



No.	Description	Data Source	Performance 2012/13	North West 2012/13	Target/Plan 2013/14	YTD Target 2013/14	YTD Performance	Forecast Outturn	Overall Status	Monthly Trend	Reporting Period	Accountable Officer	Comments
<b>Domain 3: Transformation and Resources</b>													
<b>Financial Services</b>													
CP1	Chargeable Services (% achievement versus best practice)	KPMG	TBC	N/A	Upper Middle Quartile (Feb 2014)	-	-	Upper Middle Quartile	G		Apr - Jan	V Quayle	KPMG study complete. Wirral approach is ok and improvements are being implemented where practicable. Fees and charges to be taken to Cabinet in February 2014. Reviews of charges / income to be developed in 2014/15. Funding streams have changed and more reliance placed on economic factors at local level.
CP2	Adult Care Packages supported by Direct Debit (as a %)	Accounts Receivable Ledger	NIL	N/A	30%	25%	0%	10%	R		Apr - Jan	M Flanagan	System went live in January 2014. Only existing residential care users canvassed for Direct Debit for February 2014 start. Domiciliary care service users can only be considered for inclusion during 2014/2015 in agreement with Adult Social Services agreeing billing periods.
CP3	Establishment reduction compared to savings assumption	Establishment List	N/A	N/A	100%	100%	85%	100%	A	↔	Apr - Jan	V Quayle / C Hyams	Year to date performance is 85%. A major data matching exercise has been undertaken and a number of differences and queries identified and resolved. Transformation & Resources, Regeneration & Environment and Chief Executive's office are complete. A small number of queries outstanding in these areas relate to 'normal' timing issues between datasets. Work is now commencing to resolve Families and Wellbeing queries. Human Resources and Finance colleagues are working together to resolve these. This project was dependent upon restructures being finalised. This work now falls under the Future Council project and will link to the project timetable.
CP4	Budget savings achieved (£m)	General Ledger	N/A	N/A	£48.40	£33.20	£38.36	£48.40	G	↑	Apr - Dec	V Quayle	As per Month 9 budget monitor reported to Cabinet 12th February 2014.
<b>Human Resources / Organisational Development</b>													
CP5	Agency/Consultancy costs	General Ledger	£2,000,000	N/A	£1,500,000	£1,366,667	NYA		G	↓	Apr - Jan	C Hyams	The current reduction to date on Agency Spend, compared to January 2013, is £555,655.
CP6	Sickness absence: The number of working days/shifts lost due to sickness absence (cumulative)	M44 Form	10.50days	N/A	10.50days	7.70	6.77	9.48	G	↓	Apr - Dec	C Hyams	The cumulative sickness absence (April to November) was 6.32 days, below the target of 6.82 days and an improvement on the actual for April to November 2012 which was 6.62 days.  December's provisional cumulative sickness absence rate of 6.93 days remains below the 7.70 day target and the rate for December 2012 which was 7.47 days.
<b>Business Processes</b>													
DP8	Percentage recovery of Council Tax.	Rev Ben system	96.8%	N/A	95.1%	92.0%	91.4%	95.1%	G	↓	Apr - Jan	M Flanagan	Percentage recovery equates to £123,929 collected of £135,524 payable.  Performance is 2.3% below the collection rate at January 2013, which was 93.7%, but is on track to meet the year end target.
DP9	Percentage recovery of National Non Domestic Rates (NNDR).	Rev Ben system	95.3%	N/A	95.4%	92.0%	94.2%	96.0%	G	↑	Apr - Jan	M Flanagan	Percentage recovery equates to £65,636 of £69,648 payable.  Performance is on track to reach the year-end target.

