

Improvement Priority One: Working together to develop the local economy

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|---------------|-------------|--|-----------------------|--|--|
| P1.1.1 | Communities | Complete the current programme of regeneration works in Bridgend town centre | GREEN | <ul style="list-style-type: none"> The four phases of the £9 million programme of improvements in Bridgend town centre have now been completed, with the exception of minor variations that will be finished by the June 2015 deadline. The bulk of the funding has come from European grant and the Welsh Government. The programme has included comprehensive improvements at Nolton Street, Court Road, Derwen Road, Merthyr Mawr Road (North), Rhiw Hill and Elder Street, including new road layouts, pedestrian safety measures, new public realm, artworks, better accessibility and on street parking at Nolton Street to support short-stay trading. The improvements have also acted as a catalyst for a series of private sector investments in these areas. The scheme has been completed to programme and within budget. | |
| P1.1.2 | Communities | Begin a new programme of works to develop retail, office and residential sites in Bridgend town centre subject to the success of our bid for funding to the Welsh Government | GREEN | <ul style="list-style-type: none"> Complete for year one. Programme remains on target; full spend and grant draw down achieved for year one; 1st stage of OJEU procurement completed for £10m Rhiw project – final tenders awaited; planning application submitted. Gateway 0 external audit completed and achieved joint highest rating of any local authority under the VVP Programme. | |
| P1.1.3 | Communities | Reappraise development options and continue to manage regeneration projects in Porthcawl | AMBER | <ul style="list-style-type: none"> This priority is made up of multiple activities that are at different stages in terms of RAG status. The Porthcawl Townscape Heritage Initiative and sale of Jennings building for a new regeneration scheme are 100% on target. The completion of the first period of operations for the Porthcawl Marina has been successfully completed, with a new pricing regime agreed/introduced and a waiting list for take up of berths retained and extended. The only area where progress has been slow is in respect of the wider regeneration of phase 1 of Porthcawl Waterfront – the failure of the superstore market to deliver a scheme has necessitated a re-think on how to bring regeneration of phase 1 forward, and remains subject of ongoing discussions with landowning parties and agents. In view of the scale of this element within this priority, it would render its overall status amber. | <ul style="list-style-type: none"> The failure of the superstore market to deliver a scheme has necessitated a re-think on how to bring regeneration of phase 1 forward, and remains subject of ongoing discussions with landowning parties and agents. |
| P1.1.4 | Communities | Commence the development of the Ewenny Road site in Maesteg and develop proposals for future development in the Llynfi Valley | GREEN | <ul style="list-style-type: none"> As reported in Q4, Ewenny Rd is no longer being reported under this priority as it doesn't form part of the Welsh Government funding agreement. The latter has been approved and funding released (£2.5million) to BCBC for undertaking site investigations and ground remediation of 3 key sites in the Llynfi Valley. The ultimate aim is marketing and disposing of the sites for new housing development. The 3 sites are Maesteg Washery (itself containing 2 sites) and the former lower school site in Maesteg. Schemes are 100% on target for completion of the SI and potential commencement of remediation by end of 2015/16. | |
| P1.2.5 | Communities | Work with neighbouring local authorities to provide focused support for businesses to help them to invest and create jobs | GREEN | <ul style="list-style-type: none"> Work on-going through SEWDER to establish a social enterprise project nationally and regionally. | |
| P1.3.6 | Communities | Improve transport, pedestrian and cycle links between the bus and rail network and employment and education sites | GREEN | <ul style="list-style-type: none"> Bus services reviewed and changes to services made to meet MTFS. On-going discussions with Network rail on Structures and Rights of way. | |

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| P1.5.7 | Communities | Complete the final year of the three-year highway improvement programme to improve the condition of our roads | AMBER | <ul style="list-style-type: none"> Scheme slippage indicated as the inner bypass bridge bearing replacement. The scheme slippage was in part to ensure that the critical deck waterproofing would be undertaken during the summer months of 2015. Slippage was raised and supported by Welsh Government who is funding the LGBI and this slippage does not affect the funding arrangement. | <ul style="list-style-type: none"> To complete the bridge work during the summer 2015. |
| P1.6.10 | Communities | Establish the Bridgend Tourism Partnership and work with partners to improve accommodation, attractions and events | GREEN | <ul style="list-style-type: none"> The Destination Management Partnership and Coastal Partnership both met during this quarter. The research commissioned by the Destination Management Partnership has been completed and is being used as an evidence base for an application for funding to the Regional Tourism Engagement Fund. The research commissioned with the coastal partnership has been extended due to the funding deadline timetable. This will continue to be monitored by the Tourism team and reported to the coastal partnership. | |
| P1.7.8 | Communities | Engage with people and communities to understand their learning needs so that courses are developed that meet those needs and employment prospects improved | GREEN | <ul style="list-style-type: none"> In a year of considerable change for Adult Community Learning it has met its key activity objectives of increasing its engagement and targeted provision work. The partnership with the Communities First BESP project (Bridgend Employment and Skills Programme), has proved particularly successful. Through working closely with employers, the services has a greater understanding of the skills deficits and how to utilise learning opportunities to match learners with employers. The service is now well placed to meet the Welsh Government's priority of tackling poverty and to work within a reduced funding framework into 2015/16. | |
| P1.7.9 | Communities | Establish a county borough wide provision with partners that will help people to gain skills and training that leads to employment | GREEN | <ul style="list-style-type: none"> Jobs target complete. Since Christmas 2014 many projects have ceased or are waiting for new EU funding, which would result in new job clubs. | |

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|--------------------|-------------|--|---------------------|--|-------------------------|--|
| DCO.L.1.8i | Communities | The number of visitors to town centres (annual footfall in Bridgend) | 5,000,000 | 5,354,363 | ↓ 5,565,023 | <ul style="list-style-type: none"> The decline in recorded footfall in Bridgend is following a national trend. It is difficult for BCBC to influence the change in footfall. |
| DCO.L.1.8ii | Communities | The number of visitors to town centres (annual footfall in Porthcawl). | 2,700,000 | 3,975,792 | ↑ 3,135,193 | |
| DCO1.1.3i | Communities | Number of vacant premises in town centres: Bridgend | 64 | 55 | ↑ 65 | |
| DCO1.1.3ii | Communities | Number of vacant premises in town centres: Maesteg | 18 | 19 | ↔ 19 | <ul style="list-style-type: none"> The Maesteg figure is one vacant property above target; the figure is, however, in line with the Welsh town vacancy rate. |
| DCO1.1.3iii | Communities | Number of vacant premises in town centres: Porthcawl | 16 | 17 | ↔ 17 | <ul style="list-style-type: none"> The vacancy rate is one above target for Porthcawl. This figure is, however, still in line with the Welsh Town vacancy rate. |

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| <u>DCO.OA.1.2</u> | Communities | Additional floor space created through the Townscape Heritage Initiative (THI) and the Town Improvement Grant (TIG) | 800 | 1851 | ↑ 628 | |
| <u>DCO.OA.1.3</u> | Communities | Buildings brought back into use through the THI and TIG. | 1 | 2 | ↔ 2 | |
| <u>DCO.OA.1.7</u> | Communities | Increased number of active businesses through the Town Improvement Grant (TIG) | 1 | 2 | 3 (Trend is not applicable) | <ul style="list-style-type: none"> 2 properties in Commercial Street Maesteg completed March 2015. This is a grant based indicator for the Outcome Agreement with WG. The target was agreed with WG, taking into account grant available for the year. |
| <u>DCO.OA1.10</u> | Communities | Number of VAT/PAYE registered businesses in the Borough | 4,001 | 4,090 | ↑ 4000 | |
| <u>DCO.OA1.11</u> | Communities | Number of jobs created (Local Investment Fund) | 40 | 48.5 | ↑ 47 | |
| <u>DCO1.2.3</u> | Communities | Total annual expenditure by tourists | 294,780,000 | 306,620,000 | ↑ 289,000,000 | |
| <u>HHA013 NSI, PAM</u> | Communities | Percentage of all potentially homeless households for whom homelessness was prevented for at least 6 months | 61 | 64.2 | ↑ 61.54 | |
| <u>THS007</u> | Communities | Percentage of adults aged 60 or over who hold a concessionary bus pass | 91 | 90.65 | ↑ 88.55 | <ul style="list-style-type: none"> Target of 91% not reached. A press release was produced and submitted in January 2015 to inform residents about the free concessionary travel bus pass scheme. Early indications show that the press release was well acknowledged and bus pass applications for 60+ year olds continues to grow. |
| <u>THSO11a</u> | Communities | Percentage of: Principal (A) roads in overall poor condition | 6.96 | 5.1 | ↓ 4.99 | <ul style="list-style-type: none"> The percentage of roads in poor condition is 5.1% compared to 4.99% in 13/14, but also compared to 5.7% in 12/13 and 7% in 11/12, so is just up by 0.2% but showing an improving trend over the last 4 years. |
| <u>THSO11b</u> | Communities | Percentage of: non-principal (B) roads in overall poor condition | 9.88 | 5.7 | ↑ 6.07 | |
| <u>THSO11c</u> | Communities | Percentage of: non-principal (C) roads in overall poor condition | 12.82 | 12.4 | ↓ 11.4 | <ul style="list-style-type: none"> The increase in the surveyed network between 2013/14 and 2014/15 was due to an error in the dataset provided by the Pavement Management system software supplier that BCBC uses. The matter was taken up with the PMS supplier and resolved for the following year, hence the increase in surveyed network for C roads. |
| <u>THSO12</u> | Communities | Percentage of: Principal (A) road, non-principal (B) roads, and non-principal (C) roads in overall poor condition | 8.42 | 7.7 | ↓ 6.92 | <ul style="list-style-type: none"> The increase in the surveyed network for C roads (which has had an impact on THS012) between 2013/14 was due to an error in the dataset provided by the Pavement Management System software supplier that BCBC uses. |

