## ARGYLL AND BUTE COUNCIL PERFORMANCE AND IMPROVEMENT FRAMEWORK

#### 1. INTRODUCTION

- 1.1 This document sets out how Argyll and Bute Council approaches its performance and improvement functions to ensure that it meets its obligations to deliver best value to the people of Argyll and Bute.
- 1.2 The PIF is comprised of two parts: the framework document, itself, and a series of appendices that provide detailed guidance on the different elements of the framework.
- 1.3 The framework document is 'fixed' and has been designed to provide the context for the council's overall activities. The supplementary documentation, provided in the appendices, is designed to be updated and reviewed independently of the PIF, informed by and flexible to the future requirements of the council and its services.

## 2. WHY DO WE HAVE A PERFORMANCE AND IMPROVEMENT FRAMEWORK (PIF)?

- 2.1 The Performance Improvement Framework enables the Council to deliver its statutory duty 'to make arrangements to secure Best Value (continuous improvement in the performance of functions)', as required by the Local Government in Scotland Act 2003.
- 2.2 The PIF sets out the structure of Argyll and Bute Council's planning, performance and improvement functions, and shows how the functions are interlinked. The PIF provides a common language to enable everyone, from Elected Members and senior managers through to individual employees, to understand how they contribute to the delivery of these functions. The PIF sets out the roles and responsibilities of different groups in delivering these.

#### 3. MAKING A DIFFERENCE

#### 3.1 How Does The Council Make A Difference?

The PIF is founded on the principle that the council exists to make a positive difference to the people of Argyll and Bute through the delivery of public services. In order to make a difference, we have to identify the component parts of our framework.

The functions that contribute to performance and improvement activity

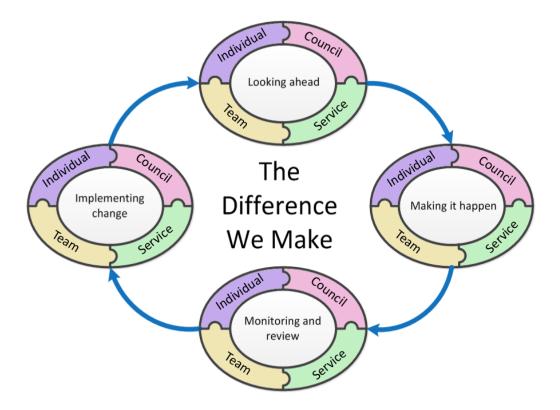
and that show how we make a difference can be thought of as a continuous circle of activity, summarised as:

- Looking Ahead what we will do in the future
- Making It Happen what we deliver
- Monitoring and review how we have delivered
- Implementing change how we improve

Each of these areas of activity is described in more detail, below.

The four areas of activity combine together to create The Difference We Make, which is the foundation of our PIF. See figure 1. The diagram shows that in each stage of the PIF, we all have a role to play.

Figure 1: The Difference We Make



#### 3.1.1 Looking Ahead

Looking Ahead relates to planning of future activities and setting the direction for future service delivery.

At the highest levels of the organisation, Looking Ahead relates to the setting of outcomes and the development of organisational strategy for the long-term. This is articulated through:

- The Local Outcomes Improvement Plan (LOIP)
- The Corporate Plan.

At the level of Departments and Services, forward planning is carried out over medium-term time horizons, and is articulated through:

- Service Plans
- Workforce plans

Team planning focusses on shorter-term tactical and operational activities.

Individual planning focusses primarily on the delivery of day-to-day operational activities. Planning is carried out through:

PRDs and their associated development plans.

Plans at the different levels of the organisation are informed by the content of plans in the level(s) above. All plans are aligned to ensure the delivery of the council's strategic objectives.

Plans at all levels should include relevant performance measures and targets to enable progress and impact to be monitored and reviewed effectively.

#### 3.1.2 Making It Happen

Making it happen relates to the delivery of services. How and what services are delivered are informed by the plans developed in Looking Ahead.

Plans are developed to illustrate the future delivery of Outcomes with agreed people and financial resources. These are supported by our detailed service planning guidance.

#### 3.1.3 Monitoring and Review

Monitoring and Review includes activities relating to: performance management; benchmarking; evaluation activity; scrutiny. These activities combine to enable the identification of Areas for Improvement.

How and what is monitored and reviewed is influenced by the content of plans developed in Looking Ahead and the activities that take place in Making it Happen.

Performance Management includes:

- The monitoring of trends, targets and status of activities
- The reporting of performance information.

Monitoring and review takes place at all organisational levels, from the corporate level down to the individual level.

Reporting at corporate, service and team level is carried out using the council's Performance Management System (Pyramid). Performance of individuals is carried out through the PRD process.

Evaluation activity relates to:

- Internal self-evaluation
- External evaluations and inspections.

Areas for Improvement may be identified from the following sources:

- Self-evaluation activities
- Audit or inspection key recommendation
- Best Value Review
- Consultation and Engagement; Customer feedback (satisfaction surveys or complaints)
- Annual Performance Review
- Employee suggestions
- Scrutiny activity, including feedback from the Performance Review and Scrutiny Committee
- Performance Measurement and Management
- Benchmarking.

