

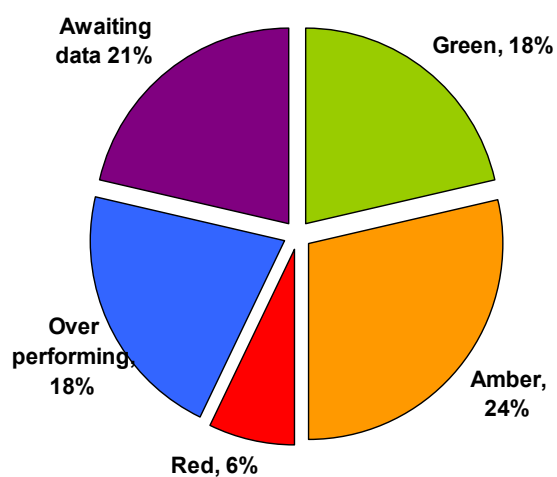
PERFORMANCE MONITORING SUMMARY

REPORT OF THE DEPUTY CHIEF EXECUTIVE / DIRECTOR OF CORPORATE SERVICES

1. Overall corporate plan progress summary

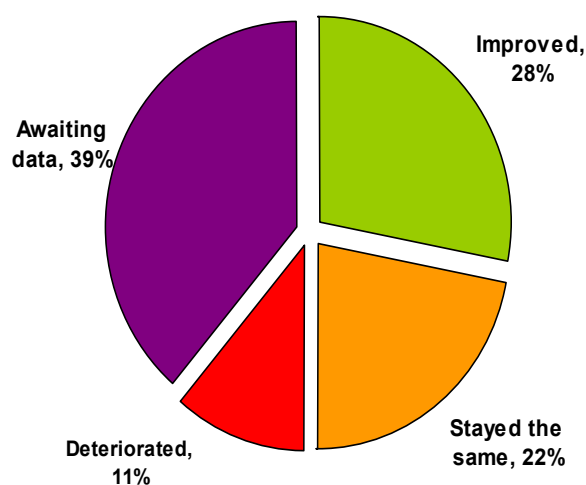
1.1. The following charts provide an overall picture for the authority at the first quarter stage. The charts show the overall council position for the key performance indicators and actions within the council's 2008/09 corporate plan.

Have our indicators hit their targets?



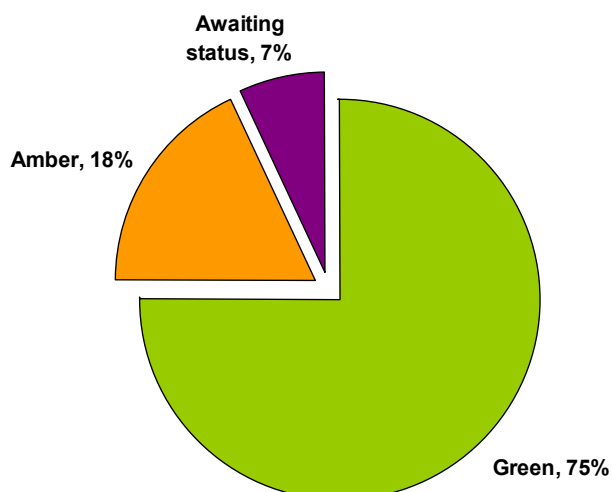
*There are 7 indicators within the corporate plan that have no target or improvement direction set and therefore cannot be included in this analysis

Have our indicators improved on this point last year?

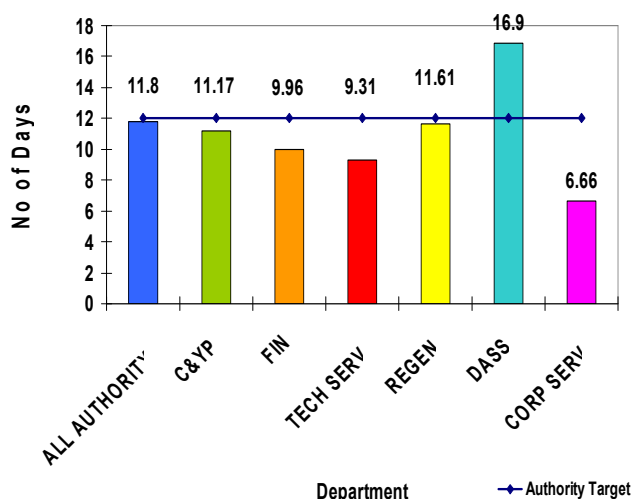


*There are 22 indicators within the corporate plan that no previous year's performance data and therefore cannot be included in this analysis

Are our projects on target?