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| DCO.OA.1.4 | Communities | Lane length of (A) and (B) roads resurfaced, or treated (km) | 1.8 | 2 | ↓ 9.6 | <ul style="list-style-type: none"> The monies provided from Welsh Government through the Local Government borrowing initiative has had a massive influence on the monies spent on carriageway surfacing throughout the borough. Spend over the 3 year LGBI programme has been 2012/13 (£2.37m), 2013/14 (£ 1.65 million), and 2014/15 (£ 0.90 million). Clearly the reduction in the monies available to spend on carriageway surfacing has caused a reduction in the length of network treated, coupled with targeting of the roads in need of repair means that the value for 2014/15 was less than undertaken in 2013/14. |
| DCO.OA.1.4i and DCO.OA.1.4ii | Communities | Lane length (km) of: (A) Roads; and (B) Roads resurfaced or treated | 0.6 1.2 | 0.7 1.3 | ↓ 8.3 ↔ 1.3 | <ul style="list-style-type: none"> See above comment. |
| DCO.OA1.5 | Communities | Emergency repairs undertaken to carriageways (all types) within the specified response time of one day | 95 | 97 | ↔ 97 | |
| DRE.OA1.6 | Resources | Percentage of undisputed invoices paid within 30 days | 95 | 96.06 | ↓ 96.48 | |

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

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|------------------------|-------------|---|-----------------------|---|--|
| P2.1.1 | Children | 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 | AMBER | <ul style="list-style-type: none"> Performance has progressed well and the commitment is now predominantly met. A full status update of the Post Inspection Action Plan was prepared and, as a result, the authority was removed from Estyn monitoring and further follow-up activity Inclusion staff have been trained and are better able to collect and analyse their data An updated action plan for early intervention on Additional Learning Needs has been developed and is being implemented. Draig has been refined to enable it to be used as a primary source of data for pupils with Additional Learning Needs There remains an outstanding issue with resources within the Central South Consortium, which prevents development and implementation of ICT action plans for each Bridgend school being achieved this financial year | <ul style="list-style-type: none"> Further work with Inclusion service to improve skills on using data will be facilitated by the implementation of the Community Care Information Solution. Head teachers will take responsibility for their ICT action plan and a relaunch of the strategy in 2015 may help to reinvigorate interest within schools. |

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| <u>P2.1.2</u> | Children | 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 | <ul style="list-style-type: none"> This commitment has been fully met. With the re-structure of the inclusion service, there is a far more rigorous approach to all forms of support regarding Additional Learning Needs children revision of the Planning and Reviewing In Partnership process has been completed which will be implemented in September A future review of the Looked After Children Education service in 15/16 will further refine our processes and improve services to children. <p>Termly primary and secondary forums facilitate the dissemination of learning</p> | |
| <u>P2.1.3</u> | Children | Monitor and seek to improve the effectiveness of schools through the Central South Consortium | GREEN | <ul style="list-style-type: none"> There continues to be an effective partnership between the Local Authority and Central South Consortium(CSC) There are regular performance review meetings between the Local Authority and Central South Consortium We take a joint approach to all aspects of school improvement and CSC assist the LA in providing a wide range of information on our schools as required. | |
| <u>P2.1.9</u> | Communities | Promote libraries and implement a series of programmes designed to get more children and young people to enjoy reading | GREEN | <ul style="list-style-type: none"> All activity measures have been met with key indicators exceeded. Over 68% of participants of the summer reading challenge completing the scheme is an improvement on 2014-15 and demonstrates a consistent effort across the whole service to attract families and young people to learn and enjoy reading. The focus on children's literacy will remain a key focus for the service into 2015-16. | |
| <u>P2.2.4</u> | Children | Reduce the number of young people not in education, employment or training (NEET) | GREEN | <ul style="list-style-type: none"> The commitment has been fully met Youth Engagement and Progression Implementation Plan 2014-2015 (YERF) has been agreed and a coordinator appointed. There is an excellent improvement i.e.reduction in the number of children who are NEET between 2013-14 and 2014-15 from 3.7% to 3.6%. . . | |
| <u>P2.3.5</u> | Children | Provide 14-19 year olds with the advice they need to ensure they engage in the right type of qualification for them | GREEN | <ul style="list-style-type: none"> The development of the Youth Engagement and Progression Implementation Plan 2014-2015 (YERF) has been effective , the YEPF action plan has been accepted by the Welsh Government a range of services for young people have been developed as a result Restructured EOTAS (Educated Other Than At School) provision commenced in April 2014.including the Bridge Alternative provision for school age single mothers. . | |
| <u>P2.4.6</u> | Children | Develop and implement the school attendance strategy | GREEN | <ul style="list-style-type: none"> The commitment has been fully met Authority's Attendance Strategy came into effect on 1st January 2015 The code of practice for Fixed Penalty Notices has now been approved by Cabinet after public consultation There has been a significant improvement in attendance in both primary and secondary sectors . | |

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| P2.5.7 | Children | Provide community focused schools that support the needs of all learners and their local community | AMBER | <ul style="list-style-type: none"> This commitment is not fully met on time , as there have been unavoidable delays with some of the schemes all schemes are on-going and will be complete broadly within agreed timescales Construction of Coity primary commenced 01/09/14 Feasibility study for Gateway primary completed. | <ul style="list-style-type: none"> Garw Valley South Scheme opening delayed to Sept 2015 EBSD (Emotional, Behavioural and Social Difficulties) Specialist Provision at the former Ogmores Comprehensive School Site will be completed in June <p>Pencoed Primary Strategic Outline Case to be finalised by the end of April</p> |
| P2.6.8 | Social Services & Wellbeing | Develop opportunities for local participation in sports leadership and accredited learning programmes for young people | GREEN | <ul style="list-style-type: none"> Leaders are on the development pathway. New recruitment for Sept 2015 for programme. | |

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|--------------------|-------------|---|---------------------|--|-------------------------|---|
| EDU015a NSI | Children | Percentage of final statements of special education need issued within 26 weeks: (a) Including exceptions; | 75 | 50.0 | ↑ 6.1 | <ul style="list-style-type: none"> This PI applies to and is calculated in calendar years. For the calendar year 1.1.14 to 31.12.14: the number of pupils for whom statements of special educational needs were issued for the first time and within 26 weeks, including exceptions = 9 the total number of pupils for whom statements of special educational needs were issued for the first time during the year, including exceptions = 17 EDU015 (Jan-Dec) is 9/18 due to one late (historic) statement issued in February 2014. The team is continuing to address historic complex cases which are consuming significant amounts of officer time. Refined processes and better mechanisms in communicating with parents and schools in particular are having the desired impact. Our performance is now 50% which although below the Wales average, is now much improved on the 6.1% of the previous reporting year. Significant work has been ongoing to refine the processes to support statementing. At present all statutory assessments that have been received since the Group Manager for Business, Strategy and Performance took over the responsibility for the process in Spring/Early Summer 2014 has risen to 100%. However, we still have to deal with legacy requests for assessments received for some considerable time before then with some over a year old. Our processes have been refined, staff are clearer of their roles and performance expectations and excellent quality statements are being produced. There is considerable confidence that this performance can be sustained although the national PI will unfortunately not reflect this now until Jan 2016 as the PI is reported nationally on a Jan to Jan basis. |
| EDU015b NSI | Children | Percentage of final statements of special education need issued within 26 weeks: (b) Excluding exceptions | 100 | No applicable statements in this quarter | 100 | |

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|--|-------------|--|--|--|-------------------------|---|
| DCH2.2.1 | Children | 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 | 48.5 | 40.15 | ↑ 47.31 | |
| EDU003 NSI, PAM, OA | Children | 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 | 84.4 NB more challenging internal target set. OA target is 83% | 86.2 | ↑ 82.6 | |
| EDU004 PAM | Children | 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 | 78.5 | 79.3 | ↑ 73.6 | |
| DCH2.1.4 | Children | 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) | 24.0 | 36.3 | ↓ 31.7 | <ul style="list-style-type: none"> The percentage difference between those Free School Meal (FSM)s and Non FSM children achieving the L2 Inclusive indicator widened by 4.6% points in the 2013-14 academic year. Non-FSM pupils achieving the L2 inclusive indicator increased from 58.07% in 2012-13 to 61.37% in 2013-14 whilst FSM pupils achieving the L2 inclusive indicator decreased from 26.35% to 25.09% over the same periods. Performance of FSM and non-FSM pupils have been analysed on a school by school basis. It is difficult to establish a consistent pattern but it has been observed that whilst the performance of FSM pupils declined slightly in the past year, this is not consistent in all schools as most schools FSM maintained/improved their performance. On the other hand, performance of non-FSM pupils increased significantly for most schools (by over 10% in 5/9 of them) and this growth has resulted in a widening of the gap in performance between FSM and non-FSM pupils in Bridgend. Schools will continue to work with their Challenge Advisers to improve the performance of FSM pupils and the new categorisation process will ensure that this target area will remain a key focus for secondary schools. |
| DCH2.1.6 | Children | The gap in the percentage achievement of the Core Subject Indicator at KS2 between pupils who are eligible to free school meals and those who are not | 22.5 | 15.6 | ↑ 19.3 | |
| EDU002i NSI, Outcome, PAM | Children | 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 | 0.41 | 0.1 | ↑ 0.4 | |

