



TRAFFORD COUNCIL

**ANNUAL DELIVERY PLAN 2014/15
Quarter 4
Performance Report
(Draft)**

1. Purpose and scope of the report

The report provides a summary of performance against the Council's Annual Delivery Plan (ADP) 2014/15 and supporting management information for the period up to the 31st March 2015.

This covers the Council's six Corporate Priorities

- Low Council Tax and Value For Money
- Economic Growth and Development
- Safe Place to Live – Fighting Crime
- Services Focused on the Most Vulnerable People
- Excellence in Education
- Reshaping Trafford Council

Quarterly data and direction of travel is provided, where data is available.

All measures have a Red/Amber/Green assessment of current performance. This is based on actual data or a management assessment of expected Quarter 4 performance.

For Corporate Priority indicators, where actual or expected performance is red (more than 10%) or Amber (within 10% below the expected level of performance) an Exception Report is included in the commentary.

2. Performance Key

G Performance meets or exceeds the target	↑	Performance has improved compared with the previous period
A Performance is within 10% of the target	↔	Performance is the same compared with the previous period
R Performance is more than 10% below the target	↓	Performance has worsened compared with the previous period

Where data is shaded, this indicates an estimated result and an assessment of performance by the Strategic Lead.



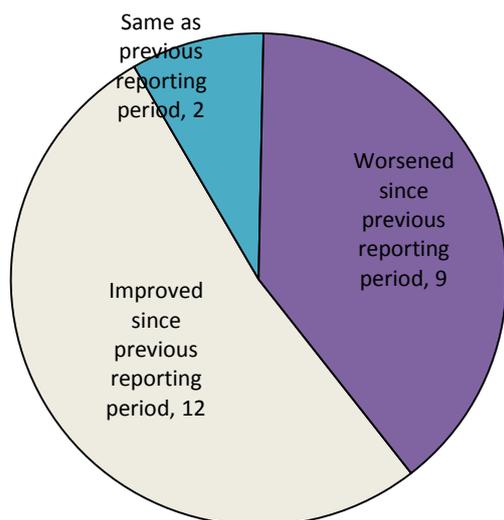
3. Performance Results

3.1 Performance Summary

Performance Indicator RAG Status by Corporate Priority



Direction of Travel of all Performance Indicators

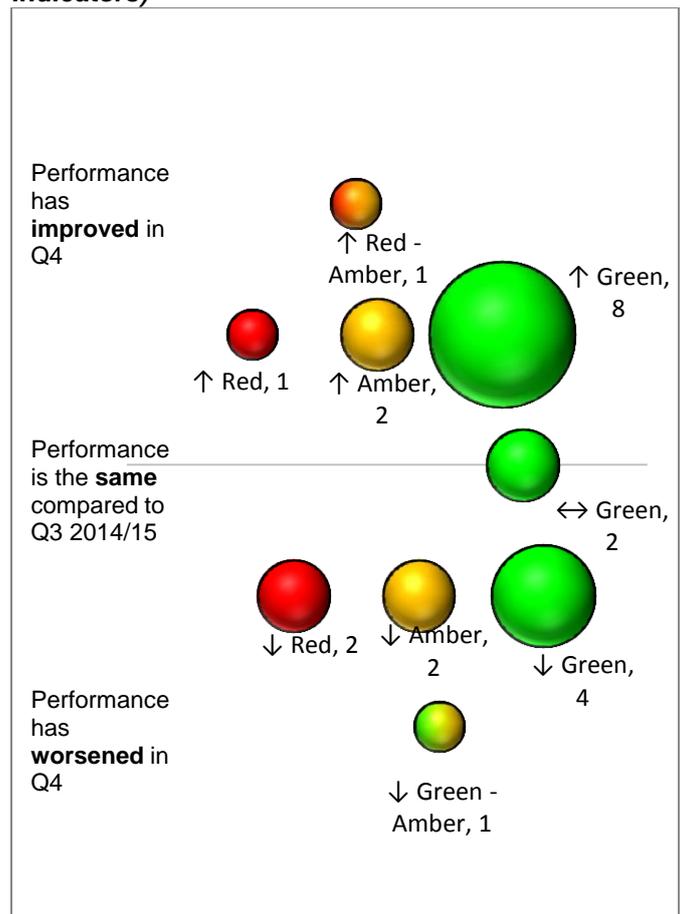


The ADP has 24 indicators. All of these have been reported in Q4/Year end. Only 23 can be included in reports above as 1 indicator's Out-turn is October.

There are 14 Green indicators, 12 indicators have improved since previous quarter with 2 staying the same and 9 that have worsened.

9 indicators are outside target (6 amber and 3 red).

Direction of Travel and RAG status (Position in relation to central line indicates direction of travel in Q4; size of bubble represents the number of indicators)



3.2 Performance Exceptions

The following indicators have a RED performance status at year-end				Exception Report (Page)
Corporate Priority	REF	DEFINITION	DOT Q4	
Low council tax and value for money	BV12i	Reduce the level of sickness absence (Council wide excluding schools)	↓	6
Economic Growth and development	NI 154	The number of housing completions per year	↑	10
SAFE PLACE TO LIVE	STP3	Reduce Total Recorded Crime	↑	14

The following indicators have an AMBER performance status at year-end				Exception Report (Page)
Corporate Priority	REF	DEFINITION	DOT Q4	
Services focused on the most vulnerable people	New	Overall Breastfeeding rate	↓	22
Economic growth and development	New	The percentage of relevant land and highways assessed as Grade B or above (predominantly free of litter and detritus).	↑	12
Excellence in Education	New	% of pupils on Free School Meals achieving 5 A*-C GSCE including English and Maths	↓	25
Services focused on the most vulnerable people	New	Increase the percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the financial year	↓	17
	CIC	Children in Care Long Term Stability	↑	20

LOW COUNCIL TAX AND VALUE FOR MONEY

Ensure that the Council can demonstrate that it provides efficient, effective and economical, value for money services to the people of Trafford.