Sickness figures Jul 07 – June 08 (not including teachers & schools)



2. 2008/09 priorities for improvement progress

2.1. This section provides more detail on achievement of the priorities for improvement, against both **key actions** and **key indicators**.

2.2. Key actions

There are 39 key actions within the council's corporate plan which have been identified as contributing towards the delivery of the council's 2008/09 priorities for improvement. The table provides a summary of performance of these key actions at the quarter one stage:

| Status | Key actions |
|--------|-------------|
| Green | 35 |
| Amber | 4 |
| Red | 0 |
| Total | 39 |

The following table provides details of those key actions which are performance exceptions at the quarter one stage and the relevant corrective action:

| Key actions identified for improvement 2008/09 | Status | Corrective action | Portfolio |
|--|--------|---|---|
| Access and assessment arrangements | Amber | Potential slippage into 2009/10 as a result of delays implanting revised DASS structure | Social Care & Inclusion |
| Ensure there are no schools if Ofsted categories | Amber | Intervention and support provided to the one school in a category | Children's Services & Lifelong Learning |
| Implement our procurement strategy to ensure that services and goods are acquired economically and efficiently, and if advantageous, in partnership with others. | Amber | We expect the slight underperformance in respect of the corporate savings targets in Quarter 1 to be rectified when a number of high value contracts are let. A detailed progress report on Procurement Efficiencies and a revised Corporate Procurement Strategy will be considered by Cabinet in September. | Finance and Best Value |
| Exceed government standards for Housing and Council Tax benefits and Council Tax collection. | Amber | New staff are in post and being trained as part of the normal management cycle. We do not expect a significant variation from target at the year end. | Finance and Best Value |

Status key

| | |
|-------|---|
| Green | All milestones that should have been met at this point have been met |
| Amber | Some non-critical milestones have been missed or there is a danger of non-critical slippage |
| Red | Critical milestones have been missed or there is serious slippage |

2.3. Performance indicators

There are 50 performance indicators which have been identified as contributing to the delivery of the council's 2008/09 priorities for improvement. Of these indicators 17 can be reported at the quarter one stage.

Direction of Travel Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 5.88% | 1 | Improved by more than 2.5% on previous year's performance |
| 0.00% | 0 | Deteriorated by more than 2.5% on previous year's performance |
| 5.88% | 1 | Stayed within +/-2.5% of previous year's performance |
| 17.65% | 3 | Awaiting data |
| 70.59% | 12 | Not applicable |
| 100.00% | 17 | (Note: percentages rounded to 2 decimal places) |

Target Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 17.65% | 3 | Green (within +/-5% of the target) |
| 23.53% | 4 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 5.88% | 1 | Red (missed target by more than 10%) |
| 17.65% | 3 | Over-performing (more than 10% of the target) |
| 17.65% | 3 | Awaiting data |
| 11.76% | 2 | Target not set |
| 5.88% | 1 | Not Applicable |
| 100.00% | 17 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.

The following table provides the details of those performance indicators that are **not on target**, are **over performing**, are **awaiting data** or have **deteriorated** (compared with the same quarter last year).

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|--|---------------|-----------------|------------------|------------------|-----------|---------------------|---|
| NI 130 | Social care clients receiving Self Directed Support (Direct Payments and Individual Budgets) | 322.3 | 241 | 205.8 | 152.0 | Red | n/a | The number of clients receiving direct payments is dropping for 2 main reasons. 1) A change in charging policy has made it more cost effective for clients who pay for the full cost of services to contract directly with providers 2) A more rigorous reviewing policy has resulted in some clients being reviewed out of |

| | | | | | | | | |
|--------|---|--------|-------|--------|--------|-----------------|-----|---|
| | | | | | | | | the service. The Direct Payments team is currently monitoring the take up of Direct Payments and the reasons why people are opting not to enter into an agreement for a Direct Payment. Solutions to these barriers will then be explored in order to eliminate or reduce them. |
| NI 135 | Carers receiving needs assessment or review and a specific carer's service, or advice and information | 18.0% | 18.0% | 5.0% | 22.7% | Over Performing | n/a | The overperformance of this indicator may be due to additional resources being put into briefing staff about the need to fully record the support given to carers in the Swift care management system. It is possible that the success in raising the profile of carers will be sustained and the annual target will prove to be less ambitious that it should have been. The view is that is to early to be assured that this is the case. |
| NI 146 | Adults with learning disabilities in employment | 8.3% | | 5.7% | | | | |
| NI 152 | Working age people on out of work benefits | 17.74% | | 17.89% | | | | Q1 data due for release in Nov 2008. |
| NI 153 | Working age people claiming out of work benefits in the worst performing neighbourhoods | 35.22 | | | | | | Q1 data due for release in Nov 2008. |
| NI 180 | The number of changes of circumstances which affect customers' HB/CTB entitlement within the year. | 1.08 | 1.08 | 0.27 | 0.44 | Over Performing | n/a | Reflects a higher percentage of changes identified by Wirral than originally anticipated in this new PI. Will be reviewed during year but no service delivery issue. |
| NI 192 | Percentage of household waste sent for reuse, recycling and composting | 34% | 34% | 33% | 39.57% | Over Performing | n/a | Target has been exceeded due to unusually high tonnage of garden waste in May, credited to favourable weather conditions. |

