

SOCIAL SERVICES & WELL-BEING DIRECTORATE – PERFORMANCE Q2

Commitments 2018-19					RAG – progress against commitment				All Indicators (incl. Finance and sickness PIs)				National Indicators (inc SSWB ACT)																							
Q2 2018-19 Directorate Commitments to delivering Corporate priorities					Total	Red	Amber	Green	Performance vs Target		Trend vs Q2 2017-18		Performance vs Target		Trend vs Q2 2017-18																					
Priority One – Supporting a successful economy					1	0	0	1			↑ 21 ↓ 9 ↔ 3																									
Priority Two – Helping people to be more self-reliant					9	0	1	8																												
Priority Three – Smarter use of resources					4	0	0	4																												
Finance					Human Resources																															
Revenue Budget <ul style="list-style-type: none"> The Directorate’s net budget for 2018-19 is £69.954 million. The current year’s projected outturn is £71.206m, meaning an overspend of £1.252m Capital Budget <ul style="list-style-type: none"> The capital budget for the Directorate for 2018-19 is £3.625m; with a capital spend for the year of £3.625m, with no variance to spend at Q2. Efficiency Savings <table border="1"> <thead> <tr> <th>Savings (£000)</th> <th>c/fwd</th> <th>2018-19</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Savings Target (2018)</td> <td>1,300</td> <td>350</td> <td>100%</td> </tr> <tr> <td>Likely to be Achieved (in 2018-19)</td> <td>1,134</td> <td>350</td> <td>100%</td> </tr> <tr> <td>Variance</td> <td>166</td> <td>0</td> <td>0%</td> </tr> </tbody> </table> <p>Additional financial information can be found in the Quarter 2 Budget Monitoring report that went to Scrutiny on 23 October 2018.</p>					Savings (£000)	c/fwd	2018-19	%	Savings Target (2018)	1,300	350	100%	Likely to be Achieved (in 2018-19)	1,134	350	100%	Variance	166	0	0%	Staff Number (FTE) <table border="1"> <thead> <tr> <th>2017-18</th> <th>2018-19</th> </tr> </thead> <tbody> <tr> <td>848.16</td> <td>834.38</td> </tr> </tbody> </table> Sickness <div style="display: flex; justify-content: space-around;"> <div> <p>Sickness Absence (cumulative - days per FTE)</p> </div> <div> <p>Sickness Absence at Long Term / Short Term</p> </div> </div>												2017-18	2018-19	848.16	834.38
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					High Corporate Risks																															

Residual Risk	Improvement Priority	Likelihood	Impact	Overall
Supporting vulnerable children, young people and their families	2 and 3	5	4	20
Supporting adults at risk	2 and 3	4	4	16
Healthy life styles	2	4	4	16
Ineffective collaboration	All	4	4	16

ADULT SOCIAL CARE

Improvement Priority Two: Helping People to become more Self Reliant

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P2.1.1	Continue to improve the ways in which the Council provides good information, advice and assistance to the public, including increasing the support available through local community coordinators.	GREEN	Phase 2 of the MASH has been implemented. The Common Access Point continues to deliver advice, information and assistance as an integral part of their contact with people requesting help.	
P2.1.2	Continue to involve service users, carers and communities in developing and commissioning services.	GREEN	There is an ongoing commitment across Social Services to continually engage with citizens and look at co-production models of care. Some positive examples undertaken during 2018-19 include the review of Carers and Short Breaks Services and the review and remodelling of children's residential homes. As part of the Social Services & Wellbeing (Wales) Act 2014, we are required to collect qualitative information about people who use social care services. Surveys will be issued to a sample of adults, carers, children and their parents during November 2018 and responses will be analysed and used to inform the development and commissioning of services going forward.	
P2.3.1	Work with partners and schools to support carers by providing the right information, advice and assistance where relevant.	GREEN	During Q1 & Q2, Bridgend Carers centre has provided support to 576 Carers, 205 Adult Carers Assessments have been completed and 24 Young Carers Assessments have been completed.	