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|---|--------------------|--|------------------------------|---|--------------------------------|---|
| EDU006i | Children | 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 2 | No target set | 8.5 | ↑ 6.3 | |
| EDU006ii NSI | Children | 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 | 10.1 | 6.6 | ↑ 5.1 | <ul style="list-style-type: none"> This indicator is intended to monitor the take-up of Welsh language medium education. It measures the number of pupils assessed in the subject of Welsh as a first language, against the total cohort of pupils for the academic year. The percentage of pupils receiving a Teacher Assessment in Welsh (first language) at the end of KS3 increased from 5.1% to 6.6% in the 2013-14 academic year. The cohort of KS3 pupils in Welsh medium education in the county increased from 84 in the 2012-13 academic year to 101 in the 2013-14 academic year. The overall pupil cohort decreased from 1,633 in 2012-13 to 1,563 in 2013-14. |
| EDU011 NSI, OA, PAM | Children | Average point score for pupils aged 15, at the preceding 31 August, in schools maintained by the local authority | 430 | 486.0 | ↑ 442.1 | |
| EDU017 NSI, OA, Outcome, PAM | Children | 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 | 60% NB CSC target 55%. | 54.8 | ↑ 52.3 | <ul style="list-style-type: none"> The percentage of Bridgend pupils who achieved this indicator improved by 2.5% points in the 2013-14 academic year, from 52.3% to 54.8%, only marginally missing target. This compared to an increase across Wales of 2.7% points and an increase across all the authorities in the CSC of 4.7% points. Level 2 and Level 2 (inclusive) continue to be the subject of school improvement strategies and the schools whose performance is of concern are targeted with appropriate support and interventions |
| EDU008a SID | Children | The number of permanent exclusions during the academic year per 1,000 pupils from: a) primary schools | 0 | 0.1 | ↓ 0 | <ul style="list-style-type: none"> ONE primary school pupil was permanently excluded in the 2013-14 academic year, compared to 0 in 2012-13. The Jan14 PLASC total number of primary children Yrs1-6 was 9247; therefore, the PI result was 0.11. Action to reduce fixed-term and permanent exclusions in both Primary and Secondary schools in Bridgend is part of a project under the Children's Change Programme Board. A report is due to be examined by the CYP OVSC in May 2015, which will include the outcomes of work conducted to date and the Fair Access Action Plan. |
| EDU008b SID | Children | The number of permanent exclusions during the academic year per 1,000 pupils from: b) secondary schools | 1 | 1.2 | ↑ 1.6 | <ul style="list-style-type: none"> There were 9 permanent exclusions from secondary schools in the 2013-14 academic year, compared to 12 in 2012-13. The PLASC Jan14 total pupils for secondary schools were 7769. The PI result is, therefore, 1.2. Action to reduce fixed-term and permanent exclusions in both Primary and Secondary schools in Bridgend is part of a project under the Children's Change Programme Board. |
| EDU010a SID | Children | The percentage of school days lost due to fixed-term exclusions during the academic year, in: a) primary schools | 0.01 | 0.008 | ↔ 0.008 | |
| EDU010b SID | Children | The percentage of school days lost due to fixed-term exclusions during the academic year, in: b) secondary schools | 0.06 | 0.042 | ↑ 0.07 | |

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| EDU016a OA PAM | Children | Percentage of pupil attendance in primary schools | 94.4 | 94.8 | ↑ 94.4 | |
| EDU016b OA PAM | Children | Percentage of pupil attendance in secondary schools | 93.4 | 93.9 | ↑ 92.5 | |
| DCH2.4.0 16a | Children | Percentage of pupil attendance in primary schools within the current academic year (for quarterly reporting) (new indicator for Q3 14-15) | 94 | 94.8 | n/a | NB The target for this indicator has been amended in line with the Central South Consortium target that differs slightly from that set in the Corporate Plan. |
| DCH2.4.0 16b | Children | Percentage of pupil attendance in secondary schools within the current academic year (for quarterly reporting) (new indicator for Q3 14-15) | 93.0 | 93.9 | n/a | NB The target for this indicator has been amended in line with the CSC target that differs slightly from that set in the Corporate Plan. |
| DCH.OA2 .1 | Children | Percentage of annual school performance reports (APRs) reported to governing bodies. | 100.00 | 100.00 | ↑ 100.00 | |
| DCH.OA2 .3 | Children | Percentage of schools inspected graded as good or excellent by Esteem | 85 | 84 | ↓ 88 | <ul style="list-style-type: none"> Of the 45 LA maintained schools in the Bridgend County Borough inspected, assessed and reported upon, in the current cycle (since September 2010), 38 were graded as either Good or Excellent for current performance or Good or Excellent for prospects for improvement. In the last year (period from 1.4.14 to 31.3.15), 11 inspections were reported relating to 9 primary schools, 1 infant school and 1 special school. Of these 11, the inspections outcomes for 3 primary schools did not meet the criteria for this indicator. Any school not graded as either Good or Excellent for current performance or Good or Excellent for prospects for improvement is placed in LA or Estyn monitoring. A Post Inspection Action Plan is developed, with support from the Challenge Advisor. All activities to implement the PIAP and the resulting outcomes are monitored and support is brokered to meet the needs of the school. Cabinet and the School Improvement Monitoring Group at the authority are regularly updated on progress. |
| DCH2.1.1 0 | Children | 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 | 3.0 | Not available | 3.2 | <ul style="list-style-type: none"> Please note: WG has advised that the 2013-14 academic year FSM vs Non FSM attendance data for primary schools will not be published until September 2015. It will not, therefore, be available for Q4 2014-15 performance monitoring. |
| DCH2.1.1 1 | Children | 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 | 4.5 | 4.9 | ↑ 6.0 | <ul style="list-style-type: none"> The improvement in performance from a gap of 6% last year to 4.9% in the 2013-14 academic year was the result of FSM attendance improving by a greater amount than Non FSM attendance. Whilst the attendance of both FSM and Non FSM pupils improved, FSM attendance improved by 2.33% points, whilst Non FSM attendance improved by 1.27 % points. Our performance was better than All Wales, where there were also improvements in both FSM and Non FSM attendance but FSM attendance did not outstrip Non FSM attendance to the same extent as in Bridgend. |
| DCH2.2.2 | Children | 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 | 30 | 29.4 | ↑ 43.3 | |

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|-----------------|-------------|---|---------------------|--|-------------------------|--|
| <u>DCH2.3.1</u> | Children | 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. | 4 | 3.6 | ↑ 3.7 | |
| <u>DCO5.5.3</u> | Communities | Percentage of children under 5 who are members of the library service. | 27.5 | 31.26 | ↑ 27.81 | |
| <u>LCL001b</u> | Communities | Number of visits to public libraries during the year, per 1,000 population. | 4600 | 4460 | ↑ 4182 | <ul style="list-style-type: none"> In order to provide consistent data the service is reporting on this PI as per previous years i.e. a combination of Welsh Government's WPLS Q16 (Library use – physical and website visits) and WPLS Q17 (User attendance at library events). The increase in visitor numbers on previous years can be attributed to the inclusion of the first full year of data from the successful new Bridgend Library. |

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

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps(For Red and Amber only) |
|---------------|-------------|---|-----------------------|---|---|
| <u>P3.1.1</u> | Children | Put systems in place so that families need only tell their stories once using the Joint Assessment Families Framework | GREEN | <ul style="list-style-type: none"> There has been a complete re-structure of all support services, resulting in the creation of multi-agency hubs. A single referral route has been developed and a re-launch of the JAFF process in order to simplify it | |
| <u>P3.1.2</u> | Children | Increase the number of staff in a named key worker role within the Multi-Agency Community teams | GREEN | <ul style="list-style-type: none"> As part of the re-structure of family support services , there are now key workers in each hub they have a single referral process to aid access to their services More work will be done in 2015-16 to enable partner agency staff to access BCBC systems | |
| <u>P3.1.3</u> | Children | Continue to develop partnership working arrangements with relevant partners | GREEN | <ul style="list-style-type: none"> All hubs are now established with a mix of safeguarding and early help staff located in each hub | |
| <u>P3.2.4</u> | Children | Improve the way we and other agencies help families address the root cause of their problems | AMBER | <ul style="list-style-type: none"> The vast majority of the component activities have been completed Services under tiers 1-4 have been brought together within Integrated Working and Family Support structure. Connecting Families Edge of Care service has now worked with 32 families, which is significantly above the original target of 20, set in April 2014 The early help strategy has been approved by cabinet Improved methodology has been established to identify and monitor assessments of young carers in place There has been poor take up by staff of the Carers Awareness eLearning module. | <ul style="list-style-type: none"> The Young Carers Awareness eLearning package launched in June 2015. Managers will need to ensure they monitor the uptake and completion of both awareness-raising packages |