Managing improvement activity in a formalised way will enable effective scrutiny by elected Members and committees.

#### 3.1.4 Implementing Change

Implementing Change relates to activities designed to embed quality and improvement across the Council. Activities are informed by the Areas for Improvement identified as part of the Monitoring and Review Process.

Change may be incremental, relating to continuous improvement, or transformational.

#### 3.2 Who Makes A Difference?

Everyone in the Council, from Elected Members to frontline staff, contributes to the delivery council services and functions. What is expected from different groups varies according to levels of responsibility. See Table 1.

Table 1:

Time horizon	Who makes a	How do we make a difference?							
	difference?	Looking Ahead	Making It Happen	Monitoring and Review	Implementing Change (Embedding Quality; Improvement)				
Long-term strategic	Elected Members Senior Managers	Provide strategic direction for the organisation  • Set outcomes / goals / targets  • Corporate plan  • Budget / resources  • Policy setting		<ul> <li>Review Performance Management</li> <li>Scrutiny</li> <li>Corporate self-evaluation</li> <li>External inspections</li> <li>Benchmarking</li> </ul>	<ul> <li>Develop transformational change agenda</li> <li>Corporate improvement plan</li> </ul>				
Mid-term strategic	Heads of Service Third Tier Managers	Provide strategic direction for Services, in line with corporate direction  Service plans Workforce planning	<ul> <li>Develop Service plan</li> <li>Oversee delivery of Service plans</li> <li>Accountability for service delivery</li> </ul>	<ul> <li>Self-evaluation</li> <li>External inspections</li> <li>Benchmarking</li> <li>Performance measurement and reporting</li> </ul>	<ul> <li>Continuous improvement</li> <li>Transformational change</li> </ul>				
Short-term tactical / operational	Third Tier Managers Managers and Supervisors Teams	Provide direction in line with Service and Corporate plans  Team plans  Development of processes to deliver services	<ul> <li>Develop Team plan</li> <li>Oversee and deliver Team plan</li> <li>Accountability for service delivery</li> </ul>	<ul> <li>Self-evaluation</li> <li>Benchmarking</li> <li>Performance monitoring and reporting</li> </ul>	<ul> <li>Continuous improvement</li> <li>Transformational change</li> </ul>				
Day-to-day operational	Individuals (Managers and Supervisors; Non-managers)	Workplan, in line with team, Service and Corporate plans, via PRD process, including delivery plan for individuals.	Deliver services / tasks	<ul> <li>PRD</li> <li>Monitoring of performance of individual</li> </ul>	Continuous improvement				

#### 3.3 Bringing It All Together

The PIF is brought together with a series of operational guidance note appendices that will be subject to amendment over time. These appendices are:

- Glossary: Elements of the framework
- Planning and performance reporting cycles
- Information guide for Pyramid and scorecards
- Service Planning guidance and plan structure
- Information guide for the Service Annual Performance Reviews
- Information guide for the Local Government Benchmarking Framework (LGBF)
- Process guide for indicators required for the LGBF-SPI
- Public Performance Reporting guidance
- Role of Elected Members in delivering Argyll and Bute Council's Performance and Improvement Framework
- Where to go, and who to contact, for additional support.
- PRD Guidance (<a href="http://intranet.argyll-bute.gov.uk/my-hr/performance">http://intranet.argyll-bute.gov.uk/my-hr/performance</a>)
- Self-evaluation guidance (under development)

#### 4. HOW DO WE KNOW THAT THE PIF IS MAKING A DIFFERENCE?

- 4.1 The effectiveness of the PIF will be demonstrated through evidence of continuous improvement, positive outcomes from external audits and inspections, and the impact of the Council's transformational activities.
- 4.2 The PIF is subject to review on a regular basis to ensure that it:
  - Continues to be appropriate to the Council
  - Helps to achieve real improvement to Council services
  - Demonstrates Best Value.
- 4.3 The HROD team will take a lead on the scheduled review of this framework, and will report to the Strategic Management Team and the PRS Committee.

# The role of Elected Members in delivering Argyll and Bute Council's Performance and Improvement Framework



### 25 September 2019 Version 1.2

**Contact: Jane Fowler** 

Version	Date	Amended
1.0	21 March 2017	
1.1	04 December 2018	Committee Updates
1.2	25 September 2019	Corporate Structure Updates

## The role of Elected Members in delivering Argyll and Bute Council's Performance and Improvement Framework

The role of the Elected Members in delivering the functions of the council's Performance and Improvement Framework is a crucial one, with some of their role being required by statute.

Elected Members make a difference to the people and communities of Argyll and Bute by concentrating on the delivery of the long-term strategic aims of the council.

Elected Members contribute directly to three of the four parts of the Performance and Improvement Framework. These parts are:

- Looking Ahead
- Monitoring and Review
- Implementing Change.