For 2014/15 we will:

Make effective use of resources

- Ensure delivery of £13.659m savings as set out in the medium term financial plan
- Continue to collaborate on efficiency projects with other local authorities
- Continue to support the AGMA Procurement Hub
- Continue to work effectively with partners to improve service quality and value for money
- Minimise increases in the Waste Disposal Levy through increased waste recycling and reuse of materials.
- Identify savings to meet the 2015/16 budget gap, seeking to minimise impact on front line services

Deliver the Council's Transformation Programme

- Complete and deliver a portfolio of Transformation Projects delivering identified benefits including financial savings
- Introduce new ways of working, putting customers at the heart of what we do and understanding what we need to do
- Structuring ourselves more effectively and working with partners to achieve excellent value for money services
- Develop the capacity and skills of managers and staff.
- Deliver a balanced budget in line with statutory responsibilities and Council priorities

Key Policy or Delivery Programmes 2014/15

- Medium term Financial Plan
- GM Municipal Waste Management Strategy

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15 Q3	2014/15 Q4			
						Actual	Target	DOT	Status
CAG 08	Improve the % of household waste arisings which have been sent by the Council for recycling/ composting	M	58.32% G	60%	63.17% (Est) G	61.9%	60%	↓	G
We have seen a decrease over Q4 due to seasonal influences. We always take less green waste over the winter months which affects our overall recycling rate. However as expected we will still achieve over 60% recycling rate for the year. Note - the figures for Q4 are only estimates at this moment in time so this could fluctuate either way.									
	Delivery of efficiency and other savings	Q	£18.5m G	£13.8m	£12.8m	£12.6m	£13.8m	↓	A
See financial monitoring report									
BV 12i	Reduce the level of sickness absence (Council wide excluding schools)	M	10.26 days R	9 days	10.3 days R	10.77 days R	9 days	↓	R
See exception report below									
BV9	Percentage of Council Tax collected	M	97.74% G	97.6%	86.4% G	97.84%	97.6%	↑	G

Theme / Priority:	Low council tax and value for money – Exception report(s)		
Indicator / Measure:	BV 12i		
Indicator / Measure detail:	Reduce the level of sickness absence (Council wide excluding schools)		
Baseline:	Number of Days		
Target and timescale:	9 Days Q4 14/15	Actual and timescale:	10.77 days Q4 14/15
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>At the end of Q4 14/15, absence levels were at an average of 10.77 days per employee. This represents an increase of 0.47 days per employee since the end of Q3. In terms of trends, absence levels are typically lower in Q1 and Q2 and we typically see an increase in absence levels in Q3 and Q4; this is primarily due to the time of year and there being a general increase in illnesses such as coughs and colds, which represent the second to top reason for absence during 2014/15. This typical absence pattern is also reflected in the figures for the previous year, 2013/14.</p> <p>Whilst this pattern of absence has followed the general annual trend, it should be noted that for Q4 14/15, we have seen a decrease in the number of long term absence cases; these have decreased from 105 as at Q4 13/14 to 74 as at Q4 14/15. This may be linked to the Council's revised Sick Pay Scheme, which has reduced sickness benefits down from 6 months' full pay/6 months' half pay to a maximum of 3 months' full pay/3 months' half pay.</p> <p>The increase in absence levels is therefore attributable to an increase in short term sickness cases, which may have been impacted by the significant level of change across the organisation in 2014/15.</p> <p>As this change begins to embed across the Council, it is anticipated that levels of sickness absence will start to improve and that we will be able to work towards achieving our annual target of 9 days absence per employee.</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>If sickness absence levels are high, then this has a significant impact on service delivery and costs at a time when the Council has to manage with limited resources. High absence levels also carry the indirect cost of increased workload pressure on colleagues of absent staff.</p>			
How can we make sure things get better?			
<ul style="list-style-type: none"> • What activities have been or will be put in place to address underperformance? Make specific reference to action plans. • When performance will be brought back on track? • Assess the need for additional resources/funding/training/investment. 			

- Identify the source of additional resources/funding/training/investment.
- Consult with other services, staff, managers, relevant Members and partners.

An analysis of the absence data indicates that short term absences continue to be the main cause for concern although there remain a number of long term absences, which are being actively managed within services and with the support of HR and Health Management.

During 2014, the HR Service delivered over 20 management briefings to support managers to improve the attendance of their staff and these continue to be delivered on a targeted basis, as required. HR Business Partners also continue to work with managers to identify strategies for hot spot areas.

In addition, an HR dashboard of key HR information is now shared with senior management on a regular basis. This dashboard provides details such as the top reasons for absence across the organisation and will further assist managers to develop high level strategies for addressing the types of absence that are prevalent in some service areas.