No.	Description	Data Source	Performance 2012/13	North West 2012/13	Target/Plan 2013/14	YTD Target 2013/14	YTD Performance	Forecast Outturn	Overall Status	Monthly Trend	Reporting Period	Accountable Officer	Comments
DP10	Percentage collection rate on additional debit re: impact of Council Tax Support Scheme, Discount and Exemption Changes and increased costs in respect of the additional £9m raised.	Rev Ben system	N/A	N/A	66.0%	52.00%	50.60%	63.00%	A	↑	Apr - Jan	M Flanagan	Percentage recovery equates to £1.6m of £3.1m payable. An additional £30,000 was paid in January 2014 moving this indicator from Red to Amber.  Assuming the shortage of payments is attributed to Christmas, as tends to happen with the majority of Revenue streams, the Year End collection rate is forecast at 3% below the target.
DP11	Percentage recovery of Personal Finance Unit (PFU) charges.	Oracle AR	90.0%	N/A	90.0%	88.0%	60.0%	65.0%	R	↔	Apr - Dec	M Flanagan	£5.26m raised during Q3, with a total reduction of £3,44m. New debt processes now operational. Management information in development and outcomes to be monitored. Benefits Team Leader seconded to Collection & Recovery Team as senior resource returned to Adult Social Services. Direct Debit facility now available to those in residential care, current service users canvassed. January 2014 showed improved collection rates at 67%.  Performance against this indicator is progressively improving, but is forecast to remain below target (red) for 2013/14.
DP11-1	Percentage recovery of Personal Finance Unit (PFU) charges (historic charges).	Oracle AR	90.0%	N/A	90.0%	88.0%	52.0%	65.0%	R	↑	Apr - Dec	M Flanagan	Cumulatively at Q3, £4.34m processed to date of original headline debt £6.9m. Benefits Team Leader seconded to Collection & Recovery Team as senior resource returned to Adult Social Services. Whilst close working initiated with Legal services to further refine processes for debt referral, associated Legal response currently awaited. Unit continuing to work through complex cases to resolve client capacity issues on behalf of Adult Social Services. Key is team is reliant on input of external colleagues and ongoing resource pressures suggest these delays impact on progress. Performance against this indicator is progressively improving, but is forecast to remain below target (red) for 2013/14.
DP11a	Percentage of Personal Finance Unit (PFU) assessments completed within timescale.	Civica	72.8%	N/A	80.0%	75.0%	48.0%	55.0%	R	↔	Apr - Dec	M Flanagan	The unit continues to progress with newly trained staff in place. The outstanding fairer charging assessments are significantly improved, with the average time to undertake new assessments at 70% for January 2014. In reducing older, outstanding assessments, the average time to process all assessments is inflated. This position will continue until the ratio of older assessments to new assessments is minimal. Older outstanding property cases and the assessment of new property cases require confirmation of initial Legal advice to take these cases forward.  Q4 will reflect these issues, and see performance against this indicator progressively improving, but remaining below target (red) for 2013/14.

No.	Description	Data Source	Performance 2012/13	North West 2012/13	Target/Plan 2013/14	YTD Target 2013/14	YTD Performance	Forecast Outturn	Overall Status	Monthly Trend	Reporting Period	Accountable Officer	Comments
<b>Legal and Member Services</b>													
<b>DP12</b>	Percentage of current Freedom of Information (FOI)/Information Requests (IRs) dealt with within the statutory timescale.	CRM system	67%	N/A	85%	85%	90%	86%	<b>G</b>		Jan	S Tour	The 85% return rate for the Council to respond to FOIs and IRs within the statutory timescales by September 2013, set by the Information Commissioners Office (ICO), has been exceeded, with a 10% increase in responses dealt with within the statutory timescale compared to April 2013.  January 2014: Directorate responses within the statutory timescale: Families & Wellbeing - 81% (DASS-Access and assessment responded to 4 contacts out of target in average of 38 days), Transformation & Resources - 93%, Regeneration & Environment - 97%, Chief Executive's Office / Team - 100%.
<b>DP16</b>	Average Number of days to respond to complaints recorded under the corporate process.	CRM system	12	N/A	11	11	12	11	<b>A</b>		Jan	S Tour	Performance dropped from 13 days in April and remained consistently at 9 days for May to August 2013. It rose to 15 days in November 2013 and has fallen from 13 days in December 2013 to 12 days in January 2014. It is still within publicised corporate target of 15 working days.  January 2014: Transformation & Resources took an average of 13 days to respond, an improvement of 3 days compared to December 2013. Benefits service took an average of 21 days to respond; call centre 23 days (single contact) one stop shops and libraries 25 days; revenues 31 days (single contact).
<b>Information Technology Services</b>													
<b>DP13</b>	To replace Windows XP with W7 (complete 500 machines in 2013/14)	Silver Project reports	N/A	N/A	500	20	0	0	<b>R</b>		Jan	D Curtis	Work is progressing but will not meet the 8 April 2014 deadline for Microsoft withdrawing Windows XP support. Work on the core infrastructure is progressing and due to be complete before the end of March 2014. Procuring equipment and services is challenging and is unlikely to be completed before September 2014 at the earliest, with the first batch of 250 to be rolled out during June 2014.
<b>DP14</b>	To obtain Compliance with external codes of connection including IG Toolkit: April 2014	CoCo process	GCSx accreditation	N/A	PSN plus IG Toolkit accreditation	-	-		<b>A</b>		Jan	D Curtis	The Annual PSN Accreditation was achieved in December 2013. The next PSN health check is due in June 2014, with a significant amount of work required to ensure compliance. The IG Toolkit accreditation will be subject to resourcing within Public Health, and current plans indicate September 2014 for accreditation.
<b>DP15</b>	To support the Delivery of Agile working with users: 2013/14	Asset plan	N/A	N/A	see Asset mgmt. plan	-	-		<b>A</b>		Jan	D Curtis	IT are undertaking a number of supportive initiatives, including, new PC's; increased wifi deployment; increased internet bandwidth; new security devices suitable for agile working. Awaiting organisational direction and an overall coordinated plan.



