismissal

If it is determined that the employee is incapable of fulfilling their contract of employment, the employee will be dismissed on the grounds of them being incapable of attending work on a regular basis.

8. Right of appeal

8.1 Appeal Against First or Final Written Warning

Should an employee wish to appeal against the decision to be issued with a first or final warning they must write to the Human Resources Unit within seven calendar days of written notification of the warning. The appellant must indicate the basis of the appeal.

Arrangements will be made for the line manager of the person who issued the warning to hear the appeal. The line manager will hear representations from the employee and their representative and from the person who issued the warning before making a decision.

The decision of the appeal hearing will be conveyed in writing to the employee within seven calendar days of the hearing.

8.2 Appeal Against Dismissal

Should an employee wish to appeal against the decision to be dismissed they must write to the Human Resources Unit within seven days of written notification of the dismissal stating the grounds for appeal.

Arrangements will be made for the Member Panel to hear the appeal. The process to be followed is attached as Appendix A.

The decision of the Committee will be conveyed in writing to the employee within seven calendar days of the hearing.

APPENDIX A

PROCEDURE TO BE ADOPTED AT MEMBER APPEAL

This procedure applies to the following policies: Disciplinary; Capability; Management of Absence and Dignity at Work.

There is a separate procedure which applies to the Grievance policy.

1. The hearing will be held by the Grievance and Disciplinary Appeals Committee, who will be supported by one of the Council's Solicitors in the role of Clerk, a Human Resources Advisor and a minute taker.
2. The parties and their representatives shall be called in simultaneously before the Committee. At the start of the hearing the Chairman will introduce those present and will explain the procedure.
3. The Chief Officer or his/her representative will present the management's case calling, if appropriate, any witnesses to assist in substantiating or clarifying the facts.
4. The appellant or his/her representative will be entitled to question the Chief Officer or his/her representative and any witnesses.
5. The appellant or his/her representative will present the appellant's case calling, if appropriate, any witnesses.
6. The Chief Officer or his/her representative will be entitled to question the appellant and any witnesses.
7. The Members, Clerk of the Committee and the Human Resources Advisor will be entitled at any time during the hearing, with the consent of the Chairman, to ask questions.
8. Where new evidence arises during an appeal it may be appropriate to adjourn in order to investigate or consider such points.
9. The Chief Officer or his/her representative will be given an opportunity to sum up but will not be able to introduce any new evidence at this stage.
10. The appellant or his/her representative will be given an opportunity to sum up. He/she will not be able to introduce any new evidence at this stage.
11. All parties other than the Members of the Committee, the Human Resources Advisor and the Legal Clerk will withdraw from the meeting.

The Human Resources Advisor and Legal Clerk will remain in the meeting whilst the Committee require advice.

12. Once the Committee has received advice from the Human Resources Advisor and Legal, Clerk the Human Resources Advisor and Legal Clerk will withdraw while the Committee considered the appeal.
13. The Committee may recall the Human Resources Advisor, Legal Clerk and minute-taker to clarify any points. Should the Committee require advice from the Human Resources Advisor or Legal Clerk both officers should be recalled together.
14. The Committee may recall the parties to clarify any points but, if so, must recall both parties and their representatives and allow them to comment if they so wish.
15. After the Committee has reached a decision on the appeal the parties and their representatives will be recalled and the decision announced to them together with the reasons for it. The decision will be confirmed in writing by the Human Resources Advisor as soon as possible after the hearing.

NOTE:

- **The term 'Chief Officer' means Chief Executive, Assistant Chief Executive, Corporate Director or Head of Service of the Council.**

The appellant may be represented by either his / her Trade Union representative or by a work colleague.

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HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT

MANAGERS GUIDELINES ON ABSENCE MANAGEMENT

January 2016

*The Management of Absence Policy and Procedure was approved by Cabinet in 2010.
Please discard any earlier versions you may have.*

1. Introduction

These Guidelines refer to the Absence Management Policy which is available on the Human Resources and Organisational Development (HR/OD) Website or by clicking [here](#).

The Policy's aims are:

- To assist with the Management of Absence
- To ensure that the Council meets its responsibilities with regard to the health, safety and wellbeing of its employees
- To provide supportive measures where appropriate [Care First is available to all employees on a 24/7 basis]

2. Payment

When an employee's period of sickness absence is due to a sports injury, motor vehicle accident etc., loss of earnings resulting from sickness absence will be recovered. Managers are expected to establish whether or not an employee is in receipt of sickness payments from a 3rd Party and, if this is the case, the Council will recover any such sickness payments. This arrangement will be reviewed dependant on the length of sickness absence should this extend beyond the period of 3rd party sickness cover.

In addition, payments will not be made for non-essential procedures (e.g. cosmetic surgery) or for injuries incurred whilst working for another employer (in line with the Secondary Employment Protocol).

3. Reporting Procedures

It is important that all line managers understand their responsibilities with regard to absence management, ensuring that their team are fully aware of the policy, that they are contractually obliged to comply with it and that non-compliance will be dealt with via the Disciplinary Policy.

a) On the first day of absence

The employee **must**, without exception, telephone her/his line manager before the commencement of the normal working day/shift or as soon as possible (staff who are working in a front-line service must make contact **no later** than 2 hours before the start of the shift). The line manager must be told the reason for sickness absence, how long the employee is likely to be away from work and, in the case of an injury, how this occurred and if it was work related. In situations where the line manager is not the person to whom the employee notifies their sickness absence, the line manager **must** return the employee's telephone call that day.

Only in an emergency situation will contact from a person other than the employee be accepted, eg, in cases of hospitalisation. Advice and guidance on when this is acceptable can be sought from the Employee Relations Advisor.

If an employee fails to follow the reporting procedure, the line manager must, in the first instance, attempt to contact the employee to ascertain the cause of their absence and to remind them of their responsibility to keep in contact. If it is not possible to contact the employee, the manager should contact the Employee Relations Advisor for advice on the matter and a non-compliance letter will be automatically issued.

All information discussed must be recorded on the Sickness Absence Management form, available via the HR/OD Web Pages or by clicking [here](#). This form should be updated at each of the stages set out below.

During the initial notification of absence the employee is able to request that consideration is given to using annual leave as an alternative to a period of sickness absence.

Line managers must ensure that there is regular contact with their absent employee. For short term absence this should be in person on a daily basis [unless there is a clear reason which needs to be documented as to why this would not be effective]. With the employee expected to ring in on the first, fourth and seventh day, it is the line managers responsibility to maintain contact with the employee on all subsequent days during the self certification period. The employee is contractually obliged to make themselves available for contact.

b) From the fourth day of absence (fourth calendar day, not working day)

If the employee's period of sickness absence continues for four consecutive days, she/he **must**, without fail, contact her/his line manager by telephone to provide an update on the absence. It is important that the line manager has early intervention in the absence process in order to support the employee and ensure that they are receiving the appropriate support. Should the employee fail to make contact, the line manager must attempt to contact the employee and should gain advice from an Employee Relations Advisor if they are unable to do so and a second compliance letter will be automatically issued.

c) If the absence continues beyond seven calendar days

In this situation the employee **must** provide a **fit note** from their G.P., Hospital Consultant etc and **must** forward this to her/his line manager within 2 working days. Failure to provide a fit note covering the appropriate period of absence will result in a third [and final] non-compliance letter being issued. It may also lead to a disciplinary investigation and any monies paid will be recovered and future payments withheld (dependant on the outcome of that investigation).

Once the absence is known to exceed 14 calendar days the line manager must notify HR to allow a letter to be issued, giving 7 days notice, informing the

employee of a scheduled Welfare Meeting. The letter will confirm that whatever the fit note indicates, ie whether the employee will be fit to return at the end of the period covered by the fit note or that the absence may continue, the meeting will proceed - either to be used as a return to work meeting or a welfare meeting.

4. Absences beyond 21 calendar days - welfare meeting

Once the sickness absence has reached 21 days a welfare meeting will be convened to develop a Return to Work Action Plan. This meeting will be chaired by HR, and in attendance will be: the line manager, the employee, their representative [if desired] and occupational health [if appropriate]. This meeting and action plan will take into account the medical evidence available at the time and may explore support mechanisms; rehabilitation plans, potential redeployment opportunities, etc.

In order to qualify for receipt of sick pay the employee, in accordance with their contract of employment, must participate in the meetings to assist with the management of their absence.

If Occupational Health advice needs to be sought consent from the employee will be requested. The relevant forms for completion will be emailed to the line manager prior to the appointment by HR/OD and these forms include a meeting pro forma and the initial consent form for signature by the employee.

In signing the consent form, the employee consents to IMASS discussing their absence with them and providing a report to management regarding their health. There are occasions where IMASS will need to obtain medical information from an employee's G.P. or consultant - in these circumstances, IMASS will discuss this in more detail with the employee prior to this being requested.

Should the employee withhold consent, a decision regarding the employee's absence will be made without the availability of additional medical evidence. Failure to participate in a telephone consultation or attend a meeting with Occupational Health without an acceptable reason or late notification of cancellation (less than 24 hours before the appointment) may result in the disciplinary procedures being invoked

5. Return to Work

Whenever an employee returns to work following sickness absence, even if the absence has only been for one day, the manager **must** carry out a return to work interview. The purpose of the interview is:

- to confirm the understanding of the reason/s for absence,
- to determine whether any adjustments to the workplace are required
- to establish whether counselling advice or support from the Occupational Health Service or the Health and Safety Team would be of benefit

- to clarify whether the employee is taking any prescribed medication for the condition and if this could affect their role
- to establish if the condition is likely to recur
- to advise the employee if the absence meets a trigger within the policy.

The Return to Work section of the Sickness Absence form should be completed at this interview. The completed Sickness Absence Management form should then be forwarded to HR/OD.

6. Absence Review Meeting

When an employee has met one of the triggers as detailed in the policy an absence review meeting will be convened.

The employee is to be contacted verbally and in writing. Confirmation that the employee may be accompanied at this meeting by a trade union representative or work colleague will be explicit.

The manager will inform the employee of her/his concerns and explain that a sustained improvement is required. The employee will also be advised that further periods of absence may result in formal action being taken which could affect future employment. Where appropriate, a referral may also be made by the manager via HR/OD to Occupational Health to explore any underlying cause of the absences and to identify any reasonable adjustments that need to be considered.

7. Formal stage of the Absence Management Policy and Procedure.

Line managers will always be accompanied by an employee relations advisor who will provide advice and guidance prior to the formal meeting taking place.

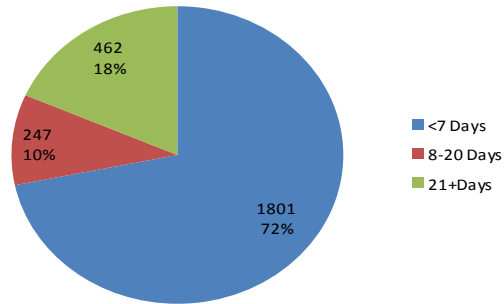
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DIRECTORATE SICKNESS ABSENCE

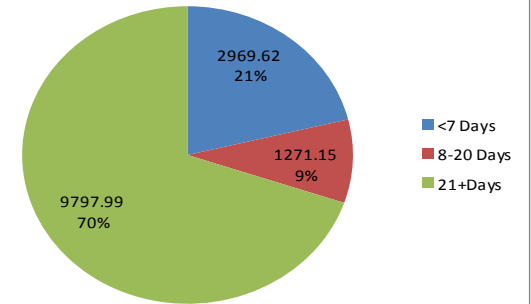
| Directorate | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|----------------------------|------------------------|-------------------------|-----------------|--------------|-------------------------|-----------------|--------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Schools | 2272.74 | 5929.99 | 1305 | 2.61 | 5701.65 | 1375 | 2.51 |
| Wellbeing | 885.93 | 4585.20 | 458 | 5.08 | 4727.40 | 425 | 5.34 |
| Education & Transformation | 467.57 | 1550.06 | 390 | 3.00 | 1566.78 | 378 | 3.35 |
| Communities | 404.75 | 1431.75 | 135 | 2.99 | 907.33 | 103 | 2.24 |
| Resources | 425.65 | 1579.60 | 224 | 3.48 | 934.88 | 190 | 2.20 |
| Legal & Regulatory | 89.23 | 242.77 | 47 | 1.73 | 198.72 | 39 | 2.23 |
| BCBC TOTAL | 4548.87 | 15319.37 | 2559 | 3.22 | 14036.76 | 2510 | 3.09 |

| Directorate | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Total Days Lost per FTE 2013/14 | Total Days Lost per FTE 2014/15 | Days per FTE - Target 2015/16 |
|----------------------------|--|--|---------------------------------|---------------------------------|-------------------------------|
| Schools | 7.64 | 7.78 | 7.25 | 7.64 | 6.90 |
| Wellbeing | 18.46 | 18.63 | 15.05 | 18.46 | 11.30 |
| Education & Transformation | 12.47 | 11.98 | 11.40 | 12.47 | 9.10 |
| Communities | 11.52 | 10.08 | 9.43 | 11.52 | 8.00 |
| Resources | 11.61 | 10.64 | 11.76 | 11.61 | 9.40 |
| Legal & Regulatory | 6.92 | 9.74 | 7.29 | 6.92 | 6.90 |
| BCBC TOTAL | 10.83 | 10.85 | 9.80 | 10.83 | 8.50 |

**No of Absences - Q4
Absence Length Summary**



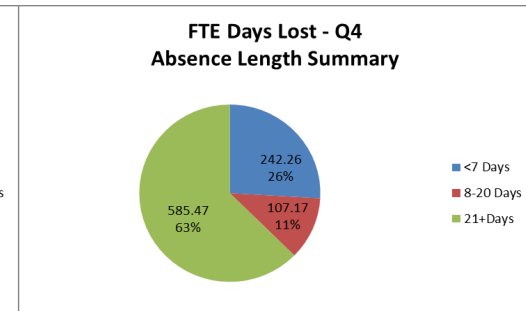
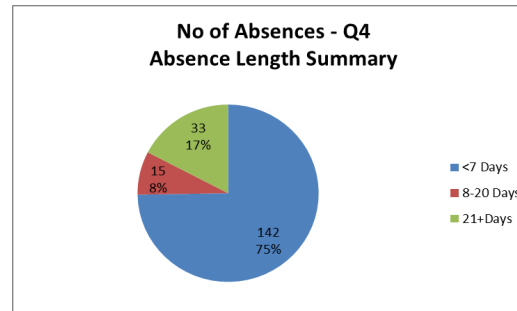
**FTE Days Lost - Q4
Absence Length Summary**



DIRECTORATE SICKNESS ABSENCE RESOURCES

| Unit | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|-----------------------------------|---------------------------|----------------------------|--------------------|-----------------|----------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| HR and Organisational Development | 119.92 | 562.49 | 60 | 4.29 | 328.28 | 52 | 2.74 |
| Finance & ICT | 178.94 | 530.27 | 64 | 2.93 | 314.75 | 63 | 1.76 |
| Property | 63.79 | 481.83 | 99 | 3.55 | 291.86 | 75 | 4.58 |
| Office of the Chief Executive | 6.00 | 5.00 | 1 | 0.83 | 0.00 | 0 | 0.00 |
| RESOURCES TOTALS | 425.65 | 1579.59 | 224.00 | 2.93 | 934.89 | 190 | 2.20 |

| Unit | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Days Lost per FTE 2013/14 | Days Lost per FTE 2014/15 | Days per FTE - Target 2015/6 |
|-----------------------------------|--|--|---------------------------------|---------------------------------|---------------------------------------|
| HR and Organisational Development | 17.13 | 11.34 | 8.45 | 17.13 | 9.40 |
| Finance & ICT | 14.05 | 9.42 | 8.95 | 9.10 | |
| Property | 11.16 | 14.18 | 15.47 | 11.16 | |
| Office of the Chief Executive | 20.43 | 3.84 | 2.16 | 20.43 | |
| RESOURCES TOTALS | 11.61 | 10.64 | 11.76 | 11.61 | |

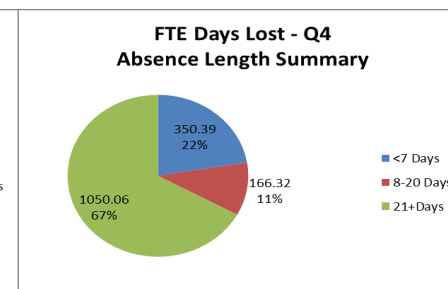
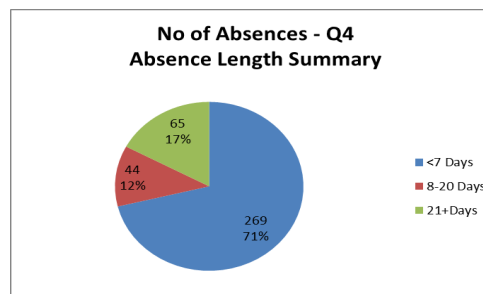


DIRECTORATE SICKNESS ABSENCE CHILDREN

| Unit | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|---|---------------------------|----------------------------|--------------------|-----------------|----------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Strategy Partnership & Commissioning | 321.25 | 1096.55 | 233 | 3.27 | 1219.43 | 222 | 3.80 |
| Business Strategy & Performance | 26.03 | 110.50 | 17 | 1.77 | 54.83 | 5 | 2.11 |
| Catering Services | 118.30 | 343.02 | 140 | 2.91 | 292.51 | 151 | 2.47 |
| Transformation Team | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Education & Transformation (excl. Schools) | 467.57 | 1550.07 | 390 | 3.00 | 1566.77 | 378 | 3.35 |

*Please note, S&FS were included in structure during Q4 2014/15

| Unit | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Days Lost per FTE - 2013/14 | Days Lost per FTE - 2014/15 | Days per FTE - Target 2015/16 |
|---|--|--|-----------------------------------|-----------------------------------|--|
| Strategy Partnership & Commissioning | 11.24 | 12.35 | 9.23 | 11.24 | 9.10 |
| Business Strategy & Support | 13.02 | 7.49 | 11.40 | 13.02 | |
| Catering Services | 8.58 | 10.03 | 9.49 | 8.58 | |
| Transformation Team | N/A | 82 | N/A | N/A | |
| Education & Transformation (excl. Schools) | 12.47 | 11.98 | 11.40 | 12.47 | |

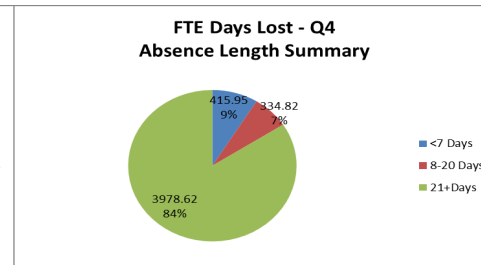
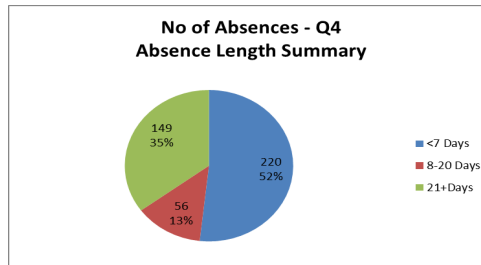


DIRECTORATE SICKNESS ABSENCE WELLBEING

| Unit | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|-------------------------------|---------------------------|----------------------------|--------------------|-----------------|----------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Healthy Living | 61.77 | 0.00 | 0 | 0.00 | 2.00 | 2 | 0.03 |
| Adult Social Care | 646.06 | 3666.10 | 359 | 5.29 | 3676.26 | 325 | 5.69 |
| Safeguarding & Assessment | 159.61 | 878.44 | 87 | 5.41 | 793.14 | 78 | 4.97 |
| Strategic Business Innovation | 61.77 | 40.66 | 12 | 1.64 | 256.00 | 20 | 4.14 |
| WELLBEING TOTAL | 885.93 | 4585.20 | 458 | 5.08 | 4727.40 | 425 | 5.34 |

*Please note, S&FS were included under Childrens for Q3 2014/15

| Unit | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Days per FTE - 2013/14 | Days per FTE - 2014/15 | Days per FTE - Target 2015/16 |
|-------------------------------|--|--|------------------------------|------------------------------|--|
| Healthy Living | 0.04 | 0.26 | 9.11 | 0.04 | 11.30 |
| Adult Social Care | 19.39 | 20.40 | 16.25 | 19.39 | |
| Safeguarding & Family Support | 5.41 | 16.71 | 15.61 | 19.08 | |
| Strategic Business Innovation | 8.86 | 10.18 | 8.06 | 8.86 | |
| WELLBEING TOTAL | 18.46 | 18.63 | 15.05 | 18.46 | |

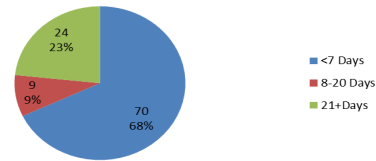


DIRECTORATE SICKNESS ABSENCE COMMUNITIES

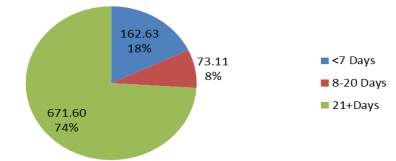
| Unit | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|---------------------------------|---------------------------|----------------------------|--------------------|-----------------|-----------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days | No. of Absences | Days per FTE |
| Electoral | 0.00 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| Culture | 4.51 | 121.19 | 24 | 1.74 | 17.00 | 2 | 3.77 |
| Management and Business Support | 13.32 | 27.00 | 6 | 1.33 | 31.76 | 8 | 2.38 |
| Regeneration & Development | 125.44 | 322.51 | 35 | 2.59 | 120.34 | 31 | 0.96 |
| Neighbourhood Services | 260.47 | 961.06 | 70 | 3.62 | 738.23 | 62 | 2.83 |
| COMMUNITIES TOTALS | 404.75 | 1431.75 | 135 | 2.99 | 907.33 | 103 | 2.24 |

| Unit | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Days per FTE - 2013/14 | Days per FTE - 2014/15 | Days per FTE - Target 2015/16 |
|---------------------------------|--|--|------------------------------|------------------------------|--|
| Electoral | 0.00 | 0.00 | 28.33 | 0.00 | 8.00 |
| Culture | 8.37 | 6.05 | N/A | 8.37 | |
| Management and Business Support | 3.28 | 5.91 | 2.38 | 3.28 | |
| Regeneration & Development | 9.43 | 5.93 | 7.44 | 9.43 | |
| Neighbourhood Services | 13.82 | 12.87 | 10.53 | 13.82 | |
| COMMUNITIES TOTALS | 11.52 | 10.08 | 9.43 | 11.52 | |

No of Absences - Q4
Absence Length Summary



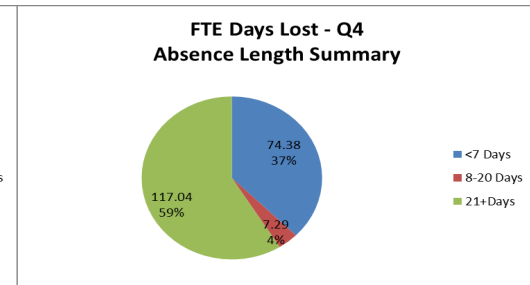
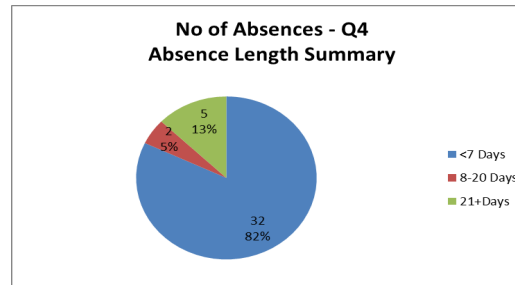
FTE Days Lost - Q4
Absence Length Summary



DIRECTORATE SICKNESS ABSENCE LEGAL & REGULATORY SERVICES

| Unit | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|--------------------------------|---------------------------|----------------------------|--------------------|-----------------|----------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Business Support | 7.00 | 5.00 | 2 | 0.71 | 60.00 | 4 | 8.57 |
| Legal Services | 23.00 | 12.57 | 6 | 0.45 | 8.00 | 3 | 0.35 |
| Partnerships | 10.60 | 9.28 | 5 | 1.15 | 36.00 | 6 | 3.40 |
| Procurement & County Supplies | 26.26 | 106.49 | 13 | 3.37 | 77.74 | 19 | 2.96 |
| Public Protection | 0.00 | 101.43 | 16 | 2.07 | N/A | N/A | N/A |
| Register Office | 4.35 | 0.00 | 0 | 0.00 | 2.43 | 1 | 0.56 |
| Scrutiny & Democratic Services | 12.61 | 8 | 5 | 0.63 | 13.55 | 5 | 1.07 |
| CMB Support | 2.86 | 0 | 0 | 0 | 1.00 | 1 | 0.35 |
| LEGAL & REG TOTALS | 89.23 | 242.77 | 47 | 1.73 | 198.72 | 39 | 2.23 |

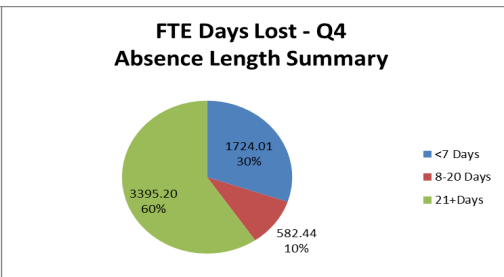
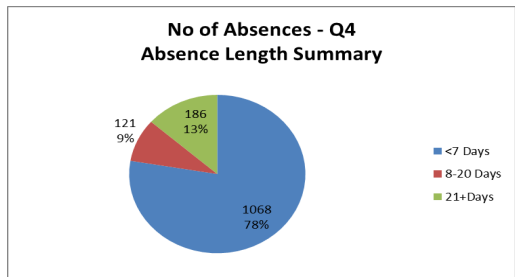
| Unit | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Days per FTE - 2014/15 | Days per FTE - 2014/15 | Days per FTE - Target 2015/16 |
|--------------------------------|--|--|------------------------------|------------------------------|--|
| Business Support | 3.83 | 10.80 | 9.09 | 3.83 | 6.90 |
| Legal Services | 3.74 | 5.87 | 2.47 | 3.74 | |
| Partnerships | 2.89 | 6.25 | N/A | 2.89 | |
| Procurement & County Supplies | 10.44 | 18.91 | 8.95 | 10.44 | |
| Public Protection | 7.39 | 1.29 | 4.19 | 7.39 | |
| Register Office | 0.43 | 1.79 | 0.20 | 0.43 | |
| Scrutiny & Democratic Services | 9.35 | 3.69 | 8.97 | 9.35 | |
| CMB Support | 0.00 | 0.35 | N/A | N/A | |
| LEGAL & REG TOTALS | 6.92 | 9.74 | 7.29 | 6.92 | |



DIRECTORATE SICKNESS ABSENCE SCHOOLS

| Unit | Average FTE 31.03.2016 | QTR4 2014/15 | | | QTR4 2015/16 | | |
|----------------------|---------------------------|----------------------------|--------------------|-----------------|-------------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Primary Schools | 1191.96 | 3066.49 | 711 | 2.61 | 2825.20 | 710 | 2.37 |
| Secondary Schools | 889.45 | 2084.45 | 467 | 2.30 | 2186.43 | 523 | 2.46 |
| Special Schools | 191.32 | 779.05 | 127 | 4.20 | 690.02 | 142 | 3.61 |
| SCHOOLS TOTAL | 2272.74 | 5929.99 | 1305 | 2.61 | 5701.65 | 1375 | 2.51 |

| Unit | To Date (Qtr4) Days Lost per FTE 2014/15 | To Date (Qtr4) Days Lost per FTE 2015/16 | Days per FTE - 2013/14 | Days per FTE - 2014/15 | Days per FTE - Target 2015/16 |
|----------------------|--|--|------------------------------|------------------------------|--|
| Nursery Schools | N/A | N/A | 9.10 | 3.04 | 6.90 |
| Primary Schools | 6.96 | 7.66 | 6.26 | 6.96 | |
| Secondary Schools | 7.40 | 7.43 | 7.54 | 7.40 | |
| Special Schools | 13.09 | 10.20 | 11.58 | 13.09 | |
| SCHOOLS TOTAL | 7.64 | 7.78 | 7.25 | 7.64 | |

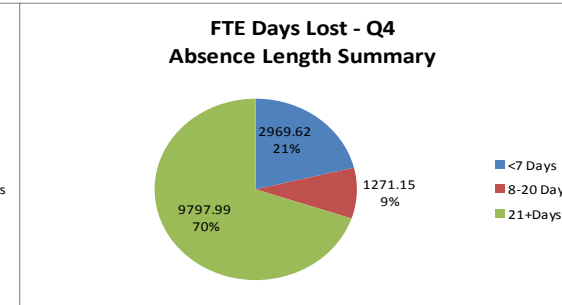
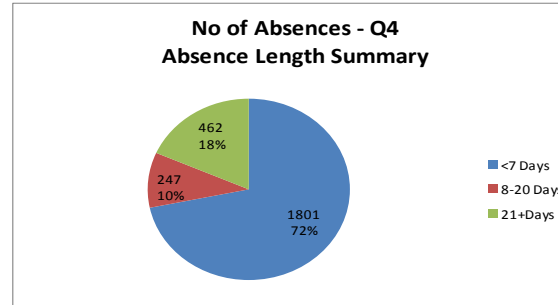


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DIRECTORATE LONG TERM SICKNESS ABSENCE

| Directorate | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|------------------------------|------------------------|-------------------------|-----------------|--------------|-------------------------|-----------------|--------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Schools | 2257.76 | 3530.19 | 150 | 1.56 | 3395.21 | 186 | 1.50 |
| Wellbeing | 886.53 | 3733.05 | 161 | 4.14 | 3978.62 | 149 | 4.49 |
| Education and Transformation | 467.74 | 857.31 | 55 | 1.66 | 1050.06 | 65 | 2.24 |
| Communities | 403.78 | 1116.34 | 32 | 2.33 | 671.60 | 24 | 1.66 |
| Resources | 408.04 | 1120.23 | 43 | 2.47 | 585.47 | 33 | 1.43 |
| Legal & Regulatory | 90.23 | 158.97 | 8 | 1.13 | 117.04 | 5 | 1.30 |
| BCBC TOTAL | 4514.08 | 10516.09 | 449 | 2.21 | 9798.00 | 462.00 | 2.17 |

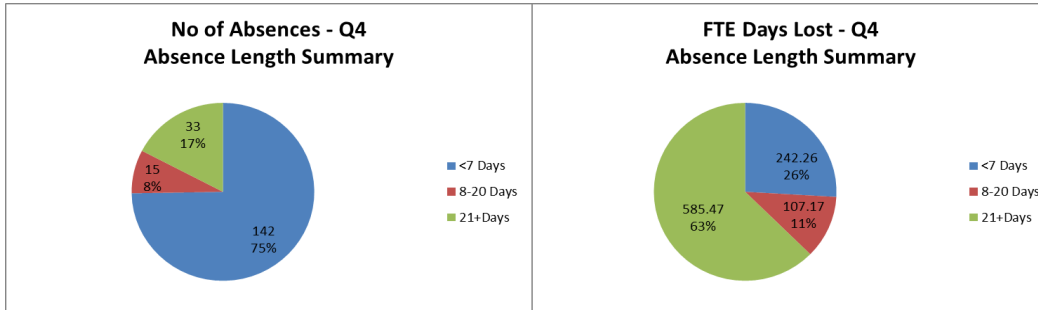
| Directorate | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|------------------------------|---|---|
| Schools | 60% | 60% |
| Wellbeing | 84% | 84% |
| Education and Transformation | 70% | 67% |
| Communities | 79% | 74% |
| Resources | 76% | 63% |
| Legal & Regulatory | 65% | 59% |
| BCBC TOTAL | 72% | 69% |



DIRECTORATE LONG TERM SICKNESS ABSENCE RESOURCES

| | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|-----------------------------------|---------------------------|----------------------------|--------------------|--------------|----------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| HR and Organisational Development | 113.26 | 408.29 | 13 | 3.11 | 210.49 | 10 | 1.86 |
| Finance & ICT | 167.26 | 342.69 | 11 | 1.89 | 152.27 | 8 | 0.91 |
| Property Services | 121.51 | 369.25 | 19 | 2.72 | 222.71 | 15 | 1.83 |
| Office of Chief Executive | 6.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| RESOURCES TOTALS | 408.03 | 1120.23 | 43 | 2.47 | 585.47 | 33.00 | 1.43 |

| Unit | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|-----------------------------------|--|--|
| HR and Organisational Development | 82% | 64% |
| Finance & ICT | 63% | 48% |
| Property Services | 77% | 76% |
| Office of Chief Executive | 96% | 0% |
| RESOURCES TOTALS | 76% | 63% |

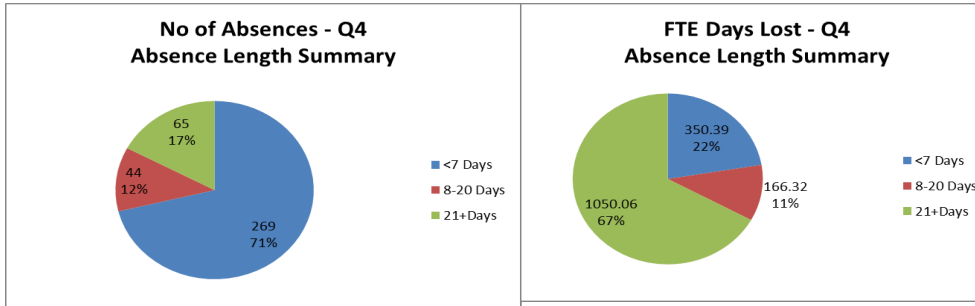


DIRECTORATE LONG TERM SICKNESS ABSENCE EDUCATION AND TRANSFORMATION

| Unit | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|---|------------------------|-------------------------|-----------------|--------------|-------------------------|-----------------|--------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Strategy Partnership & Commissioning | 337.46 | 566.09 | 28 | 1.69 | 800.95 | 40 | 2.37 |
| Business & Management Support | 12.74 | 54.66 | 2 | 0.87 | 41.00 | 1 | 3.22 |
| Catering Services | 115.55 | 236.55 | 25 | 2.00 | 208.11 | 24 | 1.80 |
| Transformation Team | 2.00 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| EDUCATION AND TRANSFORMATION TOTAL (excl. Schools) | 467.75 | 857.30 | 55 | 1.66 | 1050.06 | 65.00 | 2.24 |

*N.B. Safeguarding and Family Support included under Children's in Q3 2014/15

| Unit | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|---|---|---|
| Strategy Partnership & Commissioning | 80% | 66% |
| Business & Management Support | 64% | 75% |
| Catering Services | 68% | 71% |
| Transformation Team | 71% | 0% |
| EDUCATION AND TRANSFORMATION TOTAL (excl. Schools) | 70% | 67% |

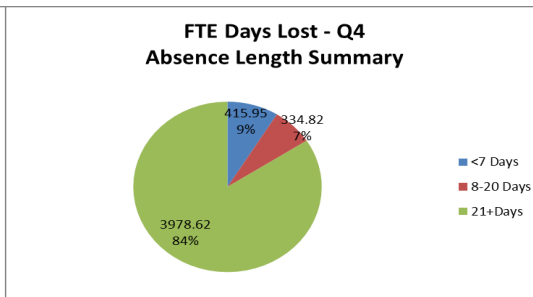
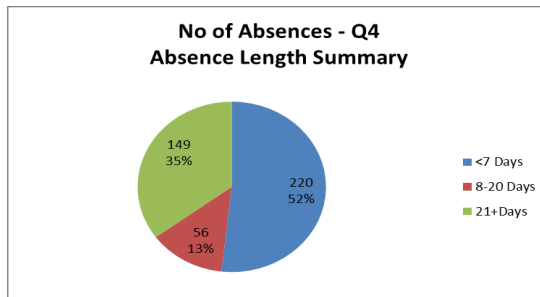


DIRECTORATE LONG TERM SICKNESS ABSENCE WELLBEING

| Unit | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|-----------------------------|------------------------|-------------------------|-----------------|--------------|-------------------------|-----------------|--------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Healthy Living | 17.51 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| Adult Social Care | 643.83 | 3054.16 | 140 | 4.41 | 3186.01 | 123 | 4.95 |
| Safeguarding and Assessment | 165.12 | 666.89 | 26 | 4.10 | 604.61 | 23 | 3.66 |
| Business Support | 60.07 | 12.00 | 1 | 0.48 | 188.00 | 3 | 3.13 |
| WELLBEING TOTAL | 886.53 | 3733.05 | 167.00 | 4.14 | 3978.62 | 149.00 | 4.49 |

*N.B. Safeguarding and Family Support included under Children's in Q3 2014/15

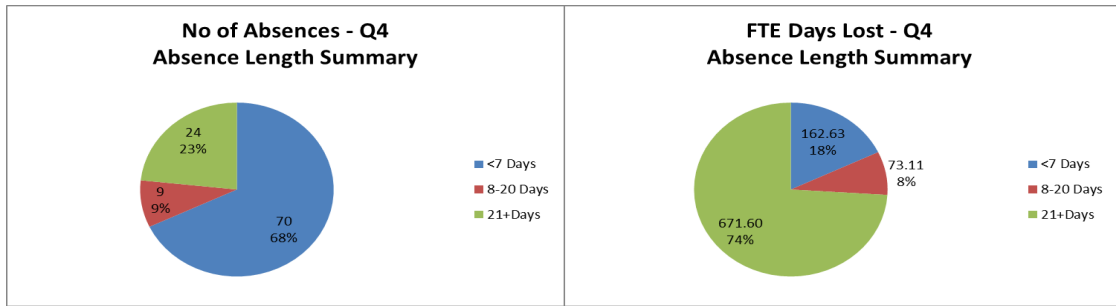
| Unit | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|-----------------------------|---|---|
| Healthy Living | 0% | 0% |
| Adult Social Care | 84% | 87% |
| Safeguarding and Assessment | 76% | 76% |
| Business Support | 72% | 73% |
| WELLBEING TOTAL | 84% | 84% |



DIRECTORATE LONG TERM SICKNESS ABSENCE COMMUNITIES

| Unit | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|---------------------------------|---------------------------|----------------------------|--------------------|--------------|----------------------------|--------------------|-----------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Electoral Services | 2.00 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| Culture | 4.51 | 66.11 | 3 | 0.95 | 15.00 | 1 | 3.33 |
| Management and Business Support | 10.78 | 15.00 | 1 | 0.74 | 9.00 | 1 | 0.83 |
| Regeneration & Development | 128.11 | 240.74 | 7 | 1.93 | 34.00 | 3 | 0.27 |
| Neighbourhood Services | 258.37 | 794.50 | 21 | 3.00 | 613.60 | 19 | 2.37 |
| COMMUNITIES TOTALS | 403.77 | 1,116.35 | 32 | 2.33 | 671.60 | 24.00 | 1.66 |

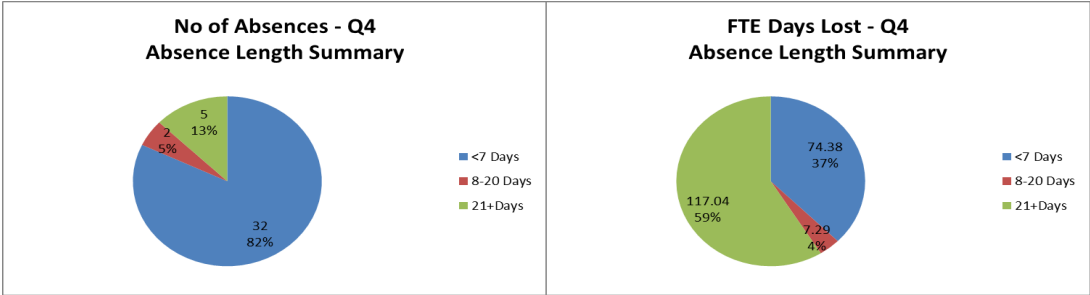
| Unit | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|---------------------------------|--|--|
| Electoral Services | 0% | 0% |
| Culture | 73% | 88% |
| Management and Business Support | 27% | 28% |
| Regeneration & Development | 71% | 28% |
| Neighbourhood Services | 83% | 83% |
| COMMUNITIES TOTALS | 79% | 74% |



DIRECTORATE LONG TERM SICKNESS ABSENCE LEGAL & REGULATORY SERVICES

| Unit | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|----------------------------------|------------------------|-------------------------|-----------------|--------------|-------------------------|-----------------|--------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Business Support | 4.00 | 0.00 | 0 | 0.00 | 51.00 | 1 | 12.75 |
| Legal Services | 29.54 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| Partnerships | 9.00 | 0.00 | 0 | 0.00 | 28.00 | 1 | 3.11 |
| Procurement and County Supplies | 28.73 | 82.97 | 3 | 2.63 | 38.04 | 3 | 1.32 |
| Public Protection | N/A | 76.00 | 5 | 1.55 | N/A | N/A | N/A |
| Register Office | 4.35 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| Scrutiny and Democratic Services | 12.61 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| CMB Support | 2.00 | 0.00 | 0 | 0.00 | 0.00 | 0 | 0.00 |
| LEGAL & REG TOTALS | 90.23 | 158.97 | 8.00 | 1.13 | 117.04 | 5.00 | 1.30 |

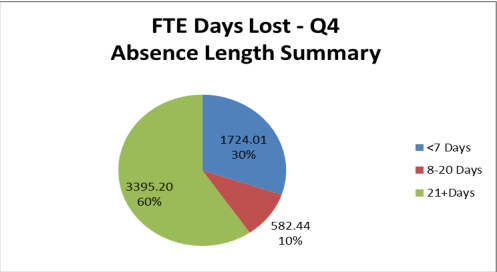
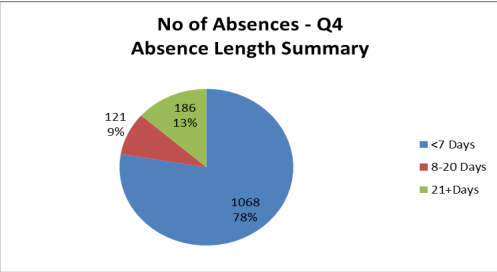
| Unit | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|----------------------------------|---|---|
| Business Support | 0% | 85% |
| Legal Services | 54% | 0% |
| Partnerships | 0% | 78% |
| Procurement and County Supplies | 73% | 49% |
| Public Protection | 65% | 0% |
| Register Office | 0% | 0% |
| Scrutiny and Democratic Services | 76% | 0% |
| CMB Support | 0% | 0% |
| LEGAL & REG TOTALS | 65% | 59% |



DIRECTORATE LONG TERM SICKNESS ABSENCE SCHOOLS

| Unit | Average FTE 31.12.2015 | LTS Qtr 4 14/15 | | | LTS Qtr 4 15/16 | | |
|----------------------|------------------------|-------------------------|-----------------|--------------|-------------------------|-----------------|--------------|
| | | Number of FTE days lost | No. of Absences | Days per FTE | Number of FTE days lost | No. of Absences | Days per FTE |
| Primary Schools | 1180.74 | 1838.01 | 84 | 1.56 | 1733.23 | 102 | 1.47 |
| Secondary Schools | 890.10 | 1226.74 | 48 | 1.35 | 1251.24 | 65 | 1.41 |
| Special Schools | 186.91 | 465.45 | 18 | 2.51 | 410.73 | 19 | 2.20 |
| SCHOOLS TOTAL | 2257.75 | 3530.20 | 150.00 | 1.56 | 3395.20 | 186.00 | 1.50 |

| Unit | Cumulative Percentage LTS Days Lost 2014/15 | Cumulative Percentage LTS Days Lost 2015/16 |
|----------------------|---|---|
| Primary Schools | 59% | 61% |
| Secondary Schools | 60% | 57% |
| Special Schools | 65% | 60% |
| SCHOOLS TOTAL | 60% | 60% |