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps(For Red and Amber only) |
|---------------|-----------------------------|--|-----------------------|--|--|
| P3.2.5 | Children | Increase the number of family support workers and train them to help families make the decisions that are right for them | GREEN | <ul style="list-style-type: none"> The re-structure of family support services into hub has resulted in there being a much wider range of services families are able to access including youth services and services for children on the edge of care. | |
| P3.3.6 | Social Services & Wellbeing | Implement Looked After Children strategy and the regional adoption service | AMBER | <ul style="list-style-type: none"> All activities are complete, with the exception of the scoping exercise to determine the viability of replacing the current commissioning of Independent Fostering Agency placements with a new local Parent and Child Fostering service. The LAC strategy continues to be implemented and will be overseen by the statutory director of Social Services during 2015-16. The regional adoption Service became fully operational in Jan 2015. Adoption teams from the 3 local authorities have now been co-located to offices based within NPT civic centre. | <ul style="list-style-type: none"> Work has continued during Q4 to identify potential in house foster carers who could become specialist parents and child placements and therefore reduce the LA's dependency on commissioning independent placements. A specialist training programme to equip parent and child foster carers with the necessary skills has been developed and is waiting to be delivered. |
| P3.3.7 | LaRS | Implement a reconfigured 'Families First' programme | GREEN | <ul style="list-style-type: none"> Commissioned services continue to deliver the required services in line with the contract and Welsh Government's Families First programme requirements. Two newly engaged Partner Providers are now operational and delivering services, as required. Isolated issues with regard to compliance flagged in Q3, have since been resolved. The impact of the restructure within Children's Directorate appears to have had minimal effect upon the programme during the period of transition. It is anticipated that the new service arrangements will aid early intervention and prevention work and improve access to much needed support services for families in or in danger of experiencing poverty. | |
| P3.5.8 | Children | Increase the number of children benefiting from Flying Start nursery provision by expanding the service into Lewistown, Blackmill and Sarn | GREEN | <ul style="list-style-type: none"> Despite some delays this commitment is now fully met handover of the Lewistown provision on 24th April 2015 | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-----------------|-----------------------------|---|---------------------|--------------------------------------|-------------------------|---|
| DCH3.2.1 | Social Services & Wellbeing | The number of children recorded on the Child Protection Register. | 150 | 125 | ↑ 179 | |
| DCH3.5.9 | Social Services & Wellbeing | The number of Children In Need | 915 | 884 | No comparable data | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-------------------|-----------------------------|--|---------------------|--------------------------------------|-------------------------|--|
| DCH3.6.4 | Social Services & Wellbeing | Looked after children as a percentage of children aged 0-17 | 1.1 | 1.3 | ↑ 1.4 | <ul style="list-style-type: none"> Although the end of year target has not been achieved there has been an improvement compared to the 2013/14 performance of 1.4% During 204/15 the Looked After Children's population has reduced from 412 at 31st March 14 to 390 at 31st March 15. This is a reduction of 22 children. Rigorous attention is still paid to implementing the Placement and Permanence Strategy agreed by Corporate Parenting Committee earlier in the year. |
| DCH3.7.1 | Social Services & Wellbeing | Assessment/Safeguarding teams' social workers average case-loads | 18 | 16 | ↔ 16 | |
| DCH3.7.2 | Social Services & Wellbeing | Assessment/Safeguarding teams' senior social work practitioners' average case-loads | 10 | 12 | ↑ 13 | <ul style="list-style-type: none"> Performance needs to be considered in the context of a large percentage of our current social workers being either newly-qualified or in their 2nd year of post-qualifying practice. The impact of this has been that senior practitioners within teams have had to carry higher caseloads than we would wish, which are additionally more complex. |
| DCH3.7.3 | Social Services & Wellbeing | Number of prospective adopters approved | 16 | 18 | ↓ 20 | <ul style="list-style-type: none"> An additional two adopters have been approved during Q4 resulting in the year-end target of sixteen being exceeded. This is despite some considerable pressures arising from the recent move to the merged Western Bay Adoption Service |
| DCH3.7.4 | Social Services & Wellbeing | Number of children adopted | 16 | 24 | ↓ 25 | <ul style="list-style-type: none"> The target number of children to be adopted in the year is 16. This target has been exceeded with 24 adoption orders being granted during 2014/15. |
| DCH3.7.5 | Social Services & Wellbeing | Number of Child Arrangement Orders (previously Residence Orders) granted. | 7 | 3 | ↓ 17 | <ul style="list-style-type: none"> One additional Child Arrangement Order was granted during Q4 resulting in a total of 3 orders granted during the year. Whilst the LA set an aspirational target for Child Arrangement Orders the preferred method of securing permanence would be through adoption or Special Guardianship Orders. |
| DCH3.7.6 | Social Services & Wellbeing | Number of Special Guardianship Orders (SGOs) granted | 15 | 22 | ↓ 29 | <ul style="list-style-type: none"> An additional 5 Special Guardianship Orders were granted in Q4 resulting in a cumulative year end figure of 22. Despite this figure being a reduction on the previous year's performance of 29, the 2014/15 target of 15 has been surpassed. |
| DCH3.7.7 | Social Services & Wellbeing | Number of care orders discharged | 4 | 35 | ↑ 17 | |
| SCC016 SID | Social Services & Wellbeing | Percentage of reviews of carried out in accordance with the statutory timetable (children in need) | 70 | 76.7 | ↓ 82.1 | <ul style="list-style-type: none"> There has been an improvement in performance during the latter half of the year which has resulted in the final outturn figure achieving target. However, there has been a decrease in comparison to the previous year's figure. Performance has been affected by capacity issues within the workforce as priority is given to child protection and looked after children cases. Case closure work is on-going within the Assessment Team in relation to inactive cases which would also have a derogatory impact on this performance indicator |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|----------------------------------|-----------------------------|---|---------------------|--------------------------------------|-------------------------|--|
| SCC011a PAM | Social Services & Wellbeing | Percentage of initial assessments that were completed during the year where there is evidence that the child has been seen by the Social Worker | 75 | 73.7 | ↓ 74.2 | <ul style="list-style-type: none"> Performance this year is marginally less than 2013/14 and slightly below target. Performance in relation to this PI has been addressed with Team Managers and there were signs of improvement up until February 2015. Performance during March has impacted on both Qtr4 and the end of year figure. Further work will take place with Teams and Team Managers to improve performance moving forward. Of the 1333 children that should have been seen at Initial Assessment (IA) during the year, 982 were seen by a qualified social worker (73.7%). However, a further 216 children were seen by a social work assistant (16.2%). Therefore, in total, 1198 children were seen at IA (89.9%). |
| SCC011b NSI | Social Services & Wellbeing | 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 | 45 | 51.0 | ↓ 51.8 | <ul style="list-style-type: none"> Performance has continued to improve in Q4, resulting in the 2014/15 end of year position remaining above target, however, this figure is marginally less than the 2013/14 figure. Further work will take place with Teams and Team Managers to improve performance moving forward. Of the 1333 children that should have been seen alone at Initial Assessment (IA) during the year, 680 were seen by a qualified social worker (51%). However, a further 119 children were seen alone by a social work assistant (8.9%). Therefore, in total, 799 children were seen alone at IA (59.9%). There were 534 children not seen alone at initial assessment with the main reasons given as- <ul style="list-style-type: none"> Child deemed to be too young/non-verbal/has limited understanding of situation/requires advocate (309 of the 534) Child refused to be seen or requested parent/carer to be present (115 of the 534) |
| SCC030a PAM | Social Services & Wellbeing | Percentage of young carers known to Social Services who were assessed | 100 | 100.0 | ↑ 100% | |
| SCC030b SID | Social Services & Wellbeing | The percentage of young carers known to Social Services who were provided with a service. | 100 | 100.0 | ↑ 91.7 | |
| SCC034 SID | Social Services & Wellbeing | Percentage of reviews of carried out in accordance with the statutory timetable (child protection) | 99 | 99.6 | ↑ 99 | |
| SCC001a PAM | Social Services & Wellbeing | Percentage of first placements of Looked After Children during the year that began with a care plan in place | 95 | 96.9 | ↑ 93.9 | |
| SCC004 NSI, PAM | Social Services & Wellbeing | Percentage of children looked after on 31 March who have had three or more placements during the year | 9 | 13.1 | ↓ 9 | <ul style="list-style-type: none"> This is a provisional figure as data is made available by WG following submission and validation of SSSDA 903 (Children Looked After Return). At 31st March 2015, 51 out of 390 looked after children had 3 or more placements during the previous 12 months. Of these, nineteen were teenagers aged between 13-17yrs, thirteen were aged under 5yrs and nineteen were aged between 5 and 12yrs. 37% of the children/young people with three or more placements fall within the 13-17 year age group, and are often the most difficult to match with appropriate accommodation. Therefore, it is often the case that these young people need to move on from placements which are not able to support their complex needs into adulthood. |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|------------------------------|-----------------------------|---|--|--------------------------------------|-------------------------|---|
| SCC021 SID | | Percentage of looked after children reviews carried out within statutory timetables during the year | 99 | 97.6 | ↑ 96.6 | <ul style="list-style-type: none"> Although it is disappointing that the year-end performance figure is marginally below target at 97.6%, it is positive to note that compliance for this indicator has steadily increased each quarter. This has resulted in improved performance against the 2013/14 figure. Of the 1167 LAC reviews held during the year only 28 reviews (involving 20 families) took place outside timescales. The main reason for these reviews being held outside timescales was due to staffing issues within the Safeguarding Teams. We acknowledge that recruiting and retaining appropriately skilled and experienced staff in Safeguarding Teams has been challenging, however, the drive to address this continues via the Recruitment and Retention Forum. |
| SCC025 PAM | | Percentage of statutory visits to Looked After Children due in the year that took place in accordance with regulations | 80 | 76.2 | ↑ 69 | <ul style="list-style-type: none"> Please note that these figures are still provisional as visits continue to be retrospectively logged. Performance during 2014/15 has improved in comparison with the previous year, although it is below this year-end target. Work has been on-going with Team Managers to improve this PI however there have been challenges with regards to management oversight, sickness absence and SW vacancies. This work will continue alongside some key activities such as recruitment, finalisation of new structure and the introduction of Deputy Team Manager Posts who will play a key role within each hub with regards to performance management. |
| SCC045 PAM | Social Services & Wellbeing | 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 | 90 review of performance 28/10/14, identified that the target is not sufficiently challenging and has been increased from 85% | 90.5 | ↓ 91 | <ul style="list-style-type: none"> During 2014/15, 2,444 out of 2,702 children's reviews have been held within compliance resulting in an end of year figure of 90.5%. Consequently, the 2014/15 target of 90% has been achieved; however, performance falls marginally short of the previous year's figure. This PI is made up of reviews in relation to children who are in need, in need of protection and in need of accommodation. There has been an increase in performance in relation to Child Protection and LAC Reviews. Performance with regards to Child in Need Reviews has had a derogatory impact on overall performance. |
| SCC033d NSI | Social Services & Wellbeing | Percentage of: d) young people formerly looked after with whom the authority is in contact at the age of 19; | 90 | 94.7 | ↑ 82.6 | |
| SCC002 | Social Services & Wellbeing | Percentage of children looked after at 31 March who has 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. | 14 | 8.8 | ↑ 12.5 | |
| SCC037 NSI | Social Services & Wellbeing | Average external qualifications point score for 16 year old Looked After Children in any local authority maintained learning setting | 300 | 262 | ↑ 202 | <ul style="list-style-type: none"> Each year, the cohort of looked after learners eligible for inclusion in this PI will change. In the 2013-14 academic year there were 30 looked after learners eligible for inclusion in this PI. The total point score for these learners was 7862. Whilst the average point score result was below the target set, the total point score compares favourably with the 2012-13 academic year when there were 29 looked learners eligible for inclusion in this PI, who achieved a total point score of 5,849. |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|------------------------------|-----------------------------|---|---------------------|--------------------------------------|-------------------------|---|
| SCC033e NSI | Social Services & Wellbeing | 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; | 100 | 100.0 | ↑ 89.5 | |
| SCC033f NSI | Social Services & Wellbeing | 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 | 85 | 61.1 | ↑ 54.8 | <ul style="list-style-type: none"> Year end performance is below the 2014/15 target of 85%; however, it is positive to note that performance is significantly higher than the previous year. 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. No exclusions from this PI calculation are admissible, irrespective of individual circumstances. |
| SCC041a NSI | Social Services & Wellbeing | Percentage of eligible, relevant and former relevant children that have pathway plans as required | 100 | 100.0 | ↑ 86.6 | |
| EDU002ii NSI, Outcome | Social Services & Wellbeing | 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 | 5.0 | 0.0 | ↑ 0.0 | |
| DCH3.5.1 | Children | The number of families benefiting from intensive family support provided by Connecting Families (CF) and Intensive Family Support Services (IFSS) that adopt a 'team around the families' (TAF) approach | 160 | 167 | ↓ 184 | <ul style="list-style-type: none"> Target for Q4 and the year achieved. Q4 IFSS referrals = 31; Connecting Families referrals = 13. |
| DCH3.5.6 | Children | Percentage of families reporting satisfaction with the service they received | 100 | 100.0 | ↑ 100 | |
| DCH3.5.7 | Children | Percentage of children and young people reporting satisfaction with the service they received | 100 | 100.00 | ↑ 100 | |
| DCH3.6.6 | Children | Number of children benefiting from the Flying Start programme (Flying Start Welsh Government set minimum number of children receiving FS services (CAP)) | 1,421 | 1428 | ↑ 1171 | |
| EDU002ii NSI, Outcome | Children | 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 | 5.0 | 0.0 | ↑ 0.0 | |
| SCC037 | Children | Average external qualifications point score for 16 year old Looked After Children in any local authority maintained learning setting | 300 | 262 | ↑ 202 | <ul style="list-style-type: none"> Each year, the cohort of looked after learners eligible for inclusion in this PI will change. In the 2013-14 academic year there were 30 looked after learners eligible for inclusion in this PI. The total point score for these learners was 7862. Whilst the average point score result was below the target set, the total point score compares favourably with the 2012-13 academic year when there were 29 looked learners eligible for inclusion in this PI, who achieved a total point score of 5,849. |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-----------------------------|-------------|--|---------------------|--------------------------------------|-------------------------|--|
| <u>DCH.OA5</u> <u>.1</u> | Children | Percentage of offers of Flying Start provided childcare taken up as a percentage of offers made to newly eligible children | 90 | 79.00 | ↓ 96.4 | <ul style="list-style-type: none"> The result this year takes account of 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 takes some time to reach capacity. |
| <u>DCH.OA5</u> <u>.2</u> | Children | Percentage of children in the Flying Start programme that are fully immunised at 47 months | 85 | 88.00 | ↑ 80 | |
| <u>DCH.OA5</u> <u>.3</u> | Children | Overall childcare attendance rate at Flying Start settings is above 70% | 76 | 81.00 | ↑ 74 | |
| <u>DCH.OA5</u> <u>.4</u> | Children | Percentage of children in the Flying Start areas reached, exceeding or within one age band of their development milestones at age 2 years | 88 | 81.00 | ↑ 71 | <ul style="list-style-type: none"> The applicable Welsh Government guidance for this indicator has changed mid-year to include children who are within one band of the development milestone. Using the original guidance, which was the basis for the target of 55%, our result for the year, would be 53%. The result of 81% has been calculated in accordance with the new guidance. The cohort of children to whom this indicator relates changes each year. The target was set based on the previous year's cohort of children, whilst the actual result reflects the abilities of children newly entered to childcare. Each year, the cohort may contain a differing number of children with additional/ emerging learning needs, affecting direct comparison of the data. Furthermore, there was a recognition that, in the past, the team that administers the 2 year assessment may have overly relied upon parental report. This will also impact on data comparisons. |
| <u>DCH.OA5</u> <u>.5</u> | Children | Percentage of children in the Flying Start areas reached, exceeding or within one age band of their development milestones at age 3 years | 88 | 77.00 | ↑ 72 | <ul style="list-style-type: none"> The percentage of children achieving the developmental milestone at age 2 is higher than the percentage of children achieving the developmental milestone at age 3. This drop-back is a national phenomenon. Actions to understand the reasons and contributory factors have been undertaken locally. One factor appears to be that the assessments undertaken by Health Visitors for children at age 2 should perhaps be less reliant on unverified parent report. The assessment at age 3 yrs. is undertaken by the childcare team practitioners and is more closely aligned to the child's actual development ability. |
| <u>DCH.OA5</u> <u>.6</u> | Children | Percentage of parents reporting child's skills have improved following attendance at Flying Start childcare | 100 | 100.00 | ↑ 96 | |
| <u>SCC002</u> | Children | 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. | 14 | 8.8 | ↑ 12.5 | |