No.	Description	Data Source	Performance 2012/13	North West 2012/13	Target/Plan 2013/14	YTD Target 2013/14	YTD Performance	Forecast Outturn	Overall Status	Monthly Trend	Reporting Period	Accountable Officer	Comments
FINANCE													
F1	Revenue	General Ledger	-	N/A	£17.577m	TBD	£29.522m	£17.300m	G	↑	Apr - Dec	V Quayle	As per Month 9 monitor reported to Cabinet 12th February 2014
F2	Capital programme	General Ledger	-	N/A	£1.974m	TBD	£1.285m	£1.974m	G	↑	Apr - Dec	V Quayle	The Capital Programme has been reprofiled in December 2013. As per Month 9 budget monitor reported to Cabinet 12th February 2014.
F3	Savings	General Ledger	-	N/A	£31.2m	TBD	£23.971m	£31.2m	G	↑	Apr - Dec	V Quayle	

RISK: Remaining significant risks to achievement of non-compliant target											
	Objective	Risk Description	Risk Category	Existing Control Measures	Current Net Scores			Risk Review Frequency	Reporting Period	Accountable Officer (Head of Service)	Additional control measures planned
					Likelihood	Impact	Total				
R - DP11 DP11-1	Percentage recovery of Personal Finance Unit charges.	Team capacity and economic downturn could lead to reduced rates of collection and assessment of charges and deliver service efficiencies.	People / Operational	Workforce Plan; Regular Service and Economy reviews.	3	3	9	Y	Apr - Jul	M Flanagan	Regular report to DMT. Detailed scrutiny of performance  Additional staff resource starting in this area in early September to address this issue  Reviewing with DASS changes to processes to reduce requirement to contact post billing.
R - DP11a	Percentage of Personal Finance Unit assessments completed within timescale.	Failure to manage fluctuations in volumes and quality of work.	Financial		3	3	9		Apr - Jul	M Flanagan	

Performance is improving  
Lower is better

Performance is improving  
Higher is better

Performance is deteriorating  
Lower is better

Performance is deteriorating  
Higher is better

Performance sustained  
in line with targets set

G

Performance within tolerance for target set.

A

Performance target slightly missed (outside of tolerance).

R

Performance not on track, action plan required.