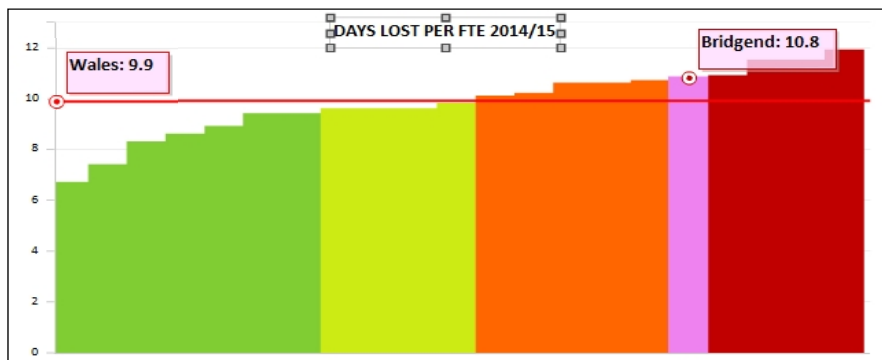
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| Number of FTE days lost by absence reason - QTR4 2015/16 | | | | | | | | | | | | | | |
|--|----------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|
| Absence Reason | Education & Transformation | | Communities | | Resources | | Legal & Regulatory | | Wellbeing | | Schools | | BCBC Total | |
| | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost |
| Cancer | 0.00 | 0.00% | 0.00 | 0.00% | 22.50 | 2.41% | 0.00 | 0.00% | 175.28 | 3.71% | 54.00 | 0.95% | 251.78 | 1.79% |
| Chest & Respiratory | 68.73 | 4.39% | 136.17 | 15.01% | 41.48 | 4.44% | 0.00 | 0.00% | 106.21 | 2.25% | 116.63 | 2.05% | 469.21 | 3.34% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 37.37 | 2.39% | 13.50 | 1.49% | 20.52 | 2.19% | 13.04 | 6.56% | 119.01 | 2.52% | 65.25 | 1.14% | 268.70 | 1.91% |
| Genitourinary / Gynaecological / Pregnancy | 3.80 | 0.24% | 0.00 | 0.00% | 5.81 | 0.62% | 0.00 | 0.00% | 55.39 | 1.17% | 14.99 | 0.26% | 80.00 | 0.57% |
| Heart / Blood Pressure / Circulation | 22.16 | 1.41% | 7.00 | 0.77% | 22.22 | 2.38% | 0.00 | 0.00% | 177.99 | 3.77% | 8.59 | 0.15% | 237.96 | 1.70% |
| Infections | 139.03 | 8.87% | 107.95 | 11.90% | 126.54 | 13.54% | 26.82 | 13.50% | 348.21 | 7.37% | 549.20 | 9.63% | 1297.76 | 9.25% |
| Injury | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 2.95 | 0.05% | 2.95 | 0.02% |
| MSD including Back & Neck | 147.00 | 9.38% | 82.00 | 9.04% | 190.03 | 20.33% | 29.99 | 15.09% | 636.79 | 13.47% | 668.58 | 11.73% | 1754.40 | 12.50% |
| Neurological | 55.57 | 3.55% | 2.00 | 0.22% | 44.74 | 4.79% | 0.95 | 0.48% | 73.32 | 1.55% | 228.83 | 4.01% | 405.40 | 2.89% |
| Other/Medical Certificate | 7.30 | 0.47% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 10.72 | 0.19% | 18.02 | 0.13% |
| Pregnancy related | 93.54 | 5.97% | 4.00 | 0.44% | 0.54 | 0.06% | 0.00 | 0.00% | 30.07 | 0.64% | 75.04 | 1.32% | 203.19 | 1.45% |
| Return to Work Form Not Received | 241.84 | 15.44% | 32.46 | 3.58% | 66.97 | 7.16% | 30.47 | 15.33% | 627.34 | 13.27% | 1926.04 | 33.78% | 2925.13 | 20.84% |
| Stomach / Liver / Kidney / Digestion | 165.68 | 10.57% | 43.80 | 4.83% | 121.78 | 13.03% | 96.45 | 48.54% | 352.57 | 7.46% | 713.66 | 12.52% | 1493.94 | 10.64% |
| Stress / Anxiety / Depression / Mental Health | 458.59 | 29.27% | 460.95 | 50.80% | 180.75 | 19.33% | 0.00 | 0.00% | 1219.30 | 25.79% | 770.51 | 13.51% | 3090.10 | 22.01% |
| Tests / Treatment / Operation | 126.18 | 8.05% | 17.50 | 1.93% | 90.99 | 9.73% | 1.00 | 0.50% | 805.91 | 17.05% | 496.67 | 8.71% | 1538.23 | 10.96% |
| Grand Total | 1566.79 | | 907.33 | | 934.87 | | 198.72 | | 4727.39 | | 5701.66 | | 14036.76 | |

| Number of FTE days lost by absence reason - Cumulative 2015/16 | | | | | | | | | | | | | | |
|--|----------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|
| Absence Reason | Education & Transformation | | Communities | | Resources | | Legal & Regulatory | | Wellbeing | | Schools | | BCBC Total | |
| | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost | Number of FTE days lost | % of total days lost |
| Cancer | 0.41 | 0.01% | 0.00 | 0.00% | 85.00 | 1.86% | 0.00 | 0.00% | 801.28 | 4.81% | 311.84 | 1.78% | 1198.53 | 2.41% |
| Chest & Respiratory | 279.97 | 5.10% | 326.22 | 7.31% | 134.65 | 2.95% | 26.00 | 2.73% | 427.72 | 2.57% | 481.21 | 8.44% | 1675.76 | 11.94% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 157.20 | 2.86% | 140.30 | 3.14% | 103.81 | 2.27% | 21.04 | 2.21% | 343.75 | 2.06% | 441.63 | 7.75% | 1207.74 | 8.60% |
| Genitourinary / Gynaecological / Pregnancy | 24.12 | 0.44% | 5.00 | 0.11% | 34.61 | 0.76% | 0.00 | 0.00% | 174.75 | 1.05% | 89.58 | 1.57% | 328.07 | 2.34% |
| Heart / Blood Pressure / Circulation | 192.40 | 3.50% | 42.25 | 0.95% | 133.89 | 2.93% | 2.03 | 0.21% | 411.95 | 2.47% | 221.04 | 3.88% | 1003.56 | 7.15% |
| Infections | 381.87 | 6.95% | 350.53 | 7.85% | 400.48 | 8.77% | 235.81 | 24.80% | 1006.51 | 6.04% | 1431.95 | 25.11% | 3807.16 | 27.12% |
| Injury | 1.27 | 0.02% | 40.25 | 0.90% | 76.00 | 1.66% | 4.00 | 0.42% | 72.69 | 0.44% | 36.67 | 0.64% | 230.88 | 1.64% |
| MSD including Back & Neck | 642.63 | 11.70% | 1117.11 | 25.02% | 625.89 | 13.71% | 161.43 | 16.98% | 2925.22 | 17.57% | 1653.07 | 28.99% | 7125.36 | 50.76% |
| Neurological | 138.62 | 2.52% | 28.53 | 0.64% | 223.98 | 4.91% | 8.89 | 0.94% | 228.38 | 1.37% | 777.41 | 13.63% | 1405.80 | 10.02% |
| Other/Medical Certificate | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% | 0.00 | 0.00% |
| Pregnancy related | 234.64 | 4.27% | 6.00 | 0.13% | 20.39 | 0.45% | 4.00 | 0.42% | 151.73 | 0.91% | 220.68 | 3.87% | 637.44 | 4.54% |
| Return to Work Form Not Received | 604.68 | 11.01% | 177.39 | 3.97% | 122.04 | 2.67% | 30.47 | 3.20% | 1592.98 | 9.57% | 5514.73 | 96.72% | 8042.30 | 57.29% |
| Stomach / Liver / Kidney / Digestion | 600.67 | 10.94% | 359.95 | 8.06% | 549.19 | 12.03% | 187.70 | 19.74% | 1266.78 | 7.61% | 2075.57 | 36.40% | 5039.86 | 35.90% |
| Stress / Anxiety / Depression / Mental Health | 1784.65 | 32.50% | 1516.77 | 33.97% | 1623.69 | 35.56% | 183.42 | 19.29% | 5244.15 | 31.49% | 2705.64 | 47.45% | 13058.32 | 93.03% |
| Tests / Treatment / Operation | 448.45 | 8.17% | 355.00 | 7.95% | 432.50 | 9.47% | 86.00 | 9.05% | 2005.07 | 12.04% | 1606.76 | 28.18% | 4933.76 | 35.15% |
| Grand Total | 5491.58 | | 4465.30 | | 4566.12 | | 950.79 | | 16652.96 | | 17567.78 | | 49694.54 | |

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| Directorate | Q1 2013/14 | Q2 2013/14 | Q3 2013/14 | Q4 2013/14 | TOTAL 13/14 | Q1 2014/15 | Q2 2014/15 | Q3 2014/15 | Q4 2014/15 | TOTAL 14/15 | Q1 2015/16 | Q2 2015/16 | Q3 2015/16 | Q4 2015/16 | TOTAL 15/16 |
|----------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|-------------|-------------|-------------|-------------|--------------|
| Schools | 1.65 | 0.95 | 2.17 | 2.48 | 7.25 | 1.75 | 1.05 | 2.23 | 2.61 | 7.64 | 2.00 | 1.24 | 2.03 | 2.51 | 7.78 |
| Wellbeing | 3.43 | 3.70 | 3.96 | 3.96 | 15.05 | 3.90 | 4.24 | 5.24 | 5.08 | 18.46 | 4.34 | 4.39 | 4.57 | 5.34 | 18.63 |
| Education & Transformation | 2.51 | 1.98 | 3.16 | 3.75 | 11.40 | 3.20 | 2.75 | 3.52 | 3.00 | 12.47 | 3.33 | 2.42 | 2.87 | 3.35 | 11.98 |
| Communities | 1.63 | 2.56 | 2.51 | 2.57 | 9.43 | 2.44 | 3.21 | 2.88 | 2.99 | 11.52 | 2.39 | 2.41 | 3.05 | 2.24 | 10.08 |
| Resources | 2.49 | 3.13 | 3.17 | 3.03 | 11.76 | 2.99 | 2.13 | 3.01 | 3.48 | 11.61 | 3.26 | 2.58 | 2.60 | 2.20 | 10.64 |
| Legal & Regulatory | 2.19 | 1.24 | 1.91 | 1.63 | 7.29 | 2.20 | 1.39 | 1.60 | 1.73 | 6.92 | 1.71 | 3.26 | 2.54 | 2.23 | 9.74 |
| BCBC TOTAL | 2.18 | 1.95 | 2.74 | 2.93 | 9.80 | 2.49 | 2.13 | 2.99 | 3.22 | 10.83 | 2.73 | 2.26 | 2.77 | 3.09 | 10.85 |



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Appendix F

| Absences 01/04/2015 - 31/12/2015 | | | | | |
|---|--------------------------------|-------------------------------------|-----------------------------|------------------------------|-------------------------|
| Directorates | Number of 'Closed' Absences | Number of RTW Forms Not Returned | % RTW Forms not Returned | Number of Warnings Issued | Number of Dismissals |
| Communities | 350 | 24 | 7% | 3 | 0 |
| Business Support Unit - Communities | 13 | 0 | 0% | 2 | 0 |
| Culture | 29 | 3 | 10% | 0 | 0 |
| Neighbourhood Services | 198 | 10 | 5% | 1 | 0 |
| Regeneration & Development | 110 | 11 | 10% | 0 | 0 |
| Education and Transformation | 880 | 90 | 10% | 13 | 0 |
| Business Strategy and Performance (BSP) | 349 | 15 | 4% | 6 | 0 |
| Inclusion Service (INC) | 313 | 46 | 15% | 4 | 0 |
| Integrated Working (IWO) | 179 | 23 | 13% | 3 | 0 |
| School Improvement (SCI) | 8 | 5 | 63% | 0 | 0 |
| Western Bay Youth Justice & Early Intervention Services | 31 | 1 | 3% | 0 | 0 |
| Legal & Regulatory Services | 88 | 6 | 7% | 1 | 0 |
| Business Support (BSU) | 8 | 0 | 0% | 0 | 0 |
| Corporate Improvement and Integrated Partnership Team (CIT) | 8 | 2 | 25% | 0 | 0 |
| Legal Section | 16 | 0 | 0% | 0 | 0 |
| Procurement (PRO) | 36 | 3 | 8% | 1 | 0 |
| Registry Office | 2 | 1 | 50% | 0 | 0 |
| Scrutiny & Democratic | 18 | 0 | 0% | 0 | 0 |
| Resources | 457 | 11 | 2% | 22 | 0 |
| Built Environment | 42 | 1 | 2% | 1 | 0 |
| Finance | 137 | 1 | 1% | 6 | 0 |
| Human Resources and Organisational Development | 124 | 0 | 0% | 4 | 0 |
| ICT | 43 | 2 | 5% | 1 | 0 |
| OCE | 3 | 0 | 0% | 0 | 0 |
| Property | 108 | 7 | 6% | 10 | 0 |
| Wellbeing | 1009 | 140 | 14% | 38 | 0 |
| Adult Social Care | 764 | 107 | 14% | 34 | 0 |
| Business Support (BSI) | 53 | 7 | 13% | 1 | 0 |

| | | | | | |
|-----------------------------------|-------------|------------|------------|-----------|----------|
| Safeguarding and Assessment (SFA) | 192 | 26 | 14% | 3 | 0 |
| Grand Total | 2784 | 271 | 10% | 77 | 0 |

| Online Pre Employment Initial Response Time | | | | | | | | | | | | | |
|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Month | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Total |
| Total Job Screen Received | 62 | 53 | 47 | 97 | 85 | 62 | 67 | 69 | 53 | 49 | 47 | 100 | 791 |
| <= 2 day Initial Clincial Action | 62 | 53 | 47 | 97 | 85 | 62 | 67 | 69 | 47 | 49 | 47 | 100 | 785 |
| > 2 day Initial Clincial Action | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 6 | 0 | 0 | 0 | 6 |
| 85% target | 52.70 | 45.05 | 39.95 | 82.45 | 72.25 | 52.70 | 56.95 | 58.65 | 45.05 | 41.65 | 39.95 | 85.00 | 672.35 |
| Result | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 89% | 100% | 100% | 100% | 99% |
| Apr 2014 - Mar 2015 | 116 | 48 | 67 | 84 | 49 | 39 | 46 | 62 | 57 | 47 | 27 | 82 | 724 |

| Online Pre Employment Time to Conclusion | | | | | | | | | | | | | |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Month | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Total |
| Total Job Screen Completed | 62 | 53 | 47 | 97 | 85 | 62 | 67 | 69 | 53 | 48 | 47 | 93 | 783 |
| concluded <= 10 days | 61 | 51 | 40 | 81 | 78 | 60 | 63 | 59 | 46 | 47 | 45 | 90 | 721 |
| concluded > 10 days | 1 | 2 | 7 | 16 | 7 | 2 | 4 | 10 | 7 | 1 | 2 | 3 | 62 |
| 85% target | 52.70 | 45.05 | 39.95 | 82.45 | 72.25 | 52.70 | 56.95 | 58.65 | 45.05 | 40.80 | 39.95 | 79.05 | 665.55 |
| Result | 98% | 96% | 85% | 84% | 92% | 97% | 94% | 86% | 87% | 98% | 96% | 97% | 92% |
| Apr 2014 - Mar 2015 | 116 | 48 | 67 | 84 | 49 | 39 | 46 | 62 | 57 | 47 | 27 | 82 | 724 |

* May 15 - 2 Jobscreen concluded > 10 days as the candidates DNA the initial appointment

| | | | | | | | | | | | | | |
|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------|
| Total Referrals Requiring Report Completed | 16 | 25 | 24 | 31 | 17 | 14 | 21 | 21 | 16 | 28 | 17 | 15 | 245 |
| <= 5 day Report Sent | 15 | 20 | 23 | 30 | 16 | 12 | 20 | 20 | 16 | 26 | 14 | 15 | 227 |
| > 5 day Report Sent | 1 | 5 | 1 | 1 | 1 | 2 | 1 | 1 | 0 | 2 | 3 | 0 | 18 |
| 85% target | 13.60 | 21.25 | 20.40 | 26.35 | 14.45 | 11.90 | 17.85 | 17.85 | 13.60 | 23.80 | 14.45 | 12.75 | 208.25 |
| Result | 94% | 80% | 96% | 97% | 94% | 86% | 95% | 95% | 100% | 93% | 82% | 100% | 93% |
| Apr 2014 - Mar 2015 | 36 | 28 | 30 | 22 | 19 | 32 | 24 | 20 | 24 | 32 | 29 | 26 | 322 |

* face to face appointments appointments booked into next available clinic and therefore KPIs not an accurate reflection

| Online Referral Initial Response Time | | | | | | | | | | | | | |
|---------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| Location | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Total |
| Bridgend County Borough Council (H) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Children | 8 | 13 | 16 | 19 | 8 | 9 | 11 | 10 | 6 | 12 | 9 | 6 | 127 |
| Communities | 1 | 3 | 4 | 5 | 0 | 0 | 1 | 2 | 5 | 2 | 3 | 0 | 26 |
| HALO Historical | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Legal & Regulatory Services | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Resources | 4 | 6 | 3 | 3 | 0 | 3 | 1 | 6 | 5 | 2 | 1 | 2 | 36 |
| Wellbeing | 6 | 8 | 2 | 7 | 10 | 3 | 9 | 4 | 0 | 17 | 4 | 11 | 81 |
| Month Total | 19 | 30 | 25 | 35 | 18 | 15 | 22 | 22 | 16 | 33 | 17 | 19 | 271 |
| Apr 2014 - Mar 2015 | 41 | 32 | 35 | 24 | 21 | 35 | 27 | 21 | 26 | 33 | 31 | 28 | 354 |

Referrals By Reason

| Reason | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Total |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| A significant period of absence e.g. a hospital stay or long term absence of 4 weeks or more. | 7 | 12 | 10 | 21 | 10 | 5 | 13 | 15 | 11 | 19 | 9 | 12 | 144 |
| Concerns that the employee's work is being affected by a medical condition. | 0 | 0 | 0 | 1 | 0 | 1 | 3 | 3 | 0 | 3 | 1 | 1 | 13 |
| Concerns that work may be exacerbating an employee's medical condition. | 3 | 2 | 5 | 2 | 2 | 1 | 2 | 0 | 1 | 0 | 1 | 2 | 21 |
| Employee appears to be suffering from negative levels of pressure/stress in either their personal or working life. | 7 | 13 | 7 | 8 | 4 | 5 | 4 | 2 | 3 | 9 | 1 | 1 | 64 |
| Health Surveillance | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| High levels of short term absence for seemingly minor reasons | 1 | 2 | 0 | 0 | 1 | 1 | 0 | 2 | 0 | 0 | 0 | 0 | 7 |
| Other (specify). | 1 | 1 | 3 | 1 | 1 | 2 | 0 | 0 | 1 | 1 | 5 | 3 | 19 |
| Paper Occupational Health Referral (Internal) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Welfare or Compassionate | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 3 |
| Month Total | 19 | 30 | 25 | 35 | 18 | 15 | 22 | 22 | 16 | 33 | 17 | 19 | 271 |
| Apr 2014 - Mar 2015 | 41 | 32 | 35 | 24 | 21 | 35 | 27 | 21 | 26 | 33 | 31 | 28 | 354 |

| Referrals By Gender | | | | | | | | | | | | | |
|---------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| Month | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Total |
| Female | 14 | 20 | 23 | 28 | 15 | 10 | 16 | 17 | 9 | 29 | 13 | 14 | 208 |
| Male | 5 | 10 | 2 | 7 | 3 | 5 | 6 | 5 | 7 | 4 | 4 | 5 | 63 |
| TBC | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Month Total | 19 | 30 | 25 | 35 | 18 | 15 | 22 | 22 | 16 | 33 | 17 | 19 | 271 |
| Apr 2014 - Mar 2015 | 41 | 32 | 35 | 24 | 21 | 35 | 27 | 21 | 26 | 33 | 31 | 28 | 354 |

| Referrals By Age | | | | | | | | | | | | | |
|---------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| Month | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | Total |
| under 18 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 18 - 30 | 2 | 3 | 1 | 3 | 0 | 1 | 3 | 1 | 2 | 1 | 0 | 2 | 19 |
| 31 - 40 | 6 | 5 | 3 | 6 | 1 | 1 | 3 | 4 | 1 | 4 | 3 | 2 | 39 |
| 41 - 50 | 4 | 9 | 7 | 17 | 5 | 2 | 6 | 10 | 6 | 7 | 5 | 3 | 81 |
| 51 - 60 | 6 | 7 | 10 | 5 | 9 | 8 | 9 | 7 | 5 | 15 | 7 | 10 | 98 |
| 60+ | 1 | 6 | 4 | 4 | 3 | 3 | 1 | 0 | 2 | 6 | 2 | 2 | 34 |
| Month Total | 19 | 30 | 25 | 35 | 18 | 15 | 22 | 22 | 16 | 33 | 17 | 19 | 271 |
| Apr 2014 - Mar 2015 | 41 | 32 | 35 | 24 | 21 | 35 | 27 | 21 | 26 | 33 | 31 | 28 | 354 |

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Bridgend County Borough Council

Report On The Employee Assistance Programme

***Quarterly Report**
1st Jan 2016 – 31st Mar 2016

For Bridgend County Borough Council

CONFIDENTIAL REPORT

Welsh Government Contract Manager

Care first Account Manager

T:

Pat Garland-Smith
Care first
1230 Landsdowne Court
Gloucester Business Park
Gloucester
GL3 4AB

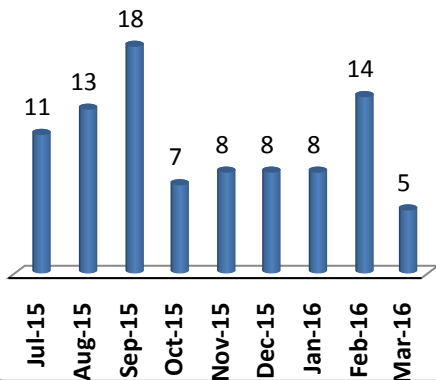
T: 01452 623200

Care first

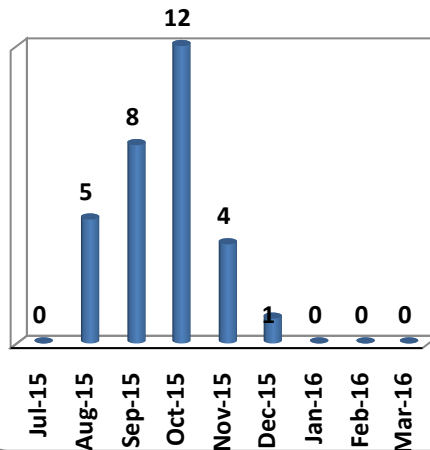
employee assistance solutions

Dashboard Summary

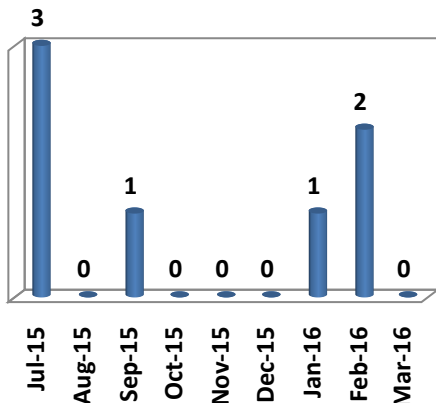
Total Calls - Telephone Counselling



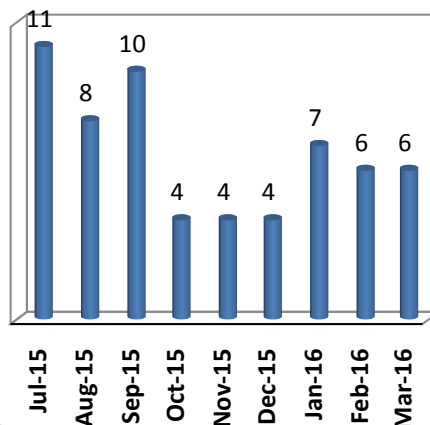
Face to Face Sessions



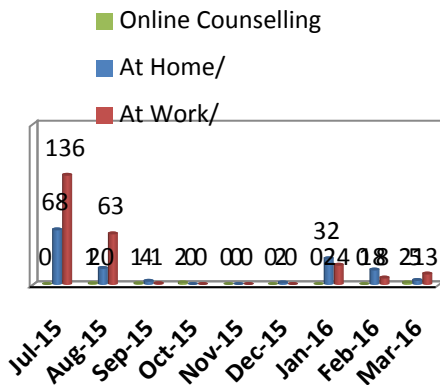
Total Calls - Telephone Information Service



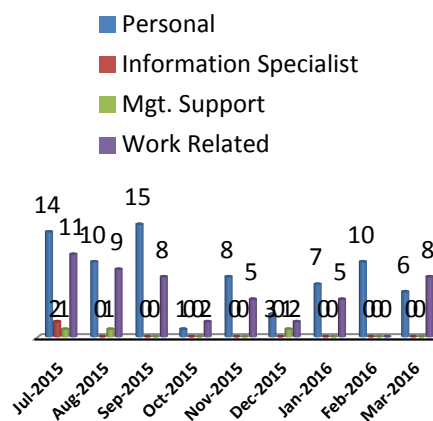
New Clients



Online Services



Issues by Category



Service Details

Description

| | |
|---------------------------|---------------------------|
| Employee Headcount | 6,600 |
| Service Commencement Date | 1 st July 2015 |
| Annual Contacts | 135 |
| Annual Usage | 2% |
| Annual New Cases | 60 |

Comments:

This report covers the period Jan, Feb and March during which time there have been a total of 32 contacts of which 27 have been to the 24/7 counselling service, 3 have been information and 2 have been on line contacts

There have been 19 new cases/client presented of which the highest number of new cases (11) have come from schools.

As well as the usage to the EAP there have again been excellent usage of the Care first Lifestyle site where there have been a total of 100 unique page view this quarter

Lifestyle at home 55 views from which the following trends have emerged

- There have been 20 views to the personal relationship information
- There have been 7 views to the financial information

Lifestyle at work 45 views with the majority 14, looking at the information relating to Mental Health

The Care first Zest has also been exceptionally well used and shows as at the end of March there were 219 registered users

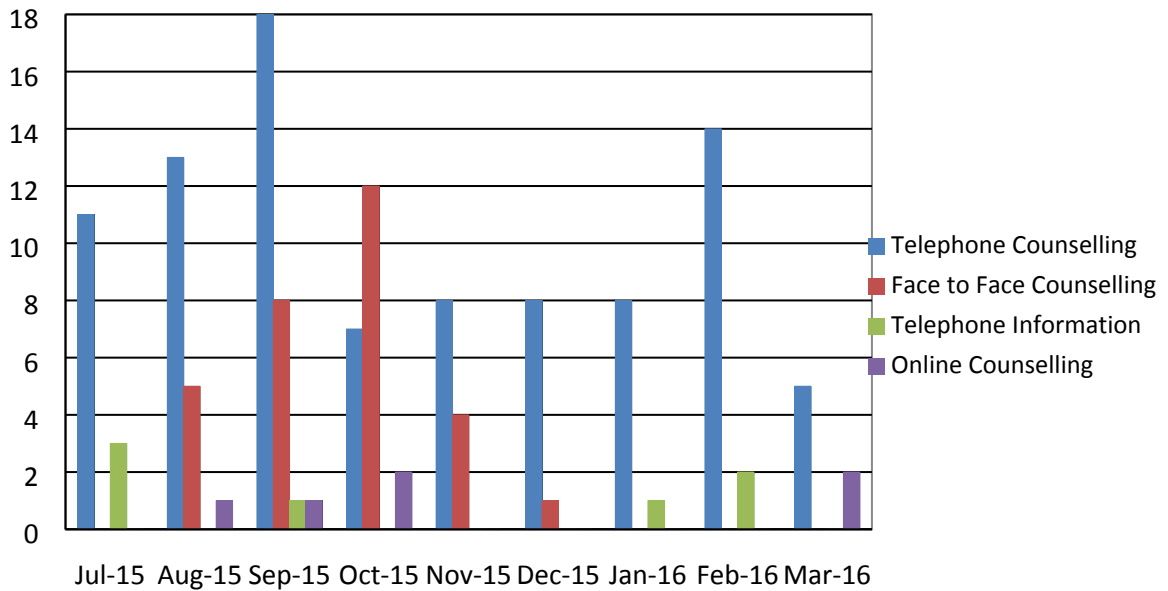
Personal 23 personal issues have been presented of which the majority were health related with 13 being about emotional health and 3 relating to physical health

Work 13 work related issues have been presented with the highest number of issues falling within the HSE management standards

All Contacts by Type

| Period | Total | All | Telephone / Face to Face | Information Specialist / Management Support | Online | Head Count |
|--------------|------------|--------------|--------------------------|---|--------------|------------|
| Apr-15 | - | -% | -% | -% | -% | 6,600 |
| May-15 | - | -% | -% | -% | -% | 6,600 |
| Jun-15 | - | -% | -% | -% | -% | 6,600 |
| Jul-15 | 14 | -.21% | -.17% | -.05% | -.00% | 6,600 |
| Aug-15 | 19 | -.29% | -.27% | -.00% | -.02% | 6,600 |
| Sep-15 | 28 | -.42% | -.39% | -.02% | -.02% | 6,600 |
| Oct-15 | 21 | -.32% | -.29% | -.00% | -.03% | 6,600 |
| Nov-15 | 12 | -.18% | -.18% | -.00% | -.00% | 6,600 |
| Dec-15 | 9 | -.14% | -.14% | -.00% | -.00% | 6,600 |
| Jan-16 | 9 | -.14% | -.12% | -.02% | -.00% | 6,600 |
| Feb-16 | 16 | -.24% | -.21% | -.03% | -.00% | 6,600 |
| Mar-16 | 7 | -.11% | -.08% | -.00% | -.03% | 6,600 |
| TOTAL | 135 | 1.56% | 1.44% | -.06% | -.06% | |

All Contacts by Type



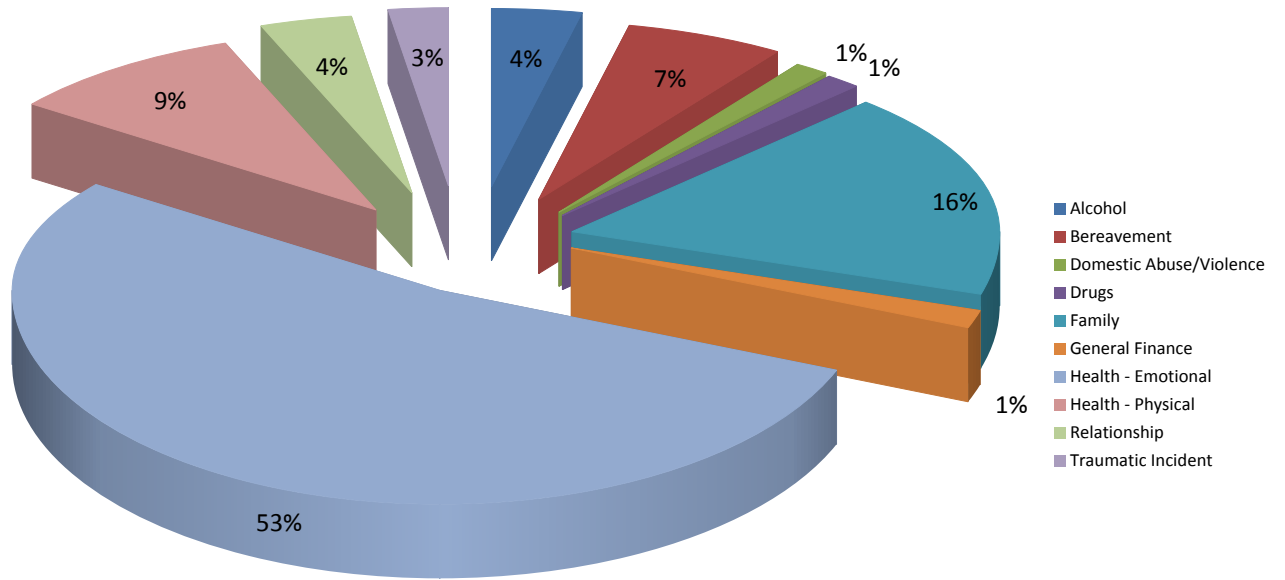
All Contacts by Type

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|--------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|-----|
| Telephone Counselling | - | - | - | 11 | 13 | 18 | 7 | 8 | 8 | 8 | 14 | 5 | 92 | 68% |
| Face to Face Counselling | - | - | - | - | 5 | 8 | 12 | 4 | 1 | - | - | - | 30 | 22% |
| Telephone Information | - | - | - | 3 | - | 1 | - | - | - | 1 | 2 | - | 7 | 5% |
| Online Counselling | - | - | - | - | 1 | 1 | 2 | - | - | - | - | 2 | 6 | 4% |
| Online CBT | | | | | | | | | | | | | | |
| TOTAL | - | - | - | 14 | 19 | 28 | 21 | 12 | 9 | 9 | 16 | 7 | 135 | |

Referrals to CBT

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|
| | - | - | - | - | - | 1 | - | - | - | - | - | 1 | 2 |

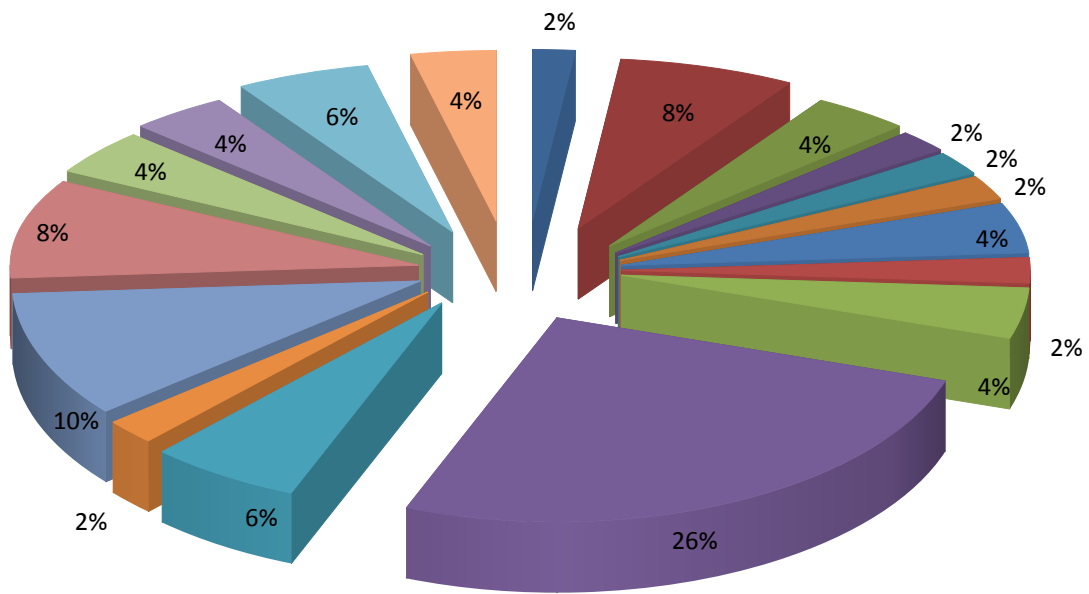
Personal Issues



Personal Issues

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|-------------------------|--------|--------|--------|-----------|-----------|-----------|----------|----------|----------|----------|-----------|----------|-----------|-----|
| Alcohol | - | - | - | 1 | 1 | - | - | - | - | - | 1 | - | 3 | 4% |
| Bereavement | - | - | - | 2 | - | 1 | - | - | - | 1 | 1 | - | 5 | 7% |
| Debt | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Domestic Abuse/Violence | - | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 1% |
| Drugs | - | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 1% |
| Family | - | - | - | 2 | 1 | 4 | - | 3 | - | - | 1 | 1 | 12 | 16% |
| Gambling | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| General Finance | - | - | - | - | - | - | - | - | - | - | 1 | - | 1 | 1% |
| Health - Emotional | - | - | - | 7 | 6 | 8 | 1 | 3 | 1 | 4 | 5 | 4 | 39 | 53% |
| Health - Physical | - | - | - | 1 | 2 | 1 | - | - | - | 1 | 1 | 1 | 7 | 9% |
| Housing | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Relationship | - | - | - | - | - | 1 | - | - | 1 | 1 | - | - | 3 | 4% |
| Retirement | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Traumatic Incident | - | - | - | 1 | - | - | - | - | 1 | - | - | - | 2 | 3% |
| TOTAL | - | - | - | 14 | 10 | 15 | 1 | 8 | 3 | 7 | 10 | 6 | 74 | |

Work Related Issues

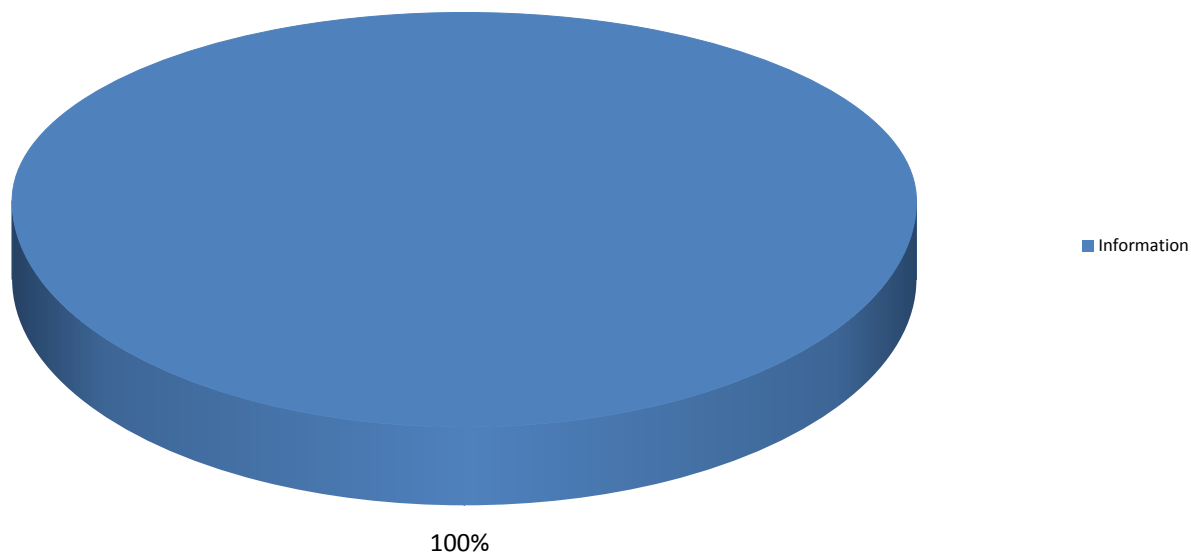


- Bullying & Harassment by Colleagues
- Performance - General
- Relationships at work with manager
- Work Related Health - Emotional
- Stress - Work Control
- Stress - Support
- Changes at work
- Performance - Target Related
- Role Ambiguity
- Work Related Health - Physical
- Stress - Demands
- Stress - Change
- Disciplinary
- Relationships at work with colleague
- Traumatic Incident
- Workplace Environmental Conditions
- Stress - Relationships
- Stress - Role

Work related Issues

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|--|--------|--------|--------|-----------|----------|----------|----------|----------|----------|----------|--------|----------|-----------|-----|
| Absence/Attendance | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Abuse/Violence by Colleagues | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Abuse/Violence by Members of Public | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Bullying & Harassment by Colleagues | - | - | - | - | 1 | - | - | - | - | - | - | - | 1 | 2% |
| Bullying & Harassment by Managers | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Bullying & Harassment by Members of Public | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Changes at work | - | - | - | - | 2 | 2 | - | - | - | - | - | - | 4 | 8% |
| Critical Incident (attendance offered) | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Disciplinary | - | - | - | - | - | - | - | 1 | - | 1 | - | - | 2 | 4% |
| Grievance | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Industrial Injury | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Information | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Mediation | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Media Attention | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Performance - General | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | 2% |
| Performance - Target Related | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | 2% |
| Racist Incident | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Redundancy | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Relationships at work with colleague | - | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 2% |
| Relationships at work with manager | - | - | - | - | 2 | - | - | - | - | - | - | - | 2 | 4% |
| Retirement | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Role Ambiguity | - | - | - | - | - | 1 | - | - | - | - | - | - | 1 | 2% |
| Traumatic Incident | - | - | - | 1 | - | - | - | - | - | - | - | 1 | 2 | 4% |
| Work Related Health - Emotional | - | - | - | 3 | 3 | 3 | - | 1 | 1 | - | - | 2 | 13 | 26% |
| Work Related Health - Physical | - | - | - | 2 | 1 | - | - | - | - | - | - | - | 3 | 6% |
| Work Underload | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Workplace Environmental Conditions | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 2% |
| <u>HSE Indicators:</u> | | | | | | | | | | | | | | |
| Stress - Work Control | - | - | - | 2 | - | - | - | 1 | - | 2 | - | - | 5 | 10% |
| Stress - Demands | - | - | - | 1 | - | - | 1 | 1 | 1 | - | - | - | 4 | 8% |
| Stress – Relationships | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 2 | 4% |
| Stress - Support | - | - | - | 1 | - | - | - | - | - | 1 | - | - | 2 | 4% |
| Stress – Change | - | - | - | - | - | 1 | - | - | - | 1 | - | 1 | 3 | 6% |
| Stress - Role | - | - | - | - | - | 1 | - | - | - | - | - | 1 | 2 | 4% |
| TOTAL | - | - | - | 11 | 9 | 8 | 2 | 5 | 2 | 5 | - | 8 | 50 | |

Management Support



Management Support

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|-------------------------------|--------|--------|--------|----------|----------|--------|--------|--------|----------|--------|--------|--------|----------|------|
| Absence/Attendance | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Abuse/Violence | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Bullying/Harassment | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Changes at Work | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Disciplinary/Grievance | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Industrial Injury | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Informal Referral | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Information | - | - | - | 1 | 1 | - | - | - | 1 | - | - | - | 3 | 100% |
| Mediation Enquiry | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Performance - General | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Relationships at Work | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Traumatic Incident | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Work Related Health | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Work/Home Conflicting Demands | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| TOTAL | - | - | - | 1 | 1 | - | - | - | 1 | - | - | - | 3 | |

Information Specialist



Information Specialist

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|---------------------------------|--------|--------|--------|----------|--------|--------|--------|--------|--------|--------|--------|--------|----------|-----|
| Benefits | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Childcare Information | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Children | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Consumer | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Debt | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Divorce/separation | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Education | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Eldercare Information | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Employment | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 50% |
| Finance | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Health/medical | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Housing | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Immigration | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Law | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Legal Information | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 50% |
| Pay & Benefits Review | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Retirement | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Substance abuse (incl. alcohol) | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Tax queries | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Other Information | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| TOTAL | - | - | - | 2 | - | - | - | - | - | - | - | - | 2 | |

Client Work Status –at first contact

| First Contact Work Status / Off Work Duration | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|-----|
| At Work | - | - | - | 6 | 2 | 4 | - | 3 | 2 | 1 | 4 | 4 | 26 | 43% |
| Plan to Return to work | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Not Applicable | - | - | - | - | 1 | 2 | 2 | - | 1 | - | 1 | 1 | 8 | 13% |
| Off Sick | - | - | - | 5 | 5 | 4 | 1 | 1 | 1 | 5 | 1 | 1 | 24 | 40% |
| Less than 1 week | - | - | - | - | 1 | - | - | - | - | 1 | 1 | - | 3 | |
| 1 week to 1 month | - | - | - | 1 | - | 1 | - | 1 | 1 | 3 | - | - | 7 | |
| 1 month to 3 months | - | - | - | 2 | 3 | 2 | - | - | - | 1 | - | - | 8 | |
| 3 months to 6 months | - | - | - | 1 | - | 1 | 1 | - | - | - | - | 1 | 4 | |
| More than 6 months | - | - | - | 1 | 1 | - | - | - | - | - | - | - | 2 | |
| Off work - not sick | - | - | - | - | - | - | 1 | - | - | 1 | - | - | 2 | 3% |
| Less than 1 week | - | - | - | - | - | - | 1 | - | - | - | - | - | 1 | |
| 1 week to 1 month | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| 1 month to 3 months | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| 3 months to 6 months | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| More than 6 months | - | - | - | - | - | - | - | - | - | 1 | - | - | 1 | |
| Grand Total | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

Support in

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD |
|---------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|------------|
| English | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 |
| Welsh | - | - | - | - | - | - | - | - | - | - | - | - | - |

Lifestyle usage

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD |
|------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------------|
| Pageviews | - | - | - | 242 | 94 | 5 | - | - | 3 | 63 | 28 | 23 | 458 |
| Unique Pageviews | - | - | - | 204 | 83 | 5 | - | - | 2 | 56 | 26 | 18 | 394 |

| Information Category | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD |
|----------------------|--------|--------|--------|------------|-----------|----------|--------|--------|----------|-----------|-----------|-----------|----------------|
| Unique Pageviews | | | | | | | | | | | | | |
| At Home | - | - | - | 68 | 20 | 4 | - | - | 2 | 32 | 18 | 5 | 149 38% |
| At Work | - | - | - | 136 | 63 | 1 | - | - | - | 24 | 8 | 13 | 245 62% |
| TOTAL | - | - | - | 204 | 83 | 5 | - | - | 2 | 56 | 26 | 18 | 394 |

Lifestyle Detail – At Home

Unique Pageviews

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|---|--------|--------|--------|-----------|-----------|----------|--------|--------|----------|-----------|-----------|----------|------------|-----|
| At Home/Homepage | - | - | - | 19 | 6 | 1 | - | - | - | 7 | 5 | 1 | 39 | 26% |
| bereavement-loss/ | - | - | - | 6 | 3 | 2 | - | - | - | 2 | - | - | 13 | 9% |
| childcare/ | - | - | - | 1 | 1 | - | - | - | - | - | 1 | - | 3 | 2% |
| childcare/childcare-options/ | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| elderly-relatives/ | - | - | - | 2 | 3 | - | - | - | - | 2 | 1 | - | 8 | 5% |
| elderly-relatives/arranging-care/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| finances/ | - | - | - | 9 | 3 | - | - | - | - | 3 | - | - | 15 | 10% |
| finances/budgeting/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| finances/budgeting-calculator/ | - | - | - | - | - | - | - | - | 1 | 3 | 1 | - | 5 | 3% |
| finances/child-benefit-changes/ | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| finances/credit-card-debt/ | - | - | - | - | - | - | - | - | - | 1 | - | - | 1 | 1% |
| finances/debt/ | - | - | - | - | 1 | - | - | - | - | - | - | - | 1 | 1% |
| finances/financial-health-check/ | - | - | - | - | 1 | - | - | - | - | 1 | - | - | 2 | 1% |
| finances/households-money/ | - | - | - | - | - | - | - | - | - | 1 | - | - | 1 | 1% |
| finances/reduced-income/ | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| finances/the-importance-of-a-will/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| parenthood/ | - | - | - | 7 | - | - | - | - | - | - | - | 2 | 9 | 6% |
| parenthood/becoming-a-parent/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| parenthood/childcare/childcare-options/ | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| parenthood/lone-parenting/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| parenthood/maternity-leave/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| parenthood/nutrition-during-pregnancy/ | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| parenthood/paternity-leave/ | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| parenthood/pregnancy/ | - | - | - | 2 | - | - | - | - | - | - | - | - | 2 | 1% |
| relationships/ | - | - | - | 6 | 1 | 1 | - | - | - | 5 | 5 | 1 | 19 | 13% |
| relationships/divorce/ | - | - | - | - | - | - | - | - | - | 2 | - | - | 2 | 1% |
| relationships/domestic-violence/ | - | - | - | - | - | - | - | - | 1 | - | - | - | 1 | 1% |
| relationships/family-breakdown/ | - | - | - | 6 | 1 | - | - | - | - | 3 | 3 | 1 | 14 | 9% |
| your-home/ | - | - | - | 3 | - | - | - | - | - | 2 | 1 | - | 6 | 4% |
| your-home/neighbour-disputes/ | - | - | - | 1 | - | - | - | - | - | - | - | - | 1 | 1% |
| your-home/renting/ | - | - | - | - | - | - | - | - | - | - | 1 | - | 1 | 1% |
| TOTAL | - | - | - | 68 | 20 | 4 | - | - | 2 | 32 | 18 | 5 | 149 | |