As referred to earlier, the significant change that has taken place across the organisation may have had an impact on absence levels; in this respect, a Change Management Strategy is in place to provide a wide range of support for staff, this includes regular communications, training and development, access to Health Management and the BDMA Counselling Service as well as access to regular health and wellbeing events and employment support through the Council's links with Job Centre Plus and Penna..

ECONOMIC GROWTH AND DEVELOPMENT

To promote economic growth and increase levels of investment, housing and jobs in Trafford; to improve the local environment and infrastructure thereby enhancing the attractiveness of the borough as a place to live, work and invest in.

For 2014/15 we will:

- Deliver strategic development projects and maximise investment in the Borough, e.g. in Town Centres, Old Trafford, Trafford Park and Carrington.
- Deliver investment and growth through effective planning processes and frameworks.
- Invest in the highway infrastructure, and improve sustainable travel choices to access jobs, services and facilities within and between communities.
- Support business growth, inward investment and opportunities in the borough.
- Encourage and support businesses, communities and individuals to take more ownership and responsibility for where they live and work.
- Maximise the use of the Council's portfolio of assets to help support the delivery of council objectives.
- Develop housing and economic growth and grow opportunities for the residents of Trafford.
- Maintain and improve the environment around our public spaces, highways and neighbourhoods.
- Implement the Trafford Council Sport and Leisure Strategy 2013-17 to improve the quality of life for Trafford residents through increased participation and access to sport, leisure and physical activity.

Key Policy or Delivery Programmes 2014/15

- Master Plans for: Old Trafford, Trafford Park, Stretford (and Altrincham Strategy)
- Trafford Local Plan: Land Allocations
- Community Infrastructure Levy
- Flood Risk Management Strategy (in partnership with Manchester + Salford)
- Housing Growth and Prevention of Homelessness strategies
- Land Sales Programme
- Transport Asset Management Plan
- Highway Maintenance Capital Programme;
- Trafford Council Sport and Leisure Strategy 2013-17

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15 Q3	2014/15 Q4			
						Actual	Target	DOT	Status
EG2	Percentage of ground floor vacant units in town centres	Q	19% A	17.3%	15% G	15.9%	17.7%	↑	G
NI 154	The number of housing completions per year	Q	246 R	300	186 R	245	300	↑	R
See exception report below									
New (EG 4.1)	Percentage of Trafford Residents in Employment	Q	72.9%	73.9%	74% G (Q1)	73.9%	73.7%	↓	G
New (EG 8)	Total Gross Value Added (The total value of goods + services produced in the area)	Q	£5.87 billion	£6.04 billion	N/A	£6.6 Billion	£6.04 Billion	↑	G
BRP 02	Deliver the published 2013/14 Highway Maintenance Capital Programme	M	100% G	100%	28% G	100%	100%	↔	G

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15 Q3	2014/15 Q4			
						Actual	Target	DOT	Status
New	The percentage of relevant land and highways assessed as Grade B or above (predominantly free of litter and detritus).	Q	New	80%	77.8% G	78.80%	80%	↑	A
See exception report below									

Theme / Priority:	ECONOMIC GROWTH AND DEVELOPMENT – EXCEPTION REPORT(S)														
Indicator / Measure:	NI 154														
Indicator / Measure detail:	The number of housing completions per year														
Baseline:															
Target and timescale:	300 Q4 14/15	Actual and timescale:	245 Q4 14/15												
Why is performance at the current level?															
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 															
<p>Compared against previous levels of annual completions, the target for 2014/15 was set at a very challenging 300 completions for the year. 44 homes were completed in the first quarter and 17 homes in the second quarter. This is less than half the expected level of completions for this six month period (150). However the statistics below indicate that the development rate increased significantly in the second half of the 12 month period with 184 units being completed during that time, more than 20% greater than the target of 150 units.</p>															
<table border="1"> <thead> <tr> <th>Quarter</th> <th>Number of housing completions</th> </tr> </thead> <tbody> <tr> <td>Q1</td> <td>44</td> </tr> <tr> <td>Q2</td> <td>17</td> </tr> <tr> <td>Q3</td> <td>125</td> </tr> <tr> <td>Q4</td> <td>59</td> </tr> <tr> <td>Total build</td> <td>245</td> </tr> </tbody> </table>				Quarter	Number of housing completions	Q1	44	Q2	17	Q3	125	Q4	59	Total build	245
Quarter	Number of housing completions														
Q1	44														
Q2	17														
Q3	125														
Q4	59														
Total build	245														
<p>These statistics reflect the trends in the national financial and economic climate which continued to adversely affect progress in terms of the rates of residential development over the first quarter of the accounting period, but which began to experience an upturn in the latter months. However, although completions increased over the last six months as a whole and, anecdotally, there has been an increase in developer interest for new residential schemes, the downturn in the last quarter emphasises the potentially fragile nature of the extent of the improvement in performance. It is considered that this picture will continue until the national climate for house building improves and has become more stable.</p>															
What difference does this make – the implications of not meeting target?															
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency • Can we move resources to support this or other priorities? 															
<p>The main implication of not meeting this target is the impact on our ability to meet relevant corporate priorities and plans, especially in relation to creating housing stock required to meet local housing needs. It also impacts on the Council's regeneration aspiration, continuing inequality in access to new housing and providing new growth in sustainable locations.</p>															
<p>Low delivery of housing also impacts on the receipt of New Homes Bonus and new Council Tax.</p>															
How can we make sure things get better?															
<ul style="list-style-type: none"> • What activities have been or will be put in place to address underperformance? Make specific reference to action plans. 															