No.	Project/Activity	Delivery Date	Project Status	Reporting Period	Accountable Officer	Comments
Financial Services						
To develop a robust process for effectively dealing with, monitoring and managing our financial challenges.						
P1	Produce a 2014/15 budget and proposals for 2015/17 that are sustainable, matched to agreed need and aligned to the Council priorities.	01/03/2014	Green	Jan-14	V Quayle	Cabinet 12 February 2014 recommended 2014/15 Budget to Council on 25 February 2014. The same meetings also considered and agreed the Medium Term Financial Strategy 2014/17. Budget has to be set by 10th March 2014.
To enhance and develop our risk management process to ensure that we effectively manage risks.						
P2	Revised Corporate Risk Strategy.	Mar-14	Green	Jan-14	J Blott	The Corporate Risk Management Policy was approved by the Audit & Risk Management Committee on 28 January 2014, and is scheduled to be taken to Cabinet on 13 March 2014 for formal adoption.
Procurement						
Improving Corporate Governance by managing the Council finances, achieving long term financial stability, imbedding and promoting strong governance arrangements.						
P3	Implement no purchase order no pay policy.	31/03/2014	Amber	Jan-14	R Williams	A key element of these projects is the centralisation of the purchasing co-ordinator function and this must be in place when the No Purchase Order / No Pay scheme becomes effective.
P4	Centralisation of procurement function.	31/03/2014	Amber	Jan-14	R Williams	There have been further delays in the recruitment of the six staff required to fill these positions. Earliest start date, pending successful recruitment will be April 2014.
Internal Audit						
To ensure that risks are identified and measures put in place to mitigate these.						
P5	Deliver Strategic Internal Audit Plan.	31/03/2014	Green	Jan-14	M Niblock	79% of planned audits have been completed which is in line with expected output for this time of year, and is on target for year end completion.
Legal and Member Services						
To improve Corporate Governance and decision making arrangements through the review / revision of the Constitution						
P6	Make changes to the Constitution under delegated powers.	Sep-13	Green	Jan-14	S Tour	Head of Legal & Member Services has reviewed the Constitution. Linked to Project P7 below.
P7	Standards and Constitution Oversight Committee recommends changes/revisions to Council.	Sep-13	Green	Jan-14	S Tour	The Committee considered proposed changes to the Constitution at its meeting in November 2013 and made a recommendation to Council. Council on 16 December 2013 resolved that further information and details be provided in relation to the proposed amendments and referred the matter back to the Committee. The Committee on 6 January reviewed the proposed amendments and the further details and agreed that the proposals be circulated to all members for their comments (by way of survey). Two Surveys have been completed: (1) Amendments to the Constitution; (2) Experiences and Perceptions of the new Governance Arrangements. The results of Survey (1) have been considered and recommendations have been made to Council for approval at its meeting on 10 March 2014. Survey (2) is being considered by the Standards Working Group who will report its findings, conclusions and recommendations to the Committee on 28 April 2014.
P8	Issue Reporting writing Guidance and Timetable for report authors.	Jun-13	Amber	Jan-14	S Tour	Draft Guidance for Report has been prepared and will be considered by CESG on 18 March 2014.
P9	Provide training during session scheduled for June 2013.	Jun-13	Amber	Jan-14	S Tour	
To implement appropriate arrangements to support the delivery of Neighbourhood Working by assessing additional legal and committee support requirements and development of a protocol to support and assist the Constituency Committees.						
P10	Provide a Resource Plan outlining the additional legal and committee support required for Constituency Committees.	Sep-13	Amber	Jan-14	S Tour	Resource Plan will be prepared once the working arrangements for the Constituency Committees have been fully determined.
P11	Prepare protocol for governing the operation of Constituency Committees.	Sep-13	Green	Jan-14	S Tour	Protocol/governance framework to be prepared once the working arrangements for the Constituency Committees have been determined. Various task and finish groups have been set up by the Constituency Committees which are defining their respective working arrangements. Toolkits for Constituency Committees have been prepared and approved defining their operating arrangements.
Implement appropriate arrangements to support the Health and Well-being Board by assessing additional legal and committee support requirements to assist the Board.						
P12	Assess additional legal and committee resources required to support and assist the Health and Well-being Board.	Jun-13	Completed	Jan-14	S Tour	This project was completed in May 2013
P13	Deliver specific Political Awareness Training to transferred NHS staff.	Jun-13	Completed	Jan-14	S Tour	Individual training needs requirements were assessed with the NHS staff, and found not to be required.



**WIRRAL COUNCIL**  
**Transformation & Resources Directorate**  
**Transformation and Resources Performance, Finance & Risk Report as at 31st January 2014: Projects**