DEPARTMENT OF ADULT SOCIAL SERVICES

1. Sickness information

1.1 Adult social services July 07 – June 08: **16.9 days**

Whole council July 07 – June 08: **11.8 days**

2. Progress of key actions

2.1 There are 15 key actions within the corporate plan which the department of Adult Social Services is responsible for delivery of. Of these 15 actions seven have been identified as contributing to the delivery of the council's 2008/09 priorities for improvement.

| Status | Key actions | Priorities for improvement 2008/09 |
|-----------------|-------------|------------------------------------|
| Green | 10 | 6 |
| Amber | 1 | 1 |
| Red | 0 | 0 |
| Awaiting status | 4 | 0 |
| Total | 15 | 7 |

1.2 Key actions exceptions

The following tables provide details of the actions that are exceptions at the quarter one stage along with relevant corrective action.

Key actions identified as contributing towards the delivery of the council's 2008/09 priorities for improvement

| Key Actions | Status | Corrective action | Portfolio |
|------------------------------------|--------|---|-------------------------|
| Access and assessment arrangements | Amber | Potential slippage into 2009/10 as a result of delays implanting revised DASS structure | Social Care & Inclusion |

All remaining DASS key actions within the corporate plan

| Key Actions | Status | Corrective action | Portfolio |
|--|--|-------------------|-------------------------|
| High risk CVD screening programme | Awaiting assessment from PCT | | Social Care & Inclusion |
| Diabetes screening | Awaiting assessment from PCT | | Social Care & Inclusion |
| Community interventions for adults with lifestyle risk factors | Awaiting assessment from PCT | | Social Care & Inclusion |
| Work of the Family Safety Unit | Query lead department on this key action | | Social Care & Inclusion |

Status key

| | |
|-------|---|
| Green | All milestones that should have been met at this point have been met |
| Amber | Some non-critical milestones have been missed or there is a danger of non-critical slippage |
| Red | Critical milestones have been missed or there is serious slippage |

3. Progress of performance indicators

3.1 Direction of travel and target summary

The following tables provide the direction of travel and target summary for Adult Social Services.

Direction of Travel Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 0.00% | 0 | Improved by more than 2.5% on previous year's performance |
| 0.00% | 0 | Deteriorated by more than 2.5% on previous year's performance |
| 0.00% | 0 | Stayed within +/-2.5% of previous year's performance |
| 55.56% | 5 | Awaiting data |
| 44.44% | 4 | Not applicable |
| 100.00% | 9 | (Note: percentages rounded to 2 decimal places) |

Target Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 0.00% | 0 | Green (within +/-5% of the target) |
| 11.11% | 1 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 11.11% | 1 | Red (missed target by more than 10%) |
| 22.22% | 2 | Over-performing (more than 10% of the target) |
| 55.56% | 5 | Awaiting data |
| 0.00% | 0 | Target not set |
| 0.00% | 0 | Not Applicable |
| 100.00% | 9 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.

3.2 Performance indicator exceptions

Of the 9 indicators that can be reported at the first quarter period for Adult Social Services, the following 8 PIs are performance exceptions.

Performance indicators identified as contributing to the delivery of the council's 2008/09 priorities for improvement

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|---|---------------|-----------------|------------------|------------------|-----------------|---------------------|---|
| NI 130 | Social care clients receiving Self Directed Support (Direct Payments and Individual Budgets) | 322.3 | 241 | 205.8 | 152.0 | Red | n/a | The number of clients receiving direct payments is dropping for 2 main reasons. 1) A change in charging policy has made it more cost effective for clients who pay for the full cost of services to contract directly with providers 2) A more rigorous reviewing policy has resulted in some clients being reviewed out of the service. The Direct Payments team is currently monitoring the take up of Direct Payments and the reasons why people are opting not to enter into an agreement for a Direct Payment. Solutions to these barriers will then be explored in order to eliminate or reduce them. |
| NI 135 | Carers receiving needs assessment or review and a specific carer's service, or advice and information | 18.0% | 18.0% | 5.0% | 22.7% | Over Performing | n/a | The over performance of this indicator may be due to additional resources being put into briefing staff about the need to fully record the support given to carers in the Swift care management system. It is possible that the success in raising the profile of carers will be sustained and the annual target will prove to be less ambitious than it should have been. The view is that it is too early to be assured that this is the case. |
| NI 146 | Adults with learning disabilities in employment | 8.3% | | 5.7% | | | | Awaiting data |