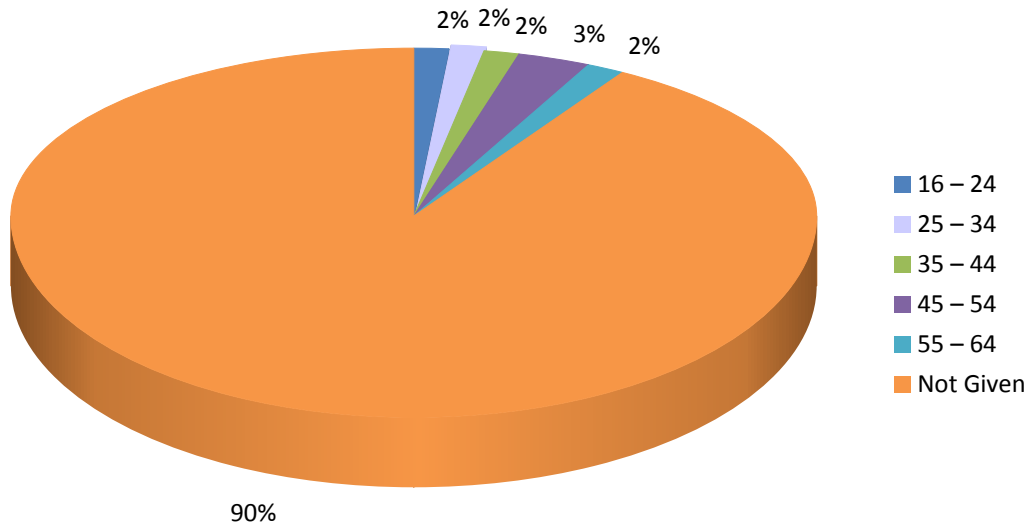
Lifestyle Detail – At Work

At Work

Unique Pageviews

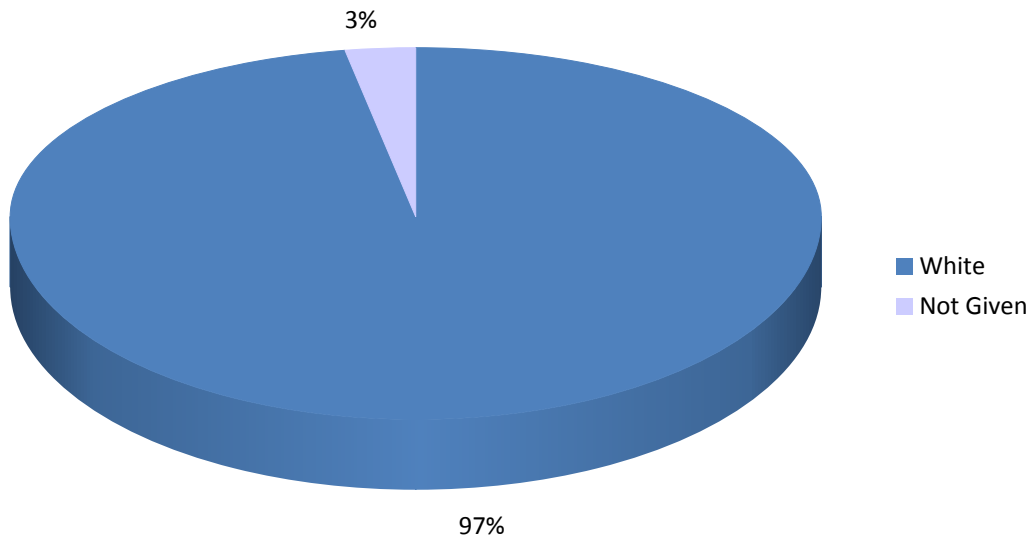
| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|---|--------|--------|--------|------------|-----------|----------|--------|--------|--------|-----------|----------|-----------|------------|-----|
| At Work/Homepage | - | - | - | 15 | 9 | - | - | - | - | 1 | 3 | 1 | 29 | 12% |
| addiction-at-work/ | - | - | - | 8 | 1 | - | - | - | - | - | - | - | 9 | 4% |
| changes-at-work/ | - | - | - | 7 | 2 | - | - | - | - | 1 | - | - | 10 | 4% |
| changes-at-work/moving-into-management/ | - | - | - | 1 | - | - | - | - | - | 1 | - | - | 2 | 1% |
| critical-incident/ | - | - | - | 6 | 3 | - | - | - | - | 2 | - | 1 | 12 | 5% |
| fit-notes/ | - | - | - | 6 | 4 | - | - | - | - | 1 | - | 1 | 12 | 5% |
| mental-health/ | - | - | - | 22 | 11 | 1 | - | - | - | 7 | 1 | 6 | 48 | 20% |
| retirement/ | - | - | - | 11 | - | - | - | - | - | 1 | - | - | 12 | 5% |
| return-to-work/ | - | - | - | 9 | - | - | - | - | - | - | - | 2 | 11 | 4% |
| working-effectively/ | - | - | - | 8 | 4 | - | - | - | - | 1 | 2 | - | 15 | 6% |
| working-effectively/20-positive-communications/ | - | - | - | 2 | 3 | - | - | - | - | 1 | 1 | - | 7 | 3% |
| working-effectively/burnout/ | - | - | - | 3 | 1 | - | - | - | - | 1 | - | - | 5 | 2% |
| working-effectively/communication/ | - | - | - | 1 | 1 | - | - | - | - | 1 | - | - | 3 | 1% |
| working-effectively/healthy-habits/ | - | - | - | 2 | 2 | - | - | - | - | - | - | - | 4 | 2% |
| working-effectively/healthy-lunch-breaks/ | - | - | - | 2 | 2 | - | - | - | - | 1 | - | - | 5 | 2% |
| working-effectively/time-management/ | - | - | - | 1 | 2 | - | - | - | - | 1 | - | - | 4 | 2% |
| working-effectively/work-smarter-not-harder/ | - | - | - | 2 | 1 | - | - | - | - | 1 | - | - | 4 | 2% |
| working-environment/ | - | - | - | 7 | 5 | - | - | - | - | 1 | 1 | - | 14 | 6% |
| working-environment/healthy-computing/ | - | - | - | 2 | 2 | - | - | - | - | - | - | - | 4 | 2% |
| working-environment/setting-up-your-desk/ | - | - | - | 3 | 1 | - | - | - | - | - | - | - | 4 | 2% |
| working-environment/stress-management/ | - | - | - | 6 | 2 | - | - | - | - | 2 | - | - | 10 | 4% |
| workplace-conflict/ | - | - | - | 10 | 5 | - | - | - | - | - | - | 2 | 17 | 7% |
| health/stress/stress-at-work/ | - | - | - | 1 | 1 | - | - | - | - | - | - | - | 2 | 1% |
| health/stress/tackle-stress-at-work/ | - | - | - | 1 | 1 | - | - | - | - | - | - | - | 2 | 1% |
| TOTAL | - | - | - | 136 | 63 | 1 | - | - | - | 24 | 8 | 13 | 245 | |

Age Summary



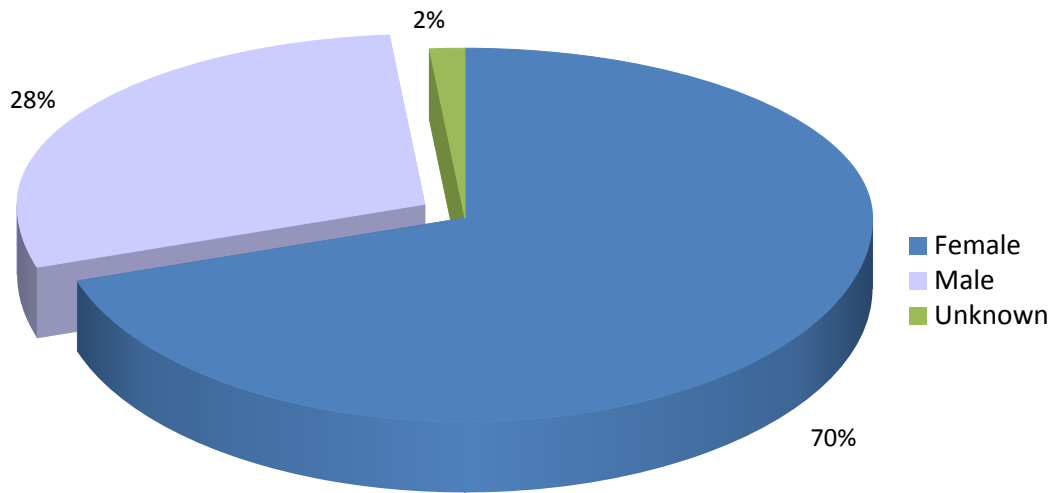
| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|--------------|--------|--------|--------|-----------|----------|-----------|----------|----------|----------|----------|----------|----------|-----------|-----|
| 16 – 24 | - | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 2% |
| 25 – 34 | - | - | - | - | - | - | - | - | - | - | 1 | - | 1 | 2% |
| 35 – 44 | - | - | - | - | - | - | - | - | - | 1 | - | - | 1 | 2% |
| 45 – 54 | - | - | - | - | - | - | - | - | - | 1 | - | 1 | 2 | 3% |
| 55 – 64 | - | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 2% |
| 65 and over | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Not Given | - | - | - | 11 | 8 | 10 | 4 | 2 | 4 | 5 | 5 | 5 | 54 | 90% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

Ethnic Origin Summary



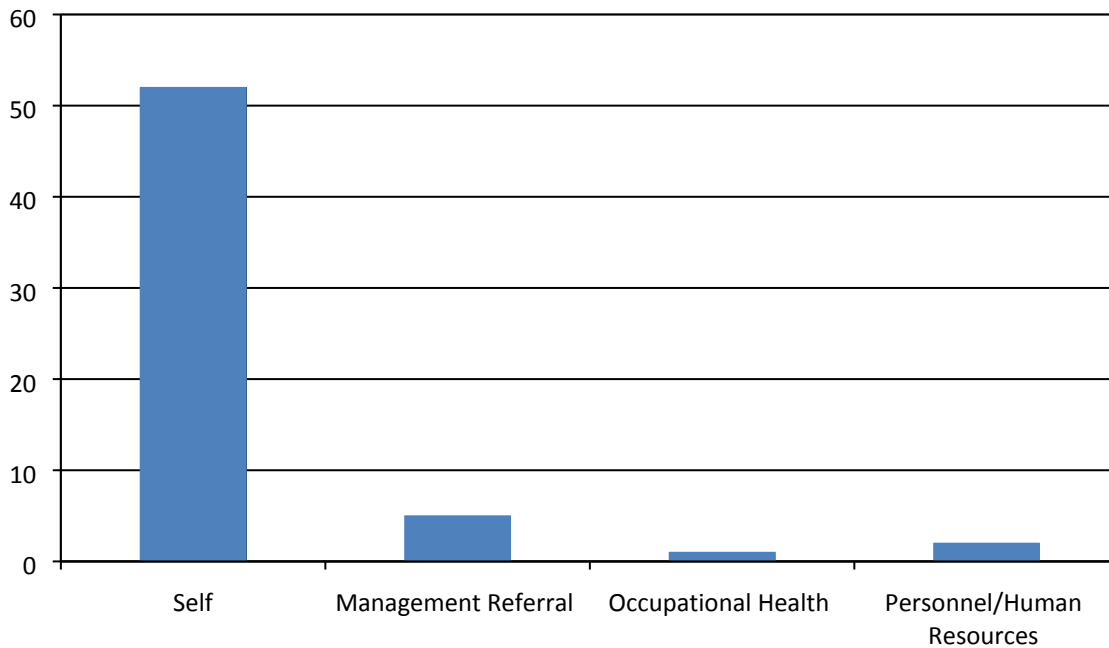
| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | | YTD |
|------------------------|--------|--------|--------|-----------|----------|-----------|----------|----------|----------|----------|----------|----------|-----------|------------|
| White or White British | - | - | - | 9 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 58 | 97% |
| Black or Black British | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Not Given | - | - | - | 2 | - | - | - | - | - | - | - | - | 2 | 3% |
| Mixed | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Asian or Asian British | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Chinese | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Other Ethnic Group | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Traveler | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

Gender Summary



| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|--------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|-----|
| Female | - | - | - | 9 | 3 | 6 | 2 | 4 | 3 | 4 | 6 | 5 | 42 | 70% |
| Male | - | - | - | 2 | 5 | 4 | 1 | - | 1 | 3 | - | 1 | 17 | 28% |
| Not given | - | - | - | - | - | - | 1 | - | - | - | - | - | 1 | 2% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

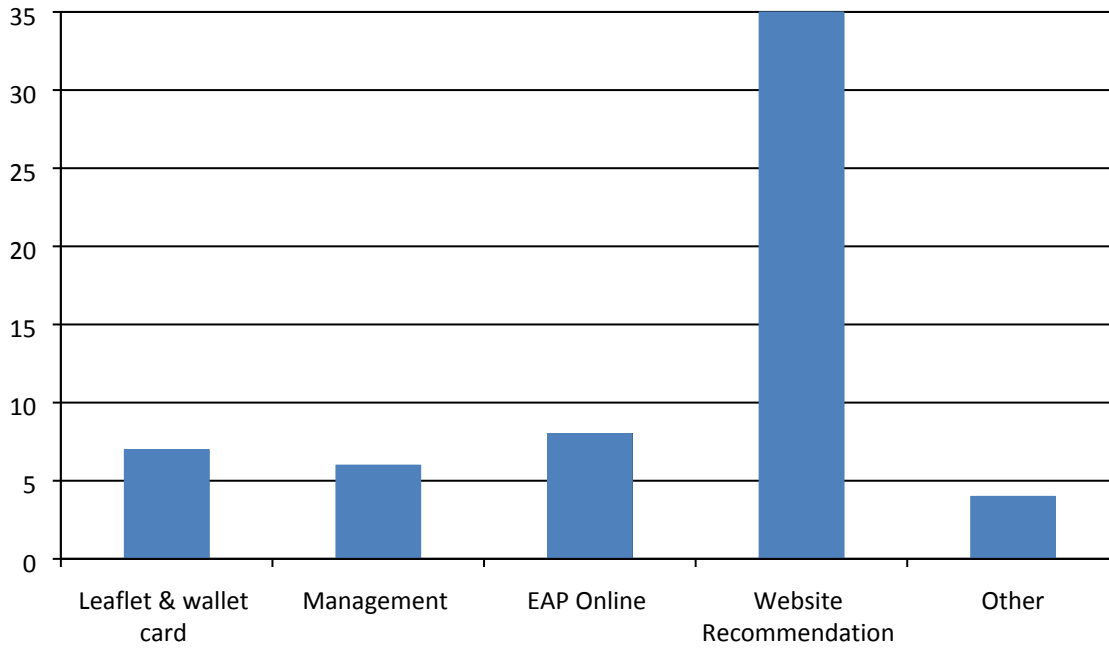
Referred by



Informal Referrals by:

| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|------------------------------|--------|--------|--------|-----------|----------|-----------|----------|----------|----------|----------|----------|----------|-----------|-----|
| Self | - | - | - | 10 | 4 | 9 | 3 | 4 | 3 | 7 | 6 | 6 | 52 | 87% |
| Management Referral | - | - | - | - | 3 | - | 1 | - | 1 | - | - | - | 5 | 8% |
| Occupational Health | - | - | - | - | 1 | - | - | - | - | - | - | - | 1 | 2% |
| Personnel/Human Resources | - | - | - | 1 | - | 1 | - | - | - | - | - | - | 2 | 3% |
| Prompted by Personnel Letter | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Trade Union | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

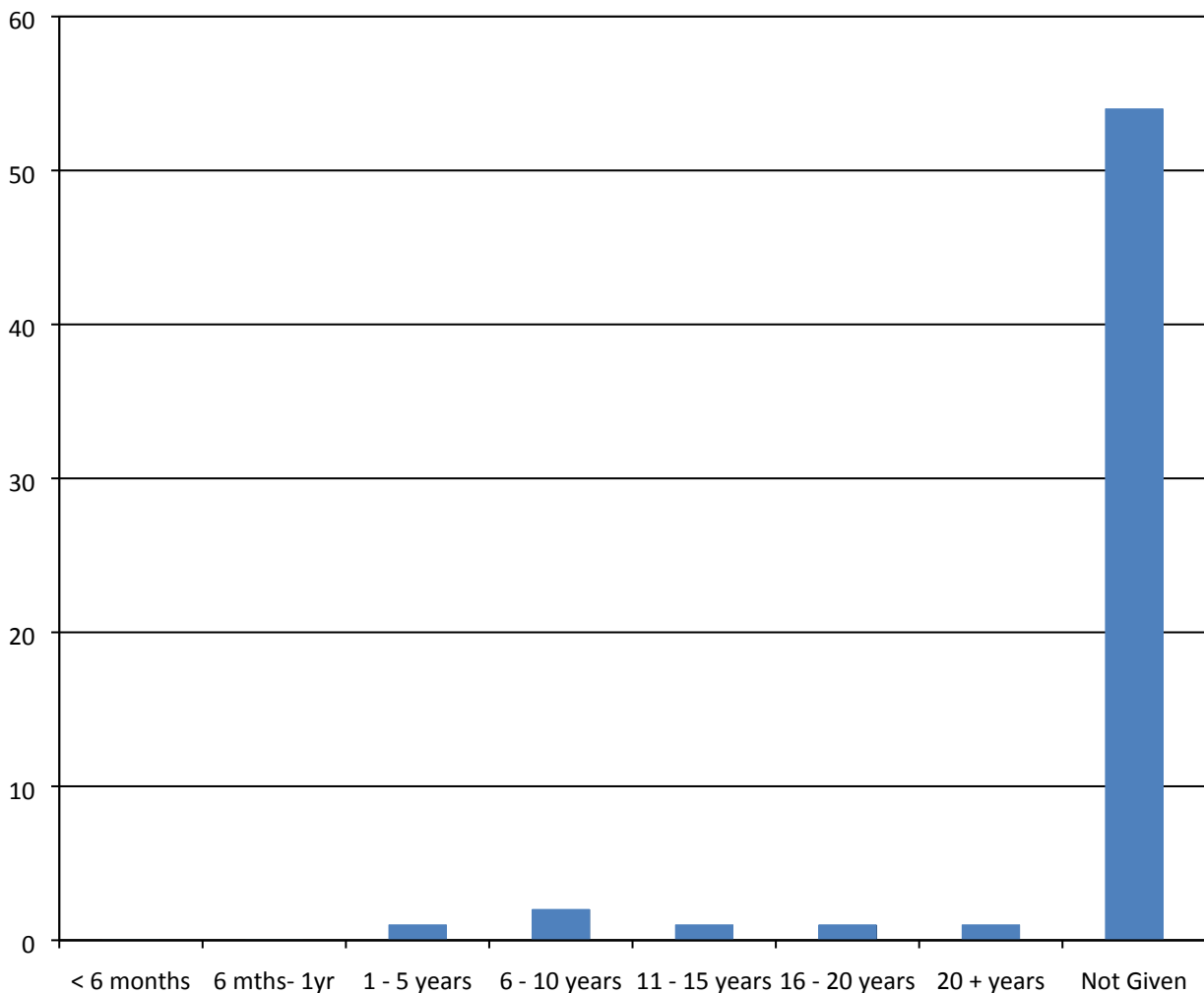
Service Knowledge



Service Knowledge

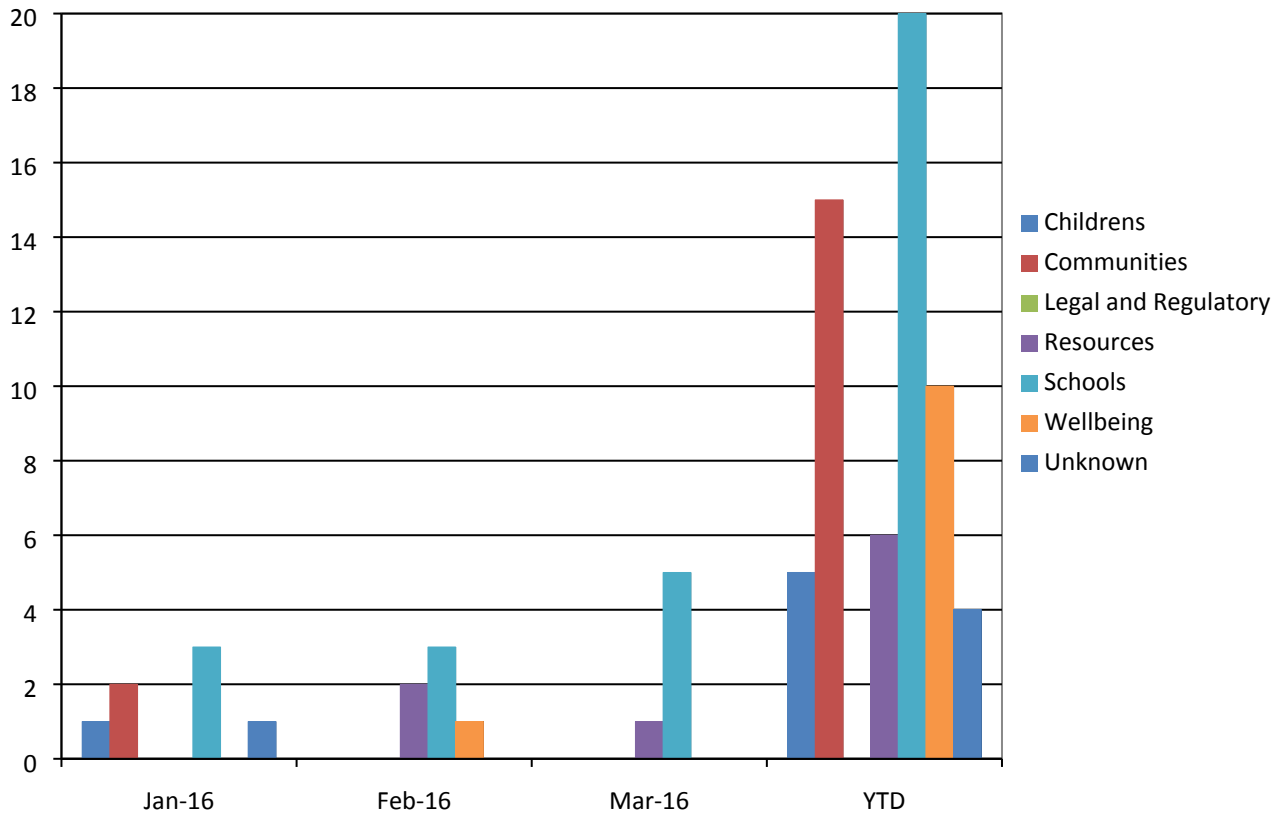
| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|-------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|-----|
| Health and Wellbeing Intranet | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Poster | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Leaflet & wallet card | - | - | - | 2 | - | 2 | - | 1 | - | 1 | 1 | - | 7 | 12% |
| Management | - | - | - | - | 2 | - | 2 | - | 2 | - | - | - | 6 | 10% |
| EAP Online | - | - | - | - | 1 | 1 | 2 | - | 1 | - | 1 | 2 | 8 | 13% |
| Health and Wellbeing events | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Unions | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Website Recommendation | - | - | - | 8 | 3 | 7 | - | 3 | 1 | 6 | 4 | 3 | 35 | 58% |
| Previously Used Service | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Not applicable | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Other | - | - | - | 1 | 2 | - | - | - | - | - | - | 1 | 4 | 7% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

Length of Service



| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|---------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|-----|
| < 6 months | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| 6 mths- 1yr | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| 1 - 5 years | - | - | - | - | - | - | - | - | - | 1 | - | - | 1 | 2% |
| 6 - 10 years | - | - | - | - | - | - | - | - | - | 2 | - | - | 2 | 3% |
| 11 - 15 years | - | - | - | - | - | - | - | 1 | - | - | - | - | 1 | 2% |
| 16 - 20 years | - | - | - | - | - | - | - | - | - | 1 | - | - | 1 | 2% |
| 20 + years | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | 2% |
| Not Given | - | - | - | 11 | 8 | 10 | 4 | 3 | 4 | 3 | 6 | 5 | 54 | 90% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

New cases by Region



| | Apr-15 | May-15 | Jun-15 | Jul-15 | Aug-15 | Sep-15 | Oct-15 | Nov-15 | Dec-15 | Jan-16 | Feb-16 | Mar-16 | YTD | |
|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-----|-----|
| Childrens | - | - | - | 1 | 1 | 2 | - | - | - | 1 | - | - | 5 | 8% |
| Communities | - | - | - | 5 | 4 | 3 | 1 | - | - | 2 | - | - | 15 | 25% |
| Legal and Regulatory | - | - | - | - | - | - | - | - | - | - | - | - | - | -% |
| Resources | - | - | - | 1 | - | 1 | - | - | 1 | - | 2 | 1 | 6 | 10% |
| Schools | - | - | - | 1 | - | 3 | 2 | 2 | 1 | 3 | 3 | 5 | 20 | 33% |
| Wellbeing | - | - | - | 2 | 2 | 1 | 1 | 2 | 1 | - | 1 | - | 10 | 17% |
| Unknown | - | - | - | 1 | 1 | - | - | - | 1 | 1 | - | - | 4 | 7% |
| TOTAL | - | - | - | 11 | 8 | 10 | 4 | 4 | 4 | 7 | 6 | 6 | 60 | |

Going forward:

Appendix - Definitions

Counselling and Information

24 hour freephone access to professional support for any personal or work related issue. All calls are answered directly by a team of qualified and experienced Care first Counsellors. Counselling calls can be single or continued with the same counsellor for an agreed number of sessions within a structural framework. Counselling is provided either on the telephone or within an agreed number of face to face counselling sessions. Face to face counselling is provided through Care first network of permanent and associate counsellors, who are centrally case managed and clinically supervised.

Professional information and advice services are provided by a team of Information Specialists working alongside the Telephone Counsellors in Care first Counselling and Information Services centre. Information Specialists are available between 8 am and 8 pm Monday to Friday but available on an emergency only basis at other times.

Case

An issue or set of issues presented to Care first by an individual for discussion. A case may take one call, a number of calls or a combination of telephone and face to face counselling and/or information to reach closure. This process may take place over a period of several weeks. Each case is assigned a unique case reference to preserve the anonymity of the individual when making a record of the discussion (case note) on the Care first database.

Where issues are being presented to Care first Counselling and Information for the first time, this is referred to as a new case. The individual may have used the service before about a different issue or set of issues. Any follow up use of the service, whether by telephone or face to face, is referred to as an existing case.

Client

An individual who has used/is using the service.

Contact

Each telephone call or face to face counselling session is recorded on the Care first database as a case note and referred to as a 'contact' within reports. This includes calls made by managers to discuss an employee and make a management referral.

Contact duration may be anything from a brief enquiry for information or advice to up to an hour-long counselling session.

Evaluation

Data extracted from forms completed anonymously by Care first face to face counselling clients to evaluate Care first service, outcomes and perception of the effectiveness of counselling.

Face to Face Counselling

Total number of face to face counselling sessions which have taken place during the period. Clients can access an agreed number of face to face sessions for each case presented. Each session lasts one hour.

Issues

Breakdown of issues presented to Care first Counselling and Information for discussion. A case may involve several inter-related issues. Each case note records the issues discussed with the client, and whether they are personal or work related.

Personal issues are further categorised under the broad headings of “Personal Issues (Counselling)”, and “Personal Issues (Information)”.

Work related issues are shown in the report in two tables “Work Related Issues” and “Management Support”. The former refers to the client’s own issues, where the latter refers to managers using the service to discuss people management issues.

Overall Service Usage

The overall level of service usage is measured through recording the number of client contacts made to the service.

Telephone Counselling

Number of calls made to a Care first Telephone Counsellor. This also includes contact made by the hearing impaired via minicom or Typetalk, or in a language other than English using our translation service.

This also includes ‘contracted’ counselling sessions, where clients have opted to continue counselling by telephone with the same counsellor, rather than be referred for face to face counselling. A telephone ‘contact’ may therefore be anything from a brief call to up to an hour’s counselling.

Telephone Information

Number of calls made to a Care first Telephone Information Specialist. This also includes contact made by the hearing impaired via minicom or Typetalk, or in a language other than English using our third party translation service.

Undisclosed

Contacts made by clients who have not wished to disclose certain information such as the area of employment.

% Usage

Number of contacts made during the period, expressed as a percentage of the headcount contracted.

Appendix I – Absence Management Training

Sickness Absence Training 2015 – Attendees by Directorate

| Directorates | Short Term Absence | | Long Term Absence | |
|------------------------------|--------------------|-----------|-------------------|----------|
| | 15/16 | 16/17 | 15/16 | 16/17 |
| Communities | 16 | 0 | 10 | 0 |
| Education and Transformation | 9 | 0 | 12 | 0 |
| Legal & Regulatory Services | 6 | 0 | 4 | 0 |
| Resources | 47 | 6 | 11 | 0 |
| Wellbeing | 18 | 18 | 13 | 7 |
| Grand Total | 96 | 24 | | 7 |

*LTS only started in February 2016

Absence Management Training Dates 2016

| Date | Course |
|----------|--------------------|
| 06/06/16 | Short Term Absence |
| 21/06/16 | Long Term Absence |
| 07/07/16 | Short Term Absence |
| 14/07/16 | Long Term Absence |
| 11/08/16 | Short Term Absence |
| 24/08/16 | Long Term Absence |
| 14/09/16 | Short Term Absence |
| 28/09/16 | Long Term Absence |

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Appendix J - Short term and Long term absence in Schools

* Data below covers the period 01/04/2015 - 31/03/2016 *

| Schools | Days Lost | | | Days Lost | | Total FTE Days Lost | Day Lost per FTE |
|--|----------------|----------------|------------|----------------|------------|------------------------|---------------------|
| | Sum of FTE | STS | %STS | LTS | % LTS | | |
| Primary Schools | 1191.96 | 3252.84 | 36% | 5777.65 | 64% | 9030.48 | 7.58 |
| Abercerdin Primary School | 21.54 | 97.09 | 74% | 34.59 | 26% | 131.68 | 6.11 |
| Afon Y Felin Primary School | 11.51 | 38.26 | 32% | 80.55 | 68% | 118.82 | 10.32 |
| Archdeacon John Lewis CIW Primary School | 17.54 | 51.75 | 75% | 17.32 | 25% | 69.08 | 3.94 |
| Betws Primary School | 25.90 | 72.43 | 58% | 53.20 | 42% | 125.64 | 4.85 |
| Blaengarw Primary School | 17.53 | 34.40 | 23% | 114.77 | 77% | 149.17 | 8.51 |
| Brackla Primary School | 26.35 | 60.62 | 48% | 65.00 | 52% | 125.62 | 4.77 |
| Bryncethin Primary School | 23.58 | 46.27 | 44% | 58.00 | 56% | 104.27 | 4.42 |
| Brynmenyn Primary School | 18.72 | 56.91 | 57% | 43.78 | 43% | 100.70 | 5.38 |
| Bryntirion Infants School | 20.66 | 76.28 | 49% | 77.95 | 51% | 154.22 | 7.46 |
| Caerau Primary School | 50.75 | 120.74 | 34% | 235.30 | 66% | 356.04 | 7.02 |
| Cefn Cribwr Primary School | 15.93 | 85.40 | 28% | 220.11 | 72% | 305.51 | 19.18 |
| Cefn Glas Infants School | 26.92 | 71.37 | 95% | 3.88 | 5% | 75.25 | 2.80 |
| Coety Primary School | 25.53 | 110.67 | 98% | 1.76 | 2% | 112.43 | 4.40 |
| Corneli Primary School | 26.87 | 80.36 | 28% | 209.08 | 72% | 289.44 | 10.77 |
| Coychurch (Llangrallo) Primary School | 11.00 | 24.93 | 24% | 79.59 | 76% | 104.53 | 9.50 |
| Croesty Primary School | 20.20 | 56.14 | 94% | 3.38 | 6% | 59.52 | 2.95 |
| Cwmfelin Primary School | 15.68 | 36.90 | 96% | 1.49 | 4% | 38.39 | 2.45 |
| Ffaldau Primary School | 18.53 | 42.81 | 22% | 151.49 | 78% | 194.30 | 10.48 |
| Garth Primary School | 20.04 | 28.43 | 6% | 435.72 | 94% | 464.16 | 23.17 |
| Litchard Primary School | 35.28 | 96.86 | 26% | 280.54 | 74% | 377.40 | 10.70 |
| Llangewydd Junior School | 28.96 | 33.42 | 55% | 27.38 | 45% | 60.80 | 2.10 |
| Llangynwyd Primary School | 11.57 | 29.46 | 21% | 108.49 | 79% | 137.95 | 11.92 |
| Maes Yr Haul Primary School | 48.23 | 107.20 | 29% | 267.78 | 71% | 374.98 | 7.78 |
| Mynydd Cynffig Primary School | 34.96 | 50.32 | 33% | 103.43 | 67% | 153.75 | 4.40 |
| Nantylffyllon Primary School | 22.67 | 68.26 | 100% | 0.00 | 0% | 68.26 | 3.01 |
| Nantymoel Primary School | 19.32 | 58.44 | 79% | 15.81 | 21% | 74.25 | 3.84 |
| Newton Primary School | 20.00 | 77.72 | 79% | 21.21 | 21% | 98.93 | 4.95 |
| Nottage Primary School | 37.33 | 91.12 | 19% | 378.22 | 81% | 469.34 | 12.57 |

| | | | | | | | |
|--|-------|--------|------|--------|-----|--------|-------|
| Ogmore Vale Primary School | 35.85 | 113.60 | 54% | 96.34 | 46% | 209.94 | 5.86 |
| Oldcastle Primary School | 35.75 | 94.92 | 58% | 68.92 | 42% | 163.84 | 4.58 |
| Pencoed Primary School | 50.12 | 118.87 | 34% | 234.81 | 66% | 353.68 | 7.06 |
| Penybont Primary School | 30.53 | 99.28 | 41% | 142.53 | 59% | 241.82 | 7.92 |
| Pen-y-fai C in W Primary School | 19.55 | 46.09 | 100% | 0.00 | 0% | 46.09 | 2.36 |
| Pil Primary School | 22.03 | 69.79 | 43% | 92.32 | 57% | 162.11 | 7.36 |
| Plasnewydd Primary School | 22.32 | 70.85 | 34% | 138.74 | 66% | 209.60 | 9.39 |
| Porthcawl Primary School | 13.31 | 14.66 | 19% | 61.20 | 81% | 75.86 | 5.70 |
| St Mary's & St Patrick's RC Primary School | 19.67 | 23.99 | 11% | 196.69 | 89% | 220.68 | 11.22 |
| St Marys RC Primary School | 22.20 | 52.45 | 26% | 150.12 | 74% | 202.57 | 9.12 |
| St Roberts RC Primary School | 15.10 | 21.17 | 32% | 45.04 | 68% | 66.21 | 4.38 |
| Tondu Primary School | 25.46 | 63.27 | 56% | 50.16 | 44% | 113.44 | 4.46 |
| Trelales Primary School | 19.11 | 67.37 | 66% | 34.65 | 34% | 102.02 | 5.34 |
| Tremains Primary School | 41.88 | 156.97 | 36% | 284.86 | 64% | 441.84 | 10.55 |
| Tynyrheol Primary School | 8.49 | 32.97 | 51% | 31.62 | 49% | 64.59 | 7.61 |
| West Park Primary School | 29.50 | 72.91 | 33% | 150.26 | 67% | 223.16 | 7.56 |
| Ysgol Gynradd Gymraeg Bro Ogwr | 36.60 | 134.14 | 36% | 236.99 | 64% | 371.13 | 10.14 |
| Ysgol Gynradd Gymraeg Cwm Garw | 15.41 | 80.39 | 28% | 203.59 | 72% | 283.99 | 18.43 |
| Ysgol Gynradd Gymraeg Cynwyd Sant | 30.11 | 71.38 | 38% | 116.47 | 62% | 187.85 | 6.24 |
| Ysgol Y Ferch O'r Sger | 24.56 | 43.19 | 11% | 352.47 | 89% | 395.66 | 16.11 |

| Schools | Sum of FTE | Days Lost | | Days Lost | | Grand Total | Total Days Lost |
|--|---------------|----------------|------------|----------------|------------|----------------|-----------------|
| | | STS | %STS | LTS | %LTS | | |
| Secondary Schools | 889.45 | 2698.86 | 41% | 3946.06 | 59% | 6644.92 | 7.47 |
| Archbishop McGrath RC Comprehensive School (A) | 73.02 | 181.23 | 52% | 169.47 | 48% | 350.71 | 4.80 |
| Brynteg Comprehensive School | 133.83 | 412.72 | 30% | 956.52 | 70% | 1369.24 | 10.23 |
| Bryntirion Comprehensive School | 89.84 | 267.21 | 56% | 208.87 | 44% | 476.08 | 5.30 |
| Coleg Cymunedol Y Dderwen | 134.20 | 670.57 | 40% | 1004.32 | 60% | 1674.89 | 12.48 |
| Cynffig Comprehensive School | 77.88 | 235.61 | 35% | 446.57 | 65% | 682.18 | 8.76 |
| Maesteg Comprehensive School | 108.32 | 261.99 | 24% | 822.84 | 76% | 1084.83 | 10.01 |
| Pencoed Comprehensive School | 94.75 | 309.26 | 80% | 77.48 | 20% | 386.75 | 4.08 |
| Porthcawl Comprehensive School | 113.45 | 215.41 | 54% | 187.06 | 46% | 402.47 | 3.55 |
| Ysgol Gyfun Gymraeg Llangynwyd | 62.16 | 144.85 | 67% | 72.92 | 33% | 217.78 | 3.50 |

| | | | | | | | |
|-----------------------------------|----------------|----------------|------------|-----------------|------------|-----------------|--------------|
| Special Schools | 191.32 | 791.95 | 41% | 1125.85 | 59% | 1917.80 | 10.02 |
| Heronsbridge Special School | 147.37 | 652.02 | 50% | 651.14 | 50% | 1303.16 | 8.84 |
| Ysgol Bryn Castell Special School | 43.98 | 139.93 | 23% | 474.72 | 77% | 614.64 | 13.98 |
| Grand Total | 2270.40 | 6743.65 | 38% | 10849.56 | 62% | 17593.20 | 7.75 |

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Appendix K - Return to Work Completion in Schools

| Row Labels | Number of Absences | RTW Not Received | RTW Received |
|--------------------|---------------------------|-------------------------|---------------------|
| Primary Schools | 1720 | 39% | 61% |
| Secondary Schools | 1337 | 55% | 45% |
| Special Schools | 317 | 41% | 59% |
| Grand Total | 1212 | 45% | 55% |

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO CORPORATE RESOURCES AND IMPROVEMENT OVERVIEW AND SCRUTINY COMMITTEE

11 JULY 2016

REPORT OF THE CHIEF EXECUTIVE

COUNCIL'S PERFORMANCE AGAINST ITS COMMITMENTS AND A SUMMARY OF ITS FINANCIAL POSITION AT YEAR END FOR 2015-16

1. PURPOSE OF REPORT

- 1.1 This report provides the Committee with an overview of the Council's performance in 2015-16. It compares this performance with the commitments to delivering the improvement priorities in the Corporate Plan for 2013-17.
- 1.2 This report also provides the Committee with an update on the financial position as at the year ended 31st March 2016.

2. CONNECTION TO CORPORATE IMPROVEMENT PLAN / OTHER PRIORITIES

- 2.1 The information in this report relates directly to the Council's Corporate Plan 2013-17, which sets out the Council's improvement priorities and identifies actions to realise those priorities and its Medium Term Financial Strategy 2015-16 to 2019-20.

3. BACKGROUND

- 3.1 In March 2015, the Council published its revised Corporate Plan for 2015-16. The Plan defined 58 commitments to the six Improvement Priorities and set out 76 outcome-focused indicators for the financial year.
- 3.2 At the same time the Council reviewed and published its Medium Term Financial Strategy (MTFS), setting out how it would use its reduced resources to support the improvement priorities. Council approved a net revenue budget of £252.201 million for 2015-16 along with a capital programme for the year of £36.441 million. The capital budget was revised in the Medium Term Financial Strategy 2016-17 to 2019-20 (MTFS) in March 2016 to £31.689 million, and then in May 2016 to £26.698 million.
- 3.3 Directorate Business Plans were developed to define service actions to carry out the defined 58 commitments. Those plans also identified performance indicators for the year. In all, 158 indicators have been nominated by directorates to be monitored at the corporate level, by the Corporate Performance Assessment panel (CPA). Of those 158 indicators, 138 are directly related to the six improvement priorities and the rest are either national indicators or local key performance indicators (KPIs).
- 3.4 As part of the Performance Management Framework, budget projections are reviewed regularly and reported to Cabinet on a quarterly basis. Performance against the commitments and performance indicators in the Corporate Plan is monitored regularly by Directorate Management Teams and quarterly by the Council's Corporate Performance Assessment Panel consisting of Cabinet, Corporate Management Board and Heads of Service.

3.5 The Corporate Resources and Improvement Overview and Scrutiny Committee has a role in monitoring and scrutinising both the financial performance of the authority against budget and the progress of the delivery of the improvement objectives to deliver efficient services.

4. CURRENT SITUATION / PROPOSAL

4.1 Summary of Performance in delivering Corporate Plan commitments

Commitments

4.1.1 The year-end data shows that almost 44 (76%) of the 58 commitments were completed, with another 12 (21%) achieving most of their milestones (amber), and only two (3%) missing most of its milestones.

Performance Indicators

4.1.2 Of the 158 indicators that are reported at a corporate level, forty one are National Strategic Indicators (NSI) / Public Accountability Measures (PAM) and the rest are local.

4.1.3 Data has been received for 152 indicators, of which 108 (71%) are on target, 24 (16%) are off target by less than 10% and 20 (13%) missed the target by more than 10%. It is important to note that data reported at this stage is subject to verification and may change prior to publication of the 2015-16 Annual Report on Council Performance. Overview information about commitments and indicators is set out in Part A of the Annex, with Directorate dashboards Appendix 1–5 providing more detailed analysis.

4.1.4 One hundred and thirty three (133) of the indicators have comparable data, of which 81 (61%) showed improvement over the previous year. The table below shows how the Council performed in the last three years.

| Performance Indicators Trend vs previous year | 13-14 vs 12-13 | | 14-15 vs 13-14 | | 15-16 vs 14-15 | |
|--|----------------|------|----------------|------|----------------|------|
| | No. | % | No. | % | No. | % |
| Better than last year | 83 | 63% | 90 | 66% | 81 | 61% |
| Same as last year | 0 | 0% | 8 | 6% | 19 | 14% |
| Worse than last year | 48 | 37% | 39 | 28% | 33 | 25% |
| Total | 131 | 100% | 137 | 100% | 133 | 100% |

4.1.5 Of the 76 indicators identified for the Corporate Plan, 72 can be compared against their target: 52 (72.2%) met their target, 12 (16.6%) were off target by less than 10% and 8 (11.2%) missed the target by more than 10%.

Long-term Outcome Indicators

4.1.6 This group of indicators are not directly influenced by the Authority, but they are chosen for the Corporate Plan because they give an indication of the socio-economic state of the borough.

4.1.7 There are 13 long term outcome indicators. Data is available for 10 of these indicators, with the latest published data showing that eight have shown an improvement

compared with the previous period, with a decline in performance for just two indicators. Detailed information is included in Part (B) of the Annex.

Sickness Absence

4.1.8 In 2015-16, the average number of days lost through sickness absence per FTE is 10.85 days, compared with 10.83 days lost for 2014-15, missing the target set for the year of 8.5 days per FTE. Long Term Sickness remains high at 69% compared with 72% last year, and the short-term sickness absence rate increased from 28% in 2014-15 to 30% in 2015-16. A range of measures, including new Absence Management Training for managers, revised absence reports and the implementation of any recommendations from the WLGA sickness absence benchmarking project will aim to reduce absence in 2016-17. The year-end data shows that the number of absences due to industrial injury was 58, exceeding the year-end target of 52. The number of days lost per FTE due to industrial injury also exceeded its target of 0.10 days per FTE at 0.23 days. Detailed information is included in Part (C) of the Annex.

4.2 Summary of Financial Position at 31st March 2016

4.2.1 Revenue Budget

4.2.1.1 The overall outturn at 31st March 2016 shows a balanced position. Directorate budgets provided a net under spend of £1.639 million (summary shown in Part D of the Annex) and corporate budgets a net under spend of £7.553 million.

4.2.1.2 Directorate Budgets

The under spend on Directorate net budgets for the year is a result of a number of factors including the maximisation of grant and other income, strict vacancy management, increased productivity on some trading accounts, savings resulting from improved systems and processes and delays in implementing some Directorate schemes. Directorates drew down £2.002 million in-year from approved earmarked reserves to meet specific one off pressures identified in previous years, including funding for transformation projects through the Change Fund, implementation costs for the new Shared Regulatory Services, costs of demolition work and service specific one-off pressures.

4.2.1.3 Corporate Budgets

The net budget for council wide services and budgets was £39.039 million and the actual outturn was £31.486 million, resulting in an under spend of £7.553 million. The most significant variances are detailed below:

| CORPORATE BUDGETS | Net Budget | Actual Outturn | Variance Over/(under) budget | % Variance |
|------------------------------|-------------------|-----------------------|-------------------------------------|-------------------|
| | £'000 | £'000 | £'000 | |
| Capital Financing | 10,372 | 10,660 | 288 | 2.8% |
| Council Tax Reduction Scheme | 13,869 | 13,348 | (521) | -3.8% |
| Building Maintenance | 767 | 583 | (184) | -24.0% |
| Sleep-Ins | 800 | - | (800) | -100.0% |
| Other Corporate Budgets | 4,685 | 392 | (6,294) | -134.3% |

- Capital Financing

The net over spend of £288,000 is mainly as a result of the repayment of additional premiums to reduce future financing costs, which were partly met from the draw down of earmarked reserves and partly offset by reduced capital financing costs generally.

- Council Tax Reduction Scheme

The under spend of £521,000 is a result of lower demand than forecast for the Council Tax Reduction Scheme. This is a demand led budget which is based on full take up. Budget reduction proposals of £300,000 in both 2016-17 and 2017-18 are built into the MTFS so this level of under spend is not expected to reoccur.

- Building Maintenance

The budget contains funding to repay prudential borrowing to fund the £1 million capital investment in parks pavilions in the capital programme. These works are now linked to Community Asset Transfer and consequently no spend has yet been incurred, and no funding drawn down. In addition, a number of schemes which received feasibility funding have slipped into 2016-17 so this funding has been used to establish an earmarked reserve and will be drawn down when spent.

- Sleep-Ins

A recurrent budget pressure was identified in the MTFS 2015-16 to 2018-19 to mitigate the potential cost of changes to salaries for staff undertaking sleep-ins, both for staff employed by the Council and those employed under contracts with the Council. To date this budget has not been spent, so this funding has been used to establish an earmarked reserve to mitigate future claims.

- Other Corporate Budgets

A net under spend of £6.294 million on other corporate budgets has arisen as a result of:

- Unwinding of earmarked reserves established in previous years following review of future requirements (£3.789 million).
- Less demand from Directorates to meet in year pay and price inflationary pressures such as energy and software costs;
- Lower inflation rates generally;
- Lower demand on price pressures than anticipated;

This under spend has enabled a number of new corporate earmarked reserves to be established to meet pressures in 2016-17, including contributions to the capital reserve, to support the capital programme and funding of demolition works, to avoid costs associated with vacant premises.

The under spend on Directorate budgets has also enabled a number of new Directorate earmarked reserves to be established, to meet service specific pressures that are anticipated to arise in 2016-17, many of which were originally planned to be undertaken in 2015-16.

As reported in the MTFS in March 2016, the under spend on accrued council tax income has been transferred into the service reconfiguration reserve to support the cost of transformation programmes, such as the Digital Transformation and Extra Care schemes.

Budget Reductions

4.2.1.4 The budget approved for 2015-16 included savings proposals of £11.225 million (5.27% of net service budgets). £1.909 million of these proposals were not realised in 2015-16, but the expenditure associated with them has been offset by vacancy management, and other savings elsewhere within the budget. Directorate dashboards provide a breakdown of those budget reductions not achieved in full. It also shows the current RAG Status of these proposals. As such there is still a recurrent pressure on 2016-17 budgets which will need to be addressed by implementing the proposals set out in the Directorate Dashboards Appendix 1-5 or by identifying and delivering alternatives. Future monitoring reports will review achievement against these targets in addition to current year budget reductions. A summary of the RAG status of the proposals is shown in the table in Part (E) of the Annex.

4.3 Capital programme outturn

4.3.1 The Council approved a revised Capital Programme in the MTFS in March 2016, which was then updated by Council in May 2016 with a budget of £26.698 million, to take account of new schemes and projected slippage into 2016-17.

4.3.2 The Directorate dashboards Appendix 1-5 provide a breakdown of those schemes within the capital programme with variances against budget available, compared with actual expenditure and where funding has slipped into 2016-17. For a number of schemes, funding slipped into 2016-17 in the May report has been brought back into 2015-16 to reflect actual expenditure, where expenditure was higher in 2015-16 than originally projected. Commentary is provided explaining reasons for any major variations in expenditure against budget or changes to budget. The total final budget for 2015-16 was £27.312 million, which takes account of additional approvals of £614,000 million since the report in May, and generally comprises schemes funded by external grant and other funding sources not previously included.

4.3.3 Total expenditure as at 31st March 2016 is £26.047 million, resulting in an over spend of £27,000 on BCBC resources, once further requests for slippage into 2016-17 of £1.292 million have been taken into account. Some of the schemes for which funding has slipped into 2016-17 include Bridgend and Porthcawl Townscape Heritage Initiatives, Housing Renewal Schemes, funding for Community Projects, Road Safety and to meet Care Standards. The small over spend will be met from general capital funding and directorate contributions.

4.4 Identification and allocation of reserves

4.4.1 The Council is required to maintain adequate financial reserves to meet the needs of the organisation. The MTFS includes the Council's Reserves and Balances Protocol which sets out how the Council will determine and review the level of its Council Fund balance and Earmarked Reserves. During 2015-16, Directorates drew down funding from specific earmarked reserves and these were reported to Cabinet through the Monitoring Reports. At year end, the Protocol requires that the Chief Finance Officer will review existing earmarked reserves, requests from Directorates for new reserves or additional corporate reserves based on new risks or pressures.