No.	Project/Activity	Delivery Date	Project Status	Reporting Period	Accountable Officer	Comments
<b>Improve the Council's Freedom of Information (FOI) responses and Data Protection Act (DPA) arrangements through the implementation and issuing of revised FOI / IR / ICO contact procedure and practice protocol to ensure that requests are handled and monitored correctly, effectively and efficiently within statutory timescales.</b>						
P14	Deliver FOI/IR/ICO contact procedure and practice protocol.	Jul-13	Completed	Jan-14	S Tour	This project was completed in May 2013
P15	Update existing monitoring and reporting arrangements.	Jun-13	Completed	Jan-14	S Tour	This project was completed in May 2013
P16	Prepare a briefing note for senior management outlining current DPA arrangements and proposed course of action.	Jun-13	Completed	Jan-14	S Tour	This project was completed in May 2013
P17	Develop and implement an action plan to improve DPA awareness understanding and information handling, including the provision of training.	Aug-13	Red	Jan-14	S Tour	The initial Action Plan was prepared and Information Governance Board (IGB) established to improve Information Governance within the Council. Initial actions were agreed in order to progress improvements in information governance and develop a more detailed action plan. The IGB has been set up and Info Gov training has been undertaken in Oct/Nov 2013. Over 400 staff attended the training sessions. An information governance checklist and guidance was sent to all departments for completion (returned mid Dec 2013). Responses have been analysed which have helped inform priorities and an action plan to improve information governance across the Council. Specialist support has been secured to ensure the Council meets the NHS Information Governance Toolkit (level 2) accreditation. The principles and approach will also be applied to the wider Council to ensure the Council's information governance arrangements are improved.
P18	Develop a DPA procedure and practice protocol.	Jul-13	Amber	Jan-14	S Tour	The Council has set up an Information Governance Board. Preliminary actions have been agreed to enable/facilitate a more detailed action plan to be prepared that will deal with DPA procedure and practice protocol, ICT security, data management and control etc. Linked to Project P17 above.
<b>Merseyside Pension Fund</b>						
<b>To provide secure pensions, effectively and efficiently administered at the lowest cost to the contributing employers through the Merseyside Pension Fund.</b>						
P19	To review and consult on the Merseyside Pension Fund's actuary and prepare the Funding Strategy Statement and Statement of Investment Principles for approval by the Pensions Committee in November.	Nov-13	Completed	Jan-14	P Wallach	The Fund worked closely with actuary and investment consultants to agree basis of data exchange which has been completed. Report was taken to the Pensions committee on 19th November 2013.
P20	To implement Local Government Pension Scheme 2014 reform.	01/04/2014	Green	Jan-14	P Wallach	Project status overall is GREEN but the direction of travel is deteriorating. Transitional Regulations released by Department for Communities & Local Government mid-March (3 months late) - has had a significant negative impact on completion of processes and calculations, and associated training material. Meeting on 19th February 2014 between Merseyside Pension Fund and Cheshire Pension Fund refocused the plan on immediate priorities. This has also significantly delayed the system update releases.
<b>Human Resources / Organisational Development</b>						
<b>To ensure that the Council has the leadership and managerial capacity in place to deliver its priorities and that the behaviour of leaders reflects the vision and values of the organisation.</b>						
P21	To design, deliver and evaluate the new Wirral Leadership Development Programme.	Feb-14	Green	Jan-14	C Hyams	Cohort 1 has been completed. Cohort 2 has commenced. Cohort 3 is due to commence in May 2014. Evaluation is underway.
P22	To roll out the new Management Development Programme to all managers across the organisation.	Sep-14	Green	Jan-14	C Hyams	The Management Development Programme was launched in September 2013. Although managers are attending the constituent workshops we are currently developing the reporting & monitoring process in order to outline who has completed which of the 16 mandatory sessions. Data will be available in March 2014.
<b>To ensure that performance appraisal is consistently applied across the whole of the Council and to improve the delivery of council services.</b>						
P23	To roll out Performance Appraisal and Development across the organisation to Senior Manager Level.	Sep-13	Completed	Jan-14	C Hyams	The Performance Appraisal training was rolled out to Senior Manager level in September 2013. 70% (73 out of 104) were completed as at November 2013. The Chief Executive's Strategic Group (CESG) have requested that a strategy and action plan for the 2014/15 roll out be presented to them for consideration on 4th February 2014.
P24	To support the completion of Key Issue Exchanges across the entire organisation.	Sep-13	Completed	Jan-14	C Hyams	Support for the completion of Key Issues Exchange (KIE) was provided, but 27% of the KIE returns across the organisation were realised. The Chief Executive's Strategic Group (CESG) have requested that a strategy and action plan for the 2014/15 roll out be presented to them for consideration on 4th February 2014.
<b>To implement Learning and Development interventions to deliver organisational and departmental improvement.</b>						
P25	To ensure that external inspections reflect that staff are receiving the required statutory learning and Development.	Apr-14	Green	Jan-14	C Hyams	There are no outstanding actions from inspections with regards to statutory learning & development.
P26	To deliver programme of support in response to Welfare Reform around Conflict & Aggressions skills training in targeted areas (Libraries, Contact Centres, front line services) to affected staff.	Apr-14	Completed	Jan-14	C Hyams	This project has been completed. Training in these areas is still available via The Skills for Wirral Programmes if required.
P27	To design, deliver & evaluate the new Wirral "Change Agent" Programme	Feb-14	Green	Jan-14	C Hyams	The 1st and 2nd Change Agent Cohorts have been completed. Evaluation for Cohort 1 is underway and Cohort 2 evaluation will be carried out with the Leadership Cohort 2 evaluation in June 2014.
P28	To deliver an Employee Engagement Survey.	Sep-13	Completed	Jan-14	C Hyams	The survey was completed in December 2013, with a 42% response rate. The results are being analysed and will be reported once this has been completed.