CHILDREN & YOUNG PEOPLE'S DEPARTMENT

1. Sickness information

1.1 Children & Young People July 07 – June 08: **11.17 days**

Whole council July 07 – June 08: **11.8 days**

2. Progress of key actions

2.1 There are 9 key actions within the corporate plan which the Children & Young People's department is responsible for delivery of. Of these 9 actions 6 have been identified as contributing to the delivery of the council's 2008/09 priorities for improvement.

| Status | Key actions | Priorities for improvement 2008/09 |
|--------------|-------------|------------------------------------|
| Green | 8 | 5 |
| Amber | 1 | 1 |
| Red | 0 | 0 |
| Total | 9 | 6 |

2.2 Key actions exceptions

The following table provides details of the actions that are exceptions at the quarter one stage along with the relevant corrective action.

Key action identified as contributing towards the delivery of the council's 2008/09 priorities for improvement

| Key Actions | Status | Corrective action | Portfolio |
|--|--------|---|---|
| Ensure there are no schools in Ofsted categories | Amber | Intervention and support provided to the one school in a category | Children's Services & Lifelong Learning |

Status key

Green All milestones that should have been met at this point have been met
 Amber Some non-critical milestones have been missed or there is a danger of non-critical slippage
 Red Critical milestones have been missed or there is serious slippage

3. Progress of performance indicators

3.1 Direction of travel and target summary

The following tables provide the direction of travel and target summary for Children & Young People's department

Direction of Travel Summary

| % PIs | No. of PIs | |
|--------|------------|---|
| 0.00% | 0 | Improved by more than 2.5% on previous year's performance |
| 0.00% | 0 | Deteriorated by more than 2.5% on previous year's performance |
| 20.00% | 1 | Stayed within +/-2.5% of previous year's performance |

| | | |
|----------------|----------|---|
| 0.00% | 0 | Awaiting data |
| 80.00% | 4 | Not applicable |
| 100.00% | 5 | (Note: percentages rounded to 2 decimal places) |

Target Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 0.00% | 0 | Green (within +/-5% of the target) |
| 20.00% | 1 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 20.00% | 1 | Red (missed target by more than 10%) |
| 0.00% | 0 | Over-performing (more than 10% of the target) |
| 0.00% | 0 | Awaiting data |
| 40.00% | 2 | Target not set |
| 20.00% | 1 | Not Applicable |
| 100.00% | 5 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.

3.2 Performance indicator exceptions

Of the 5 indicators that can be reported at the first quarter period for Children & Young People's department, the following PI is a performance exception.

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|--|------------------------|-----------------|------------------|------------------|-----------|---------------------|---|
| NI 117 | 16 to 18 year olds who are not in education, employment or training (NEET) | 7.4% (Lower is Better) | 7.4% | 8.8% | 10.2% | Red | ↔ | The NEET rate is under constant scrutiny by ethnicity, gender and by area to support intervention strategies. A hotspot project targeting employers has been initiated and a specific programme targeting 17 year olds is underway with evidence of improvement in this area. |

CORPORATE SERVICES DEPARTMENT

1. Sickness information

1.1 Corporate services July 07 – June 08: **6.66 days**

Whole council July 07 – June 08: **11.8 days**

2. Progress of key actions

2.1 There are 23 key actions within the corporate plan which the Corporate Services department is responsible for delivery of. Of these 23 actions 8 have been identified as contributing to the delivery of the council's 2008/09 priorities for improvement.

| Status | Key actions | Priorities for improvement 2008/09 |
|-----------------|-------------|------------------------------------|
| Green | 18 | 8 |
| Amber | 4 | |
| Red | 0 | 0 |
| Awaiting status | 1 | |
| Total | 23 | 8 |

2.2 Key actions exceptions

The following table provides details of the actions that are exceptions at the quarter one stage along with relevant corrective action.