- When performance will be brought back on track?
- Assess the need for additional resources/funding/training/investment.
- Identify the source of additional resources/funding/training/investment.
- Consult with other services, staff, managers, relevant Members and partners.

There is on-going work to stimulate growth in the local residential market, for example work is underway with Trafford Housing Trust on various sites, HIMOR re: Carrington and also Peel re: various sites in north of the borough in both Trafford Park and the Regional Centre to promote housing growth in the local market. Additionally partnership work is being established across Greater Manchester with the Homes and Communities Agency to establish ways to accelerate rates of development.

We continue to improve our data collection methods to ensure that we capture all housing activity, especially completions, in the borough. This has been aided by the introduction of our new back office software IDOX in December, which has improved the speed and accuracy of our reporting mechanisms and for which the monitoring module is currently being developed.

In addition to our own Building Control officers supplying completion notices, (when the developer has met all necessary standards), there are private sector organisations employing 'Approved Inspectors' – who can also supply completion notices. We are working with the regulatory body governing Approved Inspectors to ensure they meet their statutory requirement to supply copies of all completion notices to the local authority. This will ensure that we continue to capture all completions within the borough.

To supplement this information, site surveys are being undertaken in order to ensure the Council has a comprehensive understanding of the current housing situation in terms of what is in the pipeline (with planning permission) and what developments have been completed.

Theme / Priority:	ECONOMIC GROWTH AND DEVELOPMENT –EXCEPTION REPORT(S)		
Indicator / Measure:			
Indicator / Measure detail:	The percentage of relevant land and highways assessed as Grade B or above (predominantly free of litter and detritus).		
Baseline:	NEW		
Target and timescale:	80% Q4 14/15	Actual and timescale:	78.8% Q4 14/15
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
A few of the inspection scores for January and February were affected by some remaining leaf fall. This is a seasonal issue and will not affect performance in the immediate future			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency Can we move resources to support this or other priorities?			
The target was missed by just 1.2%. Overall, the standard was acceptable but just some isolated areas required attention.			
How can we make sure things get better?			
<ul style="list-style-type: none"> • What activities have been or will be put in place to address underperformance? Make specific reference to action plans. • When performance will be brought back on track? • Assess the need for additional resources/funding/training/investment. • Identify the source of additional resources/funding/training/investment. • Consult with other services, staff, managers, relevant Members and partners. 			
The areas highlighted in the report that did not meet standards were addressed almost immediately.			

SAFE PLACE TO LIVE – FIGHTING CRIME

Aim to be the safest place in Greater Manchester, and to have the highest level of public confidence and satisfaction in the action we take to tackle Crime and Anti-Social Behaviour.

For 2014/15 we will:

- Address the underlying causes of crime and anti-social behaviour by working with partners to support and intervene at individual, family and community level, targeting resources where they are most needed
- Develop a collaborative and risk led approach to tackling Anti-Social Behaviour
- Take early action and work directly with local communities to prevent crime, including the use of the Consumer Alert System.
- Develop and deliver innovative and effective interventions to address the behaviour of those involved in crime
- Deliver responsive and visible justice by undertaking robust enforcement action and turning the tables on offenders to make sure they are held accountable for their actions, and that criminal assets are recovered
- Continue to monitor public spaces CCTV cameras to improve the safety of residents by directing Police resources on the ground to incidents and also to provide recorded evidence which supports convictions

Key Policy or Delivery Programmes 2014/15

- Crime Strategy 2012-15

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15 Q3	2014/15 Q4			
						Actual	Target	DOT	Status
STP 1	Maintain the position of Trafford compared to other GM areas in terms of Total Crime Rate.	Q	1 st G	1 st	1 st G	1 st	1 st	↔	G
STP 3	Reduce total recorded crime	M	10,927 G	10,927	6,090 R	12,383	10,927	↓	R
Awaiting Exception Report									
STP 13	Reduce anti-social behaviour incidents	M	7,077 R	7,077	3,756 G	6934	7,077	↑	G