No.	Project/Activity	Delivery Date	Project Status	Reporting Period	Accountable Officer	Comments
To continue to implement HR/Payroll Self Serve to realise savings and implement changes required to ensure that managers are able to effectively analyse workforce data and implement changes required.						
P29	To continue to roll out the first phase (basic details) Self Serve to schools.	Dec-13	Red	Jan-14	C Hyams	Need to consider revisiting roll out of self serve to schools. Due to capacity it has not been possible to consider a further action plan, which has been scheduled for March 2014.
P30	To implement the absence and expenses modules across the Council.	Dec-13	Completed	Jan-14	C Hyams	The absence and expense modules went live and were rolled out across the Council in November 2013.
P31	To implement the timesheet module across the Council.	Dec-13	Amber	Jan-14	C Hyams	The plan has been amended to commence roll out in March 2014.
P32	To implement a Managers reporting dashboard‘ Insight’.	Dec-13	Completed	Jan-14	C Hyams	The managers reporting dashboard ‘Insight’ went live and was rolled out across the Council in November 2013.
To improve efficiency and deliver a high quality Human Resources Service for Schools through the review of Schools HR Service Level Agreement (SLA) for the provision of integrated HR/Payroll Admin.						
P33	To agree the level of Buyback and roll out of Self Service to schools.	Apr-14	Green	Jan-14	C Hyams	This is subject to schools buy-in of payroll/pensions/staffing admin service which has been extended for a further 12 months (with effect from April 2014).
To ensure the Council meets its legal requirements under the Equality Standard 2010, through recording the relevant information about our employees.						
P34	To review the Employee Equality data source and target the areas where information is currently unavailable, to ensure that equality data meets the statutory requirements under Equality Act 2012.	Dec-13	Amber	Jan-14	C Hyams	Further modules of Self Service have been implemented across the Council in Nov/Dec 2013 and this exercise has been used as a vehicle to encourage employees to enter any missing equality data to their own records. The data will be reviewed in March 2014 to decide whether a targeted approach will be required to collect missing information.
To effectively support and guide Managers in dealing with key Human Resource issues.						
P35	To review, revise, develop and approve key HR policies (Disciplinary, Capability, Redundancy & Redeployment, Restructure and Dignity at Work).	Sep-13	Amber	Jan-14	C Hyams	All preliminary work now undertaken and draft policies out for consultation. Report submitted to the Chief Executive's Strategic Group with an update in February 2014.
P35a	To implement the roll out a training and development programme on the revised key HR policies to managers.	Dec-13	Amber	Jan-14	C Hyams	A new programme will be implemented, as part of management essentials, when policies have been agreed.
A new programme will be implemented, as part of management essentials, when policies have been agreed.						
P36	To undertake consultation with the key managers and trade unions on annualised hours policy.	Sep-13	Amber	Jan-14	C Hyams	Work has been undertaken to analyse options and a progress report was submitted to the Chief Executive's Strategic Group in January 2014. This work will now be undertaken within future council project.
P37	To seek agreement from trade unions and seek appropriate approval on annualised hours policy	Oct-13	Amber	Jan-14	C Hyams	
To identify and make recommendations on potential savings that can be made in relation to staffing issues and support the implementation of any proposed budget savings relating to staff approved by the Council.						
P38	To carry out a review of Council Services in partnership with Trade Unions and APSE	Oct-13	Amber	Jan-14	C Hyams	Savings have not been identified, ongoing discussions are being held with Trade Unions & APSE.
Business Processes						
Business Processes						
P39	To merge the staffing of these areas and then review service delivery for implementation of proposals to improve sustainability of network.	Oct-13	Completed	Jan-14	M Flanagan	The staff merge has been completed. The branch network sustainability linked to officer budget options will be implemented 2014-2016
To manage our finances in respect of vulnerable people who have been assessed for payment contributions for services delivered in respect of domiciliary and non residential care.						
P40	To address the historic Personal Finance Unit charges and maximise recovery by use of all available methods	Mar-14	Amber	Jan-14	M Flanagan	Ongoing developmental work and enhancement of practices has been set-up to address issues around Personal Finance Unit charges and the maximisation of debt collection. Management information being further developed with the support of IT services. Legal processes for court action cases has been delayed and awaiting legal response. New debt process is now operational and direct debit payment facility now available to those in residential care.
To support vulnerable people who need access to the authority’s Local Welfare Assistance scheme.						
P41	To review the Local Welfare Assistance scheme and propose amendments for future year schemes.	Nov-13	Completed	Jan-14	M Flanagan	Report setting out scheme recommendations for 2014/2015 to be presented to Cabinet in March 2014. Scheme funding will end March 2015.
To promote digital Inclusion via use of self access facilities						
P42	To significantly increase the percentage of service requests available and made on-line.	Dec-13	Completed	Jan-14	M Flanagan	This project to be taken forward as part of the Future Council Project, which will be ongoing for a number of years. Progress on the ongoing development of on line forms and take up will be monitored as part of the Future Council Project

## PERFORMANCE ACTION PLAN TEMPLATE

This template is to be completed for ALL measures showing **RED** status of non-compliance against the specified target.