4.4.2 A review of the Council's existing earmarked reserves has been undertaken together with an assessment of the risks and pressures that are sufficiently 'known' or 'probable' over the MTFS period and for which an earmarked reserve is therefore required. This review has identified the need for £9.597 million to create new or enhance existing corporate reserves to meet the cost of future service reconfigurations (including

severance payments), the Council's Digital Transformation programme, the estimated demolition costs of four Council buildings, potential costs arising from recent case law and inescapable capital investment works required to mitigate against health and safety risks.

- 4.4.3 In addition in accordance with the Council's Reserves and Balances Protocol, Directorates were able to submit applications for new Earmarked Reserves. In determining what Directorate earmarked reserves are required priority has been given to those demonstrating significant risk, those which are sufficiently 'known' or 'probable' and those for which funding needs to be set aside as a priority, with consideration given to any existing reserve balances. Total Directorate earmarked reserves including carry forward reserves amount to £3.271 million, of which new Directorates' reserves total £1.193 million.
- 4.4.4 During the financial year, Directorates drew down £524,000 of funding from the Directorate specific earmarked reserves that were created as part of the 2014-15 year-end process, which totalled £1.490 million. A balance of £792,000 was unwound as Directorates were able to meet the costs of the proposed earmarked expenditure from within their own budgets. Finally, new Directorate specific reserves of £1.193 million were created as part of the 2015-16 year-end process. This left a balance on the Directorate specific earmarked reserves of £1.367 million. There was a further balance of £1.904 million for other Directorate reserves for Looked After Children, Wellbeing Projects, Car Parking Strategy and Porthcawl Regeneration. Detail is shown in each of the Directorate dashboards, Appendix 1-5.
- 4.4.5 Directorates also drew down £1.246 million from Corporate Reserves including the Major Claims Reserve and the Change Fund. A full breakdown of the total movement on earmarked reserves as at 31st March is set out below. The remaining under spend of £154,000 was transferred to the Council Fund.

MOVEMENT IN RESERVES 2015-16

| Opening Balance 1st April 2015 | Reserve | Expenditure 2015-16 | Additions 2015-16 | Closing Balance 31st March 2016 |
|--------------------------------------|--------------------------------|------------------------|----------------------|--|
| £'000 | | £'000 | £'000 | £'000 |
| 7,450 | Council Fund Balance | - | 154 | 7,604 |
| | Earmarked Reserves :- | | | |
| | Corporate Reserves | | | |
| 702 | Asset Management Plan | (430) | 1,220 | 1,492 |
| 300 | Building Maintenance Reserve | (30) | 86 | 356 |
| 627 | Capital feasibility fund | (208) | 212 | 631 |
| 6,434 | Capital Programme Contribution | (2,538) | 1,555 | 5,451 |
| 2,398 | Change Management | (448) | - | 1,950 |
| 115 | DDA Emergency Works | (12) | - | 103 |
| - | Digital Transformation | - | 2,500 | 2,500 |
| 861 | ICT & Finance Systems | (146) | - | 715 |
| 3,177 | Insurance Reserve | (1,166) | 24 | 2,035 |

| | | | | |
|--------|--|-----------------|---------------|---------------|
| 261 | Invest to save / Joint projects | (261) | - | - |
| 10,531 | Major Claims Reserve | (3,162) | 3,300 | 10,669 |
| 4,749 | Service Reconfiguration | (206) | 700 | 5,243 |
| 1,044 | Treasury Management Reserve | (1,044) | - | - |
| 210 | Waste Management Contract | (118) | - | 92 |
| 300 | Welfare Reform Bill | - | - | 300 |
| 30,848 | Total Corporate Reserves | (9,769) | 9,597 | 31,537 |
| | | | | |
| | <u>Directorate Reserves</u> | | | |
| 1,490 | Directorate Issues | (1,316) | 1,193 | 1,367 |
| 824 | Looked After Children | - | - | 824 |
| 600 | Wellbeing Projects | (67) | - | 533 |
| 555 | Car Parking Strategy | (84) | - | 471 |
| 125 | Porthcawl regeneration | (49) | - | 76 |
| 31 | Connecting Families | (31) | - | - |
| 4,486 | Total Directorate Reserves | (1,547) | 1,193 | 3,271 |
| | | | | |
| | <u>Equalisation of Spend Reserves</u> | | | |
| 201 | Election costs | - | - | 201 |
| - | Special Regeneration Fund | - | 149 | 149 |
| 92 | Unitary Development Plan | - | 49 | 141 |
| 10 | Building Control | - | 2 | 12 |
| 303 | Equalisation of Spend Reserves | - | 200 | 503 |
| | | | | |
| 43,087 | Total Usable Reserves | (11,316) | 11,144 | 42,915 |

5. EFFECT UPON POLICY FRAMEWORK & PROCEDURE RULES

- 5.1 Monitoring the Council's performance against its Corporate Plan forms part of the Council's Performance Management Framework.

As required by section 3 (budgetary control) of the Financial Procedure Rules; Chief Officers in consultation with the appropriate Cabinet Member are expected to manage their services within the approved cash limited budget and to provide the Chief Finance Officer with such information as is required to facilitate and monitor budgetary control.

6. EQUALITY IMPACT ASSESSMENT

- 6.1 There are no implications in this report.

7. FINANCIAL IMPLICATIONS

- 7.1 These are reflected in the body of the report.

8. RECOMMENDATION

8.1 The Committee is requested to consider the year end performance against the Corporate Plan and note the projected financial position for 2015-16. .

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Chief Executive

Randal Hemingway
Head of Finance and Section 151 Officer

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Annex - Part (A) - Performance Summary against target

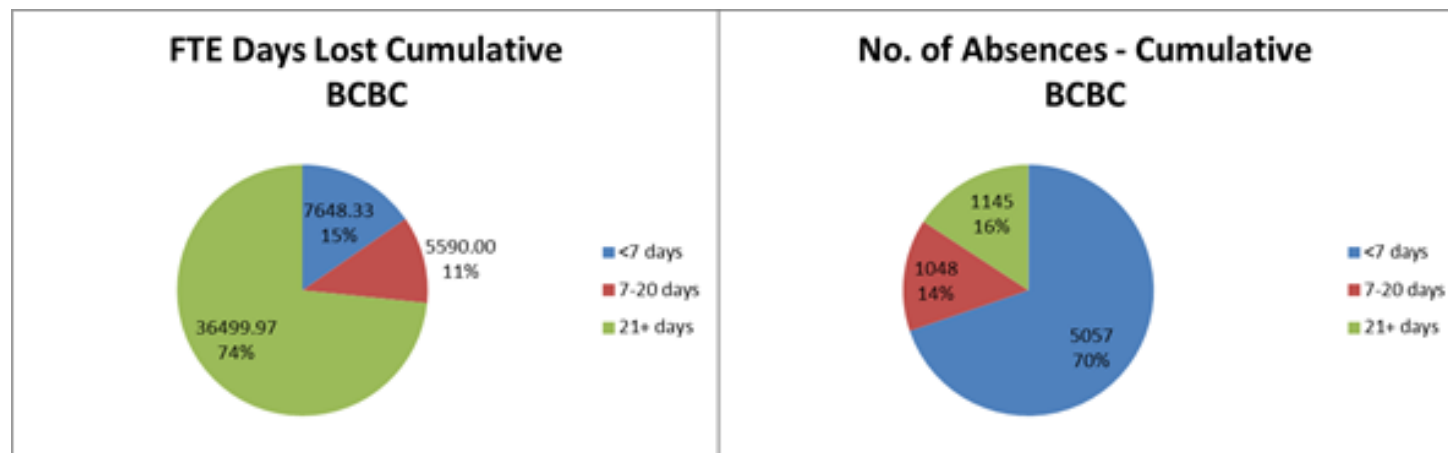
| Improvement Priorities | Commitments | | | | Indicators (Year End) | | | |
|---|-------------|----------|-----------|-----------|-----------------------|-----------|-----------|------------|
| | TOTAL | R | A | G | TOTAL | R | A | G |
| Priority One: Working together to develop the local economy | 9 | | 2 | 7 | 23 | 2 | | 21 |
| | | 0% | 22% | 78% | | 9% | | 91% |
| Priority Two: Raising Aspirations and driving up educational achievement | 11 | 1 | 1 | 9 | 27 | 5 | 7 | 15 |
| | | 9% | 9% | 82% | | 19% | 26% | 56% |
| Priority Three: Working with children and families to tackle problems early | 4 | 1 | 1 | 2 | 25 | 4 | 8 | 13 |
| | | 25% | 25% | 50% | | 16% | 32% | 52% |
| Priority Four: Working together to help vulnerable and older people to stay independent | 9 | | 3 | 6 | 26 | 4 | 3 | 19 |
| | | 0% | 33% | 67% | | 15% | 12% | 73% |
| Priority Five: Working together to tackle health issues and encourage healthy lifestyles | 13 | | | 13 | 20 | 3 | 1 | 16 |
| | | 0% | 0% | 100% | | 15% | 5% | 80% |
| Priority Six: Working together to make the best use of our resources | 12 | | 5 | 7 | 14 | 2 | 1 | 11 |
| | | 0% | 42% | 58% | | 14% | 7% | 79% |
| Total for all Improvement Priorities | 58 | 2 | 12 | 44 | 135 | 20 | 20 | 95 |
| | | 3% | 21% | 76% | | 15% | 15% | 70% |
| Other Directorate Priorities / socio economic indicators | | | | | 17 | 0 | 4 | 13 |
| Total | | | | | 152 | 20 | 24 | 108 |
| | | | | | | 13% | 16% | 71% |
| No data available | | | | | 6 | | | |
| Grand Total | | | | | 158 | | | |

Part (B) – Long Term Outcome Indicators

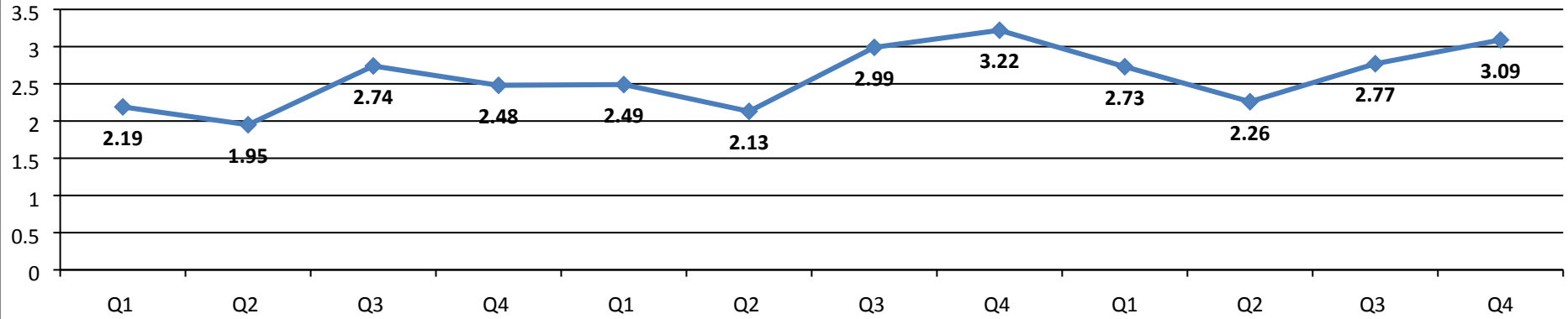
| Performance Indicators (PIs) | Annual Target 15-16 | Year End cumulative Actual & RAG vs Target | Trend vs Year End 14-15 | Wales Average 14-15 |
|---|----------------------------|--|-------------------------|---------------------|
| Gross Value Added (GVA) per head (ONS) | Increase on previous year | £16,256 (2014) | ↑ £15,593 | £16,893 |
| Gross Disposable Household Income (GDHI) per head (ONS) | Increase on previous year | £14,753 (2014) | ↓ £14,868 | £15,413 |
| Percentage of working age population that is in employment (Labour Force Survey) | Increase on previous year | 71.9% | ↑ 69.8% (Dec 2013) | 76.3% (Dec 2014) |
| Percentage of 16-24 year olds in employment (Labour Force Survey) | Increase on previous year | 50.2% (Dec 2015) | ↑ 47.9% (Dec 2014) | 59.1% (Dec 2014) |
| Number of people claiming Job Seekers Allowance | Reduction on previous year | 1.6% | ↑ 2.2% | 2.5% |
| Percentage of all children under 16 who are living in working age households with no one in employment (Annual Population Survey) | Reduction on previous year | 17.3% (2014) | ↑ 20% (2013) | 16.5% (2013) |
| Percentage of children living in households below 60% median income | Reduction on previous year | No data | 22.2% (HMRC, 2014) | Data not available |
| The Percentage of people who smoke | 20% | 18% | ↑ 20% | 21% |
| The Percentage of adults who are overweight or obese | Reduction on previous year | 59% | ↓ 58% | 58% |
| The percentage of adults who report being physically active on five or more days in the past week | Increase on previous year | n/a | 29% | 30% |
| The percentage of adults who report binge drinking on at least one day in the past week | Reduction on previous year | 25% | ↑ 27% | 25% |
| Variation in years in healthy life expectancy across our wards Male and Female | Reduction on previous year | No data | No data | No data |
| The percentage of adults reported being treated for any mental illness | Reduction on previous year | 13% | ↑ 14% | 12% |

Part (C) - Sickness Absence

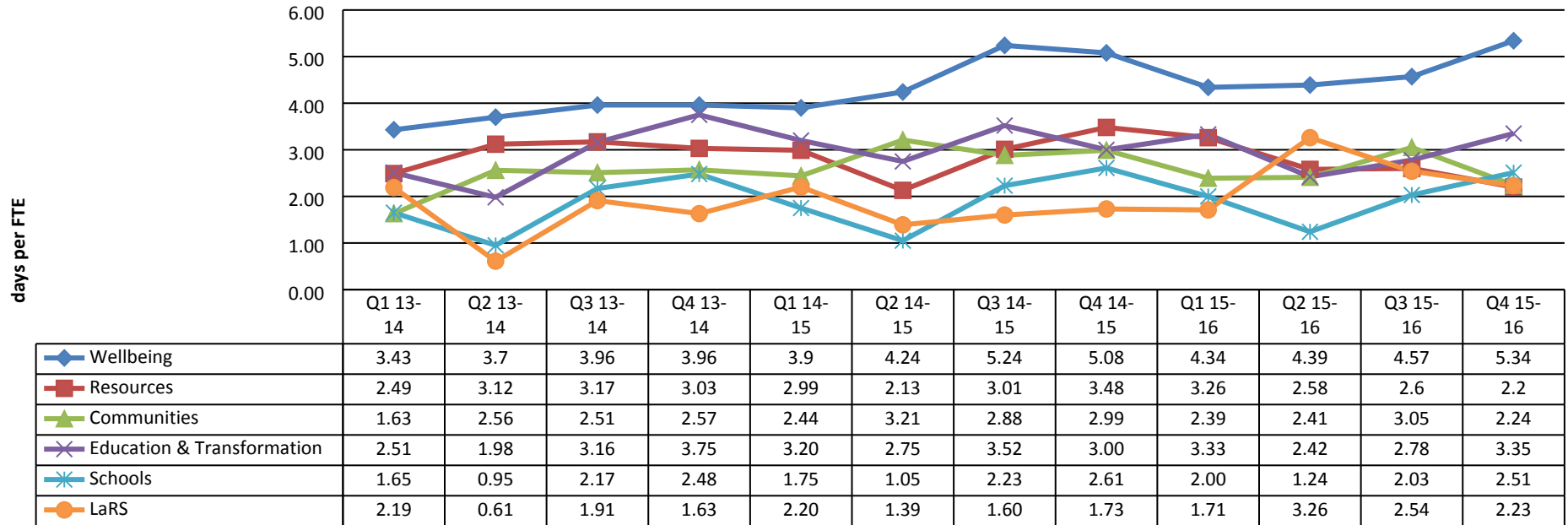
| CHROO2 (PAM)- SICKNESS – Number of working days/shift per FTE lost due to sickness absence | Annual Target 15-16 | Year End Cumulative Actual & RAG v Target | Trend v Year End 14-15 | Wales Average 2014-15 Actual (NSI/PAM only) | Rank 14 - 15 |
|--|---------------------|---|------------------------|---|--------------|
| | 8.5 | 10.85 | ↓ 10.83 | 10.15 | 9.85 |
| (CORPDRE5.3.13) Number of working days lost per FTE due to industrial injury | 0.10 | 0.23 | n/a | n/a | n/a |
| (CORPDRE 5.3.13ii) Total number of individual injury incidences | 52 | 58 | n/a | n/a | n/a |



**BCBC Quarterly Trend
2013/14-present (days lost per FTE)**



Trend of Directorate days lost per FTE by quarter



Part (D) - Budget 2015-16

| Directorate | Revised Budget 15-16 '000 (£) | Actual Outturn 15-16 '000 (£) | Actual over/(under) spend 2015-16 '000 (£) | Projected over/(under) spend Q3 15-16 '000(£) |
|----------------------------------|-------------------------------|-------------------------------|---|---|
| Education and Transformation | 105,995 | 105,667 | (328) | (100) |
| Communities | 25,228 | 25,014 | (214) | 134 |
| Legal and Regulatory Services | 6,082 | 5,685 | (397) | (369) |
| Resources | 14,572 | 14,058 | (514) | (165) |
| Social Services and Wellbeing | 61,285 | 61,099 | (186) | (102) |
| Total Directorate Budgets | 213,162 | 211,523 | (1,639) | (602) |

Part (E) – Budget reductions 2015-16

| CORP6.1.1- Value of planned budget reductions achieved Total and (percentage)£000's | Annual Target 15-16 | Year End Cumulative Actual & RAG v Target | Trend v Year End 14-15 | 2014-15 Actual (NSA/PAM only) | Wales Average 14-15 | Rank 14 – 15 |
|---|---------------------|---|------------------------|-------------------------------|---------------------|--------------|
| | 11,225 | 9,316 (83%) | 11,274 | n/a | n/a | n/a |

| Value of planned budget reductions achieved (PI) | TARGET | Achieved | Variance |
|--|---------------|--------------|--------------|
| | '000 (£) | '000 (£) | '000 (£) |
| Education and Transformation | 2,451 | 2,114 | 337 |
| Communities | 2,488 | 1,641 | 847 |
| Legal and Regulatory Services | 554 | 554 | 0 |
| Resources | 1,153 | 1,153 | 0 |
| Social Services and Wellbeing | 3,534 | 2,809 | 725 |
| Corporate | 1,045 | 1,045 | 0 |
| BCBC Total | 11,225 | 9,316 | 1,909 |

Part (F) - High risks 2015-16 (score 15 and above)

| Risk | Improvement Priority | Likelihood | Impact | Total score | Risk Owner |
|--|------------------------------|-------------------|---------------|--------------------|--|
| Making the cultural change necessary to deliver the MTFS | 6 – Best use of resources | 6 | 4 | 24 | Corporate Director Resources |
| Welfare Reform | All Priorities | 6 | 3 | 18 | Corporate Director Resources |
| The economic climate and austerity | 1 – Develop local economy | 4 | 4 | 16 | Corporate Director Communities |
| Maintaining infrastructure | 1 – Develop local economy | 4 | 4 | 16 | Corporate Director Communities |
| Supporting vulnerable children & their families | 3 – Tackle problems early | 5 | 4 | 20 | Corporate Director Social Services and Wellbeing and Corporate Director Education and Transformation |
| The impact of homelessness | 3 – Tackle problems early | 5 | 3 | 15 | Corporate Director Communities |
| Supporting vulnerable people | 4 – Helping stay independent | 5 | 4 | 20 | Corporate Director Social Services and Wellbeing |
| Healthy lifestyles | 5 – Healthy lifestyles | 4 | 4 | 16 | Corporate Director Social Services and Wellbeing |
| Disposing of waste | 6 – Best use of resources | 4 | 4 | 16 | Corporate Director Communities |
| Equal pay claims | 6 – Best use of resources | 4 | 4 | 16 | Corporate Director Resources |
| Local Government Reorganisation | All Priorities | 6 | 4 | 24 | Chief Executive |

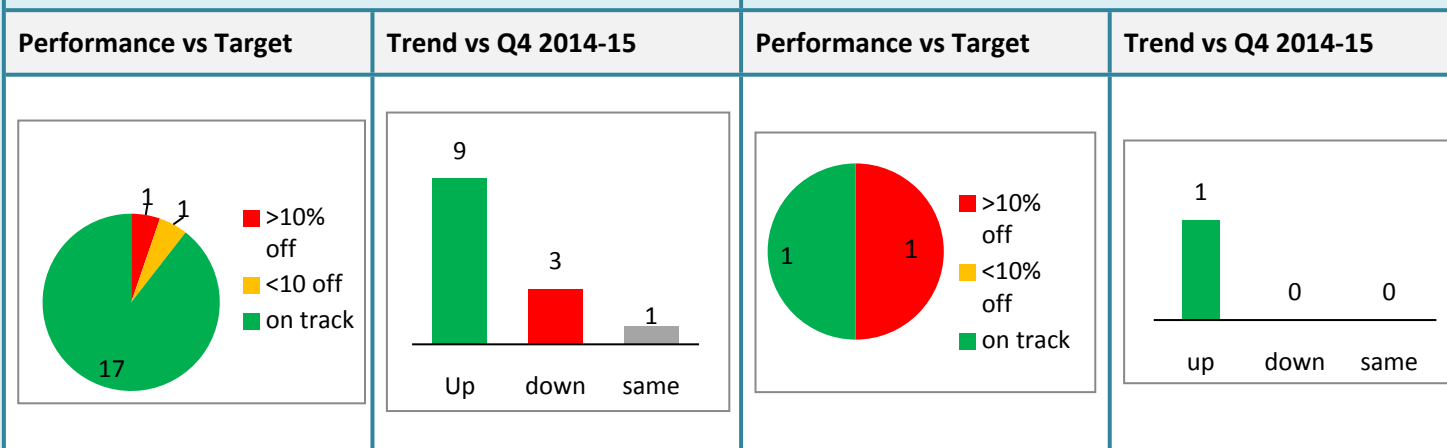
Resources Directorate Performance Year End 15 - 16

The Directorate has ended the year with a strong performance, including 90% of All Indicators being green and with all Budget Reductions met in full, including significant restructuring activity and efficiencies. There has been a marked improvement in sickness in the directorate, but this remains above target and will be an area of continued focus.

Commitments 2015-16

| RAG – current progress against commitment | Total | Red | Amber | Green |
|--|-------|-----|-------|-------|
| Year End Resources Directorate Commitments | 14 | 0 | 3 | 11 |

All Indicators



Finance

Revenue Budget

- The net revenue budget for the Directorate for 2015/16 is **£14.572m**.
- The year-end financial outturn is **£14.058m** meaning an underspend of **£514k**.

Capital Budget

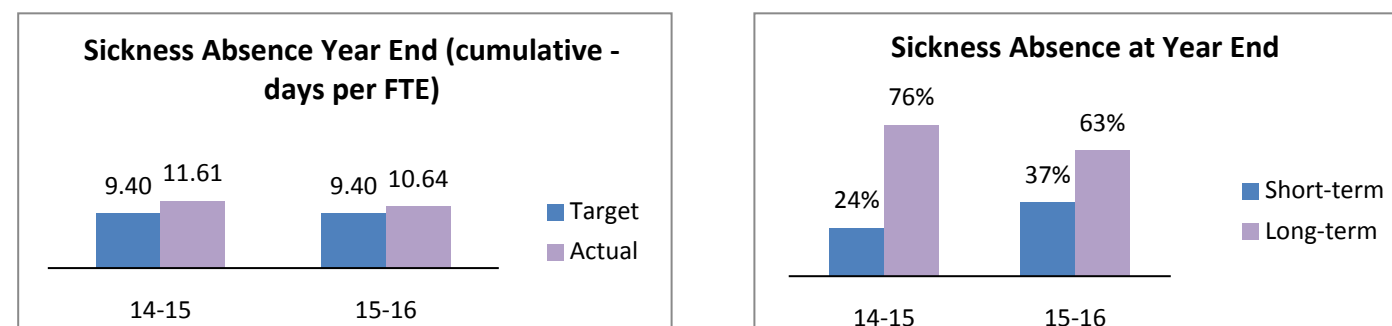
- The revised budget for the Directorate for 2015-16 is **£3.662m**
- The year end financial outturn is **£3.657m**, with an **underspend of £5k**, with slippage of £5k requested.

Budget Reductions

| Budget reductions (£000) | 2015-16 £000 | % |
|--------------------------------|--------------|------|
| Budget reduction target | 1,153 | |
| Achieved | 1,153 | 100% |
| Overall variance | 0 | 0% |

Additional financial information is provided at the end of the report.

Human Resources



(Annual Target – 9.40. Current Status - **RED**)

While the directorate missed the target set, actual performance was materially improved vs the previous year at 10.6 days per FTE vs 11.6 in 2014-15. The primary reason for improved performance is a more concentrated approach to long term sickness – a particular problem in 2014-15.

Implications of Financial Reductions on Service Performance and other Key Issues

Planned restructures in both ICT and Finance have been implemented during the year to achieve MTFs reductions both for 2015-16 and partial delivery of 2016-17 figures. As a consequence:

- ICT experienced a significant number of vacancies which could not be filled, impacting on resources available. A different approach making greater use of apprentices is being pursued
- A significant proportion of the finance team are in new roles, which will provide benefits long term, but has caused some short term delays, particularly at closing, as staff learn their new responsibilities

High Corporate Risks (risk owner)

| Risk | Improvement Priority | Likelihood | Impact | Overall |
|-----------------------------|----------------------|------------|--------|---------|
| Welfare Reform | All | 6 | 3 | 18 |
| Using resources effectively | P.6 | 6 | 4 | 24 |
| Equal Pay claims | P.6 | 4 | 4 | 16 |

KEY:

| Commitments | | Performance Indicators (RAG) | | Performance Indicators (Trend) | | Performance Indicator types |
|--------------|--|------------------------------|---|--------------------------------|---|---|
| Red | Most key milestones are missed | Red | Performance is worse than target by 10% or more | ↑ | Performance improved vs same quarter of previous year | NSI: National Strategic Indicator |
| Amber | Most key milestones are on track, but some are at risk | Amber | Performance is worse than target by under 10% | ↔ | No change in performance vs same quarter of previous year | PAM: Public Accountability Measure |
| Green | All key milestones are on track. No reason for concern | Green | Performance is equal to or better than target | ↓ | Performance declined vs same quarter of previous year | OA: Outcome Agreement |

Improvement Priority One: - Working together to develop the local economy

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15 -16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---------------------------|--|---------------------|---------------------|----------------------------------|-------------------------|--------------------------------|----------------------------|---|
| DRE.OA1.6 | Percentage of undisputed invoices paid within 30 days <i>Higher preferred</i> | 95 | 95 | 95.06 | ↓ 96.06 | n/a | n/a | The target was achieved for the financial year 2015-16 despite the finance restructure which resulted in vacant posts and new staff requiring training on invoice payments. As we shrink as an organisation, the volume of invoices isn't reducing. Therefore the PI is likely to continue to fall though this year there is no Outcome Agreement Grant so there isn't a risk of losing money from failing to achieve it. A review of future targets may be required. Target Setting: Target agreed corporate and is based on national target and actual target for 2014/15 |

Improvement Priority Two: Working together to raise ambitions and drive up educational achievement

| Code | Action Planned | Status | Comments | Next Steps(for Red and Amber only) |
|-------------------------|---|--------------|---|---|
| P2.3.10 | Deliver the agreed actions under the School Modernisation Programme, including implementation of projects within the capital programme. | AMBER | <ul style="list-style-type: none"> Remodelling work at Ysgol Bryn Castell and construction of Coety Primary School has been completed Pencoed Primary School - scheme currently in design and WG have approved the SOC Safe dry warm schools action plan for 2015/16 has been delivered Fire Safety Officer has been appointed and commenced employment in January 2016 | <ul style="list-style-type: none"> Garw Valley South - Cabinet approval received to tender the scheme and first stage of tender process has been completed Brynmenyn Primary School - contract documents are in the process of being drawn up for the appointment of a contractor to design the school Pencoed primary School - Consultation on the proposal to relocate the school has closed and progressing the purchase on no.38 |

Improvement Priority Four: Working together to help vulnerable people to stay independent

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15 -16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---------------------------|---|---------------------|---------------------|----------------------------------|-------------------------|--------------------------------|----------------------------|--|
| DRE6.12.1 | Average time (days) taken to process housing benefit (HB) and council tax benefit (CTB) new claims <i>Lower preferred</i> | 17 | 17 | 15.10 | ↑ 17.58 | n/a | n/a | Target setting: National Target |
| DRE6.12.2 | Average time (days) taken to process housing benefit (HB) and council tax benefit (CTB) change events <i>Lower preferred</i> | 10 | 10 | 5.38 | ↑ 6.11 | n/a | n/a | Target setting: Target based on previous year's target and actual value |

Improvement Priority Five - Working together to tackle health issues and encourage healthy lifestyles

| Code | Action Planned | Status | Comments | Next Steps(for Red and Amber only) |
|-------------------------|--|--------|---|------------------------------------|
| P5.3.13 | Identify and promote new initiatives that support the health and wellbeing of employees (RE) | GREEN | Implementation and related publicity complete. Initiatives covered have included the ongoing Care First service, advice on range of health and wellbeing issues, the "Winners Do Quit" anti-smoking campaign, taster sessions for new leisure activities, launch of a LGBT support group, Love2Walk staff walking challenge and the Cycle To Work scheme. Communications have been conveyed to staff via Bridgenders emails, newsletter, Message of the Day and the staff classifieds announcements. Health and wellbeing staff intranet page has been established. | |

Improvement Priority Six - Working together to make the best of our resources

| Code | Action Planned | Status | Comments | Next Steps(for Red and Amber only) |
|-------------------------|---|--------|--|--|
| P6.1.1 | Implement the planned savings identified in the 2015-16 budget | GREEN | All resources directorate budget reductions fully achieved by year end | |
| P6.2.2 | Deliver the IP6 projects contained within the Bridgend Change Programme | GREEN | The milestones for projects and programmes under Priority 6 "Making Best Use of Resources" are on track, and progress has been reported back to PMB | |
| P6.4.3 | Improve efficiency by rationalising and maximising the use of ICT systems and software applications | GREEN | ICT systems and software applications have been rationalised and maximised. The financial system has been brought in-house as of 29th February 2016 | |
| P6.4.8 | Deliver the agreed actions of the Parc Afon Ewenny scheme | AMBER | Option appraisal being undertaken to review rationalising and retaining reduced depot on site. Once rationalisation has been delivered, staff will be relocated, if necessary. Site preparatory works commenced in order to produce technical development pack for marketing and achieving the capital receipts. | Once options appraisal completed, consider viability of rationalising and retaining reduced depot on site and marketing remainder of site to deliver Local Development Plan requirements and achieve capital receipts. |
| P6.4.10 | Further rationalise the Council's operational estate to reduce accommodation costs | GREEN | Sunnyside and Glanogwr offices have been sold. | |
| P6.4.11 | Pursue our asset disposal strategy with the aim of securing capital receipts of at least £6 million | AMBER | £5.9million capital receipts achieved | The actual capital receipts are only 1.6% below the target capital receipts. It is not possible to predict to this level of accuracy, given the different issues and constraints involved in disposal of property. |

| Code | Action Planned | Status | Comments | Next Steps(for Red and Amber only) |
|-------------------------|--|--------|--|------------------------------------|
| P6.4.12 | Introduce a compliance tracking system to support more effective facilities management of our buildings | GREEN | Property compliance monitoring system introduced. | |
| P6.5.9 | Extend electronic learning opportunities for staff to develop the skills and flexibility of the Council's work force | GREEN | The updated Learning and Development website has been launched and all employees are able to self-enrol onto a range of e-learning modules. A review of the e-learning modules has been completed. | |
| P6.6.4 | Develop proposals to provide citizens with more self-service options for accessing Council services | GREEN | Programme has progressed to procurement phase with tender issued. On track for first services go live in the second half of 2016-17 | |
| P6.6.5 | Develop effective mechanisms to improve our understanding of citizens' views | GREEN | Significant boost in panel membership overall and for each of the target groups compared with the previous year. During this quarter we have also held the waste consultation which has been the biggest consultation the council has done to date. The cross promotion of signing up to the panel within the waste consultation has contributed to gaining extra panel members. Overall increase +38% for the year. | |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15-16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|----------------------------|--|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|---|
| DRE6.1.1vi | Related reductions delivered following staff restructures <i>Higher preferred</i> | 100k | 100k | 100k | n/a | | | Target setting: Target set to meet MTFS savings required |
| DRE6.2.2 | Percentage of feeder invoices over all invoices processed <i>Higher preferred</i> | 55 | 60 | 61.41 | ↑ 55.28 | n/a | n/a | Target setting: Based on 2014/15 actual. Agreed corporately |
| DRE6.2.6 | The percentage increase of documents managed through EDRM (Electronic Document Record Management) <i>Higher preferred</i> | n/a | 10 | 31.86 | n/a | n/a | n/a | Target setting: 10% increase from 1,247,224 documents managed through EDRM in 2013-14. |
| DRE6.4.1.2 | Total useable office accommodation per employee in our core offices linked to the maximising space project (m ²) <i>Lower preferred</i> | 11.7m ² | 10m ² | 8.79m ² | ↑ 11.4m ² | n/a | n/a | Target setting: Based on 2014/15 actual and MTFS savings. |
| DRE6.4.6 | Ratio of employees to desk space <i>Higher preferred</i> | 3.2 | 6:5 | 6:5 | ↑ 1:1 | n/a | n/a | Target setting: Changed to 6:5 (staff to desk ratio) as the original target of 3:2 was based on staff relocating from Raven's Court which was always scheduled from April 2016. |
| DRE6.4.10i | Delivery of annual savings(from assets released) <i>Higher preferred</i> | £92k | £400k | £442k | ↑ £92k | n/a | n/a | Target setting: Based on 2014/15 actual and MTFS savings identified for current year. |
| DRE6.4.11i | Capital receipts generated <i>Higher preferred</i> | £3.9m | £6m | £5.9m | ↑ £4.2m | n/a | n/a | The actual capital receipts are only 1.6% below the target capital receipts. It is not possible to predict to this level of accuracy, given the different issues and constraints involved in disposal of property. Target setting: Based on 2014/15 actual and MTFS targets for the current year. |
| DRE6.6.4i | Percentage of employees completing e-learning modules <i>Higher preferred</i> | n/a | 24 | 43.07 | n/a | n/a | n/a | Target setting: Target based on previous actual values. Departmental commitment in developing e-learning modules and target agreed corporately. |

| | | | | | | | | |
|--|---|---------|--------|---------|-----------|-----|-----|--|
| DRE6.7.6 | Percentage improvement in the range of responses to Citizens Panel surveys. Key areas are: Those responding electronically, Welsh speakers, younger people (16-34), disabled groups and underrepresented wards <i>Higher preferred</i> | n/a | 5 | 38 | n/a | n/a | n/a | Target setting: New target for 2015-16. Target based on the increase over the previous year whilst taking into account the need to improve representation. |
| DRE6.9.2 | Value of budget reduction proposals for ICT systems achieved <i>Higher preferred</i> | £50,000 | 18,000 | £18,000 | ↓ £50,000 | n/a | n/a | Value of budget reduction proposals for ICT systems achieved. Target set lower due to better settlement. Target setting: Target was reduced to £18,000 because of the better settlement. |
| DRE6.11.1 | Percentage change in carbon dioxide emissions in the non domestic public building stock <i>Higher preferred</i> | 3 | 3 | 18.86 | ↑ 11 | n/a | n/a | As the actual figure is not available until September, it has been decided to report on the previous years figures going forward. The wording for the PI is to be changed for next year to reflect the future reporting. Actual t/CO2 for 2015-16 is 13,487 which is a 18.86% difference from the base year of 16,623 t/CO2. Target setting: Target does not include streetlighting from 2014-15. Target set is a national target. |
| DREcam037 PAM | Average Display Energy Certificate (DEC) energy performance operational rating for building over 1000m2 <i>Lower preferred</i> | 85.72 | 85.72 | 84.21 | ↔ 84.21 | n/a | n/a | Target setting: The target is to achieve a lower DEC energy operating rating average for sites covering building over 1000m2, to demonstrate that the authority is improving the energy efficiency of its building stock. |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15-16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--|--|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|----------|
| CHR002iii PAM | Number of working days per full time equivalent lost due to sickness absence (Resources) <i>Lower preferred</i> | 9.40 | 9.40 | 10.64 | ↑ 11.61 | 9.85 | 17 | |

| PI Ref No | PI Description | Annual target 15-16 £'000 | Performance as at Year End | | | | | | Comments | |
|----------------------------|---|------------------------------|----------------------------|---|-------|---|-------|-------|----------|--|
| | | | Red | | Amber | | Green | | | |
| | | | £'000 | % | £'000 | % | £'000 | % | | |
| DRE6.1.1ii | Value of planned budget reductions achieved (Resources) | 1,153 | | | | | | 1,153 | 100 | |

Other priority/business as usual

| Code | Action Planned | Status | Comments | Next Steps(for Red and Amber only) |
|----------------------|---|--------------|---|-------------------------------------|
| DLR1 | To develop a Directorate health and Safety Risk Register | GREEN | Identification of top hazards within directorate to confirm management arrangements and control measures are adequate. | |
| DLR2 | Develop a Directorate communication and consultation plan | GREEN | Now a clear structure for Health and Safety communication within the directorate. Linked to the directorate risk register. Discussed in DMT Management team meetings, committees and toolbox talks. | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End 15 -16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|-------------------------|--|---------------------|---------------------|----------------------------------|-------------------------|--------------------------------|----------------------------|--|
| | Number of working days lost per full time equivalent due to industrial injury <i>Lower preferred</i> | n/a | 0.06 | 0.0 | n/a | n/a | n/a | |
| DRE 2.1 | Increase in non-operational income (relates only to new income generated) (£) <i>Higher preferred</i> | 25000 | 20000 | 20000 | ↓ 25000 | n/a | n/a | Target based on actual 2014/15 and the AMP. The £20k relates only to new income generated. |

Additional Financial Information - Main Revenue Budget Variances

The net budget for the Directorate for 2015-16 was £14.572 million and the actual outturn was £14.058 million resulting in an under spend of £514,000. There was £338,000 drawn down from earmarked reserves during the year for specific pressures, including £143,000 for demolition costs, £135,000 feasibility funding for capital schemes and £44,000 for schemes funded from the Change Fund.

The most significant variances are detailed below:

| RESOURCES DIRECTORATE | Net Budget £'000 | Actual Outturn £'000 | Variance Over/(under) budget £'000 | % Variance |
|-----------------------|---------------------|-------------------------|---------------------------------------|------------|
| Property (Estates) | 1,776 | 1,722 | (54) | -3.0% |
| HR | 3,932 | 3,899 | (33) | -0.8% |
| ICT | 4,068 | 3,668 | (400) | -9.8% |
| Finance | 1,659 | 1,564 | (95) | -5.7% |
| Housing Benefit | 478 | 746 | 268 | 56.1% |
| Audit Fees | 887 | 756 | (131) | -14.8% |

Property Services

- An under spend on Facilities Management of £280,000 has arisen primarily as a result of reduced business rates and running costs on Council premises. This has been partly offset by an over spend relating to voids on non-operational assets (£100,000), and additional costs incurred on the 21st Century Schools programme that were not eligible to be funded from capital (£90,000).

Human Resources

- The net under spend of £33,000 has arisen mainly as a result of an under spend on Disclosure and Barring Service (DBS) checks (£65,000), offset by additional costs associated with staff counselling and occupational health (£30,000).

ICT

- The net under spend of £400,000 has arisen as a result of under spends on software and from staffing vacancies in anticipation of future years budget reductions. This under spend was intended to finance the revenue costs associated with implementing agile working and the move from Raven's Court. However, due to the delay in this project, this funding remains unspent in 2015-16 and an earmarked reserve has been established to meet the costs in 2016-17.

Finance

- The net under spend of £95,000 in relation to accountancy services arose following restructuring of the service during 2015 to meet budget reductions for 2015-16 and 2016-17 and is a combination of reduced staffing costs and additional income generation from agreed charges for services.

Housing Benefit

- The net over spend of £268,000 comprises an over spend of £522,000 on payments of housing benefit, partly offset by an under spend of £254,000 on the administration of housing benefit claims. The over spend has partly arisen due to an increase in bad debt provision following work undertaken by the Inland Revenue to identify people who are working and claiming housing benefit, and the subsequent increase in the level of debtors. The under spend is mainly due to the transfer of fraud activity to DWP and savings generated as a consequence.

Audit Fees and Bank Charges

- The under spend of £131,000 comprises an under spend of £55,000 on internal audit fees, as a result of staffing vacancies, and £85,000 relating to reduced external audit fees. This is partly offset by lower income from the recharge of bank charges, in particular CHAPS fees.

Additional Financial Information - Main Capital Budget Variances

The current year end spend for the Directorate was £3.662m indicating a projected underspend of £5k, with slippage requested of £5k. The most significant variances are detailed below:

| Main Scheme | Total Expd to Date 2015-16 £'000 | Projected spend 2015-16 £,000 | Over / (Under) Spend £'000 | Slippage Requested 2015-16 £'000 | Impact on BCBC Resources £'000 | Comments |
|---|----------------------------------|-------------------------------|----------------------------|----------------------------------|--------------------------------|------------------------------------|
| Fire Precautions | 182 | 104 | -78 | 78 | 0 | |
| Var Playgrounds DDA | - | 95 | 95 | -95 | 0 | Funding brought forward from 16-17 |
| Maximising Space and Technology / BCP | 418 | 496 | 78 | -78 | 0 | Funding brought forward from 16-17 |
| Relocation of Depot Facilities | 29 | 0 | -29 | 29 | 0 | |
| Agile working (rationalisation of Admin Estate) | - | 16 | 16 | -16 | 0 | Funding brought forward from 16-17 |
| Community Projects | 148 | 57 | -91 | 91 | 0 | |

Additional Sickness Information Service Area

| | Average FTE 31.03.2016 | 2015/16 | | | | | 2014/15 |
|-----------------------------------|---------------------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | | QTR1 | QTR2 | QTR 3 | QTR 4 | QTR 4 Cum | QTR 4 Cum |
| | | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE |
| HR and Organisational Development | 119.92 | 3.65 | 2.90 | 2.05 | 2.74 | 11.34 | 17.13 |
| Finance & ICT | 178.94 | 2.62 | 2.20 | 2.84 | 1.76 | 9.42 | 9.10 |
| Property | 63.79 | 3.77 | 2.94 | 2.89 | 4.58 | 14.18 | 11.16 |
| Office of the Chief Executive | 6.00 | 3.34 | 0.33 | 0.17 | 0 | 3.84 | 20.43 |
| RESOURCES TOTALS | 425.65 | 3.26 | 2.58 | 2.60 | 2.20 | 10.64 | 11.61 |

Additional Sickness Information by Absence Reason

| Absence Reason | % of total days lost |
|---|----------------------|
| Stress / Anxiety / Depression / Mental Health | 35.56% |
| MSD including Back & Neck | 13.71% |
| Stomach / Liver / Kidney / Digestion | 12.03% |
| Tests / Treatment / Operation | 9.47% |
| Infections | 8.77% |
| Neurological | 4.91% |
| Chest & Respiratory | 2.95% |
| Heart / Blood Pressure / Circulation | 2.93% |
| Return to Work Form Not Received | 2.67% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 2.27% |
| Cancer | 1.86% |
| Injury | 1.66% |
| Genitourinary / Gynaecological / Pregnancy | 1.21% |
| Grand Total | 100% |

Legal and Regulatory Services Directorate Performance Year End 15-16 :

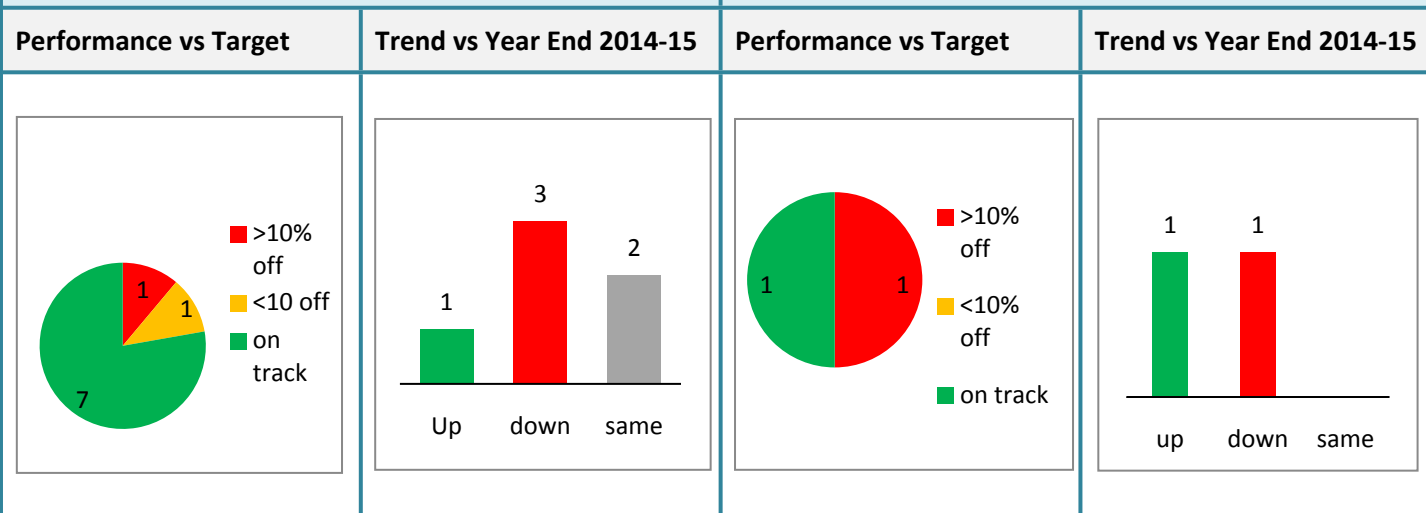
The budget has been bought in underspent due to preparations for the current budget year savings. Performance has been maintained to plan although in Legal this is due to central funding to support the priority areas and whilst there has been a slight dip in performance of the joint regulatory team, this is understandable given the period of filling the new structure. Future budget reductions are problematic particularly in regulatory due to the joint arrangements and legal which as stated is already supported from the centre.

The Registrars service continues to thrive and has provided additional income towards the budget reductions. Development of the new structure in procurement is ongoing and training for all Directorates on the use and maintenance of the contracts register has been arranged. Support has been maintained for Member services although Member approval is required for future budget reductions.

Commitments 2015-16

| RAG – current progress against commitment | Total | Red | Amber | Green |
|---|-------|-----|-------|-------|
| Year End LaRS Directorate Commitments | 9 | 0 | 1 | 8 |

All Indicators



Finance

Revenue Budget

- The net revenue budget for the Directorate for 2015/16 is **£6.082m**
- The year end financial outturn is **£5.685m**, meaning an **underspend of £397k**.

Capital Budget

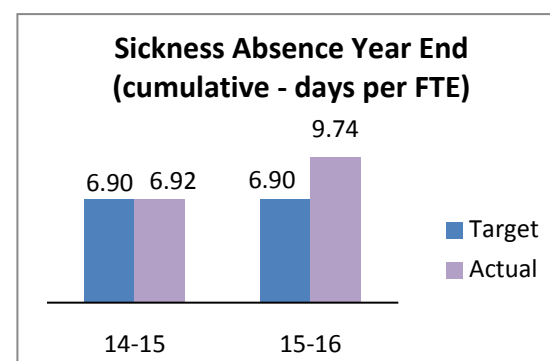
- There is no capital budget.

