

From: Roger Gough – Leader of the Council
David Cockburn – Chief Executive Officer

To: County Council – 13 July 2023

Decision No: n/a

Subject: **End of Year Performance Report, 2022/23**

Classification: Unrestricted

Summary: This is the Performance Report for Kent County Council covering the financial year ending 31 March 2023. The report presents information for Key Performance Indicators (KPIs) and activity measures across the Council Directorates, and a summary of the Corporate Risk Register.

Of the 37 Key Performance Indicators (KPIs) contained within the QPR, 15 achieved target (Green), 10 achieved and exceeded the floor standard but did not meet target (Amber). 12 KPIs did not meet the floor standard (Red).

Recommendation(s): The County Council is asked to NOTE the Performance Report.

1. Introduction

- 1.1. The Quarterly Performance Report (QPR) is a key mechanism within the Performance Management Framework for the Council. The report summary for Quarter 4, 2022/23 is attached at Appendix 1, and includes data up to the end of March 2023.
- 1.2. The QPR includes 37 Key Performance Indicators (KPIs) where results are assessed against Targets set at the start of the financial year.

2. Quarter 4 Performance Report

- 2.1. Results for KPIs compared to Target are assessed using a Red/Amber/Green (RAG) status.
- 2.2. Of the 37 KPIs included in the report, the latest RAG status are as follows:
 - 15 are rated Green (same as the previous Quarter) - the target was achieved or exceeded.
 - 10 are rated Amber (six fewer than the previous Quarter) – performance achieved or exceeded the expected floor standard but did not meet target.
 - 12 are rated Red (six more than the previous Quarter) – performance did not meet the expected floor standard.

2.3. The 12 indicators where the RAG rating is Red, are in:

- Customer Services
 - Percentage of phone calls to Contact Point which were answered
 - Percentage of complaints responded to within timescale
- Governance and Law
 - Percentage of Freedom of Information Act (Fol) requests completed within 20 working days
 - Percentage of Data Protection Act (DPA) Subject Access requests completed within statutory timescales
- Growth, Economic Development & Communities
 - Developer contributions secured as a percentage of amount sought
- Environment and Transport
 - Percentage of routine pothole repairs completed within 28 days
 - Percentage of Emergency highway incidents attended within 2 hours of notification.
- Children, Young People and Education
 - Percentage of Education, Health Care Plans (EHCPs) issued within 20 weeks
 - Percentage of pupils (with EHCP's) being placed in independent or out of county special schools
 - Percentage of foster care placements which are in-house or with relatives and friends (excluding UASC)
- Adult Social Care
 - Percentage of new Care Needs Assessments delivered within 28 days
 - Long Term support needs of older people (65 and over) met by admission to residential and nursing care homes, per 100,000.

2.4. With regards to Direction of Travel, which identifies any significant trend over past 6 quarters, two indicators show a positive trend (one fewer than the previous Quarter), 24 are stable or with no clear trend, and 11 are showing a negative trend (three more than the previous Quarter).

3. Commentary:

3.1 Since Quarter 2 the Council has had less than half of the KPIs in the QPR rated as Green, and Quarter 4 has seen six KPIs previously rated as Amber turn Red. Moreover, the Direction of Travel analysis continues to be less positive than in previous years, with the number of KPIs now showing a negative trend at 11 out of the 37, with just two showing positive movement in terms of trend over the last 6 Quarters.

- 3.2 The report reflects the current performance and pressures across the Council, with all Directorates having some Red rated indicators. The fact that over half the KPIs are missing target and nearly a third are below their floor standard reflects the demand-led challenges faced by the Council. Initial requests for assessments for an Education and Health Care Plan, remain well above the latest national average. Referrals into Children's Social Care are at their highest level in over 5 years. The rate of children in care is at its highest level since 2016 (both including and excluding UASC). Quarter 4 saw Adult Social Care experience the highest number of people making contact in over 2 years, and its highest number of new care needs assessments and carer assessments being undertaken. Of those accessing Adult Social Care services, there are increasing numbers of people who have a mental health need. At the same time, poor weather at the end of Quarter 3, which continued into Quarter 4, saw above expected levels of highway faults and emergency incidents reported which impacted performance.
- 3.3 It is important to note that this demand-led pressure on services in Kent is being reported by many upper tier local authorities across the country. The long-term effects of the Covid-19 pandemic on service demand continues, there is a knock-on effect on adult social care services as NHS providers struggle to meet demand and catch up with significant waiting lists, whilst the social care provider market continues to be fragile given workforce and inflationary pressures. The need for the Government to implement a sustainable funding model for adult social care is imperative if all local authority services are not to face ongoing financial and capacity pressures. Weather related demand and market pressures are impacting on the quality of the road network at national level.
- 3.4 It is however also important to take a balanced picture and reflect on the many positives. Callers' satisfaction with Contact Point advisors has met target in 5 out of the last 6 Quarters. The No Use Empty programme continues to bring over 400 homes back to the market every year. Physical visits to libraries continue on an upward trend, and total book issues are higher than pre-Covid. Only 0.2% of our waste went to landfill last year and our Greenhouse Gas emissions continue on a downward trend towards net zero. Over 90% of our schools are good or outstanding. We ensure children who come into our care move in with an adoptive family in a timely manner. We have reduced the number of people who have to make a repeat contact with Adult Social Care; and finally, all of the public health indicators are meeting target.
- 3.5 Moreover, it is necessary to consider the detail of the 12 indicators rated as Red. These 12 Red indicators are spread across all directorates and the severity of their situations is quite varied in terms of how far below floor standard they are and whether their longer-term direction of travel is flat or worsening. So, for example, there are some indicators that are rated as Red, but which have fallen just below the floor standard to be rated as Amber, and where there is no clear direction of travel to suggest a trend of worsening of performance. These include:
- '% of pupils (with EHCP's) being placed in independent or out of county special schools' and '