INDICATOR OVERVIEW	
Indicator Title	<b>% Adult Care Packages supported by Direct Debit – CP2</b>
Strategic Director Lead	<b>Joe Blott</b>
Departmental Lead	<b>Malcolm Flanagan</b>
Target	<b>30%</b>

CURRENT SITUATION: Detail what the performance is for this measure and reason/s for non-compliance		
Performance this Period	<b>0%</b>	<b>+ / - Target : -25%</b>
Non-compliance reason	System package first available January 2014 with work required to ensure operation thus DD deadline for January (28 <sup>th</sup> ) instalment could not reasonably be achieved. Limits capacity to introduce DD arrangements to February / March. Positively, following proactive canvass of existing residential users, circa 50 response / mandates received and accepted by banks for February payment collection.	

ACTIONS: This describes what's necessary or how to achieve a 'green' score. This way everyone is clear on what is required and when; knows the expected outcome and how to achieve it .	
What (is required)	Need for ongoing publicity of DD option to encourage and promote awareness and encourage take-up. Reliance on service users to elect to take-up option of making payment in this way influences out turn against PI target
How (will it be achieved)	Publicity and use when agreeing care packages with people residential cases only in agreement with DASS. Post April 2014 will look to develop for domiciliary care. From discussion with other local authorities these debts have a low take up of direct debit
Who (will be responsible)	PFU service manager and Team Leaders on a day to day operational basis. Senior Benefits manager to whom service manager reports
When (will results be realised)	Ongoing from initially targeting existing residential care users. Developing to wider client group during 2014/2015 if feasible to do so (care charge billing cycles against mandatory requirements of DD )



## PERFORMANCE ACTION PLAN TEMPLATE

This template is to be completed for ALL measures showing **RED** status of non-compliance against the specified target.

INDICATOR OVERVIEW		
Indicator Title	Percentage recovery of Personal Finance Unit charges – DP 11	
Strategic Director Lead	Joe Blott	
Departmental Lead	Malcolm Flanagan	
Target	90%	

CURRENT SITUATION: Detail what the performance is for this measure and reason/s for non-compliance		
Performance this Period	67%	+ / - Target : -21%
Non-compliance reason	Two secondees returned to DASS during January 2014 impacting on the resource available for collection and recovery work which has also limited reporting / data analysis capacity for debt recovery work	

ACTIONS: This describes what's necessary or how to achieve a 'green' score. This way everyone is clear on what is required and when; knows the expected outcome and how to achieve it .	
What (is required)	<p>Enhanced system reporting (progress made with support of IT colleagues in January) and this would be complimented by the introduction of a more appropriate debt cycle.</p> <p>Staff resources have been transferred to work on new debt, although this needs to be consistently applied by maintaining resources. Client side response needs to be timely to not to delay case action.</p> <p>Sufficient resource to balance the number of priorities remains key with current debt progress being linked to the performance of the Units financial assessment work. To assist this one senior FTE has recently been seconded to this work from Benefits with our benefit work having to be adversely affected.</p> <p>Given the inroads into the initial batch of debt, recovery work is now required on the next batch of debt again this will be a call on staffing requirements as work needs to continue on both older and newer debts simultaneously to rectify this long standing position.</p>
How (will it be achieved)	Revision of debt cycle for Personal Finance Charges debt was projected for April 2014. Sufficient staff resource is again required to be maintained to address all recovery work and to ensure personal care charging assessment work is timely and accurate. Effective legal processes are required to be maintained alongside sufficient legal resource. Timely DASS administration of electronic social care records is also a necessary requirement to achieve this.
Who (will be responsible)	PFU service manager and Team Leaders on a day to day operational basis. Senior Benefits manager to whom service manager reports
When (will results be realised)	This work will be ongoing for the rest of the financial year and see this PI stay red for that period with progressive improvement.

## PERFORMANCE ACTION PLAN TEMPLATE

This template is to be completed for ALL measures showing **RED** status of non-compliance against the specified target.

INDICATOR OVERVIEW	
Indicator Title	Percentage recovery of Personal Finance Unit charges (historic charges) DP11 / 1
Strategic Director Lead	Joe Blott
Departmental Lead	Malcolm Flanagan
Target	<b>90%</b>

CURRENT SITUATION: Detail what the performance is for this measure and reason/s for non-compliance		
Performance this Period	<b>58%</b>	+ / - Target : <b>-36%</b>
Non-compliance reason	<p>Resources seconded from DASS onto collection team returned to DASS this month significantly impacting on resource available. However, payments received during January encouraging and evident of response to collection activity by team.</p> <p>Legal input / response required following meetings to refine practice and agree scope in terms of potential for prosecution.</p> <p>Client side response outstanding in some areas, eg complaints, disputes which delay action until clarified</p>	

ACTIONS: This describes what's necessary or how to achieve a 'green' score. This way everyone is clear on what is required and when; knows the expected outcome and how to achieve it .	
What (is required)	Sufficient staff resource to be retained to complete clearance of the original £6.9m ring fenced debt and to then embark in the next oldest batch of debt. Timely Client side response to individual case matters alongside Legal responses.
How (will it be achieved)	Through the application of clearly defined processes, agreed policy and debt cycle, providing requirements detailed above are consistently met
Who (will be responsible)	PFU service manager and Team Leaders on a day to day operational basis. Senior Benefits manager to whom service manager reports
When (will results be realised)	Work will be ongoing for the rest of the financial year and see this PI stay red for that period with it progressively improving.