Budget Reductions

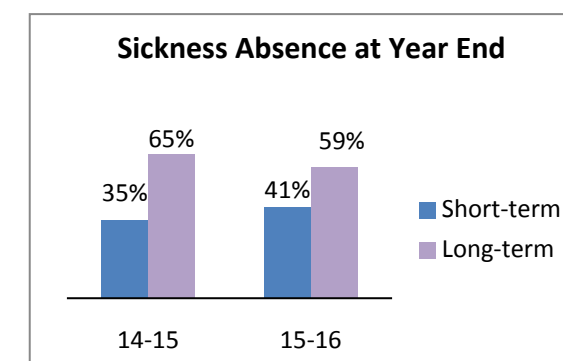
| Budget Reductions (£000) | 2015-16 | % |
|---------------------------------|---------|------|
| Budget Reductions Target | 554 | |
| Achieved | 554 | 100% |
| Overall variance | 0 | 0% |

Additional financial information is provided at the end of the report.

Human Resources



(Annual Target – 6.9. Current Status - **RED**)



Absence is a cause for a concern in area that historically has been on target. Staff hours and additional pressure to undertake additional duties after the latest round of staff reductions is having an impact on stress levels in particular.

Implications of Financial Reductions on Service Performance and other Key Issues

High Corporate Risks (risk owner)

A lack of clarity over the future of Local Authorities is impacting on the ability to collaborate. It should be noted that formal collaboration can produce budget reduction problems when these are different to those anticipated when the collaboration is agreed.

| Risk | Improvement Priority | Likelihood | Impact | Overall |
|-----------------------------|----------------------|------------|--------|---------|
| Collaboration with partners | 6 | 3 | 4 | 12 |

Key

| Commitments | | Performance Indicators (RAG) | | Performance Indicators (Trend) | | Performance Indicator types |
|--------------|--|------------------------------|---|--------------------------------|---|---|
| Red | Most key milestones are missed | Red | Performance is worse than target by 10% or more | ↑ | Performance improved vs same quarter of previous year | NSI: National Strategic Indicator |
| Amber | Most key milestones are on track, but some are at risk | Amber | Performance is worse than target by under 10% | ↔ | No change in performance vs same quarter of previous year | PAM: Public Accountability Measure |
| Green | All key milestones are on track. No reason for concern | Green | Performance is equal to or better than target | ↓ | Performance declined vs same quarter of previous year | OA: Outcome Agreement |

Improvement Priority Five - Working together to tackle health issues and encourage healthy lifestyles

| Code | Action Required | Status | Comments | Next Steps(For Red and Amber only) |
|------------------------|---|--------------|---|-------------------------------------|
| P5.2.4 | Promote the Healthy Options Scheme with businesses across the county borough to offer customers healthy options on a food business' menu | GREEN | Healthy options scheme has been adopted where possible in line with the business plan and will now be embedded into the routine inspection work where appropriate. | |
| P5.2.5 | Continue to work with partners towards joint inspections of premises selling age restricted products such as tobacco and alcohol which will help tackle nuisance behaviour related to alcohol consumption | GREEN | Where appropriate and evidence available inspection or joint enforcement/advice was completed with partners. Future work will now be built into the new Shared Regulatory Services business plan and routine inspection work. | |
| P5.2.6 | Develop and provide advice and education to businesses on matters such as the sale of age restricted products and food hygiene standards | GREEN | On-going as part of routine inspection work and monitored through key performance indicators for the service | |
| P5.3.8 | Support partners in the LSB to further develop target projects to encourage better health with a focus on the Llynfi Valley | GREEN | LV 20 continues to progress. Additional funding has been secured for the physical wellbeing, sexual health and dementia work streams. Currently exploring amalgamating the Weight and Nutrition, the Smoking Cessation and the Sexual Health work streams to make a single 'Healthy Lifestyles' work stream. Community engagement continues to be a key theme throughout the project. | |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15-16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------|---|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|--|
| PPN001i | Percentage of high risk businesses that were liable to a programmed inspection or alternative inspection activity that were inspected/subject to alternative enforcement activity for Trading standards <i>Higher preferred</i> | 100 | 100 | 100 | ↔ 100 | n/a | n/a | Target Setting: Target maintained to previous years level |
| PPN001ii | Percentage of high risk businesses that were liable to a programmed inspection or alternative inspection activity that were inspected/subject to alternative enforcement activity for: (ii) Food Hygiene <i>Higher preferred</i> | 100 | 100 | 90 | ↓ 100 | n/a | n/a | The newly formed Commercial Services team, which is primarily responsible for the Food Hygiene regime, has had a significant number of vacancies during 2015/16. At meetings of the Joint Committee, the Head of Service has indicated that performance would improve through the year as officers were recruited to fill those vacancies, but the 100% target would not be met. The target number of high-risk premises liable for the year was 466; officers visited 421 of those premises. In the period |

| | | | | | | | | |
|----------------------------|---|-----|-----|-----|-------|-------|-----|---|
| | | | | | | | | 2015/16, all the Category A and B premises visits were completed to schedule. Resources, limited during this period, were prioritised to ensure these premises were visited as required. The figures set out above suggest that the new operating model, when fully resourced, is capable of delivering the required performance and has delivered the savings sought by the Council. Target Setting: Target maintained to previous years level |
| PPN001iii | Percentage of high risk businesses that were liable to a programmed inspection or alternative inspection activity that were inspected/subject to alternative enforcement activity for: (iii) Animal Health <i>Higher preferred</i> | 100 | 100 | 100 | ↔ 100 | n/a | n/a | Target Setting: Target maintained to previous years level |
| PPN008ii | Percentage of new businesses identified during the year which were subject to an inspection or submitted a self assessment questionnaire for: (ii) Food Hygiene <i>Higher preferred</i> | 80 | 80 | 89 | ↓ 90 | n/a | n/a | Slight impact due to the development of the shared regulatory services and associated restructure. Target Setting: Target reduced in line with previous performance outcome |
| PPN009 PAM | Percentage of food establishments which are broadly compliant with food hygiene standards <i>Higher preferred</i> | 75 | 85 | 95 | ↑ 93 | 94.19 | 15 | Target Setting: Target reduced in line with previous performance outcome |
| DLR5.2.4.1 | The number of businesses supporting the Healthy Options Award <i>Higher preferred</i> | n/a | 3 | 5 | n/a | n/a | n/a | Target Setting: Creation of shared regulatory service and transfer of staff is having an effect on the development of the Awards but work with businesses is ongoing to support the adoption of the Award where appropriate. |

Improvement Priority Six: working together to make the best use of our resources

| Code | Action Required | Status | Comments | Next Steps(for Red and Amber only) |
|------------------------|--|--------|---|--|
| P6.1.1 | Implement the planned savings identified in the 2015-16 budget (LR) | GREEN | The required cuts were made prior to the commencement of the financial year | |
| P6.2.2 | Deliver the projects contained within the Bridgend Change Programme | GREEN | The OAP's services restructure has aligned procurement and legal to ensure a comprehensive support service to the corporate projects. The restructure of the procurement team has been delayed due to the closure of the County Borough Supplies and the subsequent impact on staff gradings. Legal is seeking to recruit a temporary contracts/procurement lawyer to ensure capacity for the corporate projects and in the meantime has an agent in place. | |
| P6.3.7 | Implement the contract management and e-procurement strategy to improve efficiency | AMBER | Project management Board has approved an updated PID for the project. there has been delay due to the need to restructure the project in line with Welsh Government policy on the use of national framework agreements and the closure of County Borough Supplies. The latter has impacted the procurement team both in workload and gradings. | The restructure of the procurement team (now managed within Legal) and the implementation of the corporate contracts register are the most important steps. The implementation of electronic tendering and greater use of the purchasing cards will make the commissioning of goods and services across the Authority more efficient and will link with the wider corporate digital project. |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End cumulative Actual & RAG vs Target | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|-----------------------------|--|---------------------|---------------------|--|-------------------------------|--------------------------------|----------------------------|----------|
| CHR002v PAM | Number of working days per full time equivalent lost due to sickness absence <i>Lower preferred</i> | 6.90 | 6.90 | 9.74 | 10.83 (BCBC) ↓ 6.92 (LARS) | 9.85 | 17 | |

| PI Ref No | PI Description | Annual target 15-16 £'000 | Performance as at year end | | | | | | Comments |
|---------------------------|---|------------------------------|----------------------------|---|-------|---|-------|-----|----------|
| | | | Red | | Amber | | Green | | |
| | | | £'000 | % | £'000 | % | £'000 | % | |
| DLR6.1.1v | Value of planned budget reductions achieved | 554 | 0 | 0 | 0 | 0 | 554 | 100 | |

Other priority/business as usual

| Code | Action Required | Status | Comments | Next Steps(for Red and Amber only) |
|----------------------|---|--------------|------------------------------|-------------------------------------|
| DLR1 | To develop a Directorate health and Safety Risk Register | GREEN | H&S risk register completed. | |
| DLR2 | Develop a Directorate communication and consultation plan | GREEN | Plan has been developed. | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Actual 14-15 & RAG | Annual 15-16 target | Year End cumulative Actual & RAG vs Target | Trend vs Q3 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------|--|---------------------|--------------------|---------------------|--|--------------------------|--------------------------------|----------------------------|----------|
| DLR5.6.8 | Number of working days lost per full time equivalent due to industrial injury (LaRS) <i>Lower preferred</i> | n/a | n/a | 0.0 | 0.0 | n/a | n/a | n/a | |

Additional Financial Information - Main Revenue Budget Variance

The net budget for the Directorate for 2015-16 was £6.082 million and the actual outturn was £5.685 million resulting in an under spend of £397,000. There was £359,000 drawn down from earmarked reserves during the year for specific pressures, including £295,000 for redundancy costs on establishment of the Shared Regulatory Service and smaller schemes funded from the Change Fund.

The most significant variances are detailed below:

| LEGAL AND REGULATORY SERVICES DIRECTORATE | Net Budget | Actual Outturn | Variance Over/(under) budget | % Variance |
|--|-------------------|-----------------------|-------------------------------------|-------------------|
| | £'000 | £'000 | £'000 | |
| Legal Services | 2,253 | 2,010 | (243) | -10.8% |
| Democratic Services | 1,561 | 1,521 | (40) | -2.6% |
| Procurement | 284 | 219 | (65) | -22.9% |
| Partnerships | 353 | 314 | (39) | -11.0% |

Legal Services

- The under spend on Legal Services is mainly a combination of additional income from the Registrar's service of £60,000, staffing vacancies and recovery of fees for legal services.

Democratic Services

- The under spend is a combination of small under spends on member and officer salaries, resources and training.

Procurement

- The under spend relates to vacancy management in preparation for future MTFS budget reductions. These under spends will not reoccur in 2016-17.

Partnerships

- The under spend on partnerships and performance management relates to vacancy management in preparation for future MTFS budget reductions. These under spends will not reoccur in 2016-17.

Additional Sickness Information by Service Area

| | Average FTE 31.03.16 | 2015/16 | | | | | 2014/15 |
|---|-------------------------|-----------------|-----------------|-----------------|-----------------|--------------|--------------|
| | | QTR1 | QTR2 | QTR 3 | QTR 4 | QTR 4 Cum | QTR 4 Cum |
| | | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE |
| Business Support | 7.00 | 0.80 | 1.43 | 0 | 8.57 | 10.80 | 3.83 |
| Legal Services | 23.00 | 1.30 | 2.43 | 1.79 | 0.35 | 5.87 | 3.74 |
| Partnerships | 10.60 | 0.00 | 1.41 | 1.44 | 3.40 | 6.25 | 2.89 |
| Procurement & County Supplies | 26.26 | 4.01 | 6.87 | 5.07 | 2.96 | 18.91 | 10.44 |
| Public Protection | 0.00 | 1.29 | n/a | n/a | N/A | 1.29 | 7.39 |
| Register Office | 4.35 | 1.23 | 0.00 | 0.00 | 0.56 | 1.79 | 0.43 |
| Scrutiny & Democratic Services | 12.61 | 0.56 | 0.63 | 1.43 | 1.07 | 3.69 | 9.35 |
| CMB Support | 2.86 | 0.00 | 0.00 | 0.00 | 0.35 | 0.35 | n/a |
| LEGAL & REG TOTALS | 89.23 | 1.71 | 3.26 | 2.54 | 2.23 | 9.74 | 6.92 |

Additional Sickness Information by Absence Reason

| Absence Reason | % of Total FTE days Lost |
|---|--------------------------|
| Infections | 24.80% |
| Stomach / Liver / Kidney / Digestion | 19.74% |
| Stress / Anxiety / Depression / Mental Health | 19.29% |
| MSD including Back & Neck | 16.98% |
| Tests / Treatment / Operation | 9.05% |
| Return to Work Form Not Received | 3.20% |
| Chest & Respiratory | 2.73% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 2.21% |
| Neurological | 0.94% |
| Injury | 0.42% |
| Genitourinary / Gynaecological / Pregnancy | 0.42% |
| Heart / Blood Pressure / Circulation | 0.21% |
| Total | 100.00% |

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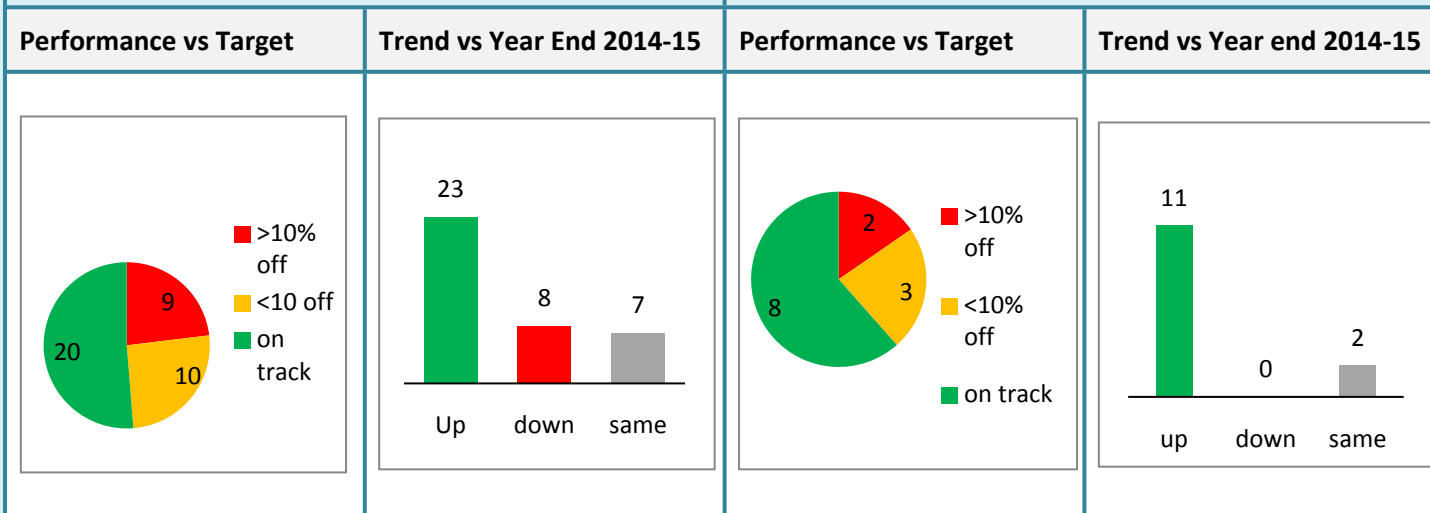
Children's Directorate Performance Year End 2015-16

- Education data is based on the academic year 14/15 and attainment reports on outcomes of teacher assessment, national test and external examinations taken a year ago, and have been explored in previous CPA meetings. Pupils have just undertaken teacher assessment and national tests and external examinations are underway for academic year 15/16. We will have validated data to report on results of these in CPA quarter 3.
- GCSE early entry and secure pupil tracking suggests that we are on target to reach targets for 15/16 at KS3 and KS4.
- The attainment of e-FSM (eligible for free school meals) pupils in Bridgend at the L2+ indicator is ranked third in Wales - a result of implementation of the vulnerable groups strategy and impact of the early help offer meeting the needs of vulnerable learners at an earlier stage, preventing exclusion and improving pupil wellbeing.

Commitments 2015-16

| RAG – current progress against commitment | Total | Red | Amber | Green |
|---|-------|-----|-------|-------|
| Yr End 2015-16 Children's Directorate Commitments | 19 | 2 | 2 | 15 |

All Indicators



Finance

Revenue Budget

- The revised net revenue budget for the Directorate for 2015/16 is **£105.995m**
- The year-end financial outturn is **£105.667m** meaning an **underspend of £328k**

Capital Budget

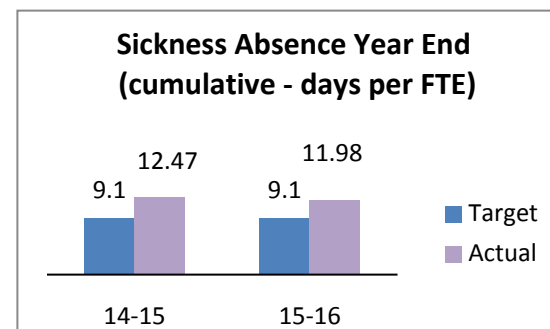
- The revised capital budget for the Directorate for 2015-16 is **£8.966m**.
- The year end financial outturn is **£8.911m**, with an underspend of **£55k** and slippage of **£55k** into 2016-17.

Budget Reductions

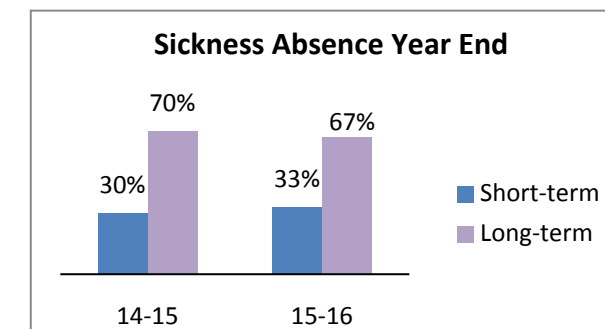
| Budget Reduction (£000) | 2015-16 | % |
|--------------------------------|---------|------|
| Budget Reduction Target | 2,451 | 100% |
| Achieved | 2114 | 86% |
| Overall Variance | 337 | 14% |

Additional financial information is provided at the end of the report.

Human Resources



(Annual Target – 9.10. Current Status - **RED**)



We continue to have a strong focus on sickness absence. Number of days FTE for 15/16 was less than 14/15, and also the number of long term absences in 15/16 were less than 14/15 as we have worked hard to get staff back to work following long term illness including cancers and stress and anxiety.

Implications of Financial Reductions on Service Performance and other Key Issues

High Corporate Risks (risk owner)

| | | | | | | |
|--|--|---|-----------------------------|-------------------|---------------|----------------|
| <ul style="list-style-type: none"> The reductions in the budget for 15/16 meant that some transformation projects did not progress at the pace that we would have liked. The schools strategic review we hope will progress according to the timeline approved by the board. All teams are working smarter and more efficiently to meet the savings but in some areas holding vacant posts has caused capacity issues. | | Residual Risk | Improvement Priority | Likelihood | Impact | Overall |
| | | School Modernisation | 2 – Educational Achievement | 4 | 4 | 16 |
| | | Supporting vulnerable children & their families | 3 – Tackle problems early | 4 | 4 | 16 |
| | | Educational attainment | 2 – Educational Achievement | 3 | 4 | 12 |

Key

| Commitments | | Performance Indicators (RAG) | | Performance Indicators (Trend) | | Performance Indicator types |
|--------------|--|------------------------------|---|--------------------------------|---|---|
| Red | Most key milestones are missed | Red | Performance is worse than target by 10% or more | ↑ | Performance improved vs same quarter of previous year | NSI: National Strategic Indicator |
| Amber | Most key milestones are on track, but some are at risk | Amber | Performance is worse than target by under 10% | ↔ | No change in performance vs same quarter of previous year | PAM: Public Accountability Measure |
| Green | All key milestones are on track. No reason for concern | Green | Performance is equal to or better than target | ↓ | Performance declined vs same quarter of previous year | OA: Outcome Agreement |

Improvement Priority Two: Working together to raise ambitions and drive up educational achievement

| Code | Action Planned | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|---|--------------|--|-------------------------------------|
| P2.1.1 | Use data to ensure we better understand the performance of individuals and groups of learners and offer extra help at an earlier stage in their education | GREEN | Following training and with ongoing support, Inclusion Service staff have improved their understanding and skills in relation to interrogating and analysing data. This is being used to inform intervention strategies and monitoring for both individuals and groups of pupils. The Directorate has taken successful steps to further develop the self-evaluation of our education services post Estyn monitoring and these have been discussed with Estyn's Local Authority Link Inspectors. Whilst developments mean that it may be unrealistic to have an overarching ICT strategy for schools, work continues to support schools to develop their individual ICT plans, which will take account of the Digital Competency Framework being developed and launched by Welsh Government. | |
| P2.1.2 | support schools to meet pupils' additional learning needs and the needs of more-able pupils who need extra support to reach their full potential | GREEN | The revised PRIP (Planning and Review in Partnership) process has been implemented with the new PRIP form and its integral data being used as the basis of the PRIP meetings with all schools. ALN (Additional Learning Needs) provision mapping, which is used to monitor the resources and interventions for ALN (including MAT - More Able and Talented) pupils has been further refined as part of this work. This is supporting schools in measuring the effectiveness of individual and group performance for ALN pupils. All schools have received provision mapping update training. Currently in most schools, the Head Teacher is the designated LAC teacher. A Primary LAC Designated Teacher forum has been established to support teachers to successfully fulfil the functions of this role. | |

| | | | | |
|-------------------------|---|--------------|---|--|
| P2.1.3 | Monitor and seek to improve the effectiveness of schools through the Central South Consortium (CSC) | GREEN | <p>Monitoring reports and pre-inspection reports produced by CSC Challenge Advisers have accurately identified the performance (and underperformance) of schools and this has been supported by Estyn when they have inspected these schools.</p> <p>Our monitoring of commissioned services from CSC has improved the effectiveness of schools in 2015-16 (financial year) by ensuring that the school categorisation has been effectively implemented. There have also been improvements in the categories of our schools across the borough.</p> <p>Regular meetings between the LA and the CSC Challenge Advisers ensure that the LA is fully apprised of developments in all schools. These meetings also assists with linking schools to the Early Help services available within the LA and ensuring that the link ups between the services are effective.</p> <p>CSC has been able to broker appropriate support / interventions to address areas in need of improvement, tailored to meet the needs of individual schools.</p> <p>Our monitoring and evaluation of the effectiveness of the commissioning arrangements for the CSC will remain an on-going business activity.</p> | |
| P2.1.4 | Continue to implement the Youth Engagement and Progression Framework. | GREEN | <p>The VAP (Vulnerability Assessment Profile). tool aims to identify children in need of additional support, including those who may be at risk of becoming NEET.</p> <p>We have improved our data analysis, increased the frequency of review and analysis and extended the age range of pupils for application of the VAP</p> <p>Targeted interventions are then planned in collaboration with appropriate partners and implemented for these pupils.</p> <p>Through the successful implementation of the YEPF (Youth Engagement and Progression Framework) and the VAP, provision now centres on the early identification and intervention of young people who are potential NEETs from the outset of their secondary schooling.</p> <p>The support these pupils are receiving has a positive impact in helping them develop skills and build the resilience needed to overcome barriers they may have been facing to sustained engagement in Education, Employment or Training.</p> <p>The successful results of this work are shown in the Destination Data published each year by Careers Wales. This data indicates that the percentage of Year 11 School Leavers presenting as NEETs within Bridgend County has reduced from 3.7% in 2013 to 3.2% in 2015.</p> <p>Of note is the halving of our NEETs figure in the period from 2012 to 2015.</p> | |
| P2.1.7 | Provide 14-19 year olds with the advice they need to ensure they engage in the right type of qualification for them. | RED | <p>This Commitment has been cancelled as WEST (Wales Essential Skills Toolkit) implementation is now being pursued, at a national level, through the Minister's priorities for 2016-17. Accordingly, the directorate will include appropriate activities in its 2016-17 business plan.</p> <p>The development of WEST has been supported by WG. It a knowledge and skills assessment tool. The general aim is for use of the tool for pre and post-16 pupils, in schools and further education (FE) institutions, to promote greater accuracy, consistency and confidence in assessment results, thereby improving the advice to pupils regarding future choices.</p> <p>Implementation of WEST in 2015-16 was pursued through local/regional negotiation with the FE sector, with variable success across Wales. This is one of the reasons that the implementation is now being taken forward at a national level.</p> | Commitment has been cancelled. Implementation to be pursued at a national level. |
| P2.1.11 | Under the auspices of the Schools Task Group, work with schools to develop a sustainable strategy for the provision of education in Bridgend. | GREEN | <p>Each workstreams of the Schools Tasks Group (STG) met its objectives and the outcomes were used to develop specifications for future work.</p> <p>A report was submitted to Cabinet in September 2015. The report recommended a full strategic review of education provision within the county, encompassing critical issues in terms of estate, changing demographics and future pupil projections, location of provision and Post-16 provision, to ensure sustainability.</p> <p>The STG Board has been replaced by a new group, which is now taking this work forward in collaboration with all necessary partners.</p> | |
| P2.2.5 | Support schools in the implementation and use of Fixed Penalty Notices for non-attendance in schools. | GREEN | <p>In April 2015, the Education Welfare Service (EWS) officers were integrated with the new locality hub arrangements improving the access to support for schools.</p> <p>Every school has an Attendance Policy. In Q3, the EWS issued guidance on revising attendance policies to schools, with the aim of ensuring policies were consistent with new WG guidance.</p> <p>There has been a significant programme of information and guidance shared with stakeholders and this piece of work is now embedded in our daily work.</p> <p>It is schools that make the request to the EWS for a Fixed Penalty Notice (FPN) to be issued. The monitoring of this process and the effectiveness of FPNs in achieving the desired outcomes has been embedded in EWS operational activities.</p> <p>The percentage of unauthorised absence in our primary and secondary schools is continuing to decrease.</p> | |

| | | | | |
|------------------------|---|-------|---|--|
| P2.2.6 | Implement the BCBC Attendance Strategy | GREEN | <p>All staff with responsibility for attendance in schools have received appropriate training in relating to attendance including appropriate challenges to parents and full usage and knowledge of the School Information Management System in so far as it relates to attendance, such the proper use of codes, accurate data input and data exports.</p> <p>EWOs (Education Welfare Officers) have worked with schools and school clusters to develop action plans for improving attendance.</p> <p>Attendance figures continue to improve across both the primary and secondary sectors.</p> | |
| P2.3.8 | Provide schools that support the needs of all learners and their communities. | GREEN | <p>We completed the construction of the Emotional Behavioural and Social Difficulties (EBSD) Specialist Provision at the Bryncethin Campus and the move of the YBC Special School to the same site .</p> <p>With regard to the Garw Valley South scheme, the elements identified within this Commitment were completed on time. However, the Judicial Review in respect of the proposal to relocate Betws Primary School and Tynyrheol Primary School to the Betws site, together with a Cabinet decision to abandon the proposal to enlarge YGG Cwm Garw, necessitated a re-design of the both schools. Accordingly, both schools have been designed as 1Form Entry schools. This re-design has impacted on the timeline for the full project.</p> <p>The Feasibility Study and submission of the Strategic Outline Case for the Pencoed Primary School scheme were completed. We also completed the Feasibility Study for the Gateway Primary scheme.</p> <p>The Safe, Dry, Warm Project achieved its deliverables. A Fire Safety Officer has been appointed for the LA and schools will benefit from robust fire safety assessment moving forward. The project group will, in future, concentrate on operational aspects of work within our school buildings and act as a "gatekeeper" for physical changes to school buildings proposed by Heads.</p> | |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cumulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---------------------------|---|--------------|--------------|------------------------------------|--------------------------------|--------------------------------|----------------------------|--|
| DCH.OA2.1 | Percentage of annual school performance reports (APRs) reported to governing bodies. Higher preferred | 100.00 | 100.00 | 100 | ↔ 100.00 | | | Target Setting: The annual APR should be reported to every GB, therefore, a target of 100% is justified. |
| DCH.OA2.3 | Percentage of schools inspected graded as good or excellent by Estyn Higher preferred | 85 | 82 | 85 | ↑ 84 | | | Target Setting: The 2015-16 target is being set at a point in time when we are already aware that we will be reporting a reduction in the result for the period to 31.3.15. Nevertheless, the target has been retained at the same level as the previous year, i.e. 82%, which is suitably ambitious given the current knowledge of our position and changes to Estyn's grading approach within the current inspection cycle. |
| DCH2.1.4 | Size of the gap in educational attainments between KS4 pupils entitled to free school meals and those who are not (measured by Level 2 inclusive indicator) <i>Lower preferred</i> | 24 | 24 | 27.2 | ↑ 36.3 | 33.8 | n/a | <p>Annual Performance: We did not achieve the target but we significantly improved on 2014/15 performance. The attainment of e-FSM (eligible for free school meals) pupils in Bridgend at the L2+ indicator is ranked third in Wales. The FSM group improved by 12.31 percentage points whereas the non FSM group improved by 3.23 percentage points. In Wales the FSM group improved by 3.84 percentage points whereas the non FSM group improved by 2.55 percentage points. The performance of the LA in this indicator is good. It has been a high priority in all team plans and will remain to be so. Whereas there is variation in the performance of individual schools, the overall trend is positive for all schools.</p> <p>Target Setting: The 24% target applicable for the 2013-14 AY has been retained for the 2014-15 AY (2015-16 financial year) in acknowledgement of our continued drive to improve the performance of FSM pupils.</p> |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cumulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---------------------------|---|--------------|--------------|------------------------------------|--------------------------------|--------------------------------|----------------------------|--|
| DCH2.1.6 | Percentage of pupils eligible for free school meals who achieve the Core Subject Indicator at KS2, compared to pupils who are not eligible for free school meals <i>Lower preferred</i> | 22.5 | 13 | 14.6 | ↑ 15.6 | 17.8 | | Annual Performance: The performance of eFSM (eligible for free school meals) pupils last year improved by 2.8 percentage points, which was a greater margin than the Non-eFSM performance improvement of 1.8 percentage points. This compares to Wales eFSM improving by 3.2% and the Non-eFSM pupils improved by 1.1 percentage points. Overall, the improvement in eFSM performance in Wales was greater, but it was from a lower starting point and the gap between the attainment of e-FSM pupils in Bridgend has narrowed to a greater extent than in Wales. Closing the gap between eFSM and Non-eFSM pupils is part of the work of the multi-agency Vulnerable Groups Strategy Action Group (VGSAG), whose work is continuing. Implementation of the Vulnerable Groups Strategy and integral action plan will be taken forward during 2016-17. Target Setting: The target for the 2014-15 AY (2015-16 financial year) has been set in recognition of strategies in place and performance achievements to date. |
| DCH2.1.10 | Percentage of half day sessions (overall absence) missed by pupils of compulsory school age attending maintained primary schools and eligible for free school meals compared to those pupils who are not eligible for free school meals <i>Lower preferred</i> | 3 | 3 | 2.4 | ↑ 2.8 | 2.7 | | Target Setting: Target for 2014-15 AY (2015-16 financial year) has had to be set before the 2013-14 AY attendance results have been made available by WG. A target of 3% has been maintained, in light of and reflecting the improvement trend in previous years. |
| DCH2.1.11 | Percentage of half day sessions (overall absence) missed by pupils of compulsory school age attending maintained secondary schools and eligible for free school meals compared to those pupils who are not eligible for Free School Meals <i>Lower preferred</i> | 4.5 | 4.5 | 3.9 | ↑ 4.9 | 5.3 | | Target Setting: Target for 2014-15 AY (2015-16 financial year) has had to be set before the 2013-14 AY attendance results have been made available by WG. A target of 4.5% has been maintained in light of and reflecting the improvement trend in previous years. |
| DCH2.2.1 | The gap between SEN and non SEN pupils measured by the percentage of pupils achieving the Core Subject Indicator (level 4 or above in English/Welsh, maths and science) at the end of Key Stage 2, in mainstream schools <i>Lower preferred</i> | 48.5 | 38 | 40.01 | ↑ 40.15 | n/a | n/a | Annual Performance: The gap between SEN and Non-SEN achievement of the CSI at KS2 decreased marginally. The percentage of pupils achieving the CSI increased in both groups, with the SEN group achieving an increase of 1.04 % points, slightly more than the increase of 0.90% points achieved by the Non SEN group. Factors that are contributory to this improvement are: - sharper more focused support into mainstream provided by the Specialist Teams; - the tracking of data within each Specialist Service is more robust and there is greater accountability for outcomes; and - the impact of early intervention programmes. The needs and effectiveness of interventions for ALN/SEN pupils, as individuals and as groups, will continue to be examined as part of the provision mapping and PRIP (Planning and Review in Partnership) processes with our schools. The target for the 2014-15 AY (2015-16 financial year) has been set after review of the historical data for the two groups and known current developments. |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cumulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|-----------------------------|--|--------------|--------------|------------------------------------|---------------------------------|--------------------------------|----------------------------|---|
| DCH2.2.2 | The gap between SEN and non SEN pupils measured by the percentage of pupils achieving the Level 2 Threshold (at least 5 GCSE's Grade A*-C or equivalent) including English or Welsh and Maths, in mainstream schools <i>Lower preferred</i> | 30 | 29 | 27.5 | ↑ 29.4 | | | Target Setting: The target for the 2014-15 AY (2015-16 financial year) has been set after review of the data and performance of the SEN and Non SEN groups for the last 4 years reviewed. The target has been set in recognition of the likely increase in Non SEN achievement, due to the KS4 improvement strategies, and the likelihood that the significant increase in SEN achievement in 2013-14 AY may not be repeated to the same extent in 2014-15. |
| DCH2.3.1 | The percentage of Year 11 leavers from schools in the Authority identified as not being in education, employment or training in the Careers Wales Annual Destination Survey Statistics. <i>Lower preferred</i> | 4 | 3.5 | 3.2 | ↑ 3.6 | | | Target Setting: The target for the 2014-15 AY (2015-16 financial year) has been set in recognition of the initiatives that are in progress and the aim to maintain the trend of continuous improvement. |
| DCH2.4.016a | Percentage of pupil attendance in primary schools within the current academic year (for quarterly reporting) <i>Higher preferred</i> | 95.8 | 95.7 | 95.4 | ↑ 95.1 (14-15 academic year) | n/a | n/a | Annual Performance: Performance improved again and above CSC and Welsh averages. Sixth best performing authority in Wales. EWOs (Education Welfare Officers) will continue to work with schools, and those individual pupils whose attendance is of concern. The overall attendance at individual schools will continue to be monitored closely and collaborative support plans developed. Target Setting: This PI is intended to report attendance data on a termly basis. Therefore, in Q1, what is reported is the attendance for the Summer Term of the previous academic year. Accordingly, the target that was applicable for that academic year will still apply. |
| DCH2.4.016b | Percentage of pupil attendance in secondary schools within the current academic year (for quarterly reporting) <i>Higher preferred</i> | 93 | 94.9 | 94.3 | ↑ 93.9 | n/a | n/a | Annual Performance: The data reported at Q4 is the cumulative attendance figure for the Autumn and Spring Terms in the current (2015-16) academic year. Data that includes the Summer Term cannot be reported until Q2 in 2016-17. Performance is marginally off target but the LA and schools are continuing to take appropriate action to further improve attendance. Target Setting:- This PI is intended to report attendance data on a termly basis. Therefore, in Q1, what is reported is the attendance for the Summer Term of the previous academic year. |
| EDU002i NSI | Percentage of: i) All pupils (including those in local authority care) in any local authority maintained school, aged 15 as at the preceding 31 August that leave compulsory education, training or work based learning without an approved external qualification <i>Lower preferred</i> | 0.45 | 0.1 | 0.1 | ↔ 0.1 | 0.3 | 6 | Target Setting: Target for 2014-15 academic year (2015-16 financial year) has been set at the level of the 2013-14 academic year performance acknowledging the on-going activity in this area. |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cummulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|----------------------------------|---|--------------|--------------|-------------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| EDU003 NSI | Percentage of pupils assessed at the end of Key Stage 2, in schools maintained by the local authority, achieving the Core Subject Indicator, as determined by Teacher Assessment <i>Higher preferred</i> | 84.4 | 85 | 87.6 | ↑ 86.2 | 86.4 | 12 | Target Setting: Target for 2014-15 AY (2015-16 financial year) set in January 2015 by the HoS and GMs for School Improvement and BuSP as part of the of targets work for the Corporate Plan 2015-16. The target reflects available information from the CSC and the various strategies aimed at maintaining the trend of continuous improvement. |
| EDU004 PAM | Percentage of pupils assessed at the end of Key Stage 3, in schools maintained by the local authority, achieving the Core Subject Indicator as determined by Teacher Assessment <i>Higher preferred</i> | 78.5 | 78.9 | 84.3 | ↑ 79.3 | 81.2 | 15 | Target Setting: Target for 2014-15 academic year (2015-16 financial year) is the CSC aggregation of the targets agreed for individual schools. |
| EDU006i i NSI | Percentage of pupils assessed, in schools maintained by the local authority, receiving a Teacher Assessment in Welsh (first language) at the end of Key Stage 3 <i>Higher preferred</i> | 10.1 | 6.5 | 6.7 | ↑ 6.6 | 17.2 | 17 | Target Setting: Target for 2014-15 AY (2015-16 financial year) set by directorate in January 2015, for the 15-16 Corporate Plan. Target set in acknowledgement of the fact that we are not able to influence the two parts of this PI in any individual year i.e. the number of KS3 pupils at YGGL (these are the only pupils who will be assessed in Welsh as a first language) and the overall number of KS3 pupils in maintained schools in the borough. |
| EDU008 a | The number of permanent exclusions during the academic year per 1,000 pupils from: a) primary schools <i>Lower preferred</i> | 0 | 0.2 | 0.2 | ↓ 0.1 | n/a | n/a | Annual Performance: Two primary school pupils were permanently excluded in the 2014-15 academic year, compared to 1 in 2013-14. The Jan15 PLASC total number of primary children Yrs1-6 was 9406 (compared to 9247 in Jan14), therefore, the PI result was 0.2. Action on exclusions in both Primary and Secondary schools in Bridgend is part of the activity of the Fair Access in Education Strategy Group. Target Setting For the 2014-15 AY (2015-16 financial year), target setting has occurred in February 2015, half way through the academic year. The target has been set in recognition of what we already know at the present time, which is that there have been 2 permanent exclusions from primary schools and a further 2 currently seen unavoidable. |
| EDU008 b | The number of permanent exclusions during the academic year per 1,000 pupils from: b) secondary schools <i>Lower preferred</i> | 1 | 0.8 | 0.4 | ↑ 1.3 | n/a | n/a | Target Setting: For the 2014-15 academic year (2015-16 financial year), target setting has occurred in February 2015, half-way through the academic year. The target has been set in recognition of what we already know, which is that there has been 1 permanent exclusion from secondary schools. This suggests that we will achieve a reduction in permanent exclusions in this ac year. |
| EDU010 a | The percentage of school days lost due to fixed-term exclusions during the academic year, in: a) primary | 0.01 | 0.012 | 0.016 | ↓ 0.01 | n/a | n/a | Annual Performance: There were increases in every aspect of fixed-term exclusions in primary schools in the 2014-15 academic year, as demonstrated below: |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cummulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---|--|--------------|--------------|-------------------------------------|--------------------------------|--------------------------------|----------------------------|--|
| | schools <i>Lower preferred</i> | | | | | | | <p>2014-15: No. of FTEx 107; No. of Pupils Involved 46; Total School Days Lost 289.5. 2013-14: No. of FTEx 47, No of Pupils Involved 32; Total School Days Lost 145. (2012-13: No. of FTEx 56, No of Pupils Involved 34; Total School Days Lost 140.)</p> <p>There has been an initial presentation of the summary data to the Fair Access To Education Strategy Group. Significant analysis of the data, at a school by school level, continues. This will be the subject of further consideration by the group and used to inform the development of actions. The presentation of the summary of data is being extended to the Primary Federation meeting in November. The restructure of the Behaviour and Wellbeing teams concluded in November. There will be a more targeted, focused approach by the team. A new Leader of this area began in September and also a new Teacher in Charge took up post in January</p> <p>Target Setting: The target for this PI is set at point when we are already half way through the relevant academic year. For the 2014-15 AY (2015-16 financial year), whilst the target has been set in recognition of what we already know as at Feb15, which is that (excl, Pen Y Bont and Tremains primaries) there have been 4 occurrences of FT exclusions, for a total of 135 number of school days lost. Our final total school days lost will, therefore, be higher than last year.</p> |
| EDU010 b | The percentage of school days lost due to fixed-term exclusions during the academic year, in: b) secondary schools <i>Lower preferred</i> | 0.06 | 0.065 | 0.084 | ↓0.042 | n/a | n/a | <p>Annual Performance: The improvements achieved in the 2013-14 academic year were not sustained in 2014-15, with every aspect of fixed-term exclusions increasing, as demonstrated below: 2014-15: No. of FTEx 428; No. of Pupils Involved 236; Total School Days Lost 1214.5. 2013-14: No. of FTEx 305, No of Pupils Involved 193; Total School Days Lost 616. (2012-13: No. of FTEx 488, No of Pupils Involved 285; Total School Days Lost 1078.5.)</p> <p>There has been an initial presentation of the summary data to the Fair Access Strategy Group. Significant analysis of the data, at a school by school level, continues. This will be the subject of further consideration by the group and used to inform the development of actions. The presentation of the summary of data is being extended to the Primary Federation meeting in November. The restructure of the Behaviour and Wellbeing teams is concluding in November. There will be a more targeted, focused approach by the team. A new Leader of this area began in September and also a new Teacher in Charge will take up post before December.</p> <p>Target Setting: The target for this PI is set at point when we are already half way through the relevant academic year. For 2014-15 (2015-16 financial year), the target has been set in recognition of what we already know as at Feb15, which is that there have been 247 (311 for whole of 13-14) occasions of FT exclusion from secondary schools, equating to 726 (614 in whole of 13-14) school days lost.</p> |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cummulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---|---|--------------|--------------|-------------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| EDU011 NSI | Average point score for pupils aged 15, at the preceding 31 August, in schools maintained by the local authority <i>Higher preferred</i> | 430 | 515 | 527.6 | ↑ 486 | 530.4 | 18 | Target Setting: Target for 2014-15 academic year (2015-16 financial year): performance in the last 3 years has been close to that of the Central South average, but one year behind. The target has, therefore, been set at the level achieved in Central South for the 13-14 academic year. This also reflects our performance in excess of target in 13-14. |
| EDU015 a_NSI | Percentage of final statements of special education need issued within 26 weeks: (a) Including exceptions; <i>Higher preferred</i> | 75 | 100 | 81.7 | ↑ 50 | 64.5 | 17 | Annual Performance: This PI is calculated on a calendar year basis. Performance continues to improve, due to the 100% performance on cases that are not exceptions (EDU015b). For the period 1.1.15 to 31.12.15: - the number of pupils for whom statements of special educational needs were issued for the first time and within 26 weeks, including exceptions = 67 - the total number of pupils for whom statements of special educational needs were issued for the first time during the year, including exceptions = 82 The 82 statements issued for the calendar period were issued between January and December, therefore, included in the calendar year end PI, but would not appear in the cumulative PMF figures. Calendar Year Result = 81.7% A target of 100% is aspirational. Performance against this PI is never likely to reach 100%, as it includes ALL cases, including those where a valid exception to the 26-week timescale applies. A truer measure of the success of our activities is given by EDU015b. Target is aspirational 100% performance is unlikely given the number of complex cases and justified exceptions to the 26 week requirements, all of which are included in this part of the PI. |
| EDU015 b_NSI | Percentage of final statements of special education need issued within 26 weeks: (b) Excluding exceptions <i>Higher preferred</i> | 100 | 100 | 100 | ↔ 100 | 95.6 | not applicable | Target Setting - Part b of EDU015 excludes cases that are justified exceptions to the 26-week requirement and in light of our improved structure and processes, a target of 100% is justified for the 2015 calendar year. |
| EDU016 a_PAM | Percentage of pupil attendance in primary schools <i>Higher preferred</i> | 94.6 | 95.8 | 95.1 | ↑ 94.8 | 94.8 | 10 | Annual Performance: Performance improved again and above CSC and Welsh averages. Sixth best performing authority in Wales. EWOs (Education Welfare Officers) will continue to work with schools, and those individual pupils whose attendance is of concern. The overall attendance at individual schools will continue to be monitored closely and collaborative support plans developed. Target for the 2014-15 academic year (2015-16 financial year) is set at 1% above the 2013-14 result, reflecting the ongoing activity and drive to improve attendance. It is acknowledged that this target does not precisely mirror the target derived from the CSC aggregation of the targets set for individual schools. |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cummulative Actual and RAG | Trend vs 14-15 Year end Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--|---|--------------|--------------|-------------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| EDU016 b PAM | Percentage of pupil attendance in secondary schools <i>Higher preferred</i> | 93 | 94.9 | 94.3 | ↑ 93.9 | 93.6 | 6 | <p>Annual Performance: Bridgend Secondary Attendance in the 14-15 academic year was 0.6% points below our target but the result of 94.3% represented an improvement on the previous academic year of 0.4% points. Bridgend's performance was above the Welsh average, which improved by a marginally lower figure of 0.3% points over the previous year. Secondary school attendance in all but two of our schools is above the Welsh and CSC averages. Work is ongoing with the two schools that fall just below these figures. Performance improved again and above Welsh and CSC averages. Seventh best performing authority in Wales.</p> <p>Target for the 2014-15 academic year (2015-16 financial year) is set at 1% above the 2013-14 result, reflecting the on-going activity and drive to improve attendance. It is acknowledged that this target does not precisely mirror the target derived from the CSC aggregation of the targets set for individual schools.</p> |
| EDU017 NSI | Percentage of pupils aged 15, at the preceding 31 August, in schools maintained by the local authority who achieved the Level 2 threshold including a GCSE grade A* - C in English or Welsh first language and mathematics <i>Higher preferred</i> | 55 | 65 | 59.7 | ↑ 54.8 | 55.5 | 12 | <p>Annual Performance: The CSC previously reported a result for Bridgend of 58.5%. This figure is based on unvalidated returns from schools on the day the results were released to schools. Since then a number of exam papers have been re-marked on appeal and the results have been validated. This explains the increase in the final published figure of 59.7%. Despite not achieving target, this is a very good result. It continues the steadily improving trend and places Bridgend above the national average for the first time. Level 2 and Level 2 (inclusive) will continue to be the subject of school improvement strategies and the schools whose performance is of concern will continue to be targeted with appropriate support and interventions.</p> <p>Target for 2014-15 AY (2015-16 financial year) is set in recognition of the activities and strategies in motion, to maintain the trend of continuous improvement and to exceed the Wales Average.</p> |