Performance Indicators

PI Ref No, PI Type, PAM/ Local) link to Corp Priority	PI Description and preferred outcome	Actual 16 -17	Annual Target 17-18	Actual 17-18 & RAG	Annual Target 18 -19	Qtr 2 18-19 Target	Qtr 2 18-19 Cumulative Actual & RAG	Trend Vs Qtr 2 17 -18	Wales Average 17 - 18 PAMs	BCBC Rank 17 - 18 PAMs	Comments
Service user outcomes (O)											
National Data Item A9 CP Priority 2	Number of adults who received a service provided through a social enterprise, co-operative, user led service or third sector organisation during the year. <i>Higher preferred</i>	365	175	379	370	370	462	344 ↑	n/a	n/a	Quarterly indicator The definition states that this applied only to those with a care package/ in managed care. The target is based on Q2 2017/18 data and shows improvement

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SSWB1 CP Priority 2	Number of people who have been diverted from mainstream services, enabling them to remain independent for as long as possible. <i>Higher preferred</i>	167	200	973	1000	500	567	482 ↑	n/a	n/a	Quarterly indicator Target changed at Q1 to 1000, based on past performance.– it is recognised that numbers will plateau
PM18 National PM Priority 2	The percentage of adult protection enquiries completed within 7 days <i>Higher preferred</i>	95.42%	95%	95.92%	95%	95%	97.04%	91.89% ↑	n/a	n/a	Quarterly indicator This measure relies on data from partner agencies - not just social care.
PAM/025 PM19 National PM (SCA001) Priority 2	Rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over <i>Lower preferred</i>	0.66	2.2	1.52	2	1.0	1.41	0.64 ↓	n/a	n/a	Quarterly indicator The national definition changed- 16/17 Welsh Government's revised timelines for the validation of DToCs appears to be having an adverse effect on the ability to validate delays. There were 18 DToCs in Q1 & Q2 which are for a variety of reasons, including capacity in the community
PM20a National PM CP Priority 2	The percentage of adults who completed a period of reablement and 6 months later have a reduced package of care and support <i>Higher preferred</i>	65.98%	60%	70.64%	62%	62%	72.03%	68.10% ↑	n/a	n/a	Quarterly indicator Performance above target indicating appropriate support and interventions in place.
PM20b National PM CP Priority 2	The percentage of adults who completed a period of reablement and 6 months later have no package of care and support. <i>Higher preferred</i>	64.22%	60%	58.27%	60%	60%	57.88%	58.90% ↓	n/a	n/a	Quarterly indicator The service is supporting more people with more than one medical condition, which is related to frailty. The service works hard to maximise people's independence successfully within this background of increasing frailty.
PM21 National PM CP Priority 2	The average length of time older people (aged 65 or over) are supported in residential care homes. <i>Lower preferred</i>	899 days	1000 days	861.49 days	900	900	796.64	871.90 Days ↑	n/a	n/a	Quarterly indicator Target achieved
PM22 National PM Priority 2	Average age of adults entering residential care homes <i>Higher preferred</i>	81.56	84	82.9	84	84	85.46	83.39 ↑	n/a	n/a	Quarterly indicator Target achieved.
PM22a Local Priority 2	Average age of adults entering residential care homes over the age of 65. <i>Higher preferred</i>	Establish baseline	85	85.4	85	85	87.09	84.72 ↑	n/a	n/a	Quarterly indicator Target achieved.
PM22b Local Priority 2	Average age of adults entering residential care homes under the age of 65. <i>Higher preferred</i>	Establish baseline	58	48.26	58	58	55.03	58.04 ↓	n/a	n/a	Quarterly indicator This indicator relates to people known to the Learning Disability and Mental Health service in the main. The target has not been achieved due to a small number of people with complex conditions needing support in residential care at a younger age; this calculation is in relation to only 4 individuals, 3 of which are under the target age and one that is above