- Long Term support needs of older people (65 and over) met by admission to residential and nursing care homes'
- 3.6 One indicator – 'Developer contributions secured as a percentage of amount sought' – has been rated as Red due to 2 out of the 16 contribution agreements, where the Council sought part funding from the Community Infrastructure Levy (CIL) and has not yet had confirmation that the Council will receive the funds. However, the service is confident that those agreements will be confirmed, and the funding received in due course. It is important to note that this indicator can be quite volatile given the low numbers of agreements and the dependency of the indicator on decisions made through the local planning process.
- 3.7 However, there are other red rated KPIs that are more concerning, either because they have been performing well below the floor standard for some time, or because they are just below the floor standard but have a worsening direction of travel. Those well below the floor standard for some time include:
- Complaints, Freedom of Information requests (FOIs) and Subject Access Requests (SARs) responded to within timescale
 - EHCP assessment timescales
 - Care Needs Assessment delivered within 28 days
- 3.8 The performance of the above indicators has been an issue for some time in the Council and the reasons for this are varied. Undoubtedly there has been an increase in complaints and demand for information, either through SARs or FOI requests. Invariably the complexity of some of these requests, and the other concurrent pressures on services has in-part led to the ongoing issues in meeting response times for complaints, FOI and SARs. Management is progressing a range of actions, including implementation of new systems to allow for easier and speedier production of information required to respond within required timeframes.
- 3.9 Members will be aware of the ongoing challenges faced within the SEND service and the broader system challenges which impact on the ability of CYPE to meet the EHCP assessment timescale target. The specific practice and wider system issues are being actively addressed by the Council and system partners through the SEND transformation programme, with the aim to bring the total number of EHCPs required towards the national average, ensuring EHCPs are undertaken within the requirements of the SEND Code of Practice to ensure ECHP numbers allow for high quality EHCPs be produced within timescale.
- 3.10 Of the incoming new Care Needs Assessments (CNA) for Quarter 3 (this KPI is reported one Quarter in arrears), 70% were completed within 28 days, which is the same as the previous Quarter, and continues to be below the floor standard of 80%. However, there were over 3,900 new CNAs in Quarter 3 and over 2,700 were completed within 28 days. The time taken to complete a CNA is dependent on the person and their needs, so additional complexity of those needing assessment is a significant factor on the performance against the indicator. ASCH leadership continues to prioritise completing CNAs as part of its new

Performance Assurance Framework and has seen an increase in the number of completed CNAs each Quarter in 2022/2023.

- 3.11 Those KPIs that are just below to floor standard, and worsening include:
- Pothole repairs
 - Attending emergency highway incidents
 - Foster care placements which are in-house or with relatives or friends
- 3.12 The number of potholes requiring repairs rose steeply in Quarter 4, resulting in over 5,000 repairs being made, an increase of over 3,000 repairs compared to Quarter 3, and more than twice the number of repairs made in Quarter 4 last year. Performance has been RAG rated Amber for the previous three Quarters but has moved to a Red RAG rating for Quarter 4. The high demand has likely been caused by very wet weather in January and March, and a backlog of jobs from the snow and ice in December. The service continues to work with the Council contractor, Amey, to arrange additional resources to attend to the increase in repairs to get this service back to the target of 90%. Regarding the KPI relating to foster care placements which are in-house or with relatives or friends, current performance of 73.7% is below the target of 85% and floor standard of 75%. Performance against this measure is impacted by the numbers of children coming into care and the availability of in-house foster placements.
- 3.13 There are also a couple of the Amber rated KPIs that have a worsening Direction of Travel and are now close to their floor standard. As a result, responsible Directors are considering the appropriate interventions necessary to ensure performance against these indicators does not deteriorate further so they do not become rated as Red. These include:
- In ICS, the percentage of case holding posts filled by permanent qualified social workers (now just 0.2 percentage points above floor standard)
 - Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (now just 1 percentage point above floor standard).

4. Recommendation(s):

The County Council is asked to NOTE the Performance Report.

5. Contact details:

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