Improvement Priority Three: Working with children and families to tackle problems early

| Code | Action Planned | Status | Comments | Next Steps (for Red and Amber only) |
|--------|---|--------|---|--|
| P3.1.1 | Put systems in place to support our Multi-Agency Safeguarding Hub (MASH) arrangements. | GREEN | We completed the introduction of a joint Early Help and Safeguarding "front door" in line with the Social Services and Wellbeing Act. We contributed to the successful implementation of the new WCCIS system, which supports the national implementation of a common integrated solution for health and social care in Wales. Good progress has been made with the base actions to achieve a single integrated database. This work is expected to be completed in December 2016, once WCCIS data migration and functionality issues are resolved. Accordingly, we are in a position to fully integrate Early Help services with the MASH once this is in place. The conclusion of the work to establish the MASH is being overseen by the Wellbeing Directorate and the Education and Family Support Directorate will continue to participate in the Project Board. | |
| P3.2.2 | Relaunch the Joint Assessment Family Framework to ensure that partnership arrangements are more effective. | RED | New protocols for accessing the re-structured Early Help Service were developed. JAFF was re-launched to provide a single point of entry for Early Help hubs. Good progress has been made with the development of an integrated Early Help database but this could not be completed due to WCCIS data migration and functionality issues. This activity is now scheduled to complete in December 2016 once these issues are resolved. Once completed, all Integrated Working and Family Support staff will use the single integrated database, which will deliver joined-up information and greater efficiency of operation. | Actions have been planned to enable the single integrated database to be achieved by December 2016 |
| P3.2.3 | Implement the Early Help Strategy to reduce the number of looked after children and to prevent children becoming looked after. (CH) | AMBER | Protocols for accessing Early Help services (including the Central Hub) were developed and implemented. A review was conducted of evidenced-based interventions offered by staff for roll-out across the hubs. Family Support interventions on Edge of Care, Crisis Intervention and Rehab Home were integrated with the Connecting Families Service. A plan was developed for mentoring and training the wider workforce, including a presence of Child Social Workers in the newly created hubs. The outstanding area of activity is the completion of the work to develop a single integrated Early Help database. This is due to WCCIS data migration and functionality issues outside the directorate's control. | Actions have been planned to achieve the single integrated database by December 2016. |
| P3.2.4 | Improve the way we work with other agencies to help identify more families that are in need of support and address the root cause of their problems | GREEN | Early intervention and prevention approaches were reviewed in light of the directorate's new (at the start of 2015) senior management structure, to ensure seamless provision regardless of tier of need. Guidelines are now in place for Evidence Based Interventions (EBIs) supported by a full programme of training for staff. Early Help teams are working closely with Safeguarding Managers/teams to ensure seamless transition between tiers of need. This year has seen a dramatic increase in the number of JAFF referrals and assessments being undertaken (200% increase on last financial year) with very positive outcomes following a staged review process of packages of support. With a 'one front door' early help access point for referrals, along with the appointment of a screening officer, families are contacted, assessed with a tailored package of support offered at the earliest opportunity, families are being given the support and opportunity to address their issues and become resilient within their family surroundings and communities. Flying Start has been expanded to operate in the Garth area. The Flying Start Health Visitor for Garth has been appointed and the Childcare Team for FS childcare at Garth Primary School are all in post. Delivery of open access services will begin very shortly. The overall CAP for the number of children benefiting from FS services was achieved. | |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | 15-16 Year end Actual | Trend v Year end 14-15 | Wales Average 14-15 | BCBC Rank 14-15 (NSI/PAMs) | Comments |
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| DCH.OA 5.1 | Percentage of offers of Flying Start provided childcare taken up as a percentage of offers made to newly eligible children <i>Higher preferred</i> | 90.0 | 90.0 | 87 | ↑ 79.0 | | Annual Performance: Following the expansion at Sarn ,Blackmill and Lewistown, the uptake of childcare has increased steadily. Whilst we would desire 100%, this is not a realistic target as some parents have a need to seek childcare nearer to their places of work. Further, when FS expands to a new area, the uptake of childcare is noted to take time. Sarn is a large area and the birth rate is noted to have decreased since the expansion plan. The number of available places has been adjusted accordingly. Target Setting: The 2014-15 result was impacted by the delivery of FS services to the communities in Lewistown/ Blackmill/ Sarn commencing part way through the year and, inevitably, the take-up of services took some time to reach capacity. The target for 2015-16 has been set at 90% to reflect that we should be at full capacity for the whole year. |
| DCH.OA 5.2 | Percentage of children in the Flying Start programme that are fully immunised at 47 months <i>Higher preferred</i> | 85.00 | 90.0 | 88 | ↔ 88.0 | | Annual Performance: Immunisation data is supplied by ABMUHB and there are some issues with data timeliness and accuracy. Nevertheless, the WG focus on addressing potential gaps in take-up appears to have been successful. Immunisation rates in Bridgend remain high, however, increasing the immunisation levels remains a focus for the team. Target Setting: The target for 2015-16 has been set to maintain the trend of continuous improvement year on year, whilst recognising that delivery of the immunisation programme rests with a third party partner. |
| DCH.OA 5.3 | Overall childcare attendance rate at Flying Start settings is above 70% <i>Higher preferred</i> | 76.00 | 82.0 | 80 | ↓ 81.0 | | Annual Performance: Private places attendance was 84%. Local Authority/Voluntary sector places attendance was 79%. Total overall attendance was 80%. The team remains focused on attendance and this is discussed with all team members. WG analyses the data on attendance and offers the LA information on the revenue cost of absence/unfilled places. This data is benchmarked nationally and published occasionally. Where attendance is poor, places are removed and possible alternative options discussed with parents. The childcare contract with parents has been reviewed and revised in 2016. Target Setting: The Flying Start Childcare Attendance policy was rolled out in 2014-15, with a positive impact an attendance results. The target for 2015-16 has been set to support continuous improvement whilst acknowledging that the rate of improvement is likely to be lower than last year. |
| DCH.OA 5.4 | Percentage of children in the Flying Start areas reached, exceeding or within one age band of their development milestones at age 2 years <i>Higher preferred</i> | 55.00 | 82.0 | 77 | ↓ 81.00 | | Annual Performance: Year on year, the final result figure for this PI will be impacted by fluctuations in many factors, including the number of children with additional needs and the number of children who have had no childcare/developmental input by the time they reach the age of 2. As the expansion of FS has become more targeted and less universal, the number of children with identified additional needs involved with FS is increasing. Due to the on-going annual expansion of the programme, many of the children receiving the SOGS II assessment may not have benefited from the wider aspects of the programme as an entitlement since birth - this will again impact on the data. Until FS reaches steady state for a period of time, realistic target setting will remain a challenge. FS will continue to encourage parents to take up services on offer and will ensure on-going training in SOGS assessments for staff. Wider Early Help services will continue to identify children at an early age who may benefit from support and intervention. Actions planned to increase this number will be to work ever more closely to encourage families to engage with the early years services within FS, in particular activities such as Talk to Your Baby, early years speech and language programme. It is however important to note that FS engagement is voluntary and while the FS team make every effort to encourage ALL parents to attend the range of support |

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| | | | | | | | <p>and developmental targeted sessions such as Hello Baby, Baby Massage, Talk to your Baby, FS Link up sessions and the Nurture programme, engagement is not a factor which impacts parents ability to access the childcare aspect of the programme.</p> <p>Furthermore it is key to note that the data of the actual number was 42% in 2013/14 and 71% in 2014/15 with a significant rise to 81% in 2015/16 the target set for 2016/17 then reflected this, however such a considerable rise whilst very promising could also reflect a particular cohort or group of children where skills were above the norm for that age group when looking at target groups.</p> <p>In all areas of education and early years the performance of particular year groups will inevitably alter from year to year. The FS team will always aim very high to enable all children to benefit fully from the services available.</p> <p>Target Setting: The applicable WG guidance for this indicator changed mid-year 2014-15 to include children who are within one band of the development milestone. The result for 2014-15 was calculated according to the revised guidance and the target for 2015-16 has been determined in accordance with this revised guidance. In determining the target for this indicator, for any year, it is relevant to reflect that the cohort of children to which this indicator relates changes each year. Each year, the cohort will comprise of a different number of children with different additional/emerging learning needs. This impacts on the viability of direct comparisons of the data/results year on year.</p> |
| DCH.OA 5.5 | Percentage of children in the Flying Start areas reached, exceeding or within one age band of their development milestones at age 3 years <i>Higher preferred</i> | 88.0 | 82.0 | 68 | ↓ 77.0 | | <p>Annual Performance: Year on year, the result for this PI is impacted by fluctuations in many factors, including the number of children with additional needs. It is important to note that as the expansion of FS has become more targeted and less universal, the number of children with identified additional needs is increasing. Due to the on going annual expansion of the programme, many of the children receiving the SOGS II assessment may not have benefited from the wider aspects of the programme as an entitlement since birth, nor any childcare/developmental input. This may be especially true as FS operates in areas of deprivation. This will continue to have an impact on the assessments at age 2 and age 3. Until FS reaches a steady state for a period of time, realistic target setting will remain a challenge.</p> <p>FS will continue to encourage parents to take up services on offer and will ensure on-going training in SOGS assessments for staff. Wider Early Help services will continue to identify children at an early age who may benefit from support and intervention.</p> <p>Actions planned to increase this number will be to work ever more closely to encourage families to engage with the early years services within FS in particular activities such as Talk to Your Baby, early years speech and language programme.</p> <p>As with the statement relating to the three year old SOGS II data it is however important to note that FS engagement is voluntary and while the FS team make every effort to encourage ALL parents to attend the range of support and developmental targeted sessions such as Hello Baby, Baby Massage, Talk to your Baby FS Link up sessions and the Nurture programme, engagement is not a factor which impacts parents ability to access the childcare aspect of the programme. The ongoing expansion will indeed impact on the fact that a significant children being assessed will have had limited access to the service. However actions also include the increased detail discussed in the transition meeting between the FS HV and the childcare provider to discuss the two year SOGS II which is the baseline for each child and for the childcare setting to then use this data and that of the Wellcomm assessment to target areas of challenge</p> |

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| | | | | | | | | for the child and to focus support in the developmental areas where the milestone has not been reached. The FS advisory Teacher supports this and the children who are almost at the milestone and scoring just below the norm will be a significant focus for the childcare service in order to help all children achieve the norm for their age. Target Setting: In 2014-15, there was a national drop-back in the percentage of children achieving the developmental milestone at age 3 compared to the percentage of (the same) children achieving the developmental milestone at age 2. In Bridgend, it was identified that one factor contributing to this situation was that HVs were placing less reliance on unverified parental reports at the age 3 milestone than they were at the age 2 milestone. The target set for 2015-16 acknowledges this background and the changes in practice to more accurately reflect children's developmental ability whilst pursuing future continuous improvement. The target set for 2015-16 reflects the growth in the FS cap however with the birth number reducing the target for those achieving the milestone remains static. Please note further that the Flying Start programme Health visiting element has experienced significant levels of long term sickness which sadly impacts upon the intensive work of the Health team and its work alongside the limiting effect on the required expansion of the programme. The target for 2016-17 will again remain at 82 due to the very late expansion into the Garth area (not until late March 2016) therefore the additional number of children entering the programme will not have benefitted from the service until their entry to the programme and its intervention. Please note further that the Flying Start programme Health visiting element has experienced significant levels of long term sickness which sadly impacts upon the intensive work of the Health team and its work alongside the limiting effect on the required expansion of the programme. Significant targets set using the WellComm programme are met while impacts upon the SOGS II data to not increase as may be anticipated. targeted support for children in the one band below area of the assessment is in development work with the Advisory Teacher and Childcare staff. |
| DCH.OA 5.6 | Percentage of parents reporting child's skills have improved following attendance at Flying Start childcare <i>Higher preferred</i> | 100.0 | 100.0 | 100 | ↔ 100.0 | | | Target Setting: Given the trend in past results, achievement of 100% performance in 2014-15 and no known factors that may affect future performance, a target of 100% has been maintained for 2015-16. |
| DCH3. 2.1 | The number of children recorded on the Child Protection Register. <i>Lower preferred</i> | 150 | 145 | 176 | ↓ 125 | n/a | n/a | Annual Performnace ; The increase in the number of children on the CPR is multi-faceted and not specifically as a result of one particular area of service. The number of children on the CPR has been on the increase over several months and specific pieces of work are ongoing to identify reasons for the increase. Target Setting: Target for 2015/16: Determined by SG HoS 12/01/15 This reduced target has been predicated on an increase in prevention and early intervention services provided through the Integrated Family Support Team, IFSS and Connecting Families |
| DCH3. 6.4 | Looked After Children as a percentage of children aged 0-17 <i>Lower preferred</i> | 1.1 | 1.3 | 1.3 | ↔ 1.3 | n/a | n/a | Target Setting: The target for 2015/16 was set by the SG HoS on 12/01/15. Although we missed the target last year the 15-16 target has been set to drive relative improvement against previous performance. |

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| DCH3.6.6 | Number of children benefitting from the Flying Start programme (WG sets minimum number of children receiving FS services (CAP)) <i>Higher preferred</i> | 1421 | 1586 | 1586 | ↑ 1428 | n/a | n/a | Target for 2015-16 is the Welsh Government set minimum number of children receiving Flying Start Services (cap) |
| EDU002ii NSI | Percentage of: ii) pupils in local authority care in any local authority maintained school, aged 15 as at the preceding 31 August that leave compulsory education, training or work based learning without an approved external qualification <i>Lower preferred</i> | 5 | 1.1 | 0 | ↔ 0 | 1.2 | 1 | Target for 2015-16 financial year has been set up after consideration of the education history and individual plans of the known cohort. |
| SCC037 NSI | Average external qualifications point score for 16 year old Looked After Children in any local authority maintained learning setting <i>Higher preferred</i> | 300 | 217 | 283.85 | ↑ 262 | 276 | 15 | Target Setting: The 2015-16 target has been set in recognition of the what we already know about the core children in the cohort and their likely achievements. It is also in recognition of the very small numbers are involved and that the children in the cohort each year are different, with different complexities etc.. Some may have been looked after for some time beforehand, been in stable placements and been benefiting from LACE support. Others may become LAC just at the point of being 15 and never previously had the benefit of LACE support. |

Improvement Priority Five: Working together to tackle health issues and encourage healthy lifestyles

| Code | Action Planned | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|---|--------|--|-------------------------------------|
| P5.1.1 | Ensure our schools meet the standards of the Healthy Eating in Schools Regulations 2013 | GREEN | We have an award-winning school catering service, that is fully compliant with rigorous standards. | |
| P5.1.2 | Continue to roll out and implement cashless catering system across our schools | GREEN | The anticipated uptake of cashless catering has been achieved and half of all our primary schools are now cashless or have registered an interest. Promotion of cashless catering will continue. | |

Improvement Priority Six: Working together to make the best use of our resources

| Code | Action Planned | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|---|--------|---|-------------------------------------|
| P6.1.1 | Deliver the savings proposals identified in the 2015-16 budget (CH) | GREEN | The directorate achieved all of its MTFS targets. Details of shortfall regarding Retender Learner Transport contracts, Rationalise Special Education Needs transport and School transport route efficiencies set out in the appendices below. Investment under the Digital Transformation Project for an Online Admissions system could not be identified. Under the Digital Transformation Project, there is mention of provision of the functionality that would assist the delivering of an Online Admissions capability. In the meantime, an ICT project is progressing, which may be able to develop a system independent of digital transformation by October 2016. | |

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| <p>P6.2.2</p> | <p>Deliver the projects contained within the Bridgend Change Programme (CH)</p> | <p>AMBER</p> | <p>Vulnerable Groups / Closing the Gap:</p> <ul style="list-style-type: none"> • The multi-agency Vulnerable Groups Strategy Action Group (VGSAG) was established and the scope of the groups to be included within the strategy was defined. • Good practice in relation to good practice for closing the gap in performance between vulnerable and non-vulnerable groups was identified and shared. It has also been published on the CSC website in the Knowledge Bank. • Provision for vulnerable groups in the county was reviewed by the VGSAG and a detailed action plan is attached to the strategy document. • The performance of eFSM pupils has been examined examination performance has been reviewed. There has been a marked improvement in the performance of these pupils across the borough. We have explored the concept of a virtual head teacher for LAC pupils and will proceed to recruitment once funding is secured. A number of threads of activity have examined the issues in relation to pupil-level attainment tracking generally, as well as LAC pupil tracking specifically. Our data systems do not have the same functionality and capacity as other LAs to support pupil-level tracking. This is acknowledged as a key objective and we will pursue this further in 2016-17. <p>Fair Access to Education:</p> <ul style="list-style-type: none"> • The Fair Access Strategy Group is established and has a focus on alternatives to exclusions and the identification and sharing of best practice. The Teacher in Charge of our alternative provisions is a member of the group and is acting to build our behaviour and wellbeing capacities. • All HTs of primary and secondary schools are aware that an exclusion will prompt a Request For Help (Early help). This will be monitored and evaluated in the Fair Access Strategy Group. • Local provision for pupils with ASD has been established at YBC. <p>Out of Authority Placements for ALN Pupils:</p> <ul style="list-style-type: none"> • Local provision for pupils with ASD has been established at YBC. <p>School Estate/Modernisation Projects:</p> <ul style="list-style-type: none"> • The ALN campus at Bryncethin is established. • The new Coety Primary School opened for pupils in November 2015. • The new plans and timetable for the Garw Valley South scheme were completed. The Judicial Review in respect of the proposal to relocate Betws Primary School and Tynyrheol Primary School to the Betws site, together with the decision to abandon the proposal to enlarge YGG Cwm Garw, has necessitated in a re-design of the both schools. This work has delayed the designs of the new Pencoed Primary and Brynmenyn Primary Schools. • Mynydd Cynffig Infants School closed on 31st August 2015 and Mynydd Cynffig Junior School's age range was extended as at 1st September 2015 to create the 3-11 Mynydd Cynffig Primary School. <p>Home to School Transport Policy:</p> <ul style="list-style-type: none"> • The new policy was approved and is in place. <p>School Music Service:</p> <ul style="list-style-type: none"> • The service has been fully restructured. <p>Early Help Strategy Implementation:</p> <ul style="list-style-type: none"> • The majority of the component activities are complete. The outstanding issue is the development of an Early Help single integrated database, which has been delayed by WCCIS data migration and functionality issues, now expected to be fully resolved in December 2016. <p>MASH:</p> <ul style="list-style-type: none"> • Following the transfer of Child Safeguarding services to the Wellbeing Directorate, a new project team has been established and new project milestones . | <p>The School Modernisation Board will continue to oversee projects to full conclusion.</p> <p>Work to extract tracking data, at individual pupil level, from school systems is currently being pursued through joint work with the CSC.</p> |
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| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year End cumulative Actual & RAG | Trend vs Year end 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---|---|--------------|--------------|----------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| CHR002i v PAM | Number of working days lost per FTE due to sickness absence (Children's Directorate staff, excluding schools) <i>Lower preferred</i> | 9.1 | 9.1 | 11.98 | ↑ 12.47 | 9.85 | 17 | Annual Performance: Total days lost per FTE for Education and Transformation in 2015-16 was 11.98, exceeding the target of 9.10 by a significant margin. As the 2014-15 sickness figures included Child Safeguarding and Family Support staff sickness, a true comparison of the Education and Transformation staff sickness absence for 2014-15 and 2015-16 is not possible. The directorate is in the process of establishing the means for detailed, on-going interrogation and analysis of raw sickness data. The outcomes of which will be provided to group managers, for consideration and appropriate action, supported by Senior Management Team overview. Target: A report on sickness targets for 2015-16 was presented to CMB on 28/9/15 and it was agreed that the directorate targets for 2015-16 remain as they were for 2014-15. |

| PI Ref No | PI Description and preferred outcome | Annual target 15-16 £'000 | Red | | Amber | | Green | | Comments |
|----------------------------|---|------------------------------|-------|----|-------|-----|-------|-----|---|
| | | | £'000 | % | | | £'000 | % | |
| DCH6.1.1iv | Value of planned budget reductions achieved | 2,451 | 0 | 0% | 337 | 14% | 1751 | 86% | NB RAG in line with Finance Budget Monitoring Report Overall position: Red - as greater than 10% shortfall. Further detail below. |

Other priority/business as usual

| Code | Action Planned | Status | Comments | Next Steps(for Red and Amber only) |
|------------------------|--|--------|---|------------------------------------|
| DCH1.1 | Develop directorate risk register. | GREEN | There are now processes in place to rigorously identify the project level risks via the Group planning processes. | |
| DCH1.2 | Develop directorate communication and consultation plan. | GREEN | School modernisation board signed off the approved documents 21/1/16 | |

| PI Ref No | PI Description and preferred outcome | 14-15 target | 15-16 target | Year end cumulative Actual & RAG | Trend vs Year end 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------|---|--------------|--------------|----------------------------------|--------------------------------|--------------------------------|----------------------------|--|
| DCH5.6.2 | Number of working days lost per FTE due to industrial injury(Children's Directorate staff, <i>excluding</i> schools) <i>Lower preferred</i> | n/a | 0.571 | 0.4234 | ↓ 0.10 | n/a | n/a | There were 6 absences due to industrial injury in Q4 for the directorate (excluding schools). The total FTE days lost in Q4 was 107.13, which was significantly better than target. The total number of absences for the year was 18, exceeding the target total of 10. The total FTE days lost for the year was 176.02. This compares to a total of 10 absences and a total of 109.92 FTE days lost in 2014-15. |

Additional Financial Information - Main Revenue Budget Variations

The net budget for the Directorate for 2015-16 was £105.995 million and the actual outturn was £105.667 million, resulting in an under spend of £328,000. There was £333,000 drawn down from earmarked reserves during the year for specific pressures, including £256,000 draw down of school balances and £45,000 for demolitions.

The most significant variances are detailed below:

| EDUCATION & TRANSFORMATION DIRECTORATE | Net Budget £'000 | Actual Outturn £'000 | Variance Over/(under) budget £'000 | % Variance |
|--|---------------------|-------------------------|---------------------------------------|------------|
| Inclusion | 3,570 | 2,639 | (931) | -26.1% |
| Youth Service | 422 | 326 | (96) | -22.7% |
| School Improvement | 785 | 861 | 76 | 9.7% |
| Home to School / College Transport | 4,310 | 4,648 | 338 | 7.8% |
| Dismissal / Retirement Costs | 983 | 1,403 | 420 | 42.7% |

Inclusion

- The LEA Special Needs budget under spent by £107,000 due to strict vacancy management pending budget reductions in 2016-17.
- The Schools Special Needs budget under spent by £218,000 primarily as a result of vacancy management (£168,000), and reduced spend on one-to-one support due to difficulties in recruiting staff.
- There was an under spend of £493,000 on the budget for out of county education placements due to a reduction in the number and cost of placements (28 external placements compared with 32 in March 2015) with Recoupment income also exceeding budget by £113,000.

Youth Service

- There was an under spend on the Youth Service budget which was as a result of an under spend on staffing of £29,000 and additional grant income received in year of £52,000.

School Improvement

- There is an over spend on the School Improvement budget of £76,000 as a result of additional support provided by the Corporate Director to schools in difficulty and facing challenges, including additional teaching support and resources. In particular a considerable financial investment was required to support Year 11 pupils in Coleg Cymunedol Y Dderwen to ensure that they had the best opportunity to be successful in this summer's GCSEs.

Home to School / College Transport

- There is an over spend of £338,000 on Home to School / College transport as savings anticipated due to further retendering of contracts were less than anticipated. In addition, the 2015-16 MTFs savings have not been fully achieved partly due to the limited rationalisation of contracts because of increases in the number of pupils eligible for transport. Route efficiencies have not been fully realised as the agreed change to the Learner Travel policy by Cabinet will not now be implemented until September 2016 and this will not bring the same level of savings as were originally identified. Further efficiencies to SEN and Looked After Children (LAC) transport have been ongoing but have been impacted by some increased demand for individual transport due to the needs of individual children and our duty as a Local Authority to ensure that they are transported in line with our statutory responsibilities and our current Learner Travel policy.

Dismissal / Retirement Costs

- The over spend of £420,000 relates to an increased number of school redundancies and early retirements in 2015-16, as a result of falling school rolls, or pressure on school budgets, which have been approved by the Corporate Director. An earmarked reserve was established at the end of 2014-15 to meet any additional costs above budget, but this has not been drawn down due to the Directorate's overall under spend.

Schools' Delegated Budgets

- School balances reduced from £2.410 million at the end of March 2015 to £2.154 million at the end of March 2016 (a reduction of £256,000), representing 2.36% of the funding available. Total deficit budgets equate to £621,000 and total surplus budgets equate to £2.775 million.

- There are 6 schools (3 primary, 3 secondary) with deficit budgets and 14 schools (11 primary, 2 secondary, 1 special) with balances in excess of the statutory limits (£50,000 primary, £100,000 secondary and special schools) in line with the School Funding (Wales) Regulations 2010. These balances will be analysed by the Corporate Director, in line with the agreed 'Guidance and procedures on managing surplus school balances'.

Additional Financial Information - Main Capital Budget Variances

The year end spend for the Directorate is £8.911 m, with an underspend of £55k and slippage requested of £55k. The most significant variances are detailed below:

| | Revised P12 budget 2015/16 £'000 | Total Expenditure to P12 2015/16 £'000 | Over/ (Under) budget £'000 | Slippage Requested £'000 | Impact on BCBC Resources £'000 | Comments |
|--|-------------------------------------|---|-------------------------------|-----------------------------|-----------------------------------|---|
| Coety/Parc Derwen Primary School | 5,309 | 5,402 | 93 | -93 | 0 | Funding brought forward from 2016/17 |
| Tondu Primary School Temporary Accommodation | 29 | 0 | -29 | 29 | 0 | Small amount to be carried forward |
| West Park Pry School Temporary Accommodation | 250 | 202 | -48 | 48 | 0 | Small amount to be carried forward |
| Pencoed Primary School | 100 | 104 | 4 | -4 | 0 | Funding brought forward from 2016/17 |
| Pencoed Artificial Pitch | 187 | 175 | -12 | 12 | 0 | Small balance to be carried forward. Scheme now complete. |
| Flying Start Provision | 281 | 249 | -32 | 32 | 0 | |
| Schools Modernisation Retentions | 63 | 0 | -63 | 63 | 0 | |
| Studio 34, Pyle | 74 | 0 | -74 | 74 | 0 | Payment slipped to 2016/17 |
| Children's Directorate Minor Works | 1,178 | 1,284 | 106 | -106 | 0 | Earlier draw-down of previously agreed slippage |

Additional Financial Information - Children's Budget Reduction Monitoring Variances

| Ref. | Budget Reduction Proposal | Original 2015-16 £000 | Amount of saving achieved in 2015-16 £000 | Reason for overspend in 2015-16 | Current RAG Status (RAG) |
|------|---|--------------------------|--|---|--------------------------|
| CH3 | Retender Learner Transport contracts | 400 | 363 | Route efficiencies have not being fully realised as the agreed and revised change to the Learner Travel policy by Cabinet will not now be implemented until September 2016 and this will not bring as significant savings as envisaged when the MTFS savings were originally identified. | |
| CH4 | Rationalise Special Education Needs transport | 100 | | Savings anticipated due to further retendering of contracts were less than anticipated for this year as the majority of savings against retendering bus contracts were made in the 2014/15 financial year. Furthermore, the 15/16 MTFS savings have not been fully achieved partly due to the increases in the number of pupils eligible for transport. | |
| CH9 | School transport route efficiencies | 200 | | Further efficiencies to SEN and LAC transport have been ongoing but have been impacted by some increased demand for individual transport due to the needs of individual children and our duty as LA to ensure that they are transported in line with our statutory responsibilities and our current Learner Travel policy. | |

Additional Sickness Information by Service Area

| | Average FTE 31.12.15 | 2015/16 | | | | | 2014/15 |
|---|----------------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | | QTR1 | QTR2 | QTR 3 | QTR 4 | QTR 4 Cum | QTR 4 Cum |
| | | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE |
| Strategy Partnership & Commissioning | 321.25 | 3.43 | 2.31 | 2.81 | 3.80 | 12.35 | 11.24 |
| Business Strategy & Performance | 26.03 | 1.13 | 0.06 | 4.19 | 2.11 | 7.49 | 13.02 |
| Catering Services | 118.30 | 3.14 | 1.85 | 2.57 | 2.47 | 10.83 | 8.58 |
| Transformation Team | NA | 16.5 | 44.00 | 21.50 | NA | 82 | NA |
| Education & Transformation Total (excl. Schools) | 467.57 | 3.35 | 2.41 | 2.87 | 3.35 | 11.98 | 12.47 |

Additional Sickness Information by Absence Reason

| Absence Reason | % of Total FTE days Lost |
|---|--------------------------|
| Stress / Anxiety / Depression / Mental Health | 32.50% |
| MSD including Back & Neck | 11.70% |
| Return to Work Form Not Received | 11.01% |
| Stomach / Liver / Kidney / Digestion | 10.94% |
| Tests / Treatment / Operation | 8.17% |
| Infections | 6.95% |
| Chest & Respiratory | 5.10% |
| Genitourinary / Gynaecological / Pregnancy | 4.71% |
| Heart / Blood Pressure / Circulation | 3.50% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 2.86% |
| Neurological | 2.52% |
| Injury | 0.02% |
| Cancer | 0.01% |
| Total | 100.00% |

Communities Directorate Performance Year End 15-16:

The overall Directorate performance remains positive with again 14 of the 17 Business Plan commitments ‘green’ and the remaining 3 ‘amber’, the same position as at the end of Quarter 3. The main challenges remain meeting the requirements of the MTFs and also the large number and complexity of the transformational projects to be delivered. The resources within the Directorate to focus on this and at the same time continue to ensure day to day service provision is maintained at an acceptable level are at times very stretched. There is also a recognisable dis-connect between the expectations of some elected Members and members of the public and the level of service we are now able to provide.

The Directorate out-turned a small underspend of £214k at year end on an overall revenue budget of £25.228m. This is a significant improvement on the Quarter 3 forecast of a small overspend and is due in the main to use of reserves. This is a very positive outcome bearing in mind the volatility of some budgets e.g. waste tonnage disposal and the fact that a number of anticipated MTFs savings were not delivered due to changes in political priorities e.g. blue badge parking charges, which was anticipated to bring in income up to £165k.

The Directorate targets for 2015/16 have not been met although both short and long term sickness is significantly less than last year. This has been achieved despite Awen Trust being established in October 2015, where a large number of staff with relatively low level sickness were transferred out of the Directorate.

A number of long term sickness cases which have proved difficult to resolve remain the main cause for concern, although there has been good progress on these in the last quarter.

There have been a number of notable successes in Quarter 4:

- Corporate re-structure has resulted in Housing and Community Regeneration moving out of the Directorate and Property Services in
- Coastal Services due to move to the Directorate from October 2016 and client responsibility for Awen Trust out at that time
- Waste recycling met the Welsh Government target of 58%
- A new Housing Strategy was prepared and published
- The VVP Programme in Bridgend Town Centre has continued to progress and a study looking at options to relax pedestrianisation has been completed
- The contract documentation for the new Waste Collection Contract has been published
- The preparation for City Deal has progressed and initial outline priorities developed

| Commitments 2015-16 | | | | | All Indicators | | National Indicators | |
|--|-------|-----|-------|-------|-----------------------|---------------------------|-----------------------|---------------------------|
| RAG – current progress against commitment | Total | Red | Amber | Green | Performance vs Target | Trend vs Year End 2014-15 | Performance vs Target | Trend vs Year End 2014-15 |
| Year End 2015-16 Communities Directorate Commitments | 17 | 0 | 3 | 14 | | | | |
| Finance | | | | | Human Resources | | | |

Revenue Budget

- The net revenue budget for the Directorate for 2015/16 is **£25.228m**.
- The year-end financial outturn is **£25.014m** meaning an **underspend of £214k**.

Capital Budget

- The revised budget for the Directorate for 2015-16 is **£13.231m**.
- The year end spend is **£12.123m**, with slippage of **£1.115m** into 2016-17.

Budget Reductions

| Budget reductions (£000) | 2015-16 | % |
|--------------------------------|---------|-----|
| Budget reduction Target | 2,488 | |
| Achieved | 1,641 | 66% |
| Overall variance | 847 | 34% |

Additional Information is provided at the end of the report.

Implications of Financial Reductions on service performance and other key issues

The significant budget cuts over recent years in the Directorate, and the forecast that substantially more will need to be cut during the remaining years of the MTFS, continue to make it extremely challenging to maintain performance at historic levels in some areas of service. Certainly there is sometimes a mis-match between some public and elected Member expectation and the current level of resources and resilience in the Directorate.

Previous summary reports to CPA have highlighted how the standard of cleanliness of our streets has been impacted by the reductions in staffing but similar challenges exist in terms of maintenance of parks and playing fields, cemeteries, and highways, as well as our ability to respond effectively to community regeneration opportunities. There is a need for clarity and consensus on the role that street scene services play, in particular, towards the ‘supporting the local economy’ corporate priority.

However, the overall out-turn position is positive for 2015/16 despite a number of envisaged MTFS savings not being achieved in full. Corporate support and use of reserves has been important in this.

The forecast MTFS ‘most likely scenario’ however will mean that it is unlikely that some of the current services provided will be able to be continued with the forecast budget at the end of the MTFS period, meaning that only waste services and very low level statutory compliance would be possible.

A clear strategy is needed urgently to inform this direction of travel.

(Annual Target – 8.00. Current Status - **RED**)

Long term sickness continues to be the major concern and means that the overall Directorate sickness target has not been achieved. The revised procedures the Council is adopting will hopefully impact on this moving forward. However, both long term and short term sickness remain significantly below the levels of last year so it is an improving picture. Short term sickness remains well controlled and managed, with a large percentage of the Directorate employees taking no or very low levels of sickness absence and some recent successes in resolving long term sickness cases.

High Corporate Risks (risk owner)

| Residual Risk | Improvement Priority | Likelihood | Impact | Overall |
|------------------------------------|---------------------------|------------|--------|---------|
| The economic climate and austerity | 1 – Develop local economy | 4 | 4 | 16 |
| Disposing of waste | 6 – Best use of resources | 4 | 4 | 16 |
| Maintaining infrastructure | 1 – Develop local economy | 4 | 4 | 16 |
| Impact of homelessness | 3 – Tackle problems early | 5 | 3 | 15 |

KEY:

| Commitments | | Performance Indicators (RAG) | | Performance Indicators (Trend) | | Performance Indicator types |
|--------------|--|------------------------------|---|--------------------------------|---|---|
| Red | Most key milestones are missed | Red | Performance is worse than target by 10% or more | ↑ | Performance improved vs same quarter of previous year | NSI: National Strategic Indicator |
| Amber | Most key milestones are on track, but some are at risk | Amber | Performance is worse than target by under 10% | ↔ | No change in performance vs same quarter of previous year | PAM: Public Accountability Measure |
| Green | All key milestones are on track. No reason for concern | Green | Performance is equal to or better than target | ↓ | Performance declined vs same quarter of previous year | OA: Outcome Agreement |

Improvement Priority One: Working together to develop the local economy

| Code | Action Planned | Status | Comments | Next Steps (for amber and red only) |
|------------------------|---|--------------|--|-------------------------------------|
| P1.1.1 | Develop bids and secure funding for the next phase of economic development and urban regeneration projects through the EU convergence programme, up to 2020, to deliver this corporate priority. | AMBER | Bids have been prepared and ranked favourably against other regional projects. | Decisions are awaited. |
| P1.1.2 | Continue implementation of a composite regeneration programme in Bridgend town centre | GREEN | There has been considerable progress in implementation of town centre schemes, including the Rhiw Gateway, THI and Nolton Street property enhancement. There has been a delay in bringing the BID to ballot stage, but this is due to take place in June 2016. | |
| P1.1.3 | Re-appraise development options and deliver regenerations projects in Porthcawl | GREEN | There has been a period of heightened regeneration activity in Porthcawl this year, with the launch of the THI, the preparatory work on the Jennings, the extension to the Conservation Area and working with Harbourside CIC (Community Interest Company) to support the appropriate development of their schemes. The Coastal Partnership has gone from strength to strength, and is now an effective vehicle of partnership working between local and national stakeholders. | |
| P1.1.4 | Continue to implement the first phase of a number of key land reclamation and development projects in Maesteg and the Llynfi Valley | GREEN | A considerable programme of regeneration activity is underway in Maesteg Market projects demonstrate clear successes in delivery and achievement of outcomes. The town centre partnership is developing well and fully delivered all planned projects. The remediation of Maesteg Washery West site has yet to be commissioned, pending confirmation of payback requirements. | |
| P1.1.5 | Implement the Rural Development Programme 2014-2020 working with rural communities and partners towards achieving self-sustaining rural communities, diversified rural enterprises and vibrant rural economies. | GREEN | Project development and delivery is progressing well across all areas of the programme. Research work commissioned on Community Asset Transfer will help to inform the Council's strategy for the future. This will be concluded in the next quarter. | |
| P1.2.6 | Provide focused support for businesses and support social enterprises to help them invest and create jobs | GREEN | The first phase of the Sirolli project (enterprise facilitation) came to an end and WG have approved a successor programme. Closure work was successfully concluded on Local Investment Fund and South East Wales Community Economic Development Programme (SEWCED). The Business Forum continues to grow in strength and number. A new Chair was appointed, Ian Jessop, following the standing down of Alison Hoy, after a number of successful years as Chair. The extensive Business Events programme was delivered, including the high profile Bridgend Business Awards, with sponsorship from local businesses. | |

| | | | | |
|------------------------|--|-------|--|--|
| P1.2.7 | Engage with people and communities to understand their learning needs so that adult community learning provision is commissioned to meet outcomes and employment prospects are improved | GREEN | Q1- Adult Community Learning (ACL) transformation concluded in May 2015 in response to revised Welsh Government funding model. Service Plan received positive response from Welsh Government based on addressing key priority areas and focussing on engagement and return to work programmes. Q2- The ACL Service continues to prioritise its provision on targeted employment programmes and addressing local economic factors by developing needs based courses and opportunities to help people into work. Q3- Significant changes to planned implementation of commissioned services due to funding cuts to other providers. Some commissioning still progressing but a direct delivery model adopted in agreement with Bridgend Learning Partnership Strategic Board. Digital literacy and inclusion focus partly achieved through work undertaken by the E-Learning team. Work to be significantly increased in quarter 4 with the recruitment of a dedicated Digital Skills and Inclusion tutor which will enable achievement of full target. | |
| P1.3.8 | Continue improvements in transport, pedestrian and cycle links between the bus and rail network and employment and education sites to include schemes in Bridgend, Maesteg and Porthcawl | AMBER | The majority of projects have progressed to target with the exception of the traffic management project for Porthcawl which has undergone intensive consultation in regard of both Residential and on street parking proposals. | Take forward outcome of consultations. |
| P1.3.9 | Identify and implement physical improvements to the public rights of way and cycle track network using Welsh Government Rights of Way Improvement Plan(RoWIP) and other grant funding | GREEN | The RoWIP funding has been utilised for the financial year 15/16 with a variety of projects completed. | |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End cumulative Actual & RAG | Trend vs Year End 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|-----------------------------|---|---------------------|---------------------|----------------------------------|--------------------------------|--------------------------------|----------------------------|--|
| DCO.L.1.8i | The number of visitors to town centres (annual footfall in Bridgend) <i>Higher preferred</i> | 5,000,000 | 5,000,000 | 6,527,906 | ↑ 5,354,363 | n/a | n/a | Target setting: Target set to maintain target from previous year. |
| DCO.L.1.8ii | The number of visitors to town centres (annual footfall in Porthcawl). <i>Higher preferred</i> | 2,700,000 | 2,700,000 | 5,013,457 | ↑ 3,975,792 | n/a | n/a | Target setting: Target set to maintain target from previous year. |
| DCO1.1.3i | Number of vacant premises in town centres: Bridgend <i>Lower preferred</i> | 64 | 64 | 55 | ↔ 55 | n/a | n/a | Target setting: Target has been set to monitor vacant premises as a measure of the business in operation in the town. |
| DCO1.1.3ii | Number of vacant premises in town centres: Maesteg <i>Lower preferred</i> | 18 | 19 | 12 | ↑ 19 | n/a | n/a | Target setting: Target has been set to monitor vacant premises as a measure of the business in operation in the town. |
| DCO1.1.3iii | Number of vacant premises in town centres: Porthcawl <i>Lower preferred</i> | 16 | 17 | 16 | ↑ 17 | n/a | n/a | Target setting: Target has been set to monitor vacant premises as a measure of the business in operation in the town. |
| DCO.OA.1.2 | Additional floorspace created through the Townscape Heritage Initiative (THI) and the Town Improvement Grant (TIG) <i>Higher preferred</i> | 800 | 800 | 336 | ↓ 1851 | n/a | n/a | Delayed schemes include Victoria Inn / Elder Street, Jennings, Knights Arms. There have been delays to schemes that has meant the target has not been achieved by April 2016 for floor space development. Elder Street was delayed in implementation, as the applicant did not start the work at the scheduled time. The Jennings scheme was delayed by problems on site including purchasing and flooding issues. The Knights Arms scheme was delayed due to the applicant. Target setting: Jennings, Look Out Tower, Customs House, Sahi Restaurant, Victoria/Elder Street Jennings Knight Arms. |
| DCO.OA.1.3 | Buildings brought back into use through the Townscape Heritage Initiative(THI) and Townscape Improvement Grant (TIG). | 1 | 1 | 2 | ↔ 2 | n/a | n/a | Target Setting: TIG and THI projects are 5 year projects with targets set and monitored over this time. |

| | | | | | | | | |
|--|---|------------|----------|------------|----------------|------|-----|---|
| | <i>Higher preferred</i> | | | | | | | |
| DCO.OA.1.7 | Increased number of active businesses through the Town Improvement Grant (TIG) <i>Higher preferred</i> | 1 | 1 | 1 | ↓ 2 | n/a | n/a | Community Improvement Grant business in Pontycymmer. Target Setting: TIG and THI projects are 5 year projects with targets set and monitored over this time. |
| DCO.OA1.10 | Number of VAT/PAYE registered businesses in the Borough <i>Higher preferred</i> | 4,001 | 4,002 | 4400 | ↑ 4,090 | n/a | n/a | |
| DCO.OA1.11 | Number of jobs created (Local Investment Fund) <i>Higher preferred</i> | 5 | 5 | 380 | ↑ 48.5 | n/a | n/a | Target Setting: Project ended on 30/06/15. All targets for Bridgend CB were met (Targets were set by WEFO for 6 authorities and these were in turn agreed and shared between the 6 authorities) |
| DCO1.2.3 | Total annual expenditure by tourists <i>Higher preferred</i> | £294.8m | £306.6m | £313.0m | ↑ £306.6m | n/a | n/a | |
| THS007 NSI | Percentage of adults aged 60 or over who hold a concessionary bus pass <i>Higher preferred</i> | 91 | 89 | 91.32 | ↑ 90.65 | 85.8 | 6 | Target Setting: National Target (NSI) reporting on LA performance to ensure maintenance and drive continuous improvement. |
| THSO11a | Percentage of: Principal (A) roads in overall poor condition <i>Lower preferred</i> | 6.96 | 6.96 | 4.71 | ↑ 5.1 | 4.1 | 19 | Target Setting: Indicator reported to and set by Welsh Government. |
| THSO11b | Percentage of: non-principal (B) roads in overall poor condition <i>Lower preferred</i> | 9.88 | 9.88 | 4.92 | ↓ 4.84 | 5.0 | 8 | Target well below Welsh Government target. Slight variation in year on year performance. Target Setting: Indicator reported to and set by Welsh Government. |
| THSO11c | Percentage of: non-principal (C) roads in overall poor condition <i>Lower preferred</i> | 12.82 | 13.5 | 10.11 | ↑ 12.78 | 17.2 | 11 | Target Setting: Indicator reported to and set by Welsh Government. |
| THSO12 PAM | Percentage of: Principal (A) road, non-principal (B) roads, and non-principal (C) roads in overall poor condition <i>Lower preferred</i> | 8.42 | 9.42 | 7.06 | ↑ 7.7 | 11.9 | 9 | Target Setting: Indicator reported to and set by Welsh Government. |
| DCO.OA.1.4 | Lane length of (A) and (B) roads resurfaced, or treated (km) <i>Higher preferred</i> | 1.8 | 2.6 | 3.8 | ↑ 2 | n/a | n/a | Target Setting: The target has been set with the objective of maintaining and improving Council performance. |
| DCO.OA.1.4i and DCO.OA.1.4ii | Lane length (km) of: (A) Roads; and (B) Roads resurfaced or treated <i>Higher preferred</i> | 0.6 1.2 | 1 1.6 | 2.2 1.6 | ↑ 0.7 ↑ 1.3 | n/a | n/a | Target Setting: The target has been set with the objective of maintaining and improving Council performance. |
| DCO.OA1.5 | Emergency repairs undertaken to carriageways (all types) within the specified response time of one day <i>Higher preferred</i> | 95 | 95 | 97 | ↔ 97 | n/a | n/a | Target Setting: The target has been set with the objective of maintaining and improving Council performance. |
| CMT001 | Percentage of total length of Rights of Way that is easy is to use by members of the public <i>Higher preferred</i> | 91 | 80 | 68.97 | ↓ 78.21 | n/a | n/a | The continued decrease in the percentage of paths that are defined as 'Easy to Use' following the annual survey of the rights of way network is very disappointing particularly given the continued budgetary investment in works to maintain and improve the network by the Council and its partners. Not only is the number of paths that are deemed to be 'Easy to Use' 9% below last years' figure but it is just about 11% below target. As per previous years both Capital and Revenue budgets as well as grant funding has been used to deal with issues which have a hearing on the Indicator results, such as signposting, vegetation overgrowth, surface improvements and structure installation and repairs. However, with a significant reduction in staff resources within the Rights of Way section for most of the year this particular aspect of the Council's duties has been |

| | | | | | | | | | |
|---------------------------|--|----|----|----|---|----|-----|--|---|
| | | | | | | | | <p>very under-resourced. It is not surprising, therefore, that almost every path that has failed has done so because it is obstructed or has some other unlawful barrier preventing access.</p> <p>The Council cannot, therefore, be complacent even in the current tough economic conditions in taking forward infrastructure replacements projects as well as undertaken its statutory duties in terms of vegetation clearance and enforcement.</p> <p>Target Setting: The target was set to drive improvements in results by concentrating on the statutory duty of enforcement and maintenance.</p> | |
| DCO.L.1.4 | Overall success rates(%) for adult community learners <i>Higher preferred</i> | 77 | 77 | 93 | ↑ | 84 | n/a | n/a | <p>Target Setting: Results monitored regularly by Adult Community Learning to ensure outcomes of course delivery successful.</p> |

Improvement Priority Two: Working together to raise ambitions and drive up educational achievement

| Code | Action Planned | Status | Comments | Next Steps (for amber and red only) |
|------------------------|---|--------|--|-------------------------------------|
| P2.1.9 | Promote libraries and implement a series of programmes designed to get more children and young people to enjoy reading. | GREEN | The Library Service successfully transferred to Awen Cultural Trust, achieving the 1 st October milestone for this transition. The Council will now work with the Trust in accepting a service plan for 2016/17 against an agreed Outcomes Framework. | |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year end cumulative Actual & RAG | Trend vs Year end 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------------|--|---------------------|---------------------|----------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| DCO5.5.3 | Percentage of children under 5 who are members of the library service. <i>Higher preferred</i> | 27.5 | 28 | 30.15 | ↓ 31.26 | n/a | n/a | <p>Slight decrease compared to 14-15 (31.26) figure; to be viewed in context of national trend.</p> <p>Target Setting:</p> |
| LCL001b NSI | Number of visits to public libraries during the year, per 1,000 population. <i>Higher preferred</i> | 4200 | 4500 | 4351 | ↓ 4460 | 5526 | 15 | <p>Although total visits fell slightly in 15/16 (reduction of less than 2% to 614,431) this should be viewed in the context of the national picture in which visits are expected to show a greater decrease this year.</p> <p>Target Setting: Indicator reported to and set by Welsh Government.</p> |