## PERFORMANCE ACTION PLAN TEMPLATE

This template is to be completed for ALL measures showing **RED** status of non-compliance against the specified target.

INDICATOR OVERVIEW	
Indicator Title	<b>Percentage of Personal Finance Unit assessments completed within timescale - DP11a</b>
Strategic Director Lead	<b>Joe Blott</b>
Departmental Lead	<b>Malcolm Flanagan</b>
Target	<b>80%</b>

CURRENT SITUATION: Detail what the performance is for this measure and reason/s for non-compliance		
Performance this Period	<b>70%</b>	<b>+ / - Target : -5%</b>
Non-compliance reason	Achievement is based on completion of financial assessment. The unit continues to work through remaining older, outstanding assessments as final residual, fairer charging and assessment backlogs cleared. Progress with remaining outstanding (newer) property assessment cases on hold pending Legal response. Overall times to process these cases will as a result negatively impact on PI, although the ratio of new to older assessments is clearly reversed and helps negate overall impact to some extent. Positively and almost without exception, newly referred assessments continue to be dealt with by our staff in a timely manner.	

ACTIONS: This describes what's necessary or how to achieve a 'green' score. This way everyone is clear on what is required and when; knows the expected outcome and how to achieve it .	
What (is required)	Newer staff continue to gain experience. Sufficient resource required to be retained and there will be impacts in Q4 by the loss in March of one senior manager to DASS. Full compliance by DASS is required in responding to all information requests. Annual review will additionally impact on progress at this time. Future risk is operational and resource impacts as a result of major IT software change scheduled.
How (will it be achieved)	Continue to clear backlog of work and ongoing timely response of other service areas , as required , Legal services and client side
Who (will be responsible)	PFU service manager and Team Leaders on a day to day operational basis. Senior Benefits manager to whom service manager reports
When (will results be realised)	Q4 will reflect the balance of clearing aged assessments and improved times of new case assessments undertaken by PFU staff following procedures designed and implemented using key experience in this type of work. These issues will see this PI stay red for the rest of the financial year with it progressively improving

## PERFORMANCE ACTION PLAN TEMPLATE

This template is to be completed for ALL measures showing **RED** status of non-compliance against the specified target.

INDICATOR OVERVIEW	
Indicator Title	DP13 Replace Windows XP with Windows 7
Strategic Director Lead	Joe Blott
Departmental Lead	Steve Sankey
Target	500 PC's in 2013/14 (revised to 250 PC's rolled out - June 2014 Remaining PC's rolled out November 2014)

CURRENT SITUATION: Detail what the performance is for this measure and reason/s for non-compliance		
Performance this Period	<ol style="list-style-type: none"> <li>1. Progressing with infrastructure upgrade</li> <li>2. Progressing procurement of equipment &amp; services.</li> </ol>	+ / - Target : On schedule, based on revised plans
Non-compliance reason	Will not achieve rollout before Microsoft ceases support for XP, Office 2003, and Outlook 2003 in April.	

ACTIONS: This describes what's necessary or how to achieve a 'green' score. This way everyone is clear on what is required and when; knows the expected outcome and how to achieve it .	
What (is required)	<ol style="list-style-type: none"> <li>1. Ensure infrastructure is upgraded</li> <li>2. New equipment purchased</li> <li>3. New Software purchased</li> <li>4. Deployment company engaged</li> <li>5. Systems packaged up for deployment</li> <li>6. Rollout new equipment and software</li> <li>7. Remedial work for non-compliant old systems</li> </ol>
How (will it be achieved)	<ol style="list-style-type: none"> <li>1. Work continuing on upgrading infrastructure</li> <li>2. Work with procurement to enable new equipment and software to be purchased</li> <li>3. Work to agree scope and cost for deployment</li> <li>4. packaging up applications to meet needs of key groups of staff</li> <li>5. Engage external company to rollout new equipment</li> <li>6. Undertake remedial work for non Windows 7 compatible systems</li> </ol>
Who (will be responsible)	Project team led by Steve Sankey
When (will results be realised)	Subject to procuring the equipment and the services of an external company, the first 250 PC's will be rolled out by June, with the remaining by October/November (except for any that have non-compliance issues)