| Key Actions | Status | Corrective action | Portfolio |
|--|--------|--|------------------------------------|
| Processing the production of the Local Development Framework | Amber | Revised LDF to be prepared for September 2008. Issues and options report to be prepared for September 2008. Evidence base studies in preparation | Regeneration and Planning Strategy |
| Sustainable community strategy | Amber | Strategy work under review in line with LDF. Public will be consulted by September 2008 | Corporate Services |
| Achieve level three in ESLG | Amber | On target to achieve level 3 by March 2009 dependent on all departments achieving the required levels of activity. A clear project plan is now in place to address areas of slippage and monitoring is being undertaken via the corporate equality and inclusion group | Community and Customer Engagement |
| Review partnership and governance arrangements for LSP | Amber | Project group has met twice and conducted a desktop mapping analysis. Governance issues are to be | Corporate Services |

| Key Actions | Status | Corrective action | Portfolio |
|---|-----------------|--|--------------------|
| | | discussed as part of LAA programme board away day initially before wider consultation. | |
| Delivery of integrated marketing programme for all council services | Awaiting status | | Corporate Services |

Status key

Green All milestones that should have been met at this point have been met

Amber Some non-critical milestones have been missed or there is a danger of non-critical slippage

Red Critical milestones have been missed or there is serious slippage

3. Progress of performance indicators

3.1 Direction of travel and target summary

The following tables provide the direction of travel and target summary for Corporate Services.

Direction of Travel Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 20.00% | 1 | Improved by more than 2.5% on previous year's performance |
| 0.00% | 0 | Deteriorated by more than 2.5% on previous year's performance |
| 0.00% | 0 | Stayed within +/-2.5% of previous year's performance |
| 40.00% | 2 | Awaiting data |
| 40.00% | 2 | Not applicable |
| 100.00% | 5 | (Note: percentages rounded to 2 decimal places) |

Target Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 0.00% | 0 | Green (within +/-5% of the target) |
| 20.00% | 1 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 20.00% | 1 | Red (missed target by more than 10%) |
| 20.00% | 1 | Over-performing (more than 10% of the target) |
| 40.00% | 2 | Awaiting data |
| 0.00% | 0 | Target not set |
| 0.00% | 0 | Not Applicable |
| 100.00% | 5 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.

3.2 Performance indicator exceptions

Of the 5 indicators that can be reported at the first quarter period for Corporate Services, the following 4 PIs are performance exceptions.

Performance indicators identified as contributing to the delivery of the council's 2008/09 priorities for improvement

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|---|---------------|-----------------|------------------|------------------|-----------|---------------------|---|
| NI 152 | Working age people on out of work benefits | 17.74% | | 17.89% | | | | Q1 data due for release in Nov 2008. Discussions are currently taking place regarding the reporting frequency of this indicator which should be resolved prior to COMT / Cabinet. |
| NI 153 | Working age people claiming out of work benefits in the worst performing neighbourhoods | 35.22 | | | | | | Q1 data due for release in Nov 2008. Discussions are currently taking place regarding the reporting frequency of this indicator which should be resolved prior to COMT / Cabinet |

All remaining Corporate Services performance indicators within the corporate plan

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|------------|---|---------------|-----------------|------------------|------------------|-----------|---------------------|--|
| LOCAL 6227 | The number of 'hits' recorded on the Wirral Tourism Website - www.visitwirral.com | 5100000 | 1939631 | 1378056 | 484908 | Red | n/a | Website has experienced technical difficulties throughout the quarter with pages not being populated, and links disappearing. New Mind (hosting company) have been working on the issue and are re-populating the website, and members of the Tourism team will be trained to upload information. During first two quarters we would expect the most traffic to the website, and as the problem has been ongoing during the busy Summer months, we do not expect the figures to recover. |

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|------------|------------------------|---------------|-----------------|------------------|------------------|-----------------|---------------------|--|
| LOCAL 6247 | Number of jobs created | 275 | 324 | 68.75 | 81 | Over Performing | ↑ | Other projects in the pipe line due to be completed in the next quarter. |

FINANCE DEPARTMENT

1. Sickness information

1.1 Finance July 07 – June 08: **9.96 days**

Whole council July 07 – June 08: **11.8 days**

2. Progress of key actions

2.1 There are 9 key actions within the corporate plan which the Finance department is responsible for delivery of. Of these 9 actions 8 have been identified as contributing to the delivery of the council's 2008/09 priorities for improvement.

| Status | Key actions | Priorities for improvement 2008/09 |
|--------------|-------------|------------------------------------|
| Green | 6 | 6 |
| Amber | 3 | 2 |
| Red | 0 | 0 |
| Total | 9 | 8 |

2.2 Key actions exceptions

The following tables provide details of the actions that are exceptions at the quarter one stage along with relevant corrective action.