Improvement Priority Four: Working together to help vulnerable people to stay independent

| Code | Action Planned | Status | Comments | Next Steps (for amber and red only) |
|------------------------|---|--------------|---|---|
| P4.2.4 | Take reasonable steps to prevent homelessness in line with strengthened duties under the new Housing (Wales) Act 2014 | AMBER | <p>Private sector landlords who manage properties in the county borough have been consulted on the development of a 'Landlord Offer' which includes a financial incentive to secure their properties as a long-term let and also as shared accommodation for applicants whom the Council owe a duty to. Take up has been low but this is being discussed in the Landlords Forum in June 2016. There is a shortage of shared accommodation in the County Borough and Valleys to Coast (V2C) have agreed to work with the Council to develop a pilot model.</p> <p>The Housing Solutions Team, in conjunction with the Supporting People Team, has successfully tendered a young person's service which includes short term crisis and move-on accommodation and are also tendering for temporary supported accommodation as an alternative to bed and breakfast. This model will be accommodation based with a support provider supporting vulnerable homeless persons including 16/17 year olds.</p> <p>The Housing Solutions Team have continued to secure accommodation on an individual basis by negotiation in the private rented sector through financial incentives such as cash bonds, rent in advance, rent arrears, and shortfalls in rent etc. utilising funding provided by the Welsh Government for implementation of the Housing (Wales) Act 2014. The Team also offer support to the tenants in maintaining their tenancies via floating support funded through the Supporting People Programme.</p> <p>Recruitment in the Housing Solutions Team is on-going. Of the 3 additional Housing Solution Advisor posts vacant 1 has been filled for a 2 year contract. The remaining 2 posts and also a Housing Solutions Assistant are yet to be appointed. However, due to the short term funding for the posts and the lack of experienced personnel to appoint most applicants to date have not meet the essential criteria for the role. These posts are currently under review for an alternative way of delivering the service.</p> | <p>Take up of financial incentives to secure private sector properties as a long-term let and also as shared accommodation is being discussed in the Landlords Forum in June 2016.</p> <p>Recruitment in the Housing Solutions Team is currently under review to identify an alternative way of delivering the service.</p> |
| P4.2.5 | Help vulnerable people retain their dignity and stay as independent as possible in accommodation that best meets their needs (CO) | AMBER | <p>The Co-ordinator post to implement the Gateway (a service model for single point of access and referral for supported accommodation maintained by Bridgend County Borough Council) has been advertised both internally and externally and interviews have been held. However, a successful candidate could not be appointed. It is envisaged that the post will be re-advertised in QTR2 2016/17.</p> <p>Supporting People domestic abuse services have been commissioned. The new provider is Calan Domestic Violence Service and the contract started on 1st May 2015. It provides support to victims who have been subjected to domestic abuse. This includes crisis accommodation based support, target hardening to help victims stay or return home if safe to do so as well as an advice and floating support service.</p> <p>Supporting People floating support services have been commissioned. The provider is Gwalia and the contract started on 1st January 2016. It provides support to vulnerable people in their own homes to help maintain their tenancies and maximise independence.</p> | <p>The Co-ordinator post to implement the Gateway will be re-advertised in QTR2 2016/17.</p> |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year end cumulative Actual & RAG | Trend vs Year end 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|---------------------------|--|---------------------|---------------------|----------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| DCO.OA4.1 | Number of homeless households with dependent children in bed and breakfast accommodation <i>Lower preferred</i> | 8 | 3 | 0 | ↔ 0 | n/a | n/a | Target Setting: The target has been set with the objective of maintaining current council performance. |

| | | | | | | | | |
|---|---|------------|------------|----------------|---------------------|-------------|------------|---|
| <p>DCO.OA4.2</p> | <p>The number of units of supported accommodation available via a single point of access maintained by Bridgend County Borough Council <i>Higher preferred</i></p> | <p>51</p> | <p>172</p> | <p>151</p> | <p>↑ 51</p> | <p>n/a</p> | <p>n/a</p> | <p>The target has not been met as a number of units are in the process of being re-commissioned or about to be re-commissioned. Target Setting: The target has been set with the objective of driving relative improvement against previous Council performance.</p> |
| <p>DCO.OA4.3</p> | <p>Number of people helped with Care and Repair services (funded by the Private Sector Housing Renewal and Disabled Adaptations Policy) <i>Higher preferred</i></p> | <p>243</p> | <p>450</p> | <p>680</p> | <p>↑ 450</p> | <p>n/a</p> | <p>n/a</p> | <p>Target Setting: The target has been set with the objective of driving relative improvement against previous Council performance.</p> |
| <p>DCO.OA4.4</p> | <p>Percentage of homeless households with dependent children who have been placed in bed and breakfast accommodation as a proportion of all homeless households with dependent children placed in temporary accommodation <i>Lower preferred</i></p> | <p>8</p> | <p>6</p> | <p>0</p> | <p>↔ 0</p> | <p>n/a</p> | <p>n/a</p> | <p>Target Setting: The target has been set with the objective of maintaining current council performance.</p> |
| <p>DCO.OA4.5</p> | <p>Percentage of people who have maintained their independence for six months as a proportion of people helped with Care and Repair services (funded from the Private Sector Housing Renewal and Disabled Adaptations Policy) <i>Higher preferred</i></p> | <p>97</p> | <p>96</p> | <p>No data</p> | <p>97.94</p> | <p>n/a</p> | <p>n/a</p> | <p>Monthly Performance: QTR3 and QTR4 data not yet available as this is provided by Bridgend Care & Repair who are external to the Council. Therefore have recorded nil in the figures. Will update the actual figures as soon as they are available Target Setting: The target has been set with the objective of driving relative improvement against previous Council performance.</p> |
| <p>HHA013</p> | <p>Percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months <i>Higher preferred</i></p> | <p>61</p> | <p>67</p> | <p>67.67</p> | <p>↑ 64.2</p> | <p>65.4</p> | <p>n/a</p> | <p>Target Setting: The target has been set with the objective of achieving the Welsh average which in 2013/14 was 67%. This indicator was previously a national strategic indicator but was deleted in 2015/16.</p> |
| <p>PSR002 NSI,PAM</p> | <p>Average number of calendar days taken to deliver a Disabled Facilities Grant <i>Lower preferred</i></p> | <p>253</p> | <p>307</p> | <p>321.51</p> | <p>↓ 182.26</p> | <p>231</p> | <p>6</p> | <p>The method of calculating the indicator figure has changed slightly following a Review of Independent Living Adaptations carried out by Welsh Government in January 2015. The review identified that the start point for timing was being interpreted differentially by different local authorities. Clarification was therefore provided by Welsh Government that the starting point should be the date of first contact. Processes have therefore been changed to ensure the date of first contact is now recorded and used as the starting point. As the number of days awaiting an Occupational Therapy(OT) assessment and having the OT assessment carried out are now counted in the indicator figure, the average number of days has increased. This was anticipated with the change, however, it better reflects the average number of days waiting from the service users perspective. The target was not achieved as a result of completions within 2015/16 being cases originally caught up in a backlog of referrals at the initial stage of the process. Target Setting: This is a national strategic indicator. The Target has been set with the objective of sustaining performance following the method of calculating the indicator figure changing slightly following a review of Independent Living Adaptations carried out by Welsh Government in January 2015. The review identified that the start point for timing was being interpreted differently by different local authorities. Clarification was therefore provided by Welsh Government that the starting point should be the date of first contact. Processes have therefore been changed to ensure the date of first contact is now recorded and used as the starting point. The number of days awaiting an OT assessment and having the OT assessment carried out are now counted in the indicator figure. The target has been increased to reflect this.</p> |

| | | | | | | | | |
|--------------------------------|--|------------|------------|---------------|---------------------|------------|------------|--|
| <p>PSR009a</p> | <p>The average number of calendar days taken to deliver a Disabled Facilities Grant for: a) Children and young people <i>Lower preferred</i></p> | <p>295</p> | <p>411</p> | <p>594.55</p> | <p>↓ 321.33</p> | <p>n/a</p> | <p>n/a</p> | <p>The method of calculating the indicator figure has changed slightly following a Review of Independent Living Adaptations carried out by Welsh Government in January 2015. The review identified that the start point for timing was being interpreted differentially by different local authorities. Clarification was therefore provided by Welsh Government that the starting point should be the date of first contact. Processes have therefore been changed to ensure the date of first contact is now recorded and used as the starting point. As the number of days awaiting an OT assessment and having the OT assessment carried out are now counted in the indicator figure, the average number of days has increased and more so for children's cases due to the involvement of additional specialist medical assessments. This was anticipated with the change, however, it better reflects the average number of days waiting from the service users perspective. The target was not achieved as a result of completions within 2015/16 being cases originally caught up in a backlog of referrals at the initial stage of the process.</p> <p>A majority of the schemes involved comprehensive design layouts and after commencement the works required additional unforeseen works related to the specialist equipment. The families were also resident in the property whilst the works were being undertaken. In addition these works require permission from utility companies and organisations e.g. Welsh Water, and there are set timescales involved in obtaining the relevant approvals. These factors are outside of our control and cause delays which are unavoidable.</p> <p>Target Setting: The target has been set with the objective of sustaining performance following the method of calculating the indicator figure changing slightly following a Review of Independent Living Adaptations carried out by Welsh Government in January 2015. The review identified that the start point for timing was being interpreted differentially by different local authorities. Clarification was therefore provided by Welsh Government that the starting point should be the date of first contact. Processes have therefore been changed to ensure the date of first contact is now recorded and used as the starting point. The number of days awaiting an OT assessment and having the OT assessment carried out are now counted in the indicator figure. The target has been increased to reflect this.</p> |
| <p>PSR009b</p> | <p>The average number of calendar days taken to deliver a Disabled Facilities Grant for: b) Adults <i>Lower preferred</i></p> | <p>196</p> | <p>237</p> | <p>294.74</p> | <p>↓ 173.38</p> | <p>n/a</p> | <p>n/a</p> | <p>Monthly Performance: The method of calculating the indicator figure has changed slightly following a Review of Independent Living Adaptations carried out by Welsh Government in January 2015. The review identified that the start point for timing was being interpreted differentially by different local authorities. Clarification was therefore provided by Welsh Government that the starting point should be the date of first contact. Processes have therefore been changed to ensure the date of first contact is now recorded and used as the starting point. As the number of days awaiting an OT assessment and having the OT assessment carried out are now counted in the indicator figure, the average number of days has increased. This was anticipated with the change, however, it better reflects the average number of days waiting from the service users perspective. The target was not achieved as a result of completions within 2015/16 being cases originally caught up in a backlog of referrals at the initial stage of the process.</p> <p>Target Setting: as per indicator above.</p> |

Improvement Priority Five: Working together to help vulnerable people to stay independent

| Code | Action Planned | Status | Comments | Next Steps (for amber and red only) |
|-------------------------|---|--------------|---|-------------------------------------|
| P5.3.12 | Develop active travel maps and support walking and cycling initiatives that will contribute to the implementation of the Active Travel (Wales) Act. | GREEN | Active travel mapping has been developed and consulted upon as per WG guidance. | |

Improvement Priority Six: Working together to make the best use of resources

| Code | Action Planned | Status | Comments | Next Steps (for amber and red only) |
|------------------------|---|--------------|--|-------------------------------------|
| P6.1.1 | Implement the planned savings identified in the 2015-16 budget (CO) | GREEN | Communities had a savings target of £2,488k of which £1,648k was achieved with alternative savings found to mitigate shortfall. | |
| P6.2.2 | Deliver the projects contained within the Bridgend Change Programme | GREEN | Projects to support the Bridgend Change programme within the Communities Directorate are being delivered on target: Considerable progress has been made on the development of the Jennings project in terms of resolving the land use issues in the harbour quarter and the detail design of the building itself. The old Rhiw Car Park has been demolished and is under construction Formal launch of the Porthcawl THI took place - opened by Carwyn Jones. Phase 1 & 2 of the Nolton Street property enhancement scheme are complete. Continuing to implement Bridgend Phase II Townscape Heritage Initiative (THI) and Town Improvement Grant (TIG) in Bridgend. | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year end cumulative Actual & RAG | Trend vs Year end 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|-----------------------------|--|---------------------|---------------------|----------------------------------|--|--------------------------------|----------------------------|---|
| CHR002i PAM | Number of working days per full time equivalent lost due to sickness absence (Communities) <i>Lower preferred</i> | 8.00 | 8.00 | 10.08 | 10.83 (BCBC) ↑ 11.52 (Directorate) | 9.85 | 17 | Monthly Performance: Trend is decreasing from Quarter 3 to Quarter 4 - from 3.04 to 2.14. The whole year figure has decreased from 11.52 to 10 FTE. Directorate's short term absence continues to be around 2.5 days FTE. |

| PI Ref No | PI Description | Annual target 15-16 £'000 | Performance as at Year end | | | | | | Comments |
|-----------------------------|---|------------------------------|----------------------------|-------|-------|------|-------|-----|----------|
| | | | Red | | Amber | | Green | | |
| | | | £'000 | % | £'000 | % | £'000 | % | |
| DWB6.1.1iii | Value of planned budget reductions achieved | 2,488 | 615 | 24.7% | 232 | 9.3% | 1641 | 66% | |

Other priority/business as usual

| Code | Action Planned | Status | Comments | Next Steps |
|-----------------------|---|--------|----------|------------|
| DCO18 | Develop Directorate Health & Safety Risk Registers | GREEN | | |
| DCO19 | Develop a Directorate communication and consultation plan | GREEN | | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year end cumulative Actual & RAG | Trend vs Year end 14-15 Actual | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|-------------------------------------|--|---------------------|---------------------|----------------------------------|--------------------------------|--------------------------------|----------------------------|---|
| DC05.6.13 | Number of working days lost per FTE due to industrial injury <i>Lower preferred</i> | n/a | 0.34 | 1.7733 | n/a | n/a | n/a | Long term case in Fleet continuing. There has been a particular issue with Hand Arm Vibration related absences. |
| STS005b PAM | Percentage of highways and relevant land inspected of a high or acceptable standards of cleanliness <i>Higher preferred</i> | 98 | 99 | 89.55 | ↓ 93.45 | 96.9 | 17 | The standard of cleanliness has been affected by the reduction in staffing levels under proposals brought forward under the MTFS Target Setting: Target reported to WG (PAM) to achieve top performance for Local Authority |
| STS006 NSI | Percentage of reported fly tipping incidents cleared within 5 working days <i>Higher preferred</i> | 98 | 98 | 97.82 | ↑ 95.6 | 93.05 | 15 | Slightly below target, performance remains high but in some cases has been affected by the need for investigation and clarification around land ownership Target Setting: National target (NSI) reporting on LA performance; set by WG. Slightly below target, performance remains high but in some cases has been affected by the need for investigation and clarification around land ownership |
| WMT004b NSI, PAM | Percentage of municipal waste collected by local authorities sent to landfill <i>Lower preferred</i> | 48 | 42 | 14.7 | ↓ 13.05 | 29.38 | 4 | Target well below Welsh Government target. Slight variation in year on year performance due to nature of the service. Target Setting: Actual target for Authority is a landfill allowance. The NSI/PAM reported on to WG is a percentage, which is set to drive LA performance. |
| WMT009b NSI, PAM | Percentage of municipal waste collected by local authorities and prepared for reuse and/or recycled, including source segregated bio-wastes that are composted or treated biologically in another way <i>Higher preferred</i> | 52 | 58 | 59.04 | ↑ 57.06 | 56.24 | 8 | Target Setting: This is an NSI (PAM) so reported to WG for all Las, driven by recycling allowance. |

Additional Financial Information - Main Revenue Budget Variances

The net budget for the Directorate for 2015-16 was £25.228 million and the actual outturn is £25.014 million resulting in an under spend of £214,000. There was £727,000 drawn down from earmarked reserves for specific pressures, including £135,000 for the establishment of the Awen Trust, £120,000 for waste management procurement, £124,000 for highways works and £86,000 in respect of lost car parking income following the closure of the Rhiw Car Park. The most significant variances are detailed below:

| COMMUNITIES DIRECTORATE | Net Budget £'000 | Actual Outturn £'000 | Variance Over/(under) budget £'000 | % Variance |
|------------------------------------|---------------------|-------------------------|--|------------|
| Development | 334 | 265 | (69) | -20.7% |
| Housing and Community Regeneration | 1,341 | 949 | (392) | -29.2% |
| Regeneration | 1,780 | 1,700 | (80) | -4.5% |
| Streetworks | 7,899 | 7,936 | 37 | 0.5% |
| Highways and Fleet | 6,273 | 6,438 | 165 | 2.6% |
| Transport and Engineering | 881 | 898 | 17 | 1.9% |
| Parks and Open Spaces | 2,105 | 2,329 | 224 | 10.6% |
| Culture | 3,449 | 3,365 | (84) | -2.4% |

Development

- There is an under spend on the Development budget of £69,000. This is mainly due to increased income (£30,000) and staff vacancy management (£22,000) in Development Control, and staff vacancy management (£15,000) in Development Planning, both offsetting an under-recovery of fee income in Development Technical Support (£12,000).

Housing and Community Regeneration

- There is an under spend of £392,000 on the Housing and Community Regeneration service. This mainly comprises an under spend of £250,000 relating to the ongoing improved management of demand for temporary accommodation. The introduction of Ty Ogwr and Cornerstone (providers of housing related support funded through Supporting People Grant) has seen the under spend on this service area increase during 2015-16 as they accommodate those that previously might have been in B&B settings.
- In addition there are under spends of £50,000 as a result of core funded staff working on grant funded projects during 2015-16, an additional £35,000 of savings across the service which will contribute towards the MTFs for housing in 2016-17, and a £44,000 under spend relating to other budget headings.

Regeneration

- There is an under spend of £80,000 on the Regeneration budget. This is mainly a combination of staff vacancy management (£50,000) and a delay in the implementation of broadband at the Kenfig Nature Reserve that had been planned for 2015-16 (£11,000).

Streetworks

- Included in this budget heading is an over spend on the waste disposal budget (£275,000). This is mainly as a result of increased waste disposal costs arising from a higher than predicted tonnage of black bag waste presented at the kerbside for disposal by residents of the County Borough, along with the delay in the procurement process to appoint a contractor to operate and manage the MREC (£416,000). This has been partly offset by savings from an interim AD procurement project (£150,000).
- There has been an under spend on waste collection costs (£119,000) which has mainly been achieved from the closure of the Penllwyngwent HWRC site.
- Other budgets areas (Enforcement/Other Cleaning /Bereavement Services) within Streetworks have also offset the over spend (£141,000) via a combination of staff vacancy management and increased income recovery.

Highways and Fleet

- There is an over spend on Highways maintenance of £212,000. This is mainly due to an over spend on Waterton depot costs (£30,000), a revenue contribution to the Inner By Pass Capital Scheme (£118,000), and higher than usual costs experienced for Highway damage charges (£50,000).
- Fleet services has over spent by £93,000 due to a downturn in income against budget. This has been offset by an under spend on Street lighting energy costs (£72,000) as a consequence of installing more energy efficient units.

Transport and Engineering

- The small net over spend of £17,000 masks a number of large under and over spends.
- There is a £320,000 over spend on the car park budget primarily as a result of unforeseen delays in the implementation of MTFs savings targets - charging for blue badges (£165,000) and increase in charges for staff passes (£60,000) - combined with historic staff car pass income shortfalls (£50,000).
- There is an over spend on maintenance at Bridgend Bus Station (£50,000).
- Traffic Management and Road Safety has over spent by £65,000. Of this, £20,000 is due to the shortfall on the MTFs saving relating to School Crossing Patrols (SCPs), as a result of the decision taken not to remove all SCPs and implement savings in line with GB standards. The balance of the over spend is due to a shortfall in internal fee income (£30,000).
- Policy and Development has over spent by £125,000. This consists of a £50,000 shortfall in fee income, a £15,000 over spend on transport studies and a £60,000 over spend on staffing costs following the use of agency staff to fill vacancies prior to a staff restructure.

- The over spends identified have been offset by Engineering services exceeding their income target (£310,000) primarily due to the proportion of EU/non EU funded projects that they have worked on compared with previous years, and consequent ability to charge full costs. There has also been an under spend within Transport Co-ordination due to staff vacancy management (£180,000). The staff vacancy management will contribute to the 2016-17 MTFS budget reduction targets.

Parks and Open Spaces

- This service area had a £437,000 savings target for 2015-16. There was a delay in the implementation of the staffing restructure which has led to an over spend of £207,000. The restructure has now been implemented and will be met in full in 2016-17.

Culture

- There has been an under spend under Cultural Services of £84,000. This mainly relates to staff vacancy management under Adult Community Learning (£66,000)

Additional Financial Information - Main Capital Budget Variances

The current year end spend for the Directorate was £12.123m indicating an underspend of £1.108m, with slippage requested of £1.115m. The most significant variances are detailed below:

| | Revised P12 budget 2015/16 £'000 | Total Expenditure to P12 2015/16 £'000 | Over/ (Under) budget £'000 | Slippage Requested £'000 | Impact on BCBC Resources £'000 | Comments |
|--|--|---|-------------------------------------|--------------------------------|---|---|
| Road Safety | 241 | 188 | -53 | 53 | 0 | |
| Parks Pavilions | 19 | 259 | 240 | -240 | 0 | Funding brought forward from 2016/17 |
| Playground at Ffordd yr Eglwys | 75 | 0 | -75 | 75 | 0 | Balance carried forward |
| Residents Parking Bridgend Town Centre | 136 | 6 | -130 | 130 | 0 | Balance carried forward |
| Transport Grant Scheme - Atn Route 2 | 554 | 374 | -180 | 180 | 0 | |
| Transport Grant Scheme - Safe Routes to School | 186 | 129 | -57 | 57 | 0 | |
| Bridgend Townscape Heritage Initiative | 381 | 195 | -186 | 186 | 0 | Underspend slipped into 2016/17 |
| Porthcawl Townscape Heritage Initiative | 613 | 133 | -480 | 480 | 0 | Underspend slipped into 2016/17 |
| Maesteg Town Centre Regeneration Phase 4 | 51 | -4 | -55 | 55 | 0 | |
| Business Support Framework | 138 | 98 | -40 | 40 | 0 | |
| Commercial Improvement Areas | 110 | 18 | -92 | 92 | 0 | |
| Bridgend Town Improvement Grants | - | 71 | 71 | -71 | 0 | Brought forward from 2016/17 (SRF) |
| Housing Renewal Area | 274 | 101 | -173 | 173 | 0 | |
| Housing Renewal Schemes | 139 | 0 | -139 | 139 | 0 | Virements to reflect allocation of budget |
| Housing Renewal/Disabled Facilities Grants | 1,878 | 2,228 | 350 | -350 | 0 | Previous slippage brought forward to meet increased costs |

Additional Financial Information Budget Reduction Monitoring Variances

| Ref. | Budget Reduction Proposal | Original 2015-16 £000 | Amount of saving achieved in 2015-16 £000 | Reason for overspend in 2015-16 | Current RAG Status (RAG) |
|--------------------------------------|--|-----------------------|---|--|--------------------------|
| COM1 | Procure by competitive tendering and in accordance with the provisions of a MOU between BCBC and NPTCBC, a contractor to operate and managing the MREC | 300 | 0 | Delay in procurement process | |
| COM6 | Review of public conveniences | 50 | 10 | It has taken time to consult and implement changes as agreed in Cabinet (June 2015). Further report to Cabinet April 2016. | |
| COM7 | Review of Grounds Maintenance & Bereavement Services | 437 | 235 | Delay in implementation of restructure | |
| COM8 | Review of car parking charges - staff and long/short term stay car parks | 60 | 0 | Saving not implemented in 15/16 due to VVP project and unavailability of the Rhiw car park and displacement of staff. | |
| COM10 | Public to purchase their own black refuse bags to an appropriate specification. | 50 | 0 | Proposal removed following public consultation | |
| COM11 | Implementation of charging for Blue Badge Holders for Car Parking | 165 | 0 | Original consultation commenced in 2015/16. Cabinet report dated 15th March 2016 indicated that re-consultation process will commence. | |
| COM13 | Review of School Crossing Patrol service in line with GB standards. | 60 | 30 | Agreement to implement savings in line with GB standards - full saving therefore not achievable. | |
| Total Communities Directorate | | 1,122 | 275 | | |

Additional Sickness Information by Service Area

| | Average FTE 31.03.16 | 2015/16 | | | | | 2014/15 |
|---------------------------------|-------------------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | | QTR1 | QTR2 | QTR 3 | QTR 4 | QTR 4 Cum | QTR 4 Cum |
| | | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE |
| Electoral | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Culture | 4.51 | 0.80 | 1.27 | 0.22 | 3.77 | 6.05 | 6.63 |
| Management and Business Support | 13.32 | 1.20 | 0.29 | 2.04 | 2.38 | 5.91 | 1.95 |
| Regeneration & Development | 125.44 | 1.65 | 1.53 | 1.79 | 0.96 | 5.93 | 6.84 |
| Neighbourhood Services | 260.47 | 3.10 | 3.15 | 3.78 | 2.83 | 12.87 | 10.20 |
| COMMUNITIES TOTALS | 404.75 | 2.38 | 2.41 | 3.05 | 2.24 | 10.08 | 8.53 |

Additional Sickness Information by Absence Reason

| Absence Reason | % of Total FTE Days Lost |
|---|--------------------------|
| Stress / Anxiety / Depression / Mental Health | 33.97% |
| MSD including Back & Neck | 25.02% |
| Stomach / Liver / Kidney / Digestion | 8.06% |
| Tests / Treatment / Operation | 7.95% |
| Infections | 7.85% |
| Chest & Respiratory | 7.31% |
| Return to Work Form Not Received | 3.97% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 3.14% |
| Heart / Blood Pressure / Circulation | 0.95% |
| Injury | 0.90% |
| Neurological | 0.64% |
| Genitourinary / Gynaecological / Pregnancy | 0.25% |
| Total | 100.00% |

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Social Services and Wellbeing Directorate Performance Year End 15-16

Performance at the end of 2015/16 showed an improvement on 2014/15. The Directorate reports against 20 commitments and at quarter 4 there are no reds, 18 are reported as on target, with two at amber, as follows:

- (1) Establish an integrated operational model for the Learning Disability Community Support Team. This has been delayed which is linked to the newly formed ABMU Mental Health and Learning Disability Service Delivery Unit and their organisational restructure which is due to complete in August 2016
- (2) Engaging and consulting with children and young people to continue to hear their voice and there are specific actions identified to improve this.

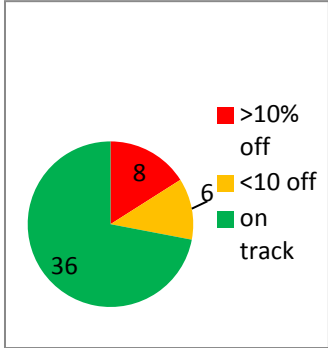
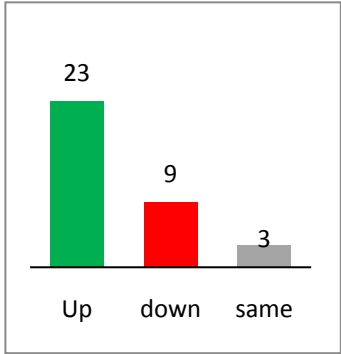
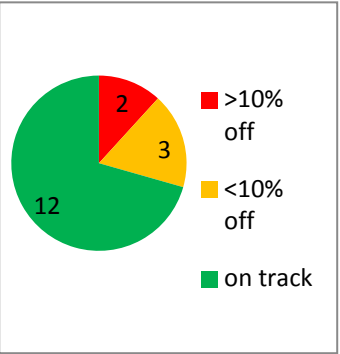
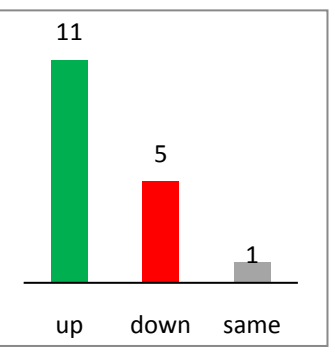
Of the 17 National Indicators at quarter 4, 12 are on track, three are amber and two are red. The three amber PIs relate to:

- Percentage of children looked after at 31 March who have experienced one or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the 12 months to 31 March. Out of 237 school age children, 35 experienced one or more change of school. This continues to be monitored by the Early Help and Permanence Board and the monthly performance meetings.
- Percentage of young people formerly looked after with whom the authority is in contact, who are known to be in suitable non -emergency accommodation at the age of 19. 35 out of 36 were in suitable accommodation - one person chose to reside with a friend.
- Percentage of young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19. This relates to 13 young people (out of 36). This is an improvement on 14/15 performance and some of the reasons that young people didn't engage were because of illness and personal circumstances.

The two red PIs relate to:

- Percentage of children looked after on 31 March 2016 who have had three or more placements during the year. Out of 380 Looked After Children, 52 had 3 or more placements. This continues to be monitored by the Early Help and Permanence Board and the monthly performance meetings.
- Sickness absence which remains high and continues to receive a high level of monitoring and attention. There continues to be robust performance management process in place in the directorate and this includes monitoring sickness data at the monthly performance meetings chaired by the Director. Further comments included below.

As reported previously, there are a range of new measures for 2016/17 which will mean that there will be limited trend data available. Bridgend is also the first council in Wales to have installed and implemented the new Welsh Community Care Information System. Configuration continues but there will be a delay to internal reporting for the first two quarters of 2016/2017 due to the need to undertake robust validation to ensure there is confidence in the data. There is a priority plan in place ensure that essential reporting is carried out .

| Commitments 2015-16 | | | | | All Indicators | | | National Indicators | |
|---|-------|-----|-------|-------|---|---|---|---|--|
| RAG – current progress against commitment | Total | Red | Amber | Green | Performance vs Target | Trend vs Year End 2014-15 | Performance vs Target | Trend vs Year End 2014-15 | |
| Year End Social Services and Wellbeing Directorate Commitments | 20 | 0 | 2 | 18 |  |  |  |  | |

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Finance

Revenue Budget

- The revised net revenue budget for the Directorate for 2015/16 is **£61.285m**
- The year-end financial outturn is **£61,099m**, meaning an **underspend of £186k**

Capital Budget

- The capital budget for 2015/16 is **£1,453m**
- The year end financial outturn is **£1,356m**, meaning an underspend of **£97k**

Budget Reductions

| Budget Reductions (£000) | 2015-16 | % |
|---------------------------------|---------|------|
| Budget Reductions Target | 3,534 | 100 |
| Achieved | 2,809 | 79.5 |
| Overall Variance | 725 | 20.5 |

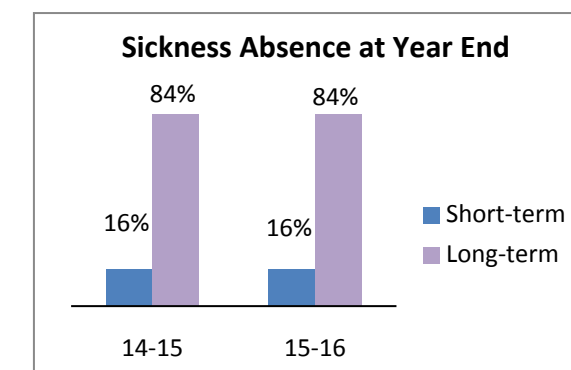
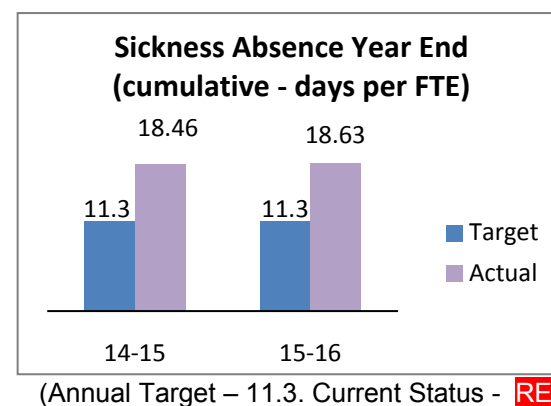
Additional financial information is provided at the end of the report.

Implications of Financial Reductions on Service Performance and other Key Issues

The Remodelling Adult Social Care programme and the children’s remodelling agenda are aligned to the corporate priorities and the MTFs and is in-keeping with the Social Services and Wellbeing (Wales) Act. Most of the projects have progressed to implementation stage and therefore require specific focus and monitoring at this time. In addition, the directorate has implemented the Social Services and Wellbeing (Wales) Act and the Welsh Community Care information System – both of which required substantial involvement of front line staff and managers.

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Human Resources



Sickness remains high across the directorate. Regular and robust monitoring of absence levels continues. We continue to scrutinise on a case by case basis to ensure appropriate action is being taken on each case and are working closely with HR to ensure there are clear plans in place where sickness is an issue. Specific cases are also being discussed at 1:1s.

Despite our sickness levels, we implemented the Social Services and Wellbeing Act, WCCIS and Welsh Language standards.

High Corporate Risks (risk owner)

| Risk | Improvement Priority | Likelihood | Impact | Overall |
|---|------------------------------|------------|--------|---------|
| Supporting vulnerable people | 4 – helping stay independent | 5 | 4 | 20 |
| Healthy lifestyles | 5 – healthy lifestyles | 4 | 4 | 16 |
| Supporting vulnerable children & their families | 3 – Tackle problems early | 5 | 4 | 20 |

In responding to legislation, there are some concerns about the capacity of the service to meet the increased demands of safeguarding activity, for example, DoLS, the number of CSE, missing children and professional strategy meetings on top of the monitoring of LAC and children in need. It is essential that the service is able to respond proportionately as this is an area of significant risk.

At year end, Adult Social Care showed an underspend of £648k, Children’s Social Care an overspend of £433k and Sport Play and Active Wellbeing an overspend of £39k leaving a total underspend of £186k for the Directorate.

KEY:

| Commitments | | Performance Indicators (RAG) | | Performance Indicators (Trend) | |
|--------------|--|------------------------------|---|--------------------------------|---|
| Red | Most key milestones are missed | Red | Performance is worse than target by 10% or more | ↑ | Performance improved vs same quarter of previous year |
| Amber | Most key milestones are on track, but some are at risk | Amber | Performance is worse than target by less than 10% | ↔ | No change in performance vs same quarter of previous year |
| Green | All key milestones are on track. No reason for concern | Green | Performance is equal to or better than target | ↓ | Performance declined vs same quarter of previous year |

Improvement Priority Three: Working with children and families to tackle problems early

| Code | Action Required | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|--|--------------|---|-------------------------------------|
| P3.2.3 | Implement the Permanency and Placement Strategy to reduce the number of looked after children and to prevent children becoming looked after (WB) | GREEN | <p>As previously reported the strategy has continued to be implemented through the year. We have established a Remodelling Social Care Board which will oversee the planning of new models of service delivery into implementation phase. One of the projects reporting to this Board is Early Help and Permanence. A joint action plan has been written with colleagues from Education and Family Support Directorate to underpin the project initiation document and the project group will hold its first meeting in June 2016.</p> <p>As at 1st April 2015, there were 390 Looked After Children, which during the year did drop to 368 (in January 2016). However, at the end of year the Looked After Children population had risen to 380 and this was largely attributable to a high number of admissions in February which have been scrutinised by Group Managers and Head of Service who are satisfied that the appropriate decisions were made in relation to individual cases.</p> | |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15-16 cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------|---|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|----------|
| DCH3.6.4 | Looked after children as a percentage of children aged 0-17 <i>Lower preferred</i> | 1.1 | 1.3 | 1.3 | ↔ 1.3 | n/a | n/a | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End 15-16 cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------------|--|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|--|
| DCH3.7.6 | Number of Special Guardianship Orders (SGOs) granted <i>Higher preferred</i> | 15 | 20 | 17 | ↓ 22 | n/a | n/a | <p>The 2015-16 target was determined by Safeguarding Senior Management Team on 21/1/15 with the objective of sustaining performance. Consideration was given to past and current performance and knowledge of current profile.</p> <p>Following last year's targeted approach to seek alternative orders for children who are looked after, and the good outcome achieved, an improving target was set for 2015/16. Despite continued focus and monitoring through monthly Permanence Meetings, the end of year figure has fallen short of this target. In addition to the 17 SGOs granted during the year a further 3 cases were prepared for SGO and applications made well in advance of end of year, however, court timetables meant that these orders were not granted until after April 2016.</p> |
| DCH3.7.7 | Number of care orders discharged <i>Higher preferred</i> | 8 | 10 | 30 | ↑ 35 | | n/a | <p>The 2015-16 target was determined by Safeguarding Senior Management Team on 21/1/15 with the objective of sustaining performance. Consideration was given to past and current performance and knowledge of current profile.</p> |
| SCC011a | Percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker <i>Higher preferred</i> | 75 | 80 | 77.5 | ↑ 73.7 | n/a | n/a | <p>The 2015-16 performance has improved on last year's figure, however, performance has fallen slightly short of the end of year target. This is due to an increase in the number of initial assessments being undertaken by social work assistants under the supervision of a registered social worker rather than directly by a social worker which is the requirement of this PI. Staffing issues across Safeguarding teams has had an influence on social workers workload capacity with a consequential increase in assessments being carried out by social work assistants. Social work assistants support the work of registered social workers; engagement in assessment activities is an aspect of their role. The Social Services and Well-being (Wales) Act 2014 Codes of Practice expects those involved in undertaking assessments, to have the skills, knowledge and competence to do so. Bridgend supports social work assistants to undertake relevant qualifications at the appropriate level as set out in Codes.</p> <p>The target for 2015/16 was determined by the Safeguarding Senior Management Team 21/1/15 with the objective of driving up performance against previous performance. The target was set after due consideration of our own past performance and quartile position, the all-Wales past performance, actions we have taken this year relevant to this PI and our performance in the current year to date.</p> |
| SCC011b NSI | 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 <i>Higher preferred</i> | 45 | 50 | 52 | ↑ 51 | 44.8 | 10 | <p>The target for 2015/16 was determined by Safeguarding Senior Management Team 21/1/15 with the objective of driving up performance against previous performance. The target was set after due consideration of our own past performance and quartile position, the all-Wales past performance, actions we have taken this year relevant to this PI and our performance in the current year to date.</p> |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End 15-16 cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|------------------------------------|--|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|---|
| SCC030a | Percentage of young carers known to Social Services who were assessed <i>Higher preferred</i> | 100 | 100 | 100 | 100 ↔ | n/a | n/a | The target for 2015/16 was determined by Safeguarding Senior Management Team on 21/1/15 after consideration on past performance. The target was set with the aim of achieving 'top' performance. |
| SCC001a | Percentage of first placements of Looked After Children during the year that began with a care plan in place <i>Higher preferred</i> | 95 | 95 | 100 | ↑ 97.6 | n/a | n/a | The target for 2015/16 was set by the Interim Head of Service, Safeguarding and Assessment, after consideration of past data and with the objective of sustaining performance. The target reflects robust care planning for looked after children, whilst acknowledging that often children and young people are accommodated in an emergency i.e. in an unplanned way. |
| SCC004 NSI, PAM | Percentage of children looked after on 31 March who have had three or more placements during the year <i>Lower preferred</i> | 9 | 12 | 13.7 | ↓ 11.8 | 9 | 21 | <p>The target for 2015/16 was determined by Safeguarding Senior Management Team 21/1/15 with the objective of driving up performance against previous performance. The target was set after due consideration of our own past performance and quartile position, the all-Wales past performance, actions we have taken this year relevant to this PI and our performance in the current year to date.</p> <p>This is a provisional figure as data is made available by WG following submission and validation of SSDA 903 (Children Looked After Return).</p> <p>We continue to avoid children moving between placements wherever possible; this only happens in exceptional circumstances. Overall 67% of the children were either under 1 or over 13 years old. 52% of the children who experienced three or more placements were aged between 13-17 years which reflects some of the issues the service is experiencing with this age group - emergency requests for remand placements, lack of placement choice/severe shortage and emergency short term placements being the only option available. 15% of the children were under 1 year of age and some of the themes with this cohort included attempts to place with parents/family breaking down, allegations/complaints against carers, complex needs and children being placed for adoption.</p> |
| SCC025 PAM | Percentage of statutory visits to Looked After Children due in the year that took place in accordance with regulations <i>Higher preferred</i> | 80 | 80 | 80.2 | ↑ 76.5 | 87.7 | 20 | The target for 2015/16 was determined by Safeguarding Senior Management team on 21/1/15, recognising actions in motion and continuing challenges but the intent to maintain a strong focus on driving relative improvement against previous performance. |
| SCC045 PAM | Percentage of reviews of Looked After Children, children on the Child Protection Register and Children In Need carried out in line with the statutory timetable <i>Higher preferred</i> | 90 | 85 | 93 | ↑ 90.5 | 88.9 | 14 | Target for 2015-16: Determined at Safeguarding Senior Management Team on 21/1/15 to reflect the anticipated interface with the evolution of the preventative approaches for Children in Need. |
| SCC033d NSI | Percentage of: d) young people formerly looked after with whom the authority is in contact at the age of 19; <i>Higher preferred</i> | 90 | 95 | 100 | ↑ 94.7 | 93.3 | 10 | Target for 2015-16 was determined by Safeguarding Heads of Service on 12/01/15 with the objective of driving relative improvement against previous performance through renewed focus and effort by allocated workers to keep in touch, enhanced by greater management oversight. |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End 15-16 cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------------|--|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|---|
| SCC002 NSI | Percentage of children looked after at 31 March who have experienced one or more changes of school, during a period or periods of being looked after, which were not due to transitional arrangements, in the 12 months to 31 March. <i>Lower preferred</i> | 14 | 14 | 14.8 | ↓ 8.8 | 13.5 | 6 | <p>The 2015-16 target was determined by Safeguarding Senior Management Team 21/1/15 with the objective of sustaining performance. Target maintained at same level as previous years due to the number of challenging children/young people that the service is engaged with and the ongoing work by the LAC and Permanence Board to return children/young people to in-house providers and improve permanence which may result in increased placement moves, and thus increased school changes.</p> <p>During 2015-16, 35 children experienced one or more changes of school due to reasons including moving to/from out of county provision, parental choice and moves within the local authority.</p> <p>A review of the provision of discretionary school transport for looked after children was carried out in the autumn and this identified some children in long term placements where it was deemed to be in their interests to move them to a school closer to their long term placement in preparation for normal transition. Each case was considered individually to ensure the move was in the best interest of the child. School transport will now only be provided on a discretionary basis if senior officers are satisfied that all other options have been considered e.g. foster carers undertaking the journeys.</p> |
| SCC033e NSI | Percentage of: e)young people formerly looked after with whom the authority is in contact, who are known to be in suitable, non-emergency accommodation at the age of 19; <i>Higher preferred</i> | 100 | 100 | 97.2 | ↓ 100 | 93.1 | 1 | <p>Target for 2015/16 determined by Safeguarding Heads of Service on 12/01/15 with aim of sustaining performance with reduced resources. Taking account of previous year performance and knowledge of ongoing work between Social Services and Housing, a challenging target has been set.</p> <p>During 2015-16, thirty five out of thirty six care leavers were deemed to be in suitable accommodation at the age of nineteen</p> |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15-16 cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|--------------------------------|--|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|---|
| SCC033f NSI | Percentage of: f) young people formerly looked after with whom the authority is in contact, who are known to be engaged in education, training or employment at the age of 19 <i>Higher preferred</i> | 85 | 70 | 63.9 | ↑ 61.1 | 59.5 | 11 | <p>Target for 2015/16 determined by Safeguarding Heads of Service on 12/01/15 with aim of sustaining performance with reduced resources. Taking account of previous year performance and knowledge of ongoing work between S/S and Housing, a challenging target has been set.</p> <p>During the year, 23 out of 36 young people were in education, training or employment at the time of their 19th birthday.</p> <p>The main reasons for thirteen young people being NEET was due to illness/disability/personal circumstance and, for the remainder, it was due to lack of engagement.</p> <p>It is positive to note that although performance is below the 2015-16 target of 70% it remains higher than the previous year's performance of 61.1%.</p> <p>Whilst Personal Advisors make every effort to encourage care leavers to engage in education, employment and training it is important to highlight that performance is primarily down to the individual circumstances of each young person and their complex needs at the time of reporting.</p> |
| SCC041a NSI | Percentage of eligible, relevant and former relevant children that have pathway plans as required <i>Higher preferred</i> | 100 | 100 | 100 | ↔ 100 | 91.2 | 1 | <p>The target for 2015/16 was determined by SG SMT on 21/1/15 with the aim of achieving 'top' performance. Consideration given to previous targets and performance.</p> |