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PM23 National PM Priority 2	The percentage of adults who have received advice and assistance from the advice and assistance service and have not contacted the service for 6 months. <i>Higher preferred</i>	91.73%	70%	89.38%	70%	n/a	n/a	n/a	n/a	n/a	Annual indicator
SCA018a (SSWB 10) CP Local Priority 2	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>	90.02%	96%	97.46%	97%	97%	98.49%	94.95% ↑	n/a	n/a	Quarterly indicator Quarterly target shows final annual target.
PAM/024 CP Priority 2	The percentage of adults 18+ who are satisfied with the care and support they received. <i>Higher preferred</i>	n/a	65.00%	85.97%	80%	n/a	n/a	n/a	n/a	n/a	New Annual Indicator
PAM/026 SSWBNS15 Priority 2	The percentage of carers reporting that they feel supported to continue in their caring role. <i>Higher preferred</i>	n/a	65.00%	81.1%	65%	n/a	n/a	n/a	n/a	n/a	New Annual Indicator
SSWB19 CP Priority 2	The percentage of adults who received advice and assistance from the information, advice and assistance service during the year <i>Higher preferred</i>	n/a	30%	63.67%	50%	50%	64.39%	51.80% ↑	n/a	n/a	Quarterly indicator Quarter 2 target is annual target: target achieved
SSWBNS7a National PM Priority 2	The percentage of adults reporting that they have received the right information or advice when they needed it. <i>Higher preferred</i>	80.8%	85%	75.5%	85%	n/a	n/a	n/a	n/a	n/a	Annual indicator
SSWBNS12 National PM Priority 2	The percentage of adults reporting that they felt involved in any decisions made about their care and support. <i>Higher preferred</i>	80.2%	80%	80.66%	80%	n/a	n/a	n/a	n/a	n/a	Annual indicator

CHILDREN'S SOCIAL CARE

Improvement Priority Two: Helping People to become more Self Reliant

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P2.2.1	Support the development of a new generation of community health and wellbeing centres for our residents with health partners.	GREEN	Funding package secured to support Halo and Health Board to develop a wellbeing hub within the bowls hall at Bridgend Life Centre. Project will include Health Board consulting, exercise referral and support for targeted population groups.	
P2.2.2	Establish a new model of residential provision for looked after children and young people and seek the best ways of meeting their individual needs including support beyond the age of 18 by offering specialist accommodation.	GREEN	The medium-long term unit has been registered by Care Inspectorate Wales (CIW) and the service is "live". The Placement and Assessment Hub is undergoing refurbishment and CIW registration is anticipated in November 2018	
P2.2.3	Finalise a transition service model to help disabled children move smoothly into adulthood.	AMBER	The ICF funding necessary was not secured	Funding loss means that his project is being re-evaluated.
P2.3.2	Recruit and retain carers across the range of fostering services.	GREEN	A Development Officer post has been approved to enhance our capacity to recruit and retain carers. A revised training plan is being implemented to upskill and retain existing carers.	

Performance Indicators

PI Ref No, PI Type, PAM / Local) link to Corp Priority	PI Description and preferred outcome	Actual 16 -17	Annual Target 17-18	Actual 17-18 & RAG	Annual Target 18 -19	Qtr 2 18-19 Target	Qtr 2 18-19 Cumulative Actual & RAG	Trend Vs Qtr 2 17 -18	Wales Average 17 - 18 PAMs	BCBC Rank 17 - 18 PAMs	Comments
Service user outcomes (O)											
SSWB20 CP Priority 2	The percentage of children who received advice and assistance from the information, advice and assistance service during the year <i>Higher preferred</i>	n/a	60%	71.35%	70%	70%	82.1%	82.76% ↓	n/a	n/a	New Quarterly Indicator Target achieved
SSWB21 CP Priority 2	The percentage of identified young carers with an up to date care and support plan in place <i>Higher preferred</i>	n/a	90%	94.83%	90%	90%	91.67%	92.59% ↓	n/a	n/a	Quarterly indicator New for 2017-18 in the Corporate Plan. Performance above target
PAM/027 CP Priority 2	The percentage of children aged 7-17 years who are satisfied with the care and support they received. <i>Higher preferred</i>	n/a	65%	84.09%	80%	n/a	n/a	n/a	n/a	n/a	New Annual Indicator
PAM/028 PM24 National PM Priority 2	The percentage of assessments completed for children within statutory timescales <i>Higher preferred</i>	85.4%	85%	86.15%	85%	85%	78.95%	81.02% ↓	90.8%	n/a	Quarterly indicator There has been a dip in performance in the IAA service due to capacity issues. This has impacted on overall performance. Additional resources have been allocated to address the temporary capacity issues in the IAA Team and performance is being closely monitored with improvements already being evident.