Key actions identified as contributing towards the delivery of the council's 2008/09 priorities for improvement

| Key Actions | Status | Corrective action | Portfolio |
|--|--------|---|------------------------|
| Implement our procurement strategy to ensure that services and goods are acquired economically and efficiently, and if advantageous, in partnership with others. | Amber | We expect the slight underperformance in respect of the corporate savings targets in Quarter 1 to be rectified when a number of high value contracts are let. A detailed progress report on Procurement Efficiencies and a revised Corporate Procurement Strategy will be considered by Cabinet in September. | Finance and Best Value |
| Exceed government standards for Housing and Council Tax benefits and Council Tax collection. | Amber | New staff are in post and being trained as part of the normal management cycle. We do not expect a significant variation from target at the year end. | Finance and Best Value |

Remaining Finance key action within the corporate plan

| Key Actions | Status | Corrective action | Portfolio |
|--------------------------|--------|--|-----------------------------------|
| Customer Access Strategy | Amber | A need for additional staff due to on-going high level demand in the call centre has been identified. This will be/was considered by Cabinet on 23 July. | Community and Customer Engagement |

Status key

- Green All milestones that should have been met at this point have been met
Amber Some non-critical milestones have been missed or there is a danger of non-critical slippage
Red Critical milestones have been missed or there is serious slippage

3. Progress of performance indicators

3.1 Direction of travel and target summary

The following tables provide the direction of travel and target summary for Finance

Direction of Travel Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 16.67% | 1 | Improved by more than 2.5% on previous year's performance |
| 0.00% | 0 | Deteriorated by more than 2.5% on previous year's performance |
| 16.67% | 1 | Stayed within +/-2.5% of previous year's performance |
| 0.00% | 0 | Awaiting data |
| 66.67% | 4 | Not applicable |
| 100.00% | 6 | (Note: percentages rounded to 2 decimal places) |

Target Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 16.67% | 1 | Green (within +/-5% of the target) |
| 33.33% | 2 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 16.67% | 1 | Red (missed target by more than 10%) |
| 33.33% | 2 | Over-performing (more than 10% of the target) |
| 0.00% | 0 | Awaiting data |
| 0.00% | 0 | Target not set |
| 0.00% | 0 | Not Applicable |
| 100.00% | 6 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.


3.2 Performance indicator exceptions

Of the 6 indicators that can be reported at the first quarter period for Finance, the following 2 PIs are performance exceptions.

Performance indicators identified as contributing to the delivery of the council's 2008/09 priorities for improvement

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|--|---------------|-----------------|------------------|------------------|-----------------|---------------------|--|
| NI 180 | The number of changes of circumstances which affect customers' HB/CTB entitlement within the year. | 1.08 | 1.08 | 0.27 | 0.44 | Over Performing | n/a | Reflects a higher percentage of changes identified by Wirral than originally anticipated in this new PI. Will be reviewed during year but no service delivery issue. |

Remaining Finance performance indicator within the corporate plan

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|-------------|--|---------------|-----------------|------------------|------------------|-----------------|---|--|
| LOC AL 2063 | Percentage of calls handled through the Call Centre. | 95% | 90% | 95% | 84% | Red |  | Additional staff being recruited to ensure target reached. |
| LOC AL 2069 | Number of visits to the Council's website | 6.0% | 6.0% | 1.5% | 5.9% | Over Performing | n/a | Reflects a higher level of web activity than had been initially projected which is good news - it presents no service delivery issues. |

REGENERATION DEPARTMENT

1. Sickness information

1.1 Regeneration July 07 – June 08: **11.61 days**

Whole council July 07 – June 08: **11.8 days**

2. Progress of key actions against the authority's aims for 2008-2013

2.1 There are 8 key actions within the corporate plan which the Regeneration department is responsible for delivery of.

| Status | Key actions | Priorities for improvement 2008/09 |
|--------------|-------------|------------------------------------|
| Green | 4 | |
| Amber | 4 | |
| Red | 0 | |
| Total | 8 | |

2.2 Key actions exceptions

The following table provides details of the actions that are exceptions at the quarter one stage along with relevant corrective action.

| Key Actions | Status | Corrective action | Portfolio |
|---------------------------------------|--------|---|------------------------------|
| Strategic Leisure Review | Amber | Policy issues to be finally determined with Cabinet Member | Culture, Tourism and Leisure |
| Affordable Housing Strategy | Amber | An initial draft has been completed however there is further work and consultation required with other teams such as Streetscene and Borough Solicitors to fully complete. This strategy will link in with new LAA targets recently agreed | Housing and Community Safety |
| Crime and disorder reduction strategy | Amber | NI 15. 18% (6 incidents) above target the first quarter was badly affected by performance in April and May. There were no repeat addresses repeat offenders or hotspots for serious violence. All offenders were male with the core age group being 18 – 25 year olds. PI 4269. . Currently operating at 26% above target the problem is being caused by a rise | Housing and Community Safety |