Theme / Priority:	SAFE PLACE TO LIVE – FIGHTING CRIME		
Indicator / Measure:			
Indicator / Measure detail:	STP3: Reduce Total Recorded Crime		
Baseline:			
Target and timescale:	10,927 14/15 Year End	Actual and timescale:	12,383 14/15 Year End
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>Crime rates have been monitored at quarterly Safer Trafford Board meetings throughout the year and the rise in overall crime has been discussed with police and partners. Crime has fallen year on year for a number of years until it has reached levels where on-going reductions may not be realistic. The rise in overall crime is comparable with all other Boroughs in GM although some have had a slower rise due to innovative pilots around domestic abuse (due to be rolled out GM-wide). Trafford remains the safest borough in GM. The rise in crime is a national trend, partly due to a further change in crime recording standards: whereas the police used to investigate to verify an allegation of crime before recording it, now all reports are recorded to investigate. A reduction in police officer numbers means that resources are directed more towards protecting vulnerable people and investigating crimes related to vulnerability such as CSE, sexual offences and domestic abuse which are often more time consuming and resource intensive. There has been a rise in reports of domestic abuse and of hate crime. Both indicate increased confidence of victims in services and the success of Third Party Reporting Centres. Domestic Abuse rates are a concern and will be subject of further work to reduce the number of repeat victims this year.</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>Confidence in police and Council services in dealing with crime and anti-social behaviour has not been adversely affected, remaining the same as the previous year and even in Altrincham where it has been traditionally lower than other areas of the borough, concerted partnership efforts through the Town Centre Action Plan have resulted in a 50% rise in positive perception in the second half of the year. There remains more to be done, however, in increasing confidence in all our town centres. Overall only 1% of people believe antisocial behaviour is high in Trafford and 93% of people feel safe outside after dark.</p>			
How can we make sure things get better?			
<ul style="list-style-type: none"> • What activities have been or will be put in place to address underperformance? Make specific reference to action plans. • When performance will be brought back on track? • Assess the need for additional resources/funding/training/investment. • Identify the source of additional resources/funding/training/investment. • Consult with other services, staff, managers, relevant Members and partners. 			
<p>Altrincham has a town centre task and finish group to address perceptions of how services address crime and ASB and fear of crime, through partnership activity such as licensing visits, Operation Assure at the Interchange and targeted intervention and enforcement with persistent perpetrators of anti-social behaviour. The shift in focus and reduction in resources in GMP has led us to adjust our STP targets for 2015-16. We wish to manage crime in terms of maintaining Trafford as the safest borough but recognise that aiming to reduce overall crime levels is no longer realistic in the current climate. It is more important to focus on protecting vulnerable residents and reducing the risk of them becoming victims or offenders in the first place and of becoming repeat ones. We also want to invest in initiatives which reduce demand on public services and increase community resilience and active participation by residents in co-producing solutions for crime prevention and community safety.</p>			

A good example of reducing demand has been a pilot to place a trained mental health nurse in the police station to triage and work with the most frequent callers to the police assessed to have mental health needs. The initiative has seen a reduction in demand to agency services of: 15% calls to Police, 20% in 999 calls to NWAS, 42% reduction in attendances at a hospital emergency department, 58% reduction in hospital in-patient admissions. As a consequence the CCG have committed on-going funding for 2015-16.

Moving forward a similar initiative will be aimed at the top 40 repeat victims in Trafford (our Super-Victims) working with CRC to take a holistic approach to addressing their individual and often complex needs. The Safer Trafford Partnership will be investing in new operating models for Domestic Abuse to reduce repeat calls by standard risk victims and by working with perpetrators on a voluntary basis who are not subject to statutory orders of the court. We will extend our provision for vulnerable young people at risk of sexual exploitation.

At the same time we will closely monitor public confidence levels and act if they drop or fail to improve in our town centres. Despite the shift in focus to vulnerability, we will continue to monitor all crime types so that any particular spikes of type or in hotspot locations can be identified quickly and addressed using a joint problem solving approach which will involve members of the community and the VCS as well as public services.

SERVICES FOCUSED ON THE MOST VULNERABLE PEOPLE

Enable people to have more choice and control over the support they receive. We also want to provide quality services that encourage people to lead healthy, independent lives and support children and young people to be safe and to aspire and succeed.

For 2014/15 we will:

Personalisation

- Enable people to have more choice, control and flexibility in meeting their needs
- Embed personal budgets and choices for children with complex and additional needs

Health improvement

- Work with the CCG and local health providers to deliver integrated commissioning and delivery of health and social care for Trafford
- Develop the Trafford wellbeing hub to reduce health inequalities and support efficient and effective access to health and social care
- Reduce alcohol and substance misuse and alcohol related harm
- Support people with long term health, mental health and disability needs to live healthier lives

Promoting resilience and independence

- Ensure that people in Trafford are able to live as independently as possible, for as long as possible
- Prepare for the implementation of the Care Bill
- Support communities to promote their health and wellbeing by fostering enhanced social networks of mutual support.

Safeguarding vulnerable adults and children and young people

- Ensure that vulnerable children, young people and adults at risk of abuse are safeguarded through robust delivery and monitoring of commissioned and Local Authority delivered services
- Continue to focus on improving the quality of early help and social work practice, taking into account new legislation and government guidance
- Be an active partner in the leadership and development of both the TSCB and Adult Safeguarding Board and ensure coordinated working across both Boards.

Market management and quality assurance

- Stimulate the market in Trafford ensuring there is a diverse choice of quality services that meet individuals' needs including access to information and advice.

Improve the health and wellbeing of the most vulnerable children and young people in the borough

- To ensure the call for action for health visiting is achieved and the recommendations from the school nursing review are implemented.
- Continue to focus on reducing childhood obesity
- Produce an emotional health and wellbeing strategy to improve children and young people's mental health

Close the gap for vulnerable children, families and communities

- Continue to improve outcomes for children in care
- Improve support for families facing difficult times, including joint agency working
- Embed the Early Help strategy to ensure all families and children get the help they need when they need it

Key Policy or Delivery Programmes 2014/15

- Stronger Families programme
- Health and Wellbeing Strategy
- Welfare Reform delivery programme
- Care Bill implementation programme
- Better Care Fund programme
- Early Intervention and Wellbeing Hub programme (New Organisational Model)