Improvement Priority Four: Working together to help vulnerable people stay independent

| Code | Action Required | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|---|--------------|--|-------------------------------------|
| P4.1.1 | Produce and consult on the prevention and wellbeing strategy that includes the coordination of support, information and advice available in local communities | GREEN | A well-attended stakeholder workshop was held on 22nd March entitled "Wellbeing is everyone's business". Attendees included care providers, third sector, police, fire service, representation from all the council, primary health care and public health colleagues. | |
| P4.1.2 | Increase the range and accessibility of advice and information for carers | GREEN | <p>As part of the regional carers' partnership, Bridgend, with Carers Measure funding, has continued to support the Carers Centre to provide advice and information. Work continues on the range and accessibility of advice and information, including funding an officer to support carers in a hospital discharge setting aligned to the carers centre.</p> <p>As previously reported, the range of information available includes leaflets, newsletters, emergency card leaflets and MacMillan family information leaflets. We have also supported third sector organisations within the Bridgend Carers' Alliance to purchase information boards and other materials to raise awareness and provide information. A guidance document has also been produced and training for staff on information sharing is ongoing.</p> <p>The number of identified carers has risen from 1421 during 2014/15 to 2102 in 2015/16.</p> | |

| | | | | |
|------------------------|---|--------------|---|--|
| P4.1.3 | Develop a regional quality framework to monitor and improve the quality of care | GREEN | <p>Bridgend officers worked with officers from City and Council of Swansea, Neath Port Talbot and ABMU to develop a Regional Quality Framework (RQF). This was piloted with 3 care homes in Bridgend and the monitoring tool was subsequently adjusted following feedback due to repetitive elements and the need to ensure that there was a clear link to contractual requirements.</p> <p>It has been agreed that our RQF monitoring tool will be reviewed and revised during 2016/17.</p> <p>Completion of this milestone was achieved in Q3 ahead of target date and there was no shortfall.</p> | |
| P4.1.9 | Establish an integrated operational model for the Learning Disability Community Support Team | AMBER | <p>Colleagues from the newly formed ABMU Mental Health and Learning Disability Service Delivery Unit have given a commitment to continue the discussions about the operating model once their organisational restructure is complete in August 2016. Health is showing commitment in line with the proposals for the operating model and taking steps in this direction. The working group has continued to meet and work through the development of assessment care management processes in line with the implementation of the Social Services and Wellbeing Act and the operating model. A draft report from the CSSIW inspection has been received and comments made. A final version is due for publication in May 2016 and the action plan will be incorporated into the team plan. The report is very positive about the work of the team but points out the need to progress work on the operating model.</p> | We will continue to work with the ABMU Mental Health and Learning Disability Service Delivery Unit to progress this. |
| P4.2.5 | Help vulnerable people retain their dignity and stay as independent as possible in accommodation that best meets their needs (WB) | GREEN | <p>Good ongoing progress. There are work streams within the CRT aiming to provide alternate pathways for people to avoid hospital admission or to support earlier hospital discharge. For example, there is a professional therapy led reablement service which is critical to supporting timely discharge from hospital. There is also community based reablement which is well-established in Bridgend, with the service known as Better@Home. This provides a short term bridging care service that supports people with levels of care whilst they wait for either the initiation of a reablement service or the restart of a current package of care. In addition to community residential capacity, the service model also provides residentially based reablement for people who would otherwise require a longer hospital stay prior to commencement of a community based service. In Bridgend there are six beds in Bryn y Cae performing this function.</p> | |

| Code | Action Required | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|---|--------------|--|-------------------------------------|
| P4.2.6 | Further develop crisis prevention, support and accommodation options for people with mental health needs that promotes independence and prevents hospital admission | GREEN | <p>At a regional level there is commitment to improve access to crisis intervention and support for people with mental health issues.</p> <ul style="list-style-type: none"> We are now in the second phase of the Single Point of Access for mental health which is operating for all referrals from GPs and referrals from internal services. The Local Primary Mental Health support service offering early intervention and prevention continues to go from strength to strength. A review of the CMHTs was undertaken during 2015; during the last quarter, a workshop was held to agree priorities in establishing a new model involving the re-establishment of an Assertive Outreach element to improve crisis provision. We have collaborated with health to agree an arrangement where Glyncynffig can be used to enable patient flow from mental health beds. The online self-help guides, developed as part of the WB collaborative, are proving to be an important source of early support with 2689 accessing this across the region during the last quarter. | |
| P4.2.7 | Continue the development of two new extracare schemes across the borough | GREEN | <p>Two sites have been identified and a report was taken to Cabinet on 12th January 2016 to recommend the sites be declared surplus to the requirements of the Council and disposed of to the preferred RSL Partner, at market value, which is to be independently assessed by the District Valuer.</p> <p>A further report was taken to full Council on 10th March 2016 setting out the Medium Term Financial Strategy 2016-17 to 2019-20, and this included provision for the two Extra Care facilities in question.</p> | |
| P4.2.8 | Continue the transformation of homecare services | GREEN | <p>Transformation of homecare services has been progressed over the year. A new framework has been established with 13 providers.</p> <p>A brokerage team manages the referral process to internal homecare and external domiciliary care so that new referrals for packages of support for people with critical-complex and complex dementia needs will receive a service from internal homecare and those with other support needs will receive a package of support from external providers.</p> <p>The milestone for 2015/16 has been achieved, however there are some historic packages that continue to be delivered by internal homecare, which are not complex-critical or complex dementia.</p> <p>Existing homecare packages for people with eligibility needs of less than critical are in the process of being reviewed.</p> | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End Cumulative Actual & RAG | Trend vs Year End 14-15 | Wales average 2014-15 (NSI/PAMs) | Rank 14-15 (NSI/PAMs) | Comments |
|----------------------------|--|---------------------|---------------------|----------------------------------|-------------------------|----------------------------------|-----------------------|---|
| DWB.OA3.1 | Number of total (rolling total) open, live Telecare installations <i>Higher preferred</i> | 1459 | 1532 | 2049 | ↑ 1759 | n/a | n/a | Target set to drive relative improvement against previous performance. |
| DWB4.1.4.1 | The percentage of our providers receiving a quality payment <i>Higher preferred</i> | 85 | 90 | 100 | No performance data | n/a | n/a | Target set to drive relative improvement against previous performance. |
| DWB4.2.2.1 | The number of people accessing floating support provision | n/a | New indicator | 121 | n/a | n/a | n/a | Establishing baseline. |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End Cumulative Actual & RAG | Trend vs Year End 14-15 | Wales average 2014-15 (NSI/PAMs) | Rank 14-15 (NSI/PAMs) | Comments |
|------------|--|---------------------|---------------------|----------------------------------|-------------------------|----------------------------------|-----------------------|--|
| | <i>Higher preferred</i> | | | | | | | |
| DWB4.2.2.2 | The number of service users accessing stress management programme <i>Higher preferred</i> | n/a | New indicator | 383 | n/a | n/a | n/a | No target set - establishing baseline. |
| DWB4.2.4.1 | Specialist hours retained internally <i>Lower preferred</i> | n/a | 2580 | 3418 | n/a | n/a | n/a | New indicator – no target set As at the end of February 2016, internal homecare was delivering 786 more hours than originally forecast. A corrective action plan was implemented in December 2015 and continues to be progressed. Existing homecare packages for people with eligibility needs of less than critical are in the process of being reviewed. A change to an existing package is classified as a 'new package of care' and is assessed against the eligibility criteria for homecare. |
| DWB4.3.1 | The percentage of carers that report that information and support for carers is improving in the County Borough (reported annually) <i>Higher preferred</i> | 35 | 40 | 68 | No performance data | n/a | n/a | Target has been set with the aim to drive relative improvement against previous performance. |
| DWB4.3.2 | Number of people who have received a service from Bridgeway (short term home care service for people with dementia) <i>Higher preferred</i> | 134 | 134 | 170 | ↑ 129 | n/a | n/a | Target set with the objective of sustaining performance with reduced resources. |
| DWB4.3.3 | Number of recipients of community resource team (intermediate services) that have been provided with an alternative to a hospital placement <i>Higher preferred</i> | 800 | 820 | 1100 | ↑ 960 | n/a | n/a | Target set with the aim to drive relative improvement against previous performance. |
| DWB4.3.4 | Percentage of Telecare clients who said that the service made it easier for them to manage in their own home <i>Higher preferred</i> | 95 | 95 | 87 | ↓ 96 | n/a | n/a | Target set with the aim of sustaining performance with reduced resources. The service has worked for the last 2 years on attempting to improve return rates on the surveys. We have collaborated with our equipment installers, who were also sending surveys, to agree one survey that would be sent to meet both organisations' needs. We found very little effect. We have also attempted to reduce the size and changed the wording of the survey in an attempt to make it easier to complete and return. There has been very little if no effect. Therefore the ongoing small return rate has meant large impacts on our ability to evidence this target. |
| DWB4.4.8.1 | The number of people on the Learning Disability register on the progression pathway | 200 | 300 | 298 | ↓ 352 | n/a | n/a | Target set with the aim to sustain performance with reduced resources. |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End Cumulative Actual & RAG | Trend vs Year End 14-15 | Wales average 2014-15 (NSI/PAMs) | Rank 14-15 (NSI/PAMs) | Comments |
|-------------------|--|---------------------|---------------------|----------------------------------|-------------------------|----------------------------------|-----------------------|--|
| | <i>Higher preferred</i> | | | | | | | Despite a very ambitious target, good progress has been made during Q4. We have surpassed expectation and missed the target by only two. . |
| DWB4.4.8.2 | The number of people with a learning disability, who live independently in their own home, using assisted technology <i>Higher preferred</i> | 20 | 42 | 47 | ↑ 42 | n/a | n/a | Target set with the aim to drive relative improvement against previous performance. |
| SCA001 NSI | Rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over <i>Lower preferred</i> | 2.75 | 2.5 | 1.00 | ↑ 1.03 | 4.83 | 3 | Target set with the aim of driving relative improvement against previous performance. |
| SCA002a NSI | Rate of: a) older people (aged 65 and over) supported in the community per 1,000 population aged 65 or over at 31 March; <i>Higher preferred nationally Lower preferred by BCBC</i> | 83 | 81 | 80.98 | ↓ 76.75 | 67.30 | 6 | Target set with the aim of driving relative improvement against previous performance. |
| SCA002b NSI | Rate of: b) older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March <i>Lower preferred</i> | 19 | 18.5 | 15.14 | ↑ 16.46 | 18.82 | 7 | Target set with the aim of driving relative improvement against previous performance. |
| SCA007 PAM | Percentage of clients with a care plan at 31 March whose care plans should have been reviewed during the year <i>Higher preferred</i> | 79 | 79 | 81.9 | ↑ 79.2 | 80.0 | 13 | Target set with the objective of sustaining performance with reduced resources. |
| SCA018a PAM | Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year <i>Higher preferred</i> | 93 | 93 | 95.3 | ↑ 94.7 | 88.3 | 10 | Target set with the aim of driving relative improvement against previous performance. |
| SCA019 NSI&PAM | Percentage of adult protection referrals completed where the risk has been managed <i>Higher preferred</i> | 88 | 90 | 97.5 | ↑ 93.91 | 95.6 | 15 | Target set with the aim of driving relative improvement against previous performance. |
| SCA020 | Percentage of adult clients who are supported in the community during the year <i>Higher preferred</i> | 88.5 | 88.5 | 89.82 | ↑ 89.14 | 85.20 | 5 | Target set with the objective of sustaining performance with reduced resources. |

Improvement Priority Five: Working together to tackle health issues and encourage healthy lifestyles

| Code | Action Required | Status | Comments | Next Steps (for Red and Amber only) |
|-------------------------|--|--------------|---|-------------------------------------|
| P5.1.3 | Through the Family Active Zone initiative, promote nutrition, physical activity and family relationships for positive lifestyle change | GREEN | The Family Active Zone programme has achieved and surpassed its targets and objectives with programmes operating and children engaged from households. During quarter 4 new links have been developed to work with early years settings via the Flying Start programme. | |
| P5.2.7 | Implement the primary and secondary school national sport programme to increase physical activity levels | GREEN | BCBC has submitted its development plan to Sport Wales and been awarded £446,202 to support programmes and initiatives for 2016/17. There has, however, been a reduction of £15,000 investment into the core national school sport programmes. Sport Wales are reviewing the way that annual participation is to be calculated beyond September 2016. Data from the national survey has been shared with local schools to help the formulation of local action plans. | |
| P5.2.10 | Continue to deliver the National Exercise Referral Programme in partnership with HALO Leisure to help reduce obesity levels and encourage better weight management across the county borough | GREEN | The NERS programme has secured 1871 referrals (against a target of 1170), 1211 first consultations (against a target of 991) and supported 475 people to complete a 16 week programme (compared to a target of 395). Despite the success of the programme there is a waiting list of 523 for support. Additional support is being made by ABMU for certain conditions. The scheme currently supports mental health, cancer, obesity and diabetes, stroke, back care, falls and pulmonary disease. | |
| P5.3.9 | Develop services and opportunities that encourage and promote life-long physical activity particularly amongst underrepresented groups by working in partnership with HALO Leisure and a range of community partners | GREEN | Park Lives programmes, which provide free outdoor activities in park settings with a particular emphasis on families and removing cost as a barrier to participation, are under development for 4 locations for summer 2016. Free swimming programme for veterans is now active with 23 identified beneficiaries. All Later Life training programmes have been completed. | |
| P5.3.11 | Coordinate the Love To Walk programme to support community walking networks | GREEN | Walking programme attendance has improved due to better weather. Community Councils in two areas are beginning to lead walks. This links with footpath monitoring from the Rights of Way section. Walking festival dates are confirmed 18-26 June with funding from RoWIP. This programme promotes sustainable community-based opportunities by building capability in volunteers and community groups to support a network approach. | |
| P5.3.13 | Identify and promote new initiatives that support the health and wellbeing of employees (WB) | GREEN | Health and Wellness information on related projects such as Nudged and the pedometer challenge, plus a Healthy at Work page is now available on the Intranet. Recruitment for the Nudged programme continues with the first group due to start shortly. Later Life training has held a further three courses during Q4 supporting 26 participants. Due to demand one additional course is planned. The Parklives programme planning is progressing. | |

| PI Ref No | PI Description and <i>preferred outcome</i> | Annual 14-15 target | Annual 15-16 target | Year End 15-16 Cumulative & RAG | Trend vs Year End 14-15 | Wales average 14-15 (NSI /PAMs) | BCBC Rank 14-15 (NSI/ PAMs) | Comments |
|----------------|---|---------------------|---------------------|---------------------------------|-------------------------|---------------------------------|-----------------------------|--|
| DWB5.1.1.1 | The number of families participating in the Family Active Zone programmes <i>Higher preferred</i> | 100 | 120 | 144 | No performance data | n/a | n/a | Target set with the objective of driving relative improvement against previous performance. |
| DWB5.2.1.1 | The percentage of schools engaged in the national sports programme -primary <i>Higher preferred</i> | n/a | 95 | 95 | New indicator | n/a | n/a | Target set with the objective of achieving 'top' performance. Target achieved with 12061 participants. Figures based on academic year 2014/15. |
| DWB5.2.1.2 | The percentage of schools engaged in the national sports programme – secondary <i>Higher preferred</i> | 100 | 100 | 100 | No performance data | n/a | n/a | Target set with the objective of achieving 'top' performance Full compliance achieved with 89307 participants. Figures based on academic yr 2014-15 |
| DWB5.2.1.3 | The percentage of young people able to swim on leaving primary school <i>Higher preferred</i> | 68 | 70 | 73 | No performance data | n/a | n/a | Target set with the objective of achieving 'top' performance. |
| DWB5.2.1.4 | The number of participants of disability activity programme <i>Higher preferred</i> | n/a | 1200 | 1814 | No performance data | n/a | n/a | New indicator - establishing a baseline. |
| DWB5.2.2.1 | The number of participants in the National Referral Scheme (NERS) programme <i>Higher preferred</i> | n/a | 1170 | 1871 | No performance data | n/a | n/a | New indicator - establishing a baseline. |
| DWB5.3.1.1 | Increase leisure facility usage by disadvantaged groups via the Access to Leisure programme <i>Higher preferred</i> | 16,764 | 25,581 | 135,514 | No performance data | n/a | n/a | Target set with the objective of driving relative improvement against previous performance. |
| DWB5.3.2.1 | The number of participants on the Love to Walk programme <i>Higher preferred</i> | 300 | 350 | 380 | No performance data | n/a | n/a | New indicator - establishing a baseline. |
| DWB5.3.2.2 | The number of people achieving an accredited reward <i>Higher preferred</i> | 10 | 15 | 5 | 63 ↓ | n/a | n/a | Target set with the objective of driving relative improvement against previous performance. The adverse winter weather has this year impacted on the walking programme and subsequent training of volunteers. It should be noted that volunteers have been recruited and training will be developed during the first half of 2016. |
| DWB5.5.4.6 | Retention rates for those completing a 16 week National Exercise Referral Food Wise Programme <i>Higher preferred</i> | 395 | 395 | 475 | 438 ↑ | n/a | n/a | Target set with the objective of sustaining performance with reduced resources. |
| DWB5.6.8.3 | The percentage of staff who have attended manual handling training <i>Higher preferred</i> | n/a | 85 | 86.7 | New indicator | n/a | n/a | Target set with the objective of driving relative improvement against previous performance. |
| LCS002b NSI | Number of visits to local authority sport and leisure facilities during the year per 1,000 population where the visitor will be participating in physical activity <i>Higher preferred</i> | 9,400 | 9,450 | 9,592 | 9,528 ↑ | 8662 | 6 | Target set with the objective of driving relative improvement against previous performance. |

Improvement Priority Six: working together to make the best of our resources

| Code | Action Required | Status | Comments | Next Steps (for Red and Amber only) |
|------------------------|--|--------|---|---|
| P6.1.1 | Implement the planned savings identified in the 2015-16 budget (WB) | GREEN | All savings identified in the budget for 2015/2016 are closely monitored within the directorate by the senior management team and individual budget managers. Currently projected to underspend in 2015/2016. Where planned savings are behind target alternative savings have been identified. | |
| P6.2.2 | Deliver the projects contained within the Bridgend Change Programme (WB) | GREEN | All projects are robustly monitored via the Adults and Children's remodelling service boards which meets on a monthly basis. | |
| P6.6.6 | Explore new ways of engaging and consulting with children and young people to continue to hear their voice | AMBER | This is captured in our Quality Assurance (QA) Framework "Achieving Excellence in Bridgend Safeguarding and Family Support Service". Our interactive document for capturing children's voices has gone live and a revised LAC handbook and foster carer review form was launched in March 2016. | <ul style="list-style-type: none"> Finalise and launch Engagement and Participation action plan. Finalise design and delivery model for the care leavers "Supper Club" model. The plans to re-align our senior management structure will result in increased officer capacity to drive forward the quality assurance agenda and further develop our approach/systems for engaging children and young people in service developments. |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15-16 Cumulative & RAG | Trend vs Year End 14-15 | Wales Average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|----------------------------------|---|---------------------|---------------------|---------------------------------|-------------------------|--------------------------------|----------------------------|---|
| CHR002iii NSI | Number of working days per full time equivalent lost due to sickness absence (WB) <i>Lower preferred</i> | 11.3 | 11.3 | 18.63 | 18.46 ↓ | 9.85 | 17 | Regular and robust monitoring of absence levels continues. We continue to scrutinise on a case by case basis to ensure appropriate action is being taken on each case and are working closely with HR to ensure there are clear plans in place where sickness is an issue. Specific cases are also being discussed at 1:1s. |

| PI Ref No | PI Description and preferred outcome | Annual 15-16 target £'000 | Performance as at Year End | | | | | | Comments |
|-----------------------------|---|------------------------------|----------------------------|-------|-------|------|-------|-------|---|
| | | | Red | | Amber | | Green | | |
| | | | £'000 | % | £'000 | % | £'000 | % | |
| DWB6.1.1iii | Value of planned budget reductions achieved | 3,534 | 605 | 17.1% | 120 | 3.4% | 2,809 | 79.5% | Overall position is red. Further details in appendices below. |
| DWB6.1.4.1 | Value of savings achieved against the Adult Social Care, Sport Play & Active Wellbeing Savings Target | 3,064 | 405 | 13.2% | 100 | 3.3% | 2,559 | 83.5% | See comment above |
| DWB6.1.4.2 | Value of savings achieved against the Safeguarding and Family Support Savings Target | 470 | 200 | 42.5% | 20 | 4.3% | 250 | 53.2% | See comment above |

Other priority/business as usual

| Code | Action Required | Status | Comments | Next Steps (for Red and Amber only) |
|----------------------|---|--------------|---|--------------------------------------|
| DWB1 | Develop a directorate risk register | GREEN | The Directorate risk register is monitored by the Directorate Health and Safety group. H&S is regular item on management meeting agendas. | |
| DWB2 | Develop a Directorate communication and consultation plan | GREEN | H&S is regular item on management meeting agendas. | |

| PI Ref No | PI Description and preferred outcome | Annual 14-15 target | Annual 15-16 target | Year End 15 -16 Cumulative & RAG | Trend vs Year End 14-15 | Wales average 14-15 (NSI/PAMs) | BCBC Rank 14-15 (NSI/PAMs) | Comments |
|----------------------------|--|---------------------|---------------------|----------------------------------|-------------------------|--------------------------------|----------------------------|----------|
| DWBOA1.1 | Increasing the number of new Telecare Installations <i>Higher preferred</i> | 86 | 140 | 289 | ↑ 239 | n/a | n/a | |
| DWBOA1.4 | The number of carers of adults offered an assessment in their own right <i>Higher preferred</i> | 1487 | 1561 | 2003 | ↑ 1460 | n/a | n/a | |
| DWB5.6.8.5 | The number of working days lost per FTE due to industrial injury <i>Lower preferred</i> | n/a | 0.13 | 0.0428 | ↑ 0.1604 | n/a | n/a | |

Additional Financial Information - Main Revenue Budget Variances

The Directorate's net budget for 2015-16 was £61.285 million and the actual outturn was £61.099 million resulting in an under spend of £186,000. This is made up of an under spend of £649,000 on Adult Social Care, an over spend of £29,000 on Sport, Play and Active Wellbeing services and an over spend of £434,000 on Safeguarding and Family Support. There was £244,000 drawn down from earmarked reserves throughout the year for specific pressures, including £117,000 for the Adult Social Care Change Team, £26,000 towards the LAC strategy and £34,000 for residual Job Evaluation costs.

The most significant variances are detailed below:

| SOCIAL SERVICES AND WELLBEING DIRECTORATE | Net Budget | Actual Outturn | Variance Over/(under) budget | % Variance |
|--|-------------------|-----------------------|-------------------------------------|-------------------|
| | £'000 | £'000 | £'000 | |
| Older People Residential Care | 8,261 | 7,607 | (654) | -7.9% |
| Older People Home Care | 7,941 | 8,177 | 236 | 3.0% |
| Learning Disabilities Residential Care | 1,487 | 1,595 | 108 | 7.3% |
| Learning Disabilities Day Opportunities | 3,238 | 3,067 | (171) | -5.3% |
| Administrative and Central Services and Management | 606 | 808 | 202 | 33.3% |
| Looked After Children | 10,923 | 11,420 | 497 | 4.6% |
| Family Support Services | 978 | 795 | (183) | -18.7% |
| Commissioning and Social Work | 4,364 | 4,559 | 195 | 4.5% |

Older People Residential Care

- A net under spend of £654,000 is a result of increased income from client contributions and for respite care and reductions in nursing placements (£236,000) and running costs (£50,000). A significant increase in income from previous forecast is due to deferred fee income in relation to income secured against clients' property. In future, this will be drawn down and monitored quarterly in 2016-17.

Older People Home Care

- The over spend is due to the increased demand for homecare hours, which are higher than those originally forecasted by the service. This is as expected as the increased demand is being managed by supporting people within the community rather than through residential care. The Directorate is in the process of remodelling the homecare service with a view to retaining only critical and complex care internally and transferring other care to independent providers.

Learning Disabilities Residential Care

- An over spend of £108,000 has arisen as a result of the continued provision of an increase in the number of residential placements. These placements will continue into the new financial year. The Directorate will monitor this pressure during 2016-17 and re-align budgets where possible.

Learning Disabilities Day Opportunities

- There is an under spend of £171,000 on the day opportunities budget as a consequence of staff vacancies within the service, part of which was held in anticipation of budget reductions in 2016-17. The under spend on these posts will not reoccur in 2016-17.

Management, Administrative and Central Services

- The Directorate is carrying a budget pressure from some unrealised 2015-16 budget reductions. Whilst these have been mitigated by additional savings generated elsewhere in the 2015-16 budget, the Directorate will re-align budgets in 2016-17 where possible to ensure the over spend does not reoccur.

Looked After Children

- The number of LAC at 31st March 2016 was 382 compared to 390 at the end of March 2015. However there still remains a budget pressure within this area. There is a £115,000 over spend on out of county residential care based on 12 active placements. In addition, there was a £110,000 over spend on independent fostering placements. There was also a £185,000 over spend against in-house residential and respite provision, related to MTFs efficiencies. The directorate is working closely with Early Help and Intervention in developing a joint plan.

Family Support Services

- There is an under spend of £183,000, mainly as a result of under-utilised direct payments (£106,000), which have been re-claimed, and partly due to under spends on salary budgets and residence orders, both of which have reduced in total from those granted in 2014-15. In terms of direct payments, the service has recently re-tendered for a direct payment and secured a support provider with the intention of increasing the number of direct payments and therefore fully utilise direct payment budgets.

Commissioning & Social Work

- There is an over spend of £195,000 due to the use of agency staff across the service.

Additional Financial Information - Main Capital Budget Variances

The current year end spend for the Directorate is £1.356m, with slippage requested of £117k. The variance is set out below:

| | Revised P12 budget 2015/16 | Total Expenditure to P12 2015/16 | Over/ (Under) budget | Slippage Requested | Impact on BCBC Resources | Comments |
|---|----------------------------|----------------------------------|----------------------|--------------------|--------------------------|--|
| | £'000 | £'000 | £'000 | £'000 | £'000 | |
| Social Services and Well-being Adult Social Care | | | | | | |
| Celtic Court Purchase and Refurbishment | 1,209 | 1,229 | 20 | 0 | -20 | Slight over spend as a result of higher fees than anticipated. To be met from additional contribution. |
| Adult Social Care Minor works | 132 | 78 | -54 | 54 | 0 | |
| Care Standards Act | 89 | 26 | -63 | 63 | 0 | |

2015-16 Budget Reduction Proposals Not Achieved In Full

| Ref. | Budget Reduction Proposal | Original 2015-16 £000 | Amount of saving achieved in 2015-16 £000 | Reason for overspend in 2015-16 | Current RAG Status (RAG) |
|-------|---|-----------------------|---|--|--------------------------|
| ASC2 | Support increased independence through enablement and progression in Learning Disability services | 220 | 0 | The re-tender of LD service provision did not achieve required services due to delays in process. | Red |
| ASC6 | Management, Admin and Training - Implement measures to achieve 7% and 5% across the 2 years | 215 | 115 | The service has been unable to reduce admin posts due to limited resource capacity. | Yellow |
| ASC7 | Re-provision and remodelling of Shared Lives | 135 | 0 | Increase in residential placements has made it difficult for these savings to be achieved | Red |
| ASC8 | Reduction in sickness across services | 50 | 0 | Difficult to achieve budget savings in relation to reduction in sickness. Also, sickness continues to be an issue. | Red |
| | Total Adult Social Care | 620 | 115 | | |
| CH22 | Remodelling of Childrens Residential Care | 200 | 0 | Work has been unable to commence until recently. | Red |
| CH20B | Review all temp posts across the directorate/Vacancy Management | 50 | 30 | See ASC6 | Yellow |
| | Total Safeguarding and Family Support | 250 | 30 | | |

Additional Sickness Information by Service Area

| | Average FTE 31.3.16 | 2015/16 | | | | | 2014/15 |
|--|---------------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | | QTR1 | QTR2 | QTR 3 | QTR 4 | QTR 4 Cum | QTR 4 Cum |
| | | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE | Days per FTE |
| Sport Play and Active Wellbeing | 17.51 | 0.00 | 0.00 | 0.23 | 0.11 | 0.26 | 0.04 |
| Adult Social Care | 646.06 | 4.85 | 4.91 | 4.95 | 5.69 | 20.40 | 19.39 |
| Safeguarding & Assessment | 159.61 | 3.80 | 3.63 | 4.31 | 4.97 | 16.71 | 19.08 |
| Business Support | 61.77 | 1.04 | 2.43 | 2.57 | 4.14 | 10.18 | 8.86 |
| SOCIAL SERVICES & WELLBEING TOTAL | 885.93 | 4.33 | 4.39 | 4.57 | 5.34 | 18.63 | 18.46 |

Additional Sickness Information by Absence Reason

| Absence Reason | % of Total FTE Days Lost |
|---|--------------------------|
| Stress / Anxiety / Depression / Mental Health | 31.49% |
| MSD including Back & Neck | 17.57% |
| Tests / Treatment / Operation | 12.04% |
| Return to Work Form Not Received | 9.57% |
| Stomach / Liver / Kidney / Digestion | 7.61% |
| Infections | 6.04% |
| Cancer | 4.81% |
| Chest & Respiratory | 2.57% |
| Heart / Blood Pressure / Circulation | 2.47% |
| Eye/Ear/Throat/Nose/Mouth/Dental | 2.06% |
| Genitourinary / Gynaecological / Pregnancy | 1.96% |
| Neurological | 1.37% |
| Injury | 0.44% |
| Total | 100% |

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BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO CORPORATE RESOURCES AND IMPROVEMNET OVERVIEW AND SCRUTINY COMMITTEE

11 JULY 2016

REPORT OF THE CORPORATE DIRECTOR – OPERATIONAL AND PARTNERSHIP SERVICES

FORWARD WORK PROGRAMME 2016-17

1. Purpose of Report.

- 1.1 To present the Committee with its draft Forward Work Programme for 2016-17 for consideration and approval.

2. Connection to Corporate Improvement Objectives/Other Corporate Priorities

- 2.1 The improvement priorities identified in the Corporate Plan 2016-2020 have been embodied in the Overview & Scrutiny Forward Work Programmes. The amended Corporate Plan adopted by Council on 10 March 2016 formally set out the improvement priorities that the Council will seek to implement between 2016 and 2020. The Overview and Scrutiny Committees engage in review and development of plans, policy or strategies that support the Corporate Themes.

3. Background.

- 3.1 Under the terms of Bridgend County Borough Council's Constitution, each Overview and Scrutiny Committee must publish a Forward Work Programme (FWP) as far as it is known. This FWP period runs from May 2016 – May 2017.

4. Current situation / proposal.

- 4.1 An effective Forward Work Programme will identify the issues that the Committee wishes to focus on during the year and provide a clear rationale as to why particular issues have been selected, as well as the approach that will be adopted; i.e. will the Committee be undertaking a policy review/ development role ("Overview") or performance management approach ("Scrutiny")?

- 4.2 On 8 April 2015, a report was presented to Council where it was agreed that:

- i) Each of the following topics be considered by only one Scrutiny Committee:

- Performance Monitoring
- Corporate Plan
- Business Planning
- Budget Monitoring

- ii) There would only be 6 scheduled meetings during the year for each Scrutiny Committee, which will look at a maximum of 12 service area topics. Without

the capacity to support additional meetings there is a need for each of the Scrutiny Committees to:

- Identify 12 topics for consideration which will provide the most significant value for the Authority and to the residents of the Borough of Bridgend;
- Prioritise their workloads i.e. if a key topic arises one of the existing planned topics will have to be removed from the programme;
- Focus their investigations to make best use of available resources;
- Determine appropriate recommendations which will support the delivery of the appropriate outcomes.

iii) Once the Forward Work Programmes for each Committee have been determined, the Scrutiny Chairs will monitor the programmes of each Committee at their monthly meeting to ensure that the corporate priorities are being met. Proposals to consider a corporate priority topic will be included in the Forward Work Programme report submitted to every Scrutiny Committee meeting.

iv) There are 12 meetings allocated to Research and Evaluation Panels (REPs) as laid out below:

- 2 meetings for the Public Service Board Scrutiny REP
- 4 meetings for the School Engagement REP
- 6 meetings of the Budget REP

4.3 There is also the potential for Collaborative Committees to deal with cross-cutting issues such as Supporting People or Child and Adolescent Mental Health. These will need to be piloted in the first instance with a single item to determine the future capacity for further Collaborative Committees.

4.3 During April, planning workshops were held to enable Overview and Scrutiny Committees to carry out a review and planning exercise.

The aim of these workshops was to:

- Review outcomes and impacts that their committee had made during the previous year.
- Assess information they have received over the previous year.
- Identify suggestions for future items.
- Identify potential invitees to attend for specific items/subject areas.

4.4 These workshops were informed by the following sources in order to select potential items for inclusion:

- *Committee Requests for Scrutiny from previous Forward Work Programmes;*
- *Committee conclusions and recommendations 2015-16*
- *Wales Audit Office Corporate Assessment Report 2015: Bridgend County Borough Council*
- *Wales Audit Office Annual Improvement report 2014-15: Bridgend County Borough Council*
- *Corporate Plan*
- *Directorate Business Plans;*

- *Performance Reports to Scrutiny Committees;*
- *Annual business planning and budget setting process;*

4.5 From these workshops, a draft list of items have been produced for each Scrutiny Committee using a set of criteria, (attached at Appendix A), and have subsequently been shared with Corporate Directors for proposed dates, additional information and suggestions.

4.6 The draft list for the Corporate Resources and Improvement Overview and Scrutiny Committee is attached at Appendix B.

5. Effect upon Policy Framework& Procedure Rules.

5.1 The work of the Corporate Resources and Improvement Overview and Scrutiny Committee relates to the review and development of plans, policy or strategy that form part of the Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend.

6. Equality Impact Assessment

6.1 There are no equality impacts arising directly from this report.

7. Financial Implications.

7.1 The delivery of the Forward Work Programme will be met from within existing resources for Overview and Scrutiny support.

8. Recommendation.

8.1 The Committee is recommended to:

1. Consider the suggested topics for inclusion on the Committee's Forward Work Programme 2016-17;
2. Identify the 12 Primary topics for inclusion on the Forward Work Programme and prioritise those topics for presentation to the Committee;
3. Propose items for consideration for a Collaborative Committee pilot.

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Background documents

None

Potential items proposed for the Forward Work Programme - questions to consider

Page 217

| | |
|--|--|
| Proposed Item | |
| Is this item within the remit of the Committee? | |
| Is it a Corporate Priority? | |
| Is it a public interest item? | |
| What are the questions that need answering? | |
| Then: | |
| What is the expected outcome from receiving the item? | |
| What can be achieved? | |
| What impact can Members have on this area? | |
| What information should be reported to the Committee? I.e. data, case studies, examples of outcomes, challenges etc. | |
| How should information be presented at the meeting? I.e. PowerPoint/Prezi presentation, audio/visual formats, photos, graphics, charts, maps etc. | |
| Who should be invited to contribute to achieve a representative picture? I.e. front line staff, users, carers, young people, representatives from partner organisations, business representatives etc. | |
| Is the item particularly suitable for webcasting? | |

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CORPORATE RESOURCES AND IMPROVEMENT OVSC – DRAFT ANNUAL FORWARD WORK PROGRAMME

| | Date | Topic | | Invitees |
|---|-------------------|---|--|---|
| 1 | 11 July 2016 | Year End Performance and Budget Monitoring Report | Annual/Year End report for financial and performance year 2015-16 | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance Lee Jones, Head of Regulatory and Partnership Services Yuan Shen, Corporate Performance, Partnership and Transformation Manager |
| 2 | 11 July 2016 | Sickness Absence | Report to include queries and issues raised by Members whilst scoping for the Sickness Absence REP | Cllr Hywel Williams, Cabinet Member - Resources Andrew Jolley, Corporate Director - Operational and Partnership Services Sarah Kingsbury, Head of Human Resources and Organisational Development Ian Vaughan, Workforce Planning Officer |
| 3 | 21 September 2016 | Procurement | Originating out of the Corporate Plan – one of the five key projects/programmes under Corporate Priority 3 – Smarter Use of Resources. How the Local Authority is getting best value for money on services and goods that we buy in; what are other LAs doing – in UK and wider? | Cllr Hywel Williams, Cabinet Member - Resources Andrew Jolley, Corporate Director - Operational and Partnership Services |
| 4 | 21 September 2016 | 2016-17 Quarter 1: Budget Monitoring | To review 2016-17 financial performance as at 30 June 2016: forecast out-turn against revenue and capital budget and reasons for variance | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance |

| | Date | Topic | | Invitees |
|---|-----------------|---|--|---|
| | | Financial Performance | | |
| 5 | 7 December 2016 | 2016-17 Half Year Financial Performance and Half Year Corporate Plan Performance Report | To review performance including financial performance as at 30 September 2015 against 2016-17 corporate plan commitments, milestones and indicators | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance Lee Jones, Head of Regulatory and Partnership Services Yuan Shen, Corporate Performance, Partnership and Transformation Manager |
| 6 | 7 December 2016 | Directorate Budget Consultation Process | Consideration of Directorate Budget for 2016/17 | Cllr Hywel Williams, Cabinet Member - Resources Andrew Jolley, Corporate Director - Operational and Partnership Services Randal Hemingway, Head of Finance |
| 7 | 17 January 2017 | Budget Responses and Budget REP | Collate all OVSC BREP feedback and comments | Cllr Hywel Williams, Cabinet Member - Resources Andrew Jolley, Corporate Director - Operational and Partnership Services Randal Hemingway, Head of Finance |
| 8 | 17 January 2017 | Corporate Plan | To comment on the Council's draft 2017-2020 Corporate Plan including its improvement priorities, revised actions and the associated commitments and indicators for 2017-18 | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance |
| 9 | 8 February 2017 | Digital Transformation Programme | Digital Transformation - Report going to Cabinet in May, Committee's role is to assist in the design and development for the future. | Cllr Hywel Williams, Cabinet Member - Resources Darren Mepham, Chief Executive Lee Jones, Head of Regulatory and Partnership Services Randal Hemingway, Head of Finance |

| | Date | Topic | | Invitees |
|----|-----------------|--|--|---|
| 10 | 8 February 2017 | Rationalising the Council's Estate including Depot Rationalisation | Originating out of the Corporate Plan – one of the five key projects/programmes under Corporate Priority 3 – Smarter Use of Resources. Rationalising the Council's Estate – Once decision made in relation to Ravens Court Committee's role to assist in developing the next phase. Depot Rationalisation relates back to 2014 where there were concerns over the budget - increase in the cost of the project and the need for consultants, the disposal of land and the gaining of a capital receipt for this. | Cllr Hywel Williams, Cabinet Member - Resources Mark Shepherd, Corporate Director - Communities |
| 11 | 15 March 2017 | Business Plan 2016/17 | To comment on Directorate 2016-17 business plans including its actions, milestones and performance measures | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance Yuan Shen, Corporate Performance, Partnership and Transformation Manager |
| 12 | 15 March 2017 | 2016-17 Quarter 3 Financial Performance | To review 2016-17 financial performance as at 31 December 2016 | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance |

Extra items

| | | |
|-------------------|---|--|
| Commercialisation | Originating out of the Corporate Plan – one of the five key projects/programmes under Corporate Priority 3 – Smarter Use of Resources. - Consideration of the wider opportunities for income generation - what are other LAs doing – in UK and wider? | |
|-------------------|---|--|

Non Service Area Reports

| Date | Topic | |
|--------------|--|---|
| 11 July 2016 | Scrutiny Annual FWP | To present to the Committee with suggested topics for consideration in the development of its Forward Work Programme for 2015-16. |
| 11 July 2016 | Corporate Parenting Champion Nomination | To cover nominations for Corporate Parenting Champion |
| TBC | Annual Recommendations Monitoring Report | |

REPORT TO CORPORATE RESOURCES AND IMPROVEMENT OVERVIEW AND SCRUTINY COMMITTEE

16 JUNE 2016

REPORT OF THE CORPORATE DIRECTOR – OPERATIONAL AND PARTNERSHIP SERVICES

FORWARD WORK PROGRAMME UPDATE

1. Purpose of Report

1.1 The purpose of this report is to:

- a) present the items due to be considered at the Committee's meeting to be held on 21 September 2016; and
- b) present a list of further potential items for prioritisation by the Committee.

2. Connection to Corporate Improvement Objectives / Other Corporate Priorities

2.1 The improvement priorities identified in the Corporate Plan 2016-2020 have been embodied in the Overview & Scrutiny Forward Work Programmes. The amended Corporate Plan adopted by Council on 10 March 2016 formally set out the improvement priorities that the Council will seek to implement between 2016 and 2020. The Overview and Scrutiny Committees engage in review and development of plans, policy or strategies that support the Corporate Themes.

3. Background

3.1 At its meeting 11 July 2016, the Corporate Resources and Improvement Overview and Scrutiny Committee will determine its Annual Forward Work Programme for 2016/17.

4. Current Situation / Proposal

Meetings of the Corporate Resources and Improvement Overview and Scrutiny Committee

4.1 In relation to the Committee's next scheduled meeting to be held on 21 September 2016, the table below lists the items to be considered and the invitees due to attend should the Committee agree it's proposed annual forward work programme.

| Topic | Invitees | Specific Information Requested | Research to be Undertaken by the Overview & Scrutiny Unit |
|-------------|---|--|---|
| Procurement | Cllr Hywel Williams, Cabinet Member - Resources Andrew Jolley, Corporate Director - Operational and Partnership Services | Originating out of the Corporate Plan – one of the five key projects/programmes under Corporate Priority 3 – Smarter Use of Resources. How the Local Authority is | |

| Topic | Invitees | Specific Information Requested | Research to be Undertaken by the Overview & Scrutiny Unit |
|--|---|---|--|
| | | getting best value for money on services and goods that we buy in; what are other LAs doing – in UK and wider? | |
| 2016-17 Quarter 1: Budget Monitoring Financial Performance | Cabinet and CMB All Scrutiny Chairs Randal Hemingway, Head of Finance | To review 2016-17 financial performance as at 30 June 2016: forecast out-turn against revenue and capital budget and reasons for variance | |

4.2 The table below lists all potential items that the Committee has considered during their planning workshop and, subject to any changes from the approval of the Annual Forward Work Programme, are put forward for reprioritisation as appropriate.

| Topic | Proposed Date | Specific Information Requested | Research to be Undertaken by the Overview & Scrutiny Unit |
|---|----------------------|--|--|
| 2016-17 Half Year Financial Performance and Half Year Corporate Plan Performance Report | 07-Dec-16 | To review performance including financial performance as at 30 September 2015 against 2016-17 corporate plan commitments, milestones and indicators | Detail research / To be confirmed |
| Directorate Budget Consultation Process | 07-Dec-16 | Consideration of Directorate Budget for 2016/17 | Detail research / To be confirmed |
| Budget Responses and Budget REP | 17-Jan-17 | Collate all OVSC BREP feedback and comments | Detail research / To be confirmed |
| Corporate Plan | 17-Jan-17 | To comment on the Council's draft 2017-2020 Corporate Plan including its improvement priorities, revised actions and the associated commitments and indicators for 2017-18 | Detail research / To be confirmed |
| Digital Transformation Programme | 08-Feb-17 | Digital Transformation - Report going to Cabinet in May, Committee's role is to assist in the design and development for the future. | Detail research / To be confirmed |

| Topic | Proposed Date | Specific Information Requested | Research to be Undertaken by the Overview & Scrutiny Unit |
|--|---------------|---|---|
| Rationalising the Council's Estate including Depot Rationalisation | 08-Feb-17 | Originating out of the Corporate Plan – one of the five key projects/programmes under Corporate Priority 3 – Smarter Use of Resources. Rationalising the Council's Estate – Once decision made in relation to Ravens Court Committee's role to assist in developing the next phase. Depot Rationalisation relates back to 2014 where there were concerns over the budget - increase in the cost of the project and the need for consultants, the disposal of land and the gaining of a capital receipt for this. | Detail research / To be confirmed |
| Business Plan 2016/17 | 15-Mar-17 | To comment on Directorate 2016-17 business plans including its actions, milestones and performance measures | Detail research / To be confirmed |
| 2016-17 Quarter 3 Financial Performance | 15-Mar-17 | To review 2016-17 financial performance as at 31 December 2016 | Detail research / To be confirmed |

Corporate Parenting

- 4.3 Corporate Parenting is the term used to describe the responsibility of a local authority towards looked after children and young people. This is a legal responsibility given to local authorities by the Children Act 1989 and the Children Act 2004. The role of the Corporate Parent is to seek for children in public care the outcomes every good parent would want for their own children. The Council as a whole is the 'corporate parent' therefore all Members have a level of responsibility for the children and young people looked after by Bridgend.¹
- 4.4 In this role, it is suggested that Members consider how the services within the remit of their Committee affects children in care and care leavers, and in what way can the Committee can therefore assist in these areas.
- 4.5 Scrutiny Champions can greatly support the Committee in this by advising them of the ongoing work of the Cabinet-Committee and particularly any decisions or changes which they should be aware of as Corporate Parents.

5. Effect upon Policy Framework and Procedure Rules

¹ Welsh Assembly Government and Welsh Local Government Association 'If this were my child... A councillor's guide to being a good corporate parent to children in care and care leavers', June 2009

5.1 The work of the Corporate Resources and Improvement Overview and Scrutiny Committee relates to the review and development of plans, policy or strategy that form part of the Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend.

6. Equality Impact Assessment

6.1 None

7. Financial Implications

7.1 None.

8. Recommendations

8.1 The Committee is recommended to:

- (i) Note the topics due to be considered at the meeting of the Committee for 21 September 2016 and confirm if it requires any additional specific information to be provided by the invitees listed or the Overview & Scrutiny Unit;
- (ii) Determine the topics, invitees to be invited to attend and any specific information it would like the invitees to provide as well as any research that it would like the Overview & Scrutiny Unit to undertake in relation to its meeting for 7 December 2016;
- (iii) Revisit and consider the list of future potential items for the Committees Forward Work Programme and reprioritise as the Committees feels appropriate.

Andrew Jolley,
Corporate Director – Operational and Partnership Services

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Background documents: None

BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO CORPORATE RESOURCES AND IMPROVEMENT OVERVIEW AND SCRUTINY COMMITTEE

11 JULY 2016

REPORT OF THE CORPORATE DIRECTOR – OPERATIONAL AND PARTNERSHIP SERVICES

CORPORATE PARENTING CHAMPION NOMINATION REPORT

1. Purpose of the Report.

- 1.1 The purpose of this report is to request the Committee to nominate one Member as its Corporate Parenting Champion to represent the Committee as an Invitee to meetings of the Corporate Parenting Cabinet Committee.

2. Connection to Corporate Improvement Objectives.

- 2.1 The improvement priorities identified in the Corporate Plan 2016-2020 have been embodied in the Overview & Scrutiny Forward Work Programmes. The amended Corporate Plan adopted by Council on 10 March 2016 formally set out the improvement priorities that the Council will seek to implement between 2016 and 2020. The Overview and Scrutiny Committees engage in review and development of plans, policy or strategies that support the Corporate Themes.

3. Background.

- 3.1 Corporate Parenting is the term used to describe the responsibility of a local authority towards looked after children and young people. This is a legal responsibility given to local authorities by the Children Act 1989 and the Children Act 2004. The role of the Corporate Parent is to seek for children in public care the outcomes every good parent would want for their own children. The Council as a whole is the 'corporate parent' therefore all Members have a level of responsibility for the children and young people looked after by Bridgend.¹
- 3.2 In order to further develop and enhance the Council's corporate parenting role with its partners, a Corporate Parenting Cabinet Committee comprising all Members of Cabinet was established by Cabinet on 4 November 2008.
- 3.3 The inaugural meeting of the Cabinet Committee was held on 27 November 2008 where it was agreed that the Cabinet Committee will meet bi-monthly. The terms of reference for the Cabinet Committee are:

¹ Welsh Assembly Government and Welsh Local Government Association 'If this were my child... A councillor's guide to being a good corporate parent to children in care and care leavers', June 2009

- to ensure that looked after children are seen as a priority by the whole of the Authority and by the Children and Young People's Partnership;
- to seek the views of children and young people in shaping and influencing the parenting they receive;
- to ensure that appropriate policies, opportunities and procedures are in place;
- to monitor and evaluate the effectiveness of the Authority in its role as corporate parent against Welsh Government guidance.

3.4 At its inaugural meeting, the Cabinet Committee requested that a Corporate Parenting "Champion" be nominated from each of the Overview and Scrutiny Committees to become permanent invitees to the Cabinet Committee.

4. Current Situation / Proposal.

4.1 The Committee is requested to nominate one Member as its Corporate Parenting Champion to represent the Committee as an invitee at meetings of the Corporate Parenting Cabinet Committee.

4.2 The role of the Corporate Parenting Champion is to represent their Overview and Scrutiny Committee, partaking in discussions with Cabinet over items relating to children in care and care leavers.

4.3 In this role, it is suggested that Members consider how the services within the remit of their Committee affect children in care and care leavers, and in what way can the Committee can therefore assist in these areas.

4.4 Scrutiny Champions can greatly support the Committee in this by advising them of the ongoing work of the Cabinet-Committee and particularly any decisions or changes which they should be aware of as Corporate Parents.

5. Effect upon Policy Framework and Procedure Rules.

5.1 The work of the Corporate Resources and Improvement Overview and Scrutiny Committee relates to the review and development of plans, policy or strategy that form part of the Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend.

6. Equality Impact Assessment.

6.1 There are no equality impacts arising from this report.

7. Financial Implications.

7.1 None.

8. Recommendation.

The Committee is asked to nominate one Member of the Committee as its Corporate Parenting Champion to represent the Committee at meetings of the Corporate Parenting Cabinet Committee

P A Jolley,
Corporate Director – Operational and Partnership Services

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Background Documents

Bridgend County Borough Council Constitution

Part II of the Local Government Act 2000: Executive Arrangements

Report of the Corporate Director – Children to Cabinet, 4 November 2008: Establishment of a Corporate Parenting Cabinet Committee

Report of the Corporate Director – Children to the Inaugural Meeting of the Corporate Parenting Cabinet Committee, 27 November 2008

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