

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

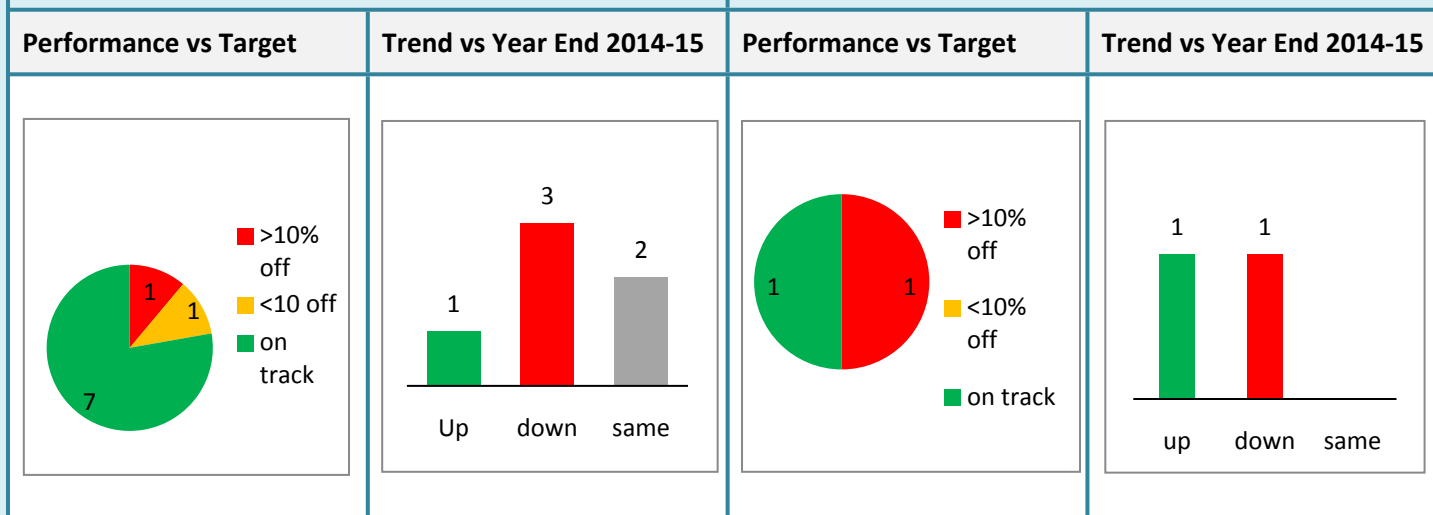
The budget has been bought in underspent due to preparations for the current budget year savings. Performance has been maintained to plan although in Legal this is due to central funding to support the priority areas and whilst there has been a slight dip in performance of the joint regulatory team,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

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

Commitments 2015-16

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

All Indicators



Finance

Revenue Budget

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

Capital Budget

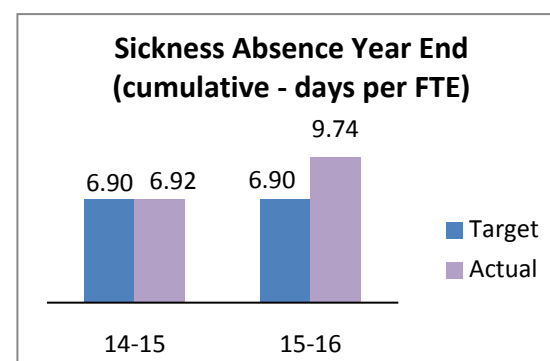
- There is no capital budget.

Budget Reductions

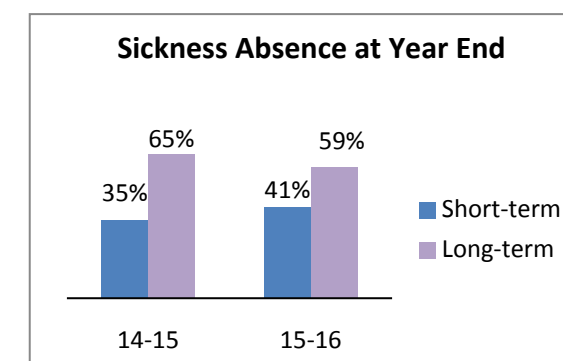
Budget Reductions (£000)	2015-16	%
Budget Reductions Target	554	
Achieved	554	100%
Overall variance	0	0%

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

Human Resources



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



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

Implications of Financial Reductions on Service Performance and other Key Issues

High Corporate Risks (risk owner)

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

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

Key

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

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

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

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

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

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

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

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

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

Other priority/business as usual

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

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

Additional Financial Information - Main Revenue Budget Variance

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

The most significant variances are detailed below:

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

Legal Services

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

Democratic Services

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

Procurement

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

Partnerships

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

Additional Sickness Information by Service Area

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

Additional Sickness Information by Absence Reason

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