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15 Q3	2014/15 Q4			
						Actual	Target	DOT	Status
...	Number of people in receipt of Telecare in year	M	2395 G	2400	2,353 G	2511	2400	↑	G
ASC OF 2Aii	Permanent admissions of older people to Residential / Nursing care	M	262	260	142 (Nov) G	203	260	↓	G
New	Increase the percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the financial year	Q	47.8%	50%	41.96% R	47.8%	50%	↑	A
See Exception report below									
New	Overall Breastfeeding rate	Q	54.37%	55.5%	54.1% A	53.96%	55.2%	↓	A
See Exception report below.									
CIC	Children in Care Long Term Stability	Q	80.2% G	82%	77.3% A	77.9%	81.5%	↑	A
See Exception report below									

Theme / Priority:	Services for the most vulnerable people – Exception report(s)		
Indicator / Measure:	NHS Health Check uptake		
Indicator / Measure detail:	Increase the percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the financial year		
Baseline:	47.6%, March 2014		
Target and timescale:	50% at March 2015	Actual and timescale:	45.81% year-to-date at Q4, 2014/15 (including pharmacies)
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>The proportion of those offered a NHS Health Check that went on to actually receive one is at 45.81 % year-to-date. Achievement in Q4, at 52.47%, was higher than the 46.5% in Q3. This was much improved compared to previous quarters and is mainly due to the Pharmacy Pilot.</p>			
<u>Action to increase uptake further in 2015/16:</u>			
<ul style="list-style-type: none"> • One large practice in Urmston does not undertake NHS Health Checks. A pilot programme offering NHS Health Checks in pharmacy is running for 12 months from January 2015 to January 2016. • A one year pilot project offering people who have previously not responded to invitations from primary care to have their NHS Health Check in one of three Tesco Pharmacies should begin in 2015/2016. The Tesco Pharmacy Health Checks will be offered at three Trafford stores, with evening and weekend opening times and they will provide increased flexibility to patients unable or unwilling to attend their GP practice. Thirteen practices have consented to allow their patients to be invited to a Tesco Pharmacy for their NHS Health Check. This extra offer for non-responders should increase the uptake rate. • We need to publicise the NHS Health Checks programme to patients so that when they receive their letter they will be aware of what the programme is and the importance of attending. Posters using Public Health England templates have been printed and are currently being distributed to community venues. • Trafford Council and the CCG have jointly commissioned the Voice of BME-Trafford for 2015/2016, to support a 5% improvement of screening uptake across the North Locality. The project, Saving Lives, will focus on cervical, breast, and bowel screening and NHS Health Checks uptake. 			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			

By not delivering more health checks, less of the population can be informed of their cardiovascular risk and take action to reduce their risk of cardiovascular disease and other diseases which cause premature death in Trafford.

The NHS Health checks programme is a mandatory service for local authorities.

By picking up risk factors and disease earlier, both the NHS and social care can save resources downstream. Also this can reduce premature mortality and a healthier working age population which in turn supports the local economy.

It is particularly important to deliver the NHS Health Check programme in areas of social deprivation where the risk factors for and the prevalence of disease is likely to be higher.

How can we make sure things get better?

- What activities have been or will be put in place to address underperformance? Make specific reference to action plans.
- When performance will be brought back on track?
- Assess the need for additional resources/funding/training/investment.
- Identify the source of additional resources/funding/training/investment.
- Consult with other services, staff, managers, relevant Members and partners.

Other areas that are achieving more than 50% uptake rates have dedicated staff to work with primary care and the community to promote NHS Health Checks and encourage attendance. The two pharmacy pilot programmes will involve a substantial amount of work to support these new providers, promote the new services to the public and adequately monitor performance and evaluate the pilot.

Theme / Priority:	<u>Services for the most vulnerable people – Exception report(s)</u>		
Indicator / Measure:	Long Term Placement Stability		
Indicator / Measure detail:	Placement stability: proportion of children under 16 & in care for 30 months or more who have been in the same placement for at least 24 months.		
Baseline:	80.2%		
Target and timescale:	82% at March 15	Actual and timescale:	77.9% at Q4 (Mar) 2014/15
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>Performance in this area continues to very positive and is above the national average which is 67% and that that of our statistical neighbour at 63%</p> <p>The variance relates to a small number of children who have changed placement. These placement changes may have been appropriate and in keeping with the individual care plans of the child .A review of the individual cases will be completed to identify the reasons for the placement changes and there may be some lessons learnt from this review.</p> <p>It is predicted that performance is likely to remain around the 77%to 80% figure for future periods. The figure is likely to continue to be negatively affected by the continuing predicted increase in the overall LAC population.</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>The outturn for this indicator continues to be very positive when compared to statistical neighbours. The provision of stable long-term placements is central to the individual success of children in care and is a key priority of Trafford’s Placement strategy.</p> <p>Progress against this indicator is monitored at both the Corporate Parenting Board and at the Monthly Directors Safeguarding meeting. The provision of long term stable placements to children in care is a priority which is shared by the whole Council.</p>			

How can we make sure things get better?

- What activities have been or will be put in place to address underperformance? Make specific reference to action plans.
- When performance will be brought back on track?
- Assess the need for additional resources/funding/training/investment.
- Identify the source of additional resources/funding/training/investment.
- Consult with other services, staff, managers, relevant Members and partners.

Trafford's placement strategy is continuing to be implemented.

A key area of placement development activity is the recruitment of more foster carers for both older children and sibling groups. A targeted foster care recruitment campaign is scheduled to be launched on the 23rd May and it is hoped that this will enhance Trafford's capacity to provide long term stable foster placements to this cohort of children.