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PM25 National PM CP Priority 2	The percentage of children supported to remain living within their family. <i>Higher preferred</i>	75.6%%	65%	61.64%	65%	65%	65.16%	62.40% ↑	n/a	n/a	Quarterly indicator Performance on target. Our LAC population is safely reducing and a continuation of this trend will continue to have a positive impact on the performance for this indicator.
PM26 National PM Priority 2	The percentage of looked after children returned home from care during the year <i>Higher preferred</i>	9.01%	10%	6.56%	10%	5.0%	4.22%	3.07% ↑	n/a	n/a	Quarterly indicator Performance for this quarter is below target, however, this has not been due to our overall proportion of discharges decreasing but applies only to those who have returned to family members under no order/SGO etc. It should also be noted that this measures discharges during the year as a proportion of our entire looked after population (some of whom have been looked after for up to 17 years). Cases are being continually reviewed within the Permanence Team to ensure we are aware of any barriers moving forward. This is being closely monitored
PM31 National PM Priority 2	The percentage of placements started during the year where the child is registered with a provider of general medical services within 10 working days of the start of the placement. <i>Higher preferred</i>	100%	100%	100%	100%	100%	100%	100% ↔	n/a	n/a	Quarterly indicator Performance remains on target
PM32 National PM (SCC002) Priority 2	The percentage of looked after children 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>	15.74%	10%	6.54%	10%	5%	2.92%	3.61% ↑	n/a	n/a	Quarterly indicator Performance is within target
PM33 (SCC004) National PM PAM/029 CP Priority 2	The percentage of looked after children on 31st March who have had three or more placements during the year. Lower preferred	13.08%	12%	10.94%	12%	6%	4.56%	12.99% ↑	n/a	n/a	Quarterly indicator Performance is within target
PM34a CP National PM Priority 1	The percentage of all care leavers who are in education, training or employment at: a)12 months after leaving care <i>Higher preferred</i>	45.2%	70%	60.53%	60%	60%	64.29%	65.52% ↓	n/a	n/a	Quarterly indicator Performance at Q2 remains above target with 9 out of 14 young people being in education, training or employment during the 12th month after leaving care. The reasons for NEET include having illnesses or disabilities which render them unfit for work, and those over the age of 18 who are unwilling to engage in any education, training or employment opportunities
PM34b CP National PM Priority 1	The percentage of all care leavers who are in education, training or employment at: b) 24 months after leaving care <i>Higher preferred</i>	50%	55%	46.67%	55%	55%	55.17%	43.75% ↑	n/a	n/a	Quarterly indicator This is an improving picture. Reasons for NEET include being young parents, job seeking, having illnesses or disabilities which render them unfit for work, and those over the age of 18 who are unwilling to engage in any education, training or employment opportunities
SSWB7 CP Priority 2	Percentage of individuals discussed at Transition Panel that have a transition plan in place by aged 17 <i>Higher preferred</i>	100%	100%	100%	100%	100%	100%	100% ↔	n/a	n/a	Quarterly indicator performance remains on target

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SSWBNS7b National PM Priority 2	The percentage of children reporting that they have received the right information or advice when they needed it. <i>Higher preferred</i>	88%	90%	85.56%	90%	n/a	n/a	n/a	n/a	n/a	Annual indicator
PM35 CP National PM Priority 2	The percentage of care leavers who have experienced homelessness during the year <i>Lower preferred</i>	7.6%	15%	13.79%	13%	13%	1.39%	6.56% ↑	n/a	n/a	Quarterly indicator Work is underway to address the issue of homelessness for vulnerable groups including care leavers. A four bed accommodation and support service has been commissioned from Dewis and there has been maximum occupancy and positive feedback since its establishment. A project team consisting of officers from SSWB and Housing has been established to further develop accommodation options for care leavers and other vulnerable young adults.
PM29a National PM Priority 2	Percentage of children achieving the core subject indicator at key stage 2 <i>Higher preferred</i>	55.32%	55%	No data	Not set	n/a	n/a	n/a	n/a	n/a	Annual indicator
PM29b National PM Priority 2	Percentage of children achieving the core subject indicator at key stage 4 <i>Higher preferred</i>	17.91%	17%	No data	Not set	n/a	n/a	n/a	n/a	n/a	Annual indicator
PM30 National PM Priority 2	The percentage of children seen by a registered dentist within 3 months of becoming looked after <i>Higher preferred</i>	55.56%	65%	82.14%	65%	65%	88.24%	78.57% ↑	n/a	n/a	Quarterly indicator Performance is above target

CORPORATE DIRECTOR

Improvement Priority One: Supporting a successful economy

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P1.1.1	Continue to work with the Cardiff Capital Regional Skills and Employment Board and BCBC led local projects to help shape employment opportunities, including continuing to capture apprenticeship opportunities, and develop a skilled workforce to meet those needs.	GREEN	Work has progressed in this area. Training, including an e-learning package for relevant managers, is in place to support the apprenticeship programme.	