#### **Looking Ahead:**

As part of looking ahead, Elected Members provide the strategic direction for the organisation. They do this by:

- Setting outcomes, goals and targets
- Setting the council's budget and allocating resources
- Agreeing the council's Corporate Plan and Service Plans
- Approving the Community Planning Partnership's Local Outcomes Improvement Plan on behalf of the council
- · Making policies.

#### Monitoring and Review:

As part of Monitoring and Review, Elected Members:

- Review the council's performance
- Carry out scrutiny of the council's functions and performance
- Carry out corporate self-evaluation exercises to enable continuous improvement
- Participate in external inspections and audits as required
- Benchmark activities and performance of the council with other organisations.

#### Implementing Change:

As part of Implementing Change, Elected Members:

- Develop and drive the council's transformational change agenda
- Develop and drive the council's corporate improvement agenda

The activities outlined above are managed via different Council committees, as set out in the table below.

Who is involved?	What is done?
Full council	<ul> <li>Sets outcomes, goals and targets</li> <li>Agrees the Corporate Plan</li> <li>Sets the budget through the approval of Service Plans</li> <li>Sets policy</li> </ul>
<ul> <li>Policy and Resources         <ul> <li>Committee</li> </ul> </li> <li>Community Services             <ul> <li>Committee</li> </ul> </li> <li>Economy, Development and Infrastructure Committee</li> <li>Planning, Protective Services and Licensing Committee</li> </ul>	These committees have delegated powers as committees of the council.  • They scrutinise performance through the performance reports and Scorecards with additional reporting in line with their remits and responsibilities
Audit and Scrutiny Committee	<ul> <li>This committee has delegated powers as a committee of the council. The committee will: <ul> <li>Assess the effectiveness of the Council's Performance Management System</li> <li>Monitor the delivery of corporate improvement programmes and ensuring that they are progressing in line with corporate aims and objectives. Reporting the findings and recommendations to the Council.</li> <li>Promote good internal control, financial management, risk, governance and performance management, in order to provide reasonable assurance of effective and efficient operation, and compliance with laws and regulations.</li> </ul> </li> </ul>
Area Committees	<ul> <li>Set and scrutinise Area Scorecards</li> <li>Work with the Area Community         Planning Groups (ACPGs) to ensure that policy objectives are being met     </li> </ul>
Policy Lead Councillors	Policy Leads have a role in setting the policy direction for the Service Plans that fall within their portfolio

## Information Guide for the Planning and Performance Reporting Cycles



## 25 September 2019 Version 1.2

**Contact: Jane Fowler** 

Version 1.0	16 March 2017	Refreshed following
		approval of the PIF
Version 1.1	04 December 2018	ABOIP Updates
Version 1.2	25 September 2019	Corporate Structure
		Updates

This document provides information of the Planning and Performance Reporting Cycle.

#### **Introduction**

The Planning and Performance Reporting cycle reports performance on an annual, 6-monthly and quarterly basis. Scrutiny of performance is an essential tool for improvement and is carried out at all levels of the Council by Senior Officers, Managers and Elected Members. Reports are submitted to the various Strategic and Area Committees on a quarterly, 6-monthly and annual basis.

#### Detail

Service Plans are aligned to the Corporate Plan and the ABOIP. They are agreed annually and clearly set the aims of the Council at Service level through agreed Business Outcomes. In each Service Plan the key challenges that each service will face are identified, as well as the success measures, targets, timelines and benchmarking. The budget for each Business Outcome is allocated and agreed by Council during February for the following financial year.

The Service Plans are built into Pyramid and displayed as Service Scorecards. Along with the performance information there is management information on resources, finance, improvements, complaints, sickness and PRDs.

The Service Scorecards roll-up to form the Executive Director Scorecards, which in turn roll-up to form the Council Scorecard.

Each quarter council performance is initially scrutinised by the Chief Executive and Executive Directors. The Scorecards and commentary reports are extracted from Pyramid and supported with additional written reports that highlight the successes, challenges and actions to support the challenges.

As performance and management information at Service level is 'rolled up' to Executive Director level it is included in the quarterly performance reports. The performance reports are then submitted to the various Strategic Committees on a quarterly basis to allow scrutiny from Elected Members.

Service level performance is scrutinised by Executive Directors, Heads of Service and Third Tier Managers on a quarterly basis.

Team level performance is reported and monitored at Executive Director, Head of Service and Third Tier Manager level on a quarterly basis.

Individual performance is monitored annually through the PRD where personal development to meet the needs of the Team, Service, Executive Director level and Council are identified and agreed.

Area Committees agree on a suite of performance indicators which are presented as Scorecards and commentary reports on a quarterly basis at each Area Committee.

Each Service completes an Annual Performance Review (APR) which summaries the Key Successes, Key Challenges and Key Improvement Actions to address the challenges. This is supported by Case Studies and information of any consultations and the resulting improvement actions. This is completed at the end of each financial year and forms the basis for the Council Annual Report.

Finally, the Audit and Scrutiny Committee is where the Council 6-month and annual Scorecard and performance reports are scrutinised prior to submitting publically on the Council's website.

## Information Guide for Pyramid and Scorecards



## 25 September 