Improvement Priority Four: Working together to help vulnerable people to stay independent (8)

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|-----------------------|-----------------------------|---|-----------------------|--|-------------------------------------|
| <u>P4.1.1</u> | Social Services & Wellbeing | Continue to bring health and social care together in order to appropriately respond to older and disabled people and further develop preventative services within the community | GREEN | <ul style="list-style-type: none"> A Stakeholder event organised for 20th May 2015. This event will reflect on the success of the integration programme to date, and support the new programme to delivering on our strategic intent in the context of the new social services and wellbeing act and the development of the cluster networks The new assessment framework has been developed and rolled out across Adult Social Care. The review of the CMHT has been completed. A caseload analysis regarding the CMHT's has also been undertaken. This work will inform the next stage of the CMHT review which is to determine a future model. Between 1st September 2014 and 28th February 2015, 217 referrals were received, 92% were seen within 72 hours. Initial analysis has indicated that the triage system has resulted in a 30% reduction in referrals to the Home Treatment Team and GP's have reported positively regarding the system. The Western Bay learning disability project group continues to drive the remodelling of the Community Support Team so that people with a learning disability, known to adult social care will receive a joined up health and social care service this. | |
| <u>P4.1.4</u> | Social Services & Wellbeing | Create alternatives to hospital admission including respite, crisis provision and carer support | GREEN | <ul style="list-style-type: none"> All avoidance services are up and running. These will be monitored to inform future developments "Better@Home" continues to deliver its aims; the capacity of the service is increasing. The further development of Phase 2 "Convalescent" is underway. A training programme to implement a competency framework around the Homecare staff who will be supporting this Phase has been planned and agreed and will be delivered over a period of 8 months. The CRT continues to deliver services based on the original Western Bay Community Services business plan. The Western Bay collaborative continues to meet to agree consistencies in terms of service names and descriptors, to date no decisions have been made. Discussions are ongoing with regard to measures. | |
| <u>P4.1.5</u> | Social Services & Wellbeing | Ensure standards are in place and monitored to improve quality of care | GREEN | <ul style="list-style-type: none"> There are standards in place for all service areas and all of the monitoring tools have been updated. There will be a need to review the tools for monitoring care homes once the regional quality framework is finalised and implemented. | |
| <u>P4.2.3</u> | Social Services & Wellbeing | Review the commissioning arrangements with the third sector to ensure the right support and services are in place | GREEN | <ul style="list-style-type: none"> All services were reviewed using the new third sector toolkit in 2014/15. Plans to review all services in 2015/16 are in place | |
| <u>P4.2.11</u> | LaRS | Continue to work with partners to mitigate the impacts of UK Government Welfare Reform | GREEN | <ul style="list-style-type: none"> 86 people have received digital inclusion training and the six LSB multi agency Welfare Reform Steering Group scheduled meetings have been held. An event to raise awareness of the introduction of Universal Credit in Bridgend in June 2015 is organised for 5 June. Up to date 120 people from the LSB partner organisations have registered for the event. An event for elected members is also planned. | |