Theme / Priority:	Services for the most vulnerable people – Exception report(s)		
Indicator / Measure:	Overall Breastfeeding rate		
Indicator / Measure detail:	Proportion of babies being breastfed at time of 6-8 week check		
Baseline:	54.5% at March 2014		
Target and timescale:	55.5% at March 15	Actual and timescale:	53.57% for Q4 (March) 2014/15 53.96% for 2014/15 overall
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>The target for 2014/15 was 55.5% breastfeeding at 6/8 weeks. The actual performance was 53.96% (53.57% for quarter 4).</p> <p>This measure can be very volatile, as evidenced by the 60.1% seen in October followed by 49.5% in November. That said, compared to the latest information we have from England and Greater Manchester, 54% breastfeeding at 6/8 weeks is a very high rate. The national rate was 47.2% in 2012/13 and in that year (with a reported rate of 51%) we were the only North West area with rates which were significantly better than the England rate. We do not have any more recent figures for England due to issues nationally in the reporting systems.</p> <p>In light of this, the target for Trafford is very challenging. It is important to note that we have initiation rates which are similar to the England average, and again we are the only North West area to have this. As we are better than the England average at 6/8 weeks, we are more effective than the average in supporting women to continue to breastfeed.</p> <p>In 2014/15 there were changes in provision which have resulted from funding issues. The post of breastfeeding support worker which had been in place for a year was disestablished. This post had resulted in an increase in breastfeeding in key areas, in particular Partington. Since this work has ceased we have seen a return to the earlier, low rate for this area.</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>The actual figures for this indicator show that the impact for service users and the public is fairly low due to the small variation from the target.</p> <p>The priority locally is to improve breastfeeding rates in order to give every child the best start in life, and to tackle inequalities. Breastfeeding has a major role promoting public health and reducing health inequalities with clear short term and long term benefits for both mother and child. Breastfeeding provides complete nutrition for the development of healthy infants but babies who are not breastfed are more likely to acquire infections such as gastroenteritis and lower respiratory</p>			

tract infections in their first year and more likely to become obese in later childhood. Unicef list nine health benefits for breastfed babies that have an extremely high evidence base. These include lower levels of: ear infections, allergic disease, SIDS, and urinary tract infections.

Reducing childhood obesity is a key priority in the Health and Wellbeing Strategy and breastfeeding provides the best start to reduce childhood obesity. A reduction in breastfeeding will impact upon our ability to achieve a reduction in obesity.

How can we make sure things get better?

- What activities have been or will be put in place to address underperformance? Make specific reference to action plans.
- When performance will be brought back on track?
- Assess the need for additional resources/funding/training/investment.
- Identify the source of additional resources/funding/training/investment.
- Consult with other services, staff, managers, relevant Members and partners.

In order to address the inequalities in breastfeeding, funding has been secured from the Public Health Grant for a part time breastfeeding support worker who will work to focus on the areas of low breastfeeding to address these inequalities. Following the trial of this approach in 2013/14, we know that this service is highly effective in Trafford. This service will be provided by Pennine Care as part of the community health contract.

Pennine Care Foundation Trust has been funded to provide this post and they are currently going through their HR processes. The Community Health contract has been varied in order to include this function.

A breastfeeding Strategy group has been set up and an action plan for the next year has been put in place. This group brings together the key services and strategic leads for breastfeeding locally. A clear partnership approach has been outlined building on the excellent work that has been happening locally. Health Visitors, Children's Centres, the Infant Feeding Coordinator and the commissioning lead are all involved.

Processes are being put in place to specifically monitor the breastfeeding drop ins and other breastfeeding support work so we are able to track how this work is targeted to areas of low breastfeeding. As soon as the final details of the changes to Children's Centres are known, a plan will be developed to consider how to continue these drop ins in the light of the changes.

Trafford will be assessed by Unicef for the Level 3 Baby Friendly Initiative Award in June this year. This is the final stage of the award and would indicate a high level of quality in the service. Work is underway to prepare for this assessment.

The action plan was developed following the North West Public Health Network Sector Led Improvement process. This benchmarked the provision in Trafford against the other GM areas and any gaps or areas for development were identified. The actions, are therefore, locally appropriate and based on the evidence, including NICE guidance.

EXCELLENCE IN EDUCATION

Ensure that children are well prepared to achieve in adulthood through high quality learning and development.

For 2014/15 we will:

Improve the life chances of all children and young people

- Work with schools to maintain the 'Trafford family of schools to support educational excellence
- Continue to embed the new delivery model to provide support to schools in line with national policy
- Increase the number, range and take up of apprenticeships
- Provide monitoring, challenge and intervention for schools to ensure sustained high standards

Close the gap in educational outcomes across our vulnerable groups

- Implement the outcomes of review of provision and support for children with special educational needs
- Use the SEN Pathfinder as an approach to support educational progress of children with special educational needs
- Increase the percentage of care leavers in Education, Employment and Training
- Increase the number of two year olds in receipt of targeted nursery education

Close the gap in educational outcomes across the borough based on the different localities

- Targeted support for young people through the Area Family Support Teams to maintain low levels of NEET (Not in Education, Employment or Training)
- Continue the improvement in reducing the gap in educational outcomes for children eligible for free school meals

