

## Item:4

### Orkney Health and Care Committee: 14 November 2019.

#### Performance Monitoring.

#### Report by Chief Officer/Executive Director, Orkney Health and Care.

### 1. Purpose of Report

To advise on the performance of Orkney Health and Care for the reporting period 1 April to 30 September 2019.

### 2. Recommendations

The Committee is invited to scrutinise:

#### 2.1.

The performance of Orkney Health and Care for the reporting period 1 April to 30 September 2019, as set out in section 4 and Annex 1 of this report.

### 3. Service Performance Indicators

Service performance indicators provide the mechanism through which the performance of aspects of the services provided year on year are monitored as in Annex 1.

### 4. Complaints and Compliments

#### 4.1.

Table 1 below sets out the number of complaints and compliments made to Orkney Health and Care in the six-month period 1 April to 30 September 2019, and for the preceding two six-month periods.

Table 1.	Six months ending 30 September 2018.	Six months ending 31 March 2019.	Six month ending 30 September 2019.	Totals.
Complaints.	9. (stage two) 15. (stage one)	5. (stage two) 17. (stage one)	0. (stage two) 4. (stage one)	14. (stage two) 36. (stage one)
Compliments.	20.	2.	0.	22.

## **4.2.**

When considering the data within Table 1, it should be noted that the Council has adopted a policy of encouraging staff to record all complaints against the Council through the Complaints Handling Procedure. This includes complaints that are quickly and satisfactorily resolved by the frontline service, thereby enabling the Council to identify any trends that would help to improve the service. As a result of this policy, the number of complaints captured by the procedure may increase and that does not necessarily reflect an increase in the number of people contacting the service to express dissatisfaction with the Council.

## **4.3.**

There is some concern about the accuracy of the data given it appears so out of line to the previous two periods.

## **5. Corporate Governance**

This report relates to the Council complying with its performance management policies and procedures and therefore does not directly support and contribute to improved outcomes for communities as outlined in the Council Plan and the Local Outcomes Improvement Plan.

## **6. Financial Implications**

There are not anticipated to be any significant financial implications arising as a result of the recommendations of this report.

## **7. Legal Aspects**

The Council's performance management systems help the Council to meet its statutory obligation to secure best value.

## **8. Contact Officer**

Sally Shaw, Chief Officer/Executive Director, Orkney Health and Care, extension 2601, Email [sally.shaw@orkney.gov.uk](mailto:sally.shaw@orkney.gov.uk)

## **9. Appendix**

Annex 1: Summary of the performance of Orkney Health and Care against its performance indicators.

## Orkney Health and Care – Service Performance Indicators for Six Months Ending 30 September 2019

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>01 - CCG - Sickness absence - The average number of working days per employee lost through sickness absence, expressed as a percentage of the number of working days available.</b> <b>Lead: Sally Shaw.</b>	7.74	Red.	8.93	4.0	6.10	Red.
	<p>Comment</p> <p>This indicator has been sitting at RED for some considerable time. The percentage of the number of average working days lost through sickness has risen this period from 7.74 to 8.93. At the meeting in September then a list of actions was identified to support managers in effectively managing sickness absence down to tolerable levels.</p> <p>As per report in September 2019, the follow actions are being undertaken but have not yet had any impact.</p> <ul style="list-style-type: none"> <li>• All Senior Managers will re-issue relevant policies to operational and registered managers.</li> <li>• They will monitor on a monthly basis that all policy advice and guidance is being utilised to full effect.</li> <li>• A report on sickness/ absence will be requested for each service in order that we can identify if this is an OHAC wide issue or whether there are specific areas of concern. This will be in order to actually focus support and improvement to the right places.</li> </ul>					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>02 - CCG - Sickness absence - Of the staff who had frequent and/or long-term sickness absence (they activated the sickness absence triggers), the proportion of these where there was management intervention</b> <b>Lead: Sally Shaw.</b>	81.58	Amber.	66.96	90.00	79.00	Red.
	<b>Comment</b>  This again is not on the right trajectory. The last report shown this PI as AMBER, but this has now gone to RED because only 66.96 of staff have triggered the sickness absence figures.  All managers supporting staff with frequent or long-term absence will be asked to report on each one individually and asked to provide the management intervention strategy that they are working to. Again, this is so support and improvement can be focused.					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>03 - CCG - Staff accidents - The number of staff accidents within the service, per 30 staff per year</b> <b>Lead: Sally Shaw.</b>	1.40	Amber.	0.89	1.00	2.1	Green.
	<b>Comment</b>  This number remains low and has reduced further from 1.4 down to 0.89. This has triggered a change in the RAG status. This has moved from AMBER to GREEN.  Manual handling and slips/trips/falls most common type of accidents recorded.					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>04 - CCG - Budget control - The number of significant variances (priority actions) generated at cost centre level, as a proportion of cost centres held</b> <b>Lead: Sally Shaw.</b>	17.00	Amber.	28.00	15.00	31.00	Amber.
	<b>Comment</b> This PI will increase negatively as the Chief Officer has requested no in year budget movements as this is potentially masking budget pressures.					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>05 - CCG - Recruitment and retention - The number of advertised service staff vacancies still vacant after six months from the time of advert, as a proportion of total staff vacancies</b> <b>Lead: Sally Shaw.</b>	1.80	Green.	2.26	2.00	4.10	Amber.
	<b>Comment</b> This has seen the RAG status shift from GREEN to AMBER. OHAC will continue to assess the impact of long-term vacancies and work with Third Sector to see how they can lessen impact of vacancies.					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
	2.56	Green.	2.35	5.00	10.10	Green.