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|----------------|-----------------------------|--|-----------------------|--|--|
| P4.3.6 | Social Services & Wellbeing | Develop an agreement with partners to address the needs of carers across the Western Bay region | GREEN | <ul style="list-style-type: none"> The Carers Information and Consultation Strategy is in its final year (2015/16). The strategic group has focussed during quarter four on reviewing the Carers' Measure Spend against the objectives set. Measure funds have supported a variety of local projects such as Welfare benefit surgeries, information leaflets and focussed work in the hospitals, schools and GP practices. The funds have also supported specific training for parent carers e.g. challenging behaviour. | |
| P4.4.2 | Social Services & Wellbeing | Work with partner organisation(s) to remodel our homecare and residential services | AMBER | <ul style="list-style-type: none"> Remodelling homecare implementation plan on track for completion by December 2015 as set out in the Transforming Homecare Plan. Re-Commissioning independent domiciliary care commissioning plan to be presented to Cabinet in June 2015 setting out our future commissioning intentions for the independent domiciliary care sector. Extra Care Housing – timescales approved by Cabinet in November 2014 have slipped in terms of appointing a Registered Social Landlord to build the Extra Care Housing schemes. | <ul style="list-style-type: none"> The homecare element of the commitment is on track. <p>Discussions on-going with Registered Social Landlords (RSLs) who have expressed an interest in building the Extra Care Housing schemes in the borough.</p> |
| P4.4.8 | Social Services & Wellbeing | Develop an accommodation strategy with a range of supported accommodation options | GREEN | <ul style="list-style-type: none"> All the projects referred to are continuing to develop according to their plans. This work is progressing in partnership with colleagues in the Communities Directorate and independent providers. This work is focussing on the development of accommodation hubs which offer advice and support as well as encouraging networks of support between people who live in the same locality Two community hubs have been established with two of the supported living providers and the third is in the planning stage. | |
| P4.4.9 | Communities | Increase accommodation options for households who are homeless or threatened with homelessness | AMBER | <ul style="list-style-type: none"> Work is ongoing to deliver a new core house for the Kerrigan project, with an estimated completion date of July 2015. The Authority continues to actively pursue shared accommodation options with the housing associations. These options had not progressed with the lack of Housing Related Support identified as a barrier. A Gateway project co-ordinator post is to be appointed. The new Housing (Wales) Act 2014 was implemented on 27th April 2015. This act places stronger duties on the Authority to prevent and relieve homelessness. Transitional funding has been provided by Welsh Government to support this, part of which will be used to increase capacity in the Housing Solutions Team including the accommodation development role to work with the Private Rented Sector. | <ul style="list-style-type: none"> The housing associations that already operate shared accommodation schemes with other local authorities, will share good practice. Gateway Steering Group to be established when co-ordinator is in post. |
| P4.4.10 | Communities | Review the Private Sector Housing Renewal and Disabled Adaptations Policy to ensure it is meeting needs and delivering value for money | AMBER | <ul style="list-style-type: none"> Due to the capacity of the Sustainable Renewal Team and Quantity Surveying Team, the introduction of an approved schedule of rates for adaptations has not commenced. The take up of the Healthy Homes Assistance Grant has more than achieved the target set. Results of the local indicator demonstrate that elderly residents receiving the grant have maintained their independence and have been able to remain in their own homes. | <ul style="list-style-type: none"> Review the fee income target quarterly for the Sustainable Renewal Section to determine whether there is capacity to commission a schedule of rates. |

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|---------------|-----------------------------|---|--------------|---|--|
| P4.5.7 | Social Services & Wellbeing | Continue to develop new models of service and support for people during the day | GREEN | <ul style="list-style-type: none"> In addition to the development of a prevention and well-being strategy to support people to have meaningful daytime activities, a review has commenced of all existing commissioned short break services that support carers and particularly those that support people living with dementia. | |
|---------------|-----------------------------|---|--------------|---|--|

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Year End Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-----------------------|-------------|--|---------------------|--|-------------------------|---|
| DCO.OA4.1 | Communities | Number of homeless households with dependent children in bed and breakfast accommodation | 8 | 0 | ↑ 8 | |
| DCO.OA4.2 | Communities | The number of units of supported accommodation available via a single point of access maintained by Bridgend County Borough Council | 51 | 51 | ↑ 44 | |
| DCO.OA4.3 | Communities | Number of people helped with Care and Repair services (funded by the Private Sector Housing Renewal and Disabled Adaptations Policy) | 243 | 450 | ↑ 310 | |
| DCO.OA4.4 | Communities | 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 | 8 | 0 | ↑ 8 | |
| DCO.OA4.5 | Communities | 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) | 97 | 97.94 | ↓ 100 | <ul style="list-style-type: none"> As the type of clients typically receiving Care & Repair services are older people, it is anticipated that a small proportion of these clients sometimes have a need to move into residential care. This has been the case for the small proportion of clients not maintaining their independence (2.06%) and is the reason why 100% of clients did not maintain their independence. However, it should be noted that the target of 97% was achieved. |
| PSR002 NSI,PAM | Communities | Average number of calendar days taken to deliver a Disabled Facilities Grant | 253 | 182.26 | ↑ 214.12 | |
| PSR009a | Communities | The average number of calendar days taken to deliver a Disabled Facilities Grant for: a) Children and young people | 295 | 321.33 | ↑ 349.27 | <ul style="list-style-type: none"> There were nil schemes completed for children in QTR3 and QTR4. Therefore, the actual figure will not have changed since QTR2. Some 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. |
| PSR009b | Communities | The average number of calendar days taken to deliver a Disabled Facilities Grant for: b) Adults | 196 | 173.38 | ↑ 200.95 | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Year End Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-----------------------|-----------------------------|---|---------------------|--|-------------------------|--|
| DWB.OA3.1 | Social Services & Wellbeing | Number of total (rolling total) open, live Telecare installations | 1,459 | 1759 | ↑ 1,520 | |
| DWB4.1.5.1 | Social Services & Wellbeing | Percentage of Care Homes assessed against care home standards | 100 | 100 | n/a | |
| DWB4.1.11 | Social Services & Wellbeing | Number of people accessing local primary Mental Health services | 1,931 | 2123 | ↑ 1,931 | |
| DWB4.3.1 | Social Services & Wellbeing | The percentage of carers that report that information and support for carers is improving in the County Borough (reported annually) | 35 | Not available | n/a | <ul style="list-style-type: none"> Awaiting results - expected June/July. This question has been included in the annual survey which is sent out by the Carers Centre. (Rather than send out two surveys we collaborated to send out one form.) |
| DWB4.3.2 | Social Services & Wellbeing | Number of people who have received a service from Bridgeway (short term home care service for people with dementia) | 134 | 129 | ↓ 134 | <ul style="list-style-type: none"> Target not met. A further 5 people commencing the service would have enabled the target to be met. |
| DWB4.3.3 | Social Services & Wellbeing | Number of recipients of community resource team (intermediate services) that have been provided with an alternative to a hospital placement | 800 | 960 | ↑ 682 | |
| DWB4.3.4 | Social Services & Wellbeing | Percentage of Telecare clients who said that the service made it easier for them to manage in their own home | 95 | 96 | ↑ 94 | |
| DWB4.4.2.4 | Social Services & Wellbeing | Number of service users who provide feedback as part of the contract monitoring arrangements | 54 | 74 | ↑ 54 | |
| DWB4.4.8.1 | Social Services & Wellbeing | The number of people on the Learning Disability register on the progression pathway | 200 | 352 | No comparable data | |
| SCA001 NSI,OA | Social Services & Wellbeing | Rate of delayed transfers of care for social care reasons per 1,000 population aged 75 and over | 2.75 | 1.11 | ↓ 0.88 | <ul style="list-style-type: none"> Within target although performance is less than 2013/14 when a rate of 0.88 was achieved. During 2014/15, 13 delayed transfers of care were as a result of social care reasons, of which 12 are attributed to mental health. This is an additional 3 DToCs when compared to 2013/14 when 10 DToCs were attributed to social care reasons during the year. |
| SCA002a NSI,OA | Social Services & Wellbeing | Rate of: a) older people (aged 65 and over) supported in the community per 1,000 population aged 65 or over at 31 March; | 83 | 76.75 | ↑ 83.18 | |
| SCA002b NSI | Social Services & Wellbeing | 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 | 19 | 16.46 | ↑ 18.47 | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Year End Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|--|-----------------------------|---|---------------------|--|-------------------------|---|
| <u>SCA007</u> <u>PAM</u> | Social Services & Wellbeing | Percentage of clients with a care plan at 31 March whose care plans should have been reviewed during the year | 79 | 79.2 | ↓ 83.1 | <ul style="list-style-type: none"> target achieved although performance less when compared to 2013/14 |
| <u>SCA018a</u> <u>PAM</u> | Social Services & Wellbeing | Percentage of carers of adults who were offered an assessment or review of their needs in their own right during the year | 93 | 94.7 | ↓ 96.9 | <ul style="list-style-type: none"> The target has been achieved and exceeded, although the end of year result has not achieved the same percentage outturn from 2013/14. During 2014/15, 1460 carers were offered an assessment compared to 1416 during 2013/14. We are currently using carer's measure funds to support the Carers Centre to undertake some focussed work in the POW hospital to offer advice, assessment and support as required. This will improve performance in this area. |
| <u>SCA019</u> <u>NSI</u> <u>PAM,OA</u> | Social Services & Wellbeing | Percentage of adult protection referrals completed where the risk has been managed | 90 | 93.9 | ↓ 100 | <ul style="list-style-type: none"> The target has been achieved, 185 of 197 POVA referrals completed have had the risk managed. 2014/15 outturn is below the 100% result in 2013/14, due to a number of the referrals being led by Health and would therefore not be managed by Social Services. Also this year we have had a number of POVA's where the individual do not wish us to proceed and they are individuals who had capacity. |
| <u>SCA020</u> <u>PAM</u> | Social Services & Wellbeing | Percentage of adult clients who are supported in the community during the year | 88.5 | 89.12 | ↑ 88.34 | |
| <u>DRE6.12.1</u> | Resources | Average time (days) taken to process housing benefit (HB) and council tax benefit (CTB) new claims | 17 | 17.6 | ↓ 15.92 | <ul style="list-style-type: none"> The issues which adversely affected Q3 performance continued into January. Resources were diverted to target the backlog of new claims, and daily monitoring implemented, to bring this under control. Performance significantly improved over the quarter with February being under 16 days and March under 14 days. |
| <u>DRE6.12.2</u> | Resources | Average time (days) taken to process housing benefit (HB) and council tax benefit (CTB) change events | 10 | 6.11 | ↑ 7.66 | |