Improvement Priority Two: Helping People to become more Self Reliant

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P2.4.1	Work with partners and the third sector to strengthen communities and identify the best way of providing services locally	GREEN	Building Resilient Communities plan has been produced with third sector stakeholder group. Work has commenced to create a directorate Prevention and Wellbeing plan and includes third sector. Volunteer development programme being progressed in partnership (linked to communities for work).	
p2.4.2	Enable community groups and the third sector to have more voice and control over community assets	GREEN	42 partnership agreements active with schools. Halo and Awen delivering positive results operating community facilities. 8% increase sustained in participation at dual use facilities. Community Chest investment has received XX applications for support. Community centres being reviewed in terms of licencing / asset transfer.	

Improvement Priority Three: Smarter Use of Resources

Code	Action Planned	Status	Comments	Next Steps (for amber and red only)
P3.1.1	Implement the planned budget reductions identified in the 2018-19 budget.	GREEN	Good progress being made which is reflected in the Q2 financial position. The Financial Plan continues to be monitored.	
P3.4.1	Support managers to lead staff through organisational change.	GREEN	There is directorate representation on all corporate groups such as Learning and Development. Training opportunities are supported and the Director holds quarterly extended managers meetings for approximately 60 managers to ensure open communication on legislative and corporate changes.	
P3.4.2	Provide the learning and development opportunities for staff to meet future service needs	GREEN	Directorate representation on the Corporate Learning and Development Group. Professional training is supported through the Social Care Workforce Development Team.	
P3.4.3	Improve and promote mechanisms that increase responses to consultations.	GREEN	A pro-active mechanism to ensure relevant consultations are responded to is discussed and agreed in the senior management team meetings.	

Performance Indicators

Value for money

PI Ref No	PI Description	Annual target 18-19 £'000	Performance as at Q2						Comments
			Red		Amber		Green		
			£'000	%	£'000	%	£'000	%	
DWB6.1.1iii (SSWB12)	Value of planned budget reductions achieved (SS & Wellbeing)	£350					£350	100%	