Key Policy or Delivery Programmes 2014/15

- CYP Strategy 2014-2017

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15 Q3	2014/15 Q4			
						Actual	Target	DOT	Status
New	% of pupils achieving 5 A*-C GSCE including English and Maths	A	70.3% A	72%	71.4%	72.2%	72%	↑	G
This is the published (Jan 15, revised upwards from Q3) figure for Trafford using the 'new' first entry only method of measurement. It is 4th highest in the country, and Trafford is one of only six authorities to have achieved a higher attainment rate this year, under first entry compared to last year's best entry measure. Under the 'old', best entry method of measuring this indicator Trafford achieved 74.1% which represents the highest level ever recorded in Trafford.									
CGV 2c	% of pupils on Free School Meals achieving 5 A*-C GSCE including English and Maths	A	47% G	48%	N/A	Actual	Target	DOT	Status
						44%	48%	↓	A
See exception report below									
LCA 2	Maintain the low level of 16-18 year olds who are not in education, employment or training (NEET) in Trafford	M	4.1% G	4.1%	5.28% A	3.97%	4.1%	↑	G
Excellent performance. There are still some concerns about validity due to current high unknown rates.									
New	Percentage of Trafford pupils educated in a Good or Outstanding school.	A	91.4%	91.4%	93.2% G	93.4%	91.4%	↓	G
This measure remains above target and the proportion of pupils at Trafford schools that are rated 'Outstanding' or 'Good' is exceptionally high compared to national and regional levels (78% in England, 81% in North West, as at 31/08/14: source, Ofsted DataView).									

Theme / Priority:	Excellence in Education – Exception Report(s)		
Indicator / Measure:			
Indicator / Measure detail:	Increase the percentage of pupils eligible for FSM achieving 5+A*-C GCSE's including English and Maths		
Baseline:	47% (2013 validated Raiseonline)		
Target and timescale:	48% (relates to exams in Summer 14)	Actual and timescale:	44% (2014 validated Raiseonline)
Why is performance at the current level?			
<ul style="list-style-type: none"> • Is any variance within expected limits? • Why has the variance occurred? • Is further information available to give a more complete picture of performance? • What performance is predicted for future periods? 			
<p>The variance is within expected limits. The attainment of FSM pupils nationally fell by 4 points due to changes in the Performance Tables regulations so the decline in Trafford was in line with the national trend. The attainment of FSM pupils in Trafford is still significantly above the attainment of FSM pupils nationally (44% compared to 36%). We are predicting a significant rise in FSM attainment in 2015.</p>			
What difference does this make – the implications of not meeting target?			
<ul style="list-style-type: none"> • Impact on service users/public. • Impact on corporate priorities and plans. • Impact on service/partner priorities. • Impact on equalities, sustainability or efficiency <p>Can we move resources to support this or other priorities?</p>			
<p>Since the decline was in line with the national trend and due to changes in the way attainment is measured nationally, rather than a real terms decline, there are no specific implications of not meeting the target other than to continue to prioritise this issue in our work with schools.</p>			
How can we make sure things get better?			
<ul style="list-style-type: none"> • What activities have been or will be put in place to address underperformance? Make specific reference to action plans. • When performance will be brought back on track? • Assess the need for additional resources/funding/training/investment. • Identify the source of additional resources/funding/training/investment. • Consult with other services, staff, managers, relevant Members and partners. 			
<p>Raising the attainment of FSM pupils will continue to be a key priority of our work. Certain schools where the attainment of FSM pupils could or should have been higher in 2014 have been identified for additional support.</p>			

RESHAPING TRAFFORD COUNCIL

Continue to develop relationships with residents, local businesses and partners to ensure that we all work together for the benefit of the Borough. Internally, to reshape the organisation to ensure the Council embraces innovation and new ways of working.

For 2014/15 we will:

- Explore different delivery models to enable the Council to manage the financial challenges up to 2017 and also beyond.
- Support the level of change required to deliver the Reshaping Trafford agenda.
- Continue to develop Locality Partnerships to create stronger and empowered communities that are safer, cleaner, healthier and better informed. This will include coming out of shadow form.
- Provide dedicated support to the Voluntary and Community Sector
- Building up on the InfoTrafford platform, develop a partnership intelligence hub to support service re-design.
- Adopt Public Service Reform principles across the Trafford Partnership through the identification of cross cutting challenges and the subsequent development of new delivery models
- Ensure that residents are consulted on and well informed about how the Council spends its budget and the standards of service that they can expect from us
- Develop arrangements to share services across agencies, where it is efficient to do so, including shared use of buildings
- Working together with our colleagues across Greater Manchester to secure greater efficiencies
- Integrated working with our Partners to pursue joined up services in local communities to provide better services for the future
- Review Customer Pledge to focus on key standards which customers will be able to expect, to ensure customers are at the centre of what we do.

Key Policy or Delivery Programmes 2014/15

- Customer Services Strategy
- NOM Change Strategy
- Collaboration Programmes (e.g. GMP, SWiTch, Strategic Procurement Unit)
- Third Sector Strategy; Volunteering Strategic framework

Ref.	Definition	Freq	13/14 Actual	14/15 Target	14/15	2014/15			
						Actual	Target	DOT	Status
..	Number of third sector organisations receiving intensive support	Q	305 G	300		132			
The Year-end reporting figure for this indicator is October; the figure attached above is the equivalent of mid-way (Q2) figure. No mid-year figure has been attached and as such we are unable to demonstrate the DOT or RAG status									
New	Improve take up of online claims for Housing Benefit and Council Tax benefit	Q	94%	96%	96% G	98% G	96%	↑	G