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

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|---------------|-----------------------------|---|-----------------------|--|-------------------------------------|
| <u>P5.1.2</u> | Social Services & Wellbeing | Implement a series of early years programmes to encourage more physically active households | GREEN | <ul style="list-style-type: none"> Programmes have been operated and targets achieved. Family active Zone resources and programmes are being utilised with partners. | |

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|---------------|-----------------------------|---|-----------------------|---|--|
| P5.1.5 | Social Services & Wellbeing | Remove or reduce barriers to being physically active for underrepresented groups by delivering the sport and physical activity objectives of the Strategic Equalities Plan | AMBER | <ul style="list-style-type: none"> • Calls for Action investment secured for 2015-16 • Calls for Action is the fund for Sport Wales investment into equalities based programmes. BCBC was the only Welsh local authority to secure investment although approval was not secured until March 2015; therefore, the implementation of the programme has been delayed. • Although BCBC has completed its evidence for the In-Sport silver accreditation we are yet to be offered an assessment date from Disability Sport Wales. This is a new programme and Bridgend may be the first to go through the silver assessment. | <ul style="list-style-type: none"> • Action plans in place and funding secured for 2 key programmes addressing inequalities |
| P5.3.7 | LaRS | Develop an effective preventative support services which will enhance people's wellbeing and contribute to a healthier lifestyle. | GREEN | <ul style="list-style-type: none"> • 100% of high risk inspections achieved, which included advice and guidance to food businesses across the borough as well where appropriate Health and Safety inspection and enforcement. • The promotion of Food Safety week, and Food Standards Agency campaigns have also been supported throughout the year. • Healthy Options Award launched with HALO within Bridgend leisure Centre, promoting healthier food choices on menus. • Underage sales enforcement surveys were completed as planned | |
| P5.4.1 | LaRS | Further develop targeted projects to encourage better health with a particular focus on the Llynfi Valley and a reduction of smoking. | GREEN | <ul style="list-style-type: none"> • Work programme complete for the year with a number of formal actions in respect of underage sales and a successful targeted campaign to raise awareness of the problems associated with illegal (counterfeit or smuggled) tobacco. | |
| P5.5.3 | Social Services & Wellbeing | Complete the re-development of Bridgend Recreation Centre and re-launch it as Bridgend Life Centre by July 2014 | GREEN | <ul style="list-style-type: none"> • Bridgend Life Centre was officially opened on 18th July 2014. Monitoring at periodic performance reviews is ongoing • 465,208 visits to Bridgend Life Centre were reached during 2014/15. • Throughout Bridgend, attendances for a physical activity reached 1,338,439 during 2014-15. • Increasing physical activity based visits to leisure facilities is a key performance objective of the contract with GLL/HALO Leisure targeting an increase of 1% per annum across all facilities. The capital investment at Bridgend Life Centre has resulted in a focus on specific visits to that facility to support evaluation of impact. The measurement of physical activity based visits is a national performance indicator. • Attendances have been identified to inform performance going forward. | |
| P5.5.4 | Social Services & Wellbeing | Deliver the National Exercise Referral Food Wise Programme in partnership with HALO Leisure Ltd to help address obesity levels and encourage better weight management across the county borough | GREEN | <ul style="list-style-type: none"> • Volume of participants reported as achieved but only 3 courses. • The Foodwise programme was a pilot. The key performance measure is the number of beneficiaries which has exceeded the target within the resource available. The 3 programmes have worked with partners and attracted people from across the county borough e.g. Bridgend carers centre, Communities first. • 438 people completed the 16 week National Exercise Referral programme against an internal target of 395. | |
| P5.6.6 | Social Services & Wellbeing | Support the implementation of the Active Travel Bill by developing walking and cycling initiatives | GREEN | <ul style="list-style-type: none"> • Delivery agreed for 2015/16 continues into next year. • The love to walk programme has included community walking groups, • Walk leader training and the Love 2Walk festival. 402 people took part in community walking programme against an internal target of 350. • The service has delivered adult cycling programmes in the Ogmere/Garw valleys and has trained staff to support the implementation of school cycling programmes including Bike Bridgend with the communities Directorate. | |

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|---------------|-----------------------------|--|-----------------------|---|-------------------------------------|
| P5.6.8 | Children | Protect and promote the health, safety and wellbeing of our employees (CH) | GREEN | <ul style="list-style-type: none"> A directorate induction programme has been developed and implemented | |
| P5.6.8 | Communities | Protect and promote the health, safety and wellbeing of our employees (CO) | GREEN | <ul style="list-style-type: none"> Action plan reviewed at Communities Directorate H&S Committee meeting by Chairs of each sub-committee. The Head of Neighbourhood Services now chairs this Committee. | |
| P5.6.8 | LaRS | Protect and promote the health, safety and wellbeing of our employees. | GREEN | <ul style="list-style-type: none"> Continue to develop the lone working policy with all staff and use of icall for front line staff – all staff trained and aware of lone working policy. | |
| P5.6.8 | Resources | Protect and promote the health, safety and wellbeing of our employees (RE) | GREEN | <ul style="list-style-type: none"> Gap analysis is around 75% complete and the analysis is following to agreed programme. This has been presented to CMB and SMT. | |
| P5.6.8 | Social Services & Wellbeing | Protect and promote the health, safety and wellbeing of our employees (WB) | GREEN | <ul style="list-style-type: none"> The Directorate continues to sit on the Corporate Health and Safety group. The Directorate Health and Safety Group meets quarterly to monitor the Directorate plan and activity, which includes training, accident and injury information, and details of any inspections | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Year End Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-------------------|-------------|--|---------------------|--|-------------------------|---|
| PPN001i | LaRS | 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 | 100 | 100 | ↑ 98 | |
| PPN001ii | LaRS | 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 | 100 | 100 | ↑ 100 | |
| PPN001iii | LaRS | 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 | 100 | 100 | ↑ 100 | |
| PPN008ii | LaRS | Percentage of new businesses identified during the year which were subject to an inspection or submitted a self-assessment questionnaire for: (ii) Food Hygiene | 80 | 90 | ↑ 88 | |
| PPN009 PAM | LaRS | Percentage of food establishments which are broadly compliant with food hygiene standards | 75 | 93 | ↑ 88 | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Year End Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-------------------|-----------------------------|--|-----------------------------------|--|-------------------------|--|
| DWB5.1.5.5 | Social Services & Wellbeing | Number of Access to Leisure Scheme memberships | 1397 | 1962 | n/a | |
| DWB5.5.3.4 | Social Services & Wellbeing | Total visitor numbers to (Bridgend) life centre (including library, play, spectators, events, etc.) | Baseline target to be established | 465,208 | n/a | |
| DWB5.5.4.6 | Social Services & Wellbeing | Retention rates for those completing a 16 week National Exercise Referral Food Wise Programme | 395 | 438 | ↑ 404 | |
| DWB5.6.8.4 | Social Services & Wellbeing | % of target staff who have had the flu vaccine | Baseline target being established | n/a | n/a | <ul style="list-style-type: none"> Awaiting results from Health |
| LCS002b | Social Services & Wellbeing | 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 | 9,400 | 9528 | ↓ 9,588 | <ul style="list-style-type: none"> Target achieved, although performance has not exceeded 2013/14. During 2014/15, 1,338,439 visits to local authority sport and leisure centres during the year where the visitor participated in physical activity, this is a decrease of 1416 visits when compared to 2013/14 when 1,339,855 was achieved. There is probably a link between the development of new all weather playing areas to support clubs other than grass, and usage does not contribute to this indicator e.g Pencoed College, Club Penybont Football Club, Coleg-y Dderwen.(2pitches).Also some clubs migrating to grass playing fields on school sites. |

Improvement Priority Six: Working together to make the best use of resources (12)

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|---------------|-------------|---|-----------------------|--|-------------------------------------|
| P6.1.1 | Resources | Continue to develop our Medium Term Financial Strategy aligning our resources to our improvement priorities | GREEN | <ul style="list-style-type: none"> MTFS is developed in line with corporate improvement priorities and the Council's Corporate Plan. The appendices in the MTFS report identify budget changes against improvement priorities over financial years and specific budget reductions against improvement priorities. The capital programme is also allocated to improvement priorities. | |
| P6.1.4 | Children | Deliver the savings proposals identified in the 2014-15 budget (CH) | GREEN | <ul style="list-style-type: none"> All savings identified within MTFS were achieved and the directorate came in exactly on budget | |
| P6.1.4 | Communities | Deliver the savings proposals identified in the 2014-15 budget (CO) | GREEN | <ul style="list-style-type: none"> Savings achieved. | |