| Key Actions | Status | Corrective action | Portfolio |
|-----------------------|--------|---|----------------------|
| | | <p>in complaints regarding youths on motor cycles. The matter is being addressed at the Anti Social Behaviour Governance Group which meets monthly. Additionally Safe Space which is a multi agency summer holiday focus upon anti social behaviour in parks will pay particular attention to the problem which has a hot spot within one of the primary parks being focussed upon during Safe Space. The problem is also high in the Bebbington area and a problem solving group for Bebbington has been arranged to consider this analysis and agree actions.</p> | |
| | | <p>A 6-week campaign will see PCSO's distributing posters and leaflets in key public buildings including; schools, libraries, supermarkets etc. advising on the impact of illegal use of motor cycles and the enforcement action that will be taken. NI 33a The target regarding deliberate primary fires was set at 72 and the number recorded in the first quarter was 106. The numbers have steadily increased since the start of the year with the worst month being June when against a monthly target of 25 fires a total of 55 were recorded. Primary fires include vehicle and property fires. Property includes outdoor non-dwelling structures and there has been an increase in this type of fire which is anti social behaviour related</p> | |
| Develop and implement | Amber | Brief for consultants to | Culture, Tourism and |

| Key Actions | Status | Corrective action | Portfolio |
|-------------------|--------|---------------------------|-----------|
| heritage strategy | | be ready by end of August | Leisure |

Status key

| | |
|-------|---|
| Green | All milestones that should have been met at this point have been met |
| Amber | Some non-critical milestones have been missed or there is a danger of non-critical slippage |
| Red | Critical milestones have been missed or there is serious slippage |

3. Progress of performance indicators

3.1 Direction of travel and target summary

The following tables provide the direction of travel and target summary for Regeneration

Direction of Travel Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 33.33% | 2 | Improved by more than 2.5% on previous year's performance |
| 16.67% | 1 | Deteriorated by more than 2.5% on previous year's performance |
| 0.00% | 0 | Stayed within +/-2.5% of previous year's performance |
| 0.00% | 0 | Awaiting data |
| 50.00% | 3 | Not applicable |
| 100.00% | 6 | (Note: percentages rounded to 2 decimal places) |

Target Summary



| % PIs | No. of PIs | |
|----------------|------------|---|
| 16.67% | 1 | Green (within +/-5% of the target) |
| 0.00% | 0 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 33.33% | 2 | Red (missed target by more than 10%) |
| 50.00% | 3 | Over-performing (more than 10% of the target) |
| 0.00% | 0 | Awaiting data |
| 0.00% | 0 | Target not set |
| 0.00% | 0 | Not Applicable |
| 100.00% | 6 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.

3.2 Performance indicator exceptions

Of the 6 indicators that can be reported at the first quarter period for Regeneration, the following 5 PIs are performance exceptions.

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|--------------------------------|---------------|-----------------|------------------|------------------|-----------|---------------------|--|
| NI 15 | Number of most serious violent | 0.37 (Lower) | 0.44 | 0.09 | 0.11 | Red | n/a | 18% (6 incidents) above target the first quarter |

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|-------------|---|-------------------------|-----------------|------------------|------------------|-----------------|---|--|
| | crimes (PSA 23: Priority Action 1) per 1000 population | is Better) | | | | | | was badly affected by performance in April and May. There were no repeat addresses repeat offenders or hotspots for serious violence. All offenders were male with the core age group being 18 – 25 year olds. |
| NI 20 | Number of “Assaults with less serious injury” (including racially and religiously aggravated) offences per 1,000 population as a proxy for alcohol related violent offences | 5.48 (Lower is Better) | 5.28 | 1.52 | 1.32 | Over Performing | n/a | This is being measured in 2008/09 by use of a [proxy indicator. Police systems which generate the data to monitor this target are as yet unable to distinguish between and element of violence which because of APACS counting rules and definitions falls into both NI 15 and NI 20. This target corresponds with that contained within Merseyside Police Policing Plan |
| NI 156 | Number of homeless households living in Temporary Accommodation | 18 (Lower is Better) | 15 | 22 | 15 | Over Performing | n/a | Improvement exceeds expectations. Homeless prevention work and concerted effort to move people on is paying dividends but action will continue to ensure improvement is sustained. |
| LOC AL 4049 | Total number of homes acquired, demolished, refurbished or built as a result of HMRI investment | 950 | 950 | 175 | 96 | Red |  | Group Repair improvements will all be reported in Q2 and Q3. Targeted marketing to increase Energy efficiency outputs. |
| LOC AL 4206 | Number of reported incidents of anti-social behaviour | 17917 (Lower is Better) | 17532 | 5024 | 4383 | Over Performing |  | This target is the subject of a monthly meeting focussed upon areas suffering the highest levels of anti social behaviour. This is an action focussed meeting and attended by a number of different agencies on Wirral. |