PI Ref No, PI Type, PAM/ Local) link to Corp Priority	PI Description and preferred outcome	Actual 16 -17	Annual Target 17-18	Actual 17-18 & RAG	Annual Target 18 -19	Qtr 2 18-19 Target	Qtr 2 18-19 Cumulative Actual & RAG	Trend Vs Qtr 2 17 -18	Wales Average 17 - 18 PAMs	BCBC Rank 17 - 18 PAMs	Comments
Value for Money (V)											
DWB4.2.3.3 SSWB 4 Local Priority 2	The percentage of adult social care third sector contracts reviewed and monitored <i>Higher preferred</i>	100%	100%	100%	100%	n/a	n/a	n/a	n/a	n/a	Annual indicator
SSWB 2 DWB4.2.3.3 Local Priority 2	The percentage of domiciliary care contracts reviewed and monitored <i>Higher preferred</i>	100%	100%	100%	100%	n/a	n/a	n/a	n/a	n/a	Annual indicator
Service User Outcomes (O)											
SSWB8 Local other	The percentage of children and young people subject to CSE protocol with an up to date SERAF assessment (Sexual Exploitation Risk Assessment Framework) <i>Higher preferred</i>	100%	100%	100%	100%	100%	100%	↔	n/a	n/a	Quarterly indicator It is positive to note that compliance has been maintained. All agencies continue to share information and work together in respect of this vulnerable group of people.
PM27 National PM other	The percentage of re-registrations of children on local authority Child Protection Registers (CPR) <i>Lower preferred</i>	1.6%	5%	3.32%	5%	5%	3.48%	↑	n/a	n/a	Quarterly indicator performance is within target
PM28 National PM other	The average length of time for all children who were on the CPR during the year <i>Lower preferred</i>	270 days	265 days	266 days	270 days	270 days	235 days	↑	n/a	n/a	Quarterly indicator Performance within target
PAM/041 other	Percentage of National Exercise Referral Scheme (NERS) clients who continue to participate in the exercise programme at 16 weeks <i>higher preferred</i>	n/a	n/a	n/a	Establish Baseline	n/a	n/a	n/a	n/a	n/a	Annual indicator New indicator introduced March 2018
PAM/42 other	Percentage of National Exercise Referral Scheme (NERS) clients who reported an increase in leisure minutes at 16 weeks <i>higher preferred</i>	n/a	n/a	n/a	Establish Baseline	n/a	n/a	n/a	n/a	n/a	Annual indicator New indicator introduced March 2018
PAM/017 (LCS002b) other	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>	9600	9450	9447	9150	9150	9059	n/a	n/a	n/a	Quarterly indicator Q1,Q2 & Q3 are end of year projections The profile of participation will generally increase in Q3 and Q4. The favourable weather in Q2 will have influenced levels of visits to indoor facilities. Competition also increasing for fitness services in the County.
PAM/040 other	Percentage of Welsh Public Library Standards Quality Indicators (with targets) achieved by the library service <i>Higher preferred</i>	82%	83%	n/a	85%	n/a	n/a	n/a	n/a	n/a	Annual indicator
SSWB23 other	Number of people with cognitive changes / dementia who are supported with information and advice to help them remain independent as possible <i>Higher preferred</i>	n/a	n/a	n/a	130	65	120	n/a	n/a	n/a	Quarterly indicator New indicator for 2018 -19 Above Target
SSWB24 SCC001b other	For looked after children whose second review (due at 4 months) was due in the year, the percentage with a plan for permanence at the due date <i>Higher preferred</i>	98.9%	95%	100%	95%	95%	100%	↑	n/a	n/a	Quarterly indicator Above target
PI Ref No, PI	PI Description and preferred outcome	Actual	Annual	Actual	Annual	Qtr 2	Qtr 2	Trend Vs	Wales	BCBC	Comments

Type, PAM/ Local) link to Corp Priority		16 -17	Target 17-18	17-18 & RAG	Target 18 -19	18-19 Target	18-19 Cumulative Actual & RAG	Qtr 2 17 -18	Average 17 - 18 PAMs	Rank 17 - 18 PAMs	
DWB5.3.1.1 Local P2	Number of members in the Access to Leisure programme for disadvantaged groups <i>Higher preferred</i>	961	1250	n/a	1350	1350	1516	n/a	n/a	n/a	Quarterly indicator Above target Q2 target is annual target
Organisational Capacity (C)											
SSWB17 Local CP feeder P1	The number of apprenticeships in the directorate throughout the year (SS & Wellbeing) <i>Higher preferred</i>	4	4	7	4	2	3	4 ↓	n/a	n/a	Quarterly indicator On target
SSWB22 CP P1	The number of apprenticeships taken by looked after children <i>higher preferred</i>	n/a	n/a	n/a	1	0.50	1	n/a	n/a	n/a	Quarterly indicator In all, eight apprenticeship opportunities have been taken up by looked after children and care leavers both within and outside the council.
CHR002iii Local Sswb13 P3	Number of working days per FTE lost due to sickness absence (SSWB) <i>Lower preferred</i>	18.25	11.04	17.04	11.04	5.52	9.81	7.94 ↓	n/a	n/a	Quarterly indicator
DWB5.6.8.5 Local SSWB14 P3	Number of working days per FTE lost due to industrial injury (SSWB) <i>Lower preferred</i>	0.2021	0.2	0.0941	0	0	0.0299	0.0726 ↑	n/a	n/a	Quarterly indicator – Target changed to 0 following Q1
SSWB15 Local P3	Number of individual injury incidents (SSWB) <i>Lower preferred</i>	7	7	6	0	0	2	5 ↑	n/a	n/a	Quarterly indicator – Target changed to 0 following Q1