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|---------------|-----------------------------|---|-----------------------|---|--|
| P6.1.4 | LaRS | Deliver the savings proposals identified in the 2014-15 budget (LR) | GREEN | <ul style="list-style-type: none"> Significant underspend achieved and structure implemented for 2015/16 savings. | |
| P6.1.4 | Resources | Deliver the savings proposals identified in the 2014-15 budget (RE) | GREEN | <ul style="list-style-type: none"> All budget reduction proposals have been achieved for 2014-15. Where there has been slippage, e.g. CCTV, the service has identified alternative proposals to meet the shortfall. | |
| P6.1.4 | Social Services & Wellbeing | Deliver the savings proposals identified in the 2014-15 budget (WB) | GREEN | <ul style="list-style-type: none"> A balanced budget has been delivered. The savings proposals have been achieved. Those being off target have been offset by other savings. | |
| P6.2.2 | Resources | Deliver the 'Making Best Use of Resources' projects in Bridgend Change Programme for the coming year | GREEN | <ul style="list-style-type: none"> Work on this commitment is overall complete with the performance management system live in all directorates. Hybrid mail live in all service areas and e-post room live. The physical works in civic are complete for levels 0, 2 and 4, however the start of level 1 was delayed because of issues over funding and will now be complete end of 25th May, 2015. The change programme continues to be monitored at PMB: however, the change programme is undergoing redefinition following the changes in relation to transformation within BCBC. A report will be going to CMB following further WILO analysis on the next steps for the business support review. | |
| P6.3.3 | Resources | Continue to rationalise and improve council systems and processes | GREEN | <ul style="list-style-type: none"> ICT restructure implementation in progress (consultation closed). Digital office operational. Average 8000 outbound mail items scanned weekly with increase targeted & OCR software used for inbound mail. Savings allocated based on usage statistics (PMB report). | |
| P6.3.5 | LaRS | Complete our procurement and commissioning review | RED | <ul style="list-style-type: none"> The Corporate Contracts Register has been completed. There has been some slippage with conducting the creditor analysis for social care and the prioritisation of savings due to ongoing cross directorate pressures outside the project control. | <ul style="list-style-type: none"> The creditor analysis, is progressing with a report going to the Procurement Review Board, prioritising savings targets for 2015/16 based on reviews already conducted. The next stage is to support the Social Care review (this has already started) and identify savings and prioritise contracts which need to be set up. It is intended that this be completed by the end of August 2015. Following this, we will produce category strategies which identify how non contract spend will be managed within the established contract Forward Work Plan. |
| P6.4.7 | Resources | Implement the Asset Management Plan (AMP) 2014-15 actions, including energy and carbon reduction measures | GREEN | <ul style="list-style-type: none"> Delivery of asset management plan 2021 on target. | |
| P6.4.8 | Resources | Work towards a collaborative land agreement for Parc Afon Ewenni (Waterton) | GREEN | <ul style="list-style-type: none"> Consensus not reached with other land owners. BCBC will market its own site independently. | |

| Code | Directorate | Action Required | Year End RAG v Target | Comments | Next Steps (For Red and Amber only) |
|----------------|-------------|---|-----------------------|---|-------------------------------------|
| P6.4.9 | Resources | Deliver the enhanced disposals programme | GREEN | <ul style="list-style-type: none"> £4.2m capital receipts approved. | |
| P6.5.6 | | Share best-practice and take action, where necessary, to reduce absence levels (WB) | AMBER | <ul style="list-style-type: none"> 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 2015-16. | |
| P6.5.11 | Resources | Develop a management competency framework and organisational development plan | GREEN | <ul style="list-style-type: none"> A Workforce Plan has been drafted which sets out workforce priorities for 2015/16 and an action plan developed for taking these priorities forward. One of the key priorities focusses on maximising skills and performance of the existing workforce to allow greater flexibility. | |
| P6.6.12 | Resources | Further develop mechanisms to enhance customer feedback | GREEN | <ul style="list-style-type: none"> Consultations and Citizens' Panel surveys are now easier to use when responding online with new capabilities that alter the size of the screen and maximising the software available to enhance the quality of data received. Large consultations were also made available in paper format at our libraries. Other mechanisms included increasing the number of opportunities for residents to respond to consultations. The budget consultation for example included public engagement events which had not been used historically. | |
| P6.7.10 | LaRS | Review the work with our partners, including the Local Service Board and the third sector | GREEN | <ul style="list-style-type: none"> Programme Boards have been set up and priorities have been identified. The review has been completed. | |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-----------------|-------------|--|---------------------|--------------------------------------|-------------------------|--|
| DLR6.8.1 | LaRS | Total savings achieved through Value Wales Collaborative Procurement Programme | £1,055,000 | £1,367,000 | ↑ £58,015 | |
| DRE6.5.1 | Resources | Percentage of citizens surveyed who found the Council was good or very good at telling them about the services it provides and council related news. | 40 | 44 | ↔ 44 | |
| DRE6.7.1 | Resources | Customer Service Centre: Percentage of calls answered within 30 seconds | 75 | 68.33 | ↓ 69.3 | <ul style="list-style-type: none"> Unprecedented sickness continued in Quarter 4. |
| DRE6.7.2 | Resources | Customer Service Centre: Percentage of customers seen within 10 minutes | 70 | 64.21 | ↓ 68.8 | <ul style="list-style-type: none"> High levels of sickness in the customer services team has impacted on performance. |

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-------------------|-------------|--|---------------------|--------------------------------------|------------------------------|---|
| <u>DRE6.7.3</u> | Resources | Percentage of correspondence responded to within 5 working days (written enquiries received by the Customer Service Centre will be responded to within 5 working days) | 100 | 100 | ↑ 99.5 | |
| <u>DRE6.7.4.i</u> | Resources | Citizens' Panel – percentage rating service very good or fairly good: Phone | 82 | 82 | ↑ 80.5 | |
| <u>DRE6.7.4.i</u> | Resources | Citizens' Panel – percentage rating service very good or fairly good: Customer Service Centre | 85 | 76 | ↓ 83 | <ul style="list-style-type: none"> 13/14 result was 83% therefore target of 85% assigned for 14/15. Sickness absence in the customer service team during 2014 resulted in lower than target service levels which may account for the decrease in satisfaction. |
| <u>DRE6.7.5</u> | Resources | Percentage of citizens surveyed who said their individual access requirements are met when contacting the Council. | 52 | 63 | No comparable data available | |

Sickness Absence

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | Comments on red and amber and declining performance |
|-----------------|-------------|--|---------------------|--------------------------------------|-------------------------|---|
| <u>CHR002vi</u> | Corporate | Number of working days per full time equivalent lost due to sickness absence | 8.5 | 10.83 | ↓ 9.80 | 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 2015-16. |

Financial Outturn

| PI Ref No | Directorate | PI Description | Annual target 14-15 £'000 | Performance as at Quarter 4 | | | | | | Comments on red and amber and declining performance |
|-----------|-------------|---|------------------------------|-----------------------------|---|--------|---|-------|---|---|
| | | | | Red | | Amber | | Green | | |
| | | | | £'000 | % | £'000 | % | £'000 | % | |
| | Corporate | Value of planned budget reductions achieved | 11,274 | 0 | 0 | 10,429 | 0 | 0 | 0 | |

Other priority/business as usual

| PI Ref No | Directorate | PI Description | Annual target 14-15 | Q4 Cumulative Actual & RAG vs Target | Trend vs Year End 13-14 | 2012-13 Actual (NSI/PAM only) | Wales average 13-14 | BCBC Rank 13-14 | Comments on red and amber and declining performance |
|-----------------------------------|-----------------------------|---|---------------------|--------------------------------------|-------------------------|-------------------------------|---------------------|-----------------|---|
| STS005b PAM | Communities | Percentage of highways and relevant land inspected of a high or acceptable standards of cleanliness | 98 | 93.45 | ↓ 99.23 | 98.5 | 96.8 | 6 | <ul style="list-style-type: none"> This has been affected by recent reductions in Other Cleaning staff levels. |
| STS006 NSI | Communities | Percentage of reported fly tipping incidents cleared within 5 working days | 98 | 96.03 | ↓ 96.69 | 97.91 | 95.03 | 11 | <ul style="list-style-type: none"> Issues arose in reporting responses. |
| WMT004b NSI, PAM | Communities | Percentage of municipal waste collected by local authorities sent to landfill | 48 | 13.24 | ↑ 21.68 | 16.69 | 37.72 | 4 | |
| WMT009b NSI, PAM | Communities | 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 | 52 | 55.71 | ↓ 56.49 | 57.11 | 54.33 | 6 | <ul style="list-style-type: none"> This figure has been affected by a change in regulation regarding wood waste. WG have advised that 100% of wood waste can no longer be claimed as a certain percentage must be put against making it into fuel. |
| DWBOA1.1 | Social Services & Wellbeing | Increasing the number of new Telecare Installations | 86 | 239 | ↑ 196 | n/a | n/a | n/a | |
| DWBOA1.4 | Social Services & Wellbeing | The number of carers of adults offered an assessment in their own right | 1487 | 1460 | ↑ 1416 | n/a | n/a | n/a | <p>During 2014/15, 1542 carers were identified (an increase of 81 carers compared to 2013/14) and 1460 were offered an assessment. The target has been narrowly missed by 27</p> <p>We are currently using carers measure funds to support the Carers Centre to undertake some focussed work in the POW hospital to offer advice, assessment and support as required. This will improve performance in this area.</p> |