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>06 - CCG - Recruitment and retention -</b> The number of permanent service staff who leave the employment of Orkney Islands Council – but not through retirement or redundancy – as a proportion of all permanent service staff <b>Lead: Sally Shaw.</b>	<b>Comment</b>					
	This has remained static with a very minor positive improvement. This PI remains its RAG status of GREEN.					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>07 - CCG - ERD - The number of staff</b> who receive (at least) an annual face-to-face employee review and development (ERD) meeting, as a proportion of the total number of staff within the service <b>Lead: Sally Shaw.</b>	46.70	Red.	50.10	90.00	79.00	Red.
	<b>Comment</b>					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>08 - CCG - Invoice payment - The number of invoices that were submitted accurately, and paid within 30 days of invoice date, as a proportion of the total number of invoices paid</b> <b>Lead: Sally Shaw.</b>	66.79	Red.	70.60	80.00	69.00	Amber.
	<b>Comment</b>					
	<p>There has been a slight improvement in this area going from 66.67 to 70.60. Although this is a slight increase then it has been enough to change the RAG status from RED to AMBER.</p> <p>Work is ongoing to improve internal processes within Orkney Islands Council. Some factors for consideration are external and out with OHAC's control.</p>					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>09 - NHSO – Sickness absence – NHS Boards to achieve a sickness absence of 4%.</b> <b>Lead: Sally Shaw.</b>	5.08	Amber.	2.93	4.00	6.10	Green.
	<b>Comment</b>					
	<p>This data has not been easy to source in the given timescale for this report. This causes concern as the variances are so significantly different to the report for the previous 6 months. The report shows that not only is there significant improvement reducing from 5.08 to 2.93 but being significantly lower than the target rate of 4%.</p>					

Performance Indicator	Previous Period: 31/03/2019		Current Period: 30/09/2019			
	Actual	RAG	Actual	Target	Intervention	RAG
<b>10 – NHSO - Staff Appraisals – The number of staff who receive (at least) an annual appraisal, as a proportion of the total number of staff within the service.</b> <b>Lead: Sally Shaw.</b>	10.04	Red.	4.00	90.00	79.00	Red.
	<b>Comment</b>					
	Again, this was data that came in late. There has been a significant change in what is being reported. This figure has decreased from 10.04 to 4.00. There was a reported lack of confidence in this PI last cycle, these figures have merely acted to increase that lack of confidence in the use of the reporting system.					

## Personnel key

**Executive Director of Orkney Health and Care:** Sally Shaw.

## RAG key

**Red** - the performance indicator is experiencing significant underperformance, with a medium to high risk of failure to meet its target.

**Amber** - the performance indicator is experiencing minor underperformance, with a low risk of failure to meet its target.

**Green** - the performance indicator is likely to meet or exceed its target.