Sickness broken down by Service Area

Unit	FTE 30.09.2018	QTR2 2017/18			QTR2 2018/19			Cumulative Days per FTE 2017/18	Cumulative Days per FTE 2018/19
		Number of FTE days lost	No. of Absences	Days per FTE	Number of FTE days lost	No. of Absences	Days per FTE		
Adult Social Care	590.28	2656.05	217	4.29	3078.31	241	5.21	8.47	10.58
Business Support - SS&W	56.23	121.97	14	2.12	61.31	9	1.09	3.78	2.93
Children's Social Care	170.80	655.84	51	3.98	902.59	71	5.28	8.03	10.32
Prevention and Wellbeing	16.07	24.12	2	1.33	1.80	2	0.11	3.05	0.49
Social Services and Wellbeing Total	834.38	3457.98	284	4.02	4044.01	323	4.85	7.94	9.80

Sickness Absence by Reason Cumulative Q2

Absence Reason	Q1 Number of FTE days lost	Q2 Number of FTE days lost	Total Number of FTE Days Lost	% of Cumulative days lost
Cancer		30.14	30.14	0.97%
Chest & Respiratory	44.65	37.49	82.14	2.65%
Eye/Ear/Throat/Nose/Mouth/Dental	56.83	21.52	78.35	2.53%
Genitourinary / Gynaecological / Pregnancy	6.41	7.05	13.46	0.43%
Heart / Blood Pressure / Circulation	60.36	123.04	183.41	5.92%
Infections	135.18	37.45	172.63	5.57%
Injury				
MSD including Back & Neck	316.20	188.19	504.39	16.29%
Neurological	2.92	31.98	34.90	1.13%
Pregnancy related	50.53	50.36	100.89	3.26%
Return to Work Form Not Received	76.05	9.73	85.78	2.77%
Stomach / Liver / Kidney / Digestion	318.84	150.98	469.82	15.17%
Stress / Anxiety / Depression / Mental Health	507.46	420.68	928.15	29.97%
Tests / Treatment / Operation	247.26	165.20	412.46	13.32%
TOTALS	1822.68	1273.81	3096.50	

KEY:

Commitments		Action	
Red	<p>A RED status usually means one or more of the following:</p> <ul style="list-style-type: none"> A significant negative variance against the budget or savings of more than 10%. Delays against key milestone/s of more than 10% of the total length of the planned action. Problems with quality that lead to significant additional costs/work. Significant lack of resources which cannot be resolved by the directorate. PIs identified to measure success of the commitment are mostly red. Dissatisfaction or resistance from stakeholders that mean acceptance may be delayed all the benefits not achieved. 	CPA/Scrutiny committee should ask the pertinent chief officer/s to provide an explanation or conduct a review to identify the root causes of the red status and put in place an action plan to prevent further deterioration and minimise the damage caused to the overall organisation.	
		Performance Indicators (RAG)	
		Red (alert)	Performance is worse than target by 10% or more
Amber	<p>An AMBER status usually means one or more of the following:</p> <ul style="list-style-type: none"> A negative variance against the budget or savings of less than 10%. Delays against critical milestones less than 10% of the total length of the planned action. Problems with quality but not causing delay. Lack of resources which can be resolved by the pertinent chief officer/s (e.g. via virement within the budget or managing vacancies). PIs identified to measure success of the commitment are a mixture of red, amber and green. Dissatisfaction or resistance from stakeholders addressed by the pertinent chief officer/s. 	Action	
		CPA/Scrutiny Committee should maintain a watching brief over Amber projects/commitments but not necessarily intervening. They may ask chief officers to provide mitigation actions to prevent amber from moving into the red.	
		Performance Indicators (RAG)	
		Amber (caution)	Performance is worse than target by under 10%
Green	<p>A GREEN status usually means one or more of the following:</p> <p>The forecast expenditure is on budget.</p> <ul style="list-style-type: none"> Milestone/s on track to complete on time. Quality at expected levels. No resource problems. PIs identified to measure success of the commitment are mostly green. Stakeholders satisfied with the outcome. 	Action	
		CPA/Scrutiny Committee can let officers progress with the delivery of the planned actions. Assurance from the underlying data should indicate that the milestone is truly green.	
		Performance Indicators (RAG)	
		Green (clear)	Performance is equal to or better than target
Performance Indicators (Trend)		Performance Indicator types	
↑	Performance improved vs same quarter of previous year	CP	Corporate Plan indicator
↔	No change in performance vs same quarter of previous year	PAM	Public Accountability Measure (National Indicator)
↓	Performance declined vs same quarter of previous year		