TECHNICAL SERVICES DEPARTMENT

1. Sickness information

1.1 Technical services July 07 – June 08: **9.31 days**

Whole council July 07 – June 08: **11.8 days**

2. Progress of key actions

2.1 There are 12 key actions within the corporate plan which the Technical Services department is responsible for delivery of. Of these 12 actions 10 have been identified as contributing to the delivery of the council's 2008/09 priorities for improvement.

| Status | Key actions | Priorities for improvement 2008/09 |
|--------------|-------------|------------------------------------|
| Green | 11 | 10 |
| Amber | 1 | 0 |
| Red | 0 | 0 |
| Total | 12 | 10 |

2.2 Key actions exceptions

The following table provides details of the actions that are exceptions at the quarter one stage along with relevant corrective action.

| Key Projects | Status | Corrective action | Portfolio |
|---|--------|--|------------------------------------|
| Improve environmental quality across the Borough through improved operational performance of the strategic contract | Amber | In an effort to further improve the standard of street cleansing, Biffa's proposals to review the method of working have now been accepted. Implementation is due end July/beginning of August | Streetscene and Transport Services |

Status key

Green All milestones that should have been met at this point have been met

Amber Some non-critical milestones have been missed or there is a danger of non-critical slippage

Red Critical milestones have been missed or there is serious slippage

3. Progress of performance indicators

3.1 Direction of travel and target summary

The following tables provide the direction of travel and target summary for Technical Services.

Direction of Travel Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 22.22% | 2 | Improved by more than 2.5% on previous year's performance |
| 11.11% | 1 | Deteriorated by more than 2.5% on previous year's performance |
| 22.22% | 2 | Stayed within +/-2.5% of previous year's performance |
| 0.00% | 0 | Awaiting data |
| 44.44% | 4 | Not applicable |
| 100.00% | 9 | (Note: percentages rounded to 2 decimal places) |

Target Summary

| % PIs | No. of PIs | |
|----------------|------------|---|
| 22.22% | 2 | Green (within +/-5% of the target) |
| 11.11% | 1 | Amber (missed or exceeded target by more than 5% but less than 10%) |
| 11.11% | 1 | Red (missed target by more than 10%) |
| 33.33% | 3 | Over-performing (more than 10% of the target) |
| 0.00% | 0 | Awaiting data |
| 0.00% | 0 | Target not set |
| 22.22% | 2 | Not Applicable* |
| 100.00% | 9 | (Note: percentages rounded to 2 decimal places) |

*PI cannot be compared with previous year or improvement direction cannot be set.

3.2 Performance indicator exceptions

Of the 9 indicators that can be reported at the first quarter period for Technical Services, the following 8 PIs are performance exceptions.

Performance indicators identified as contributing to the delivery of the council's 2008/09 priorities for improvement

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|--------|--|---------------|-----------------|------------------|------------------|-----------------|---------------------|---|
| NI 192 | Percentage of household waste sent for reuse, recycling and composting | 34% | 34% | 33% | 39.57% | Over Performing | n/a | Target has been exceeded due to unusually high tonnage of garden waste in May, credited to favourable weather conditions. |

All remaining Technical Services performance indicators within the corporate plan

| PI No. | Title | Yr End Target | Yr End Forecast | Quarter 1 Target | Quarter 1 Actual | On Target | Direction of Travel | Corrective Action |
|---------|--|-----------------------|-----------------|------------------|------------------|-----------------|---------------------|---|
| NI 157a | % of planning applications determined within 13 weeks for Major applications | 70% | 70% | 70% | 62.5% | Red | ↑ | Overall performance has improved in comparison to Quarter1 2007/08. A dedicated Officer has been recruited to deal exclusively with Major applications commencing during Quarter2. |
| NI 195a | Improved street and environmental cleanliness (levels of litter) | 8% (Lower is Better) | 8% | 10% | 7.67% | Over Performing | ↑ | This data has been calculated manually. The database has been uploaded to Defra and results are awaited. Additional resource secured through pump priming monies for HIT team to target land of indeterminate ownership, has led to improvement in scores. |
| NI 195b | Improved street and environmental cleanliness (levels of detritus) | 10% (Lower is Better) | 10% | 12% | 8.53% | Over Performing | ↓ | This data has been calculated manually. The database has been uploaded to Defra and results are awaited. Additional resources secured through pump priming monies for HIT team to target land of indeterminate ownership, has led to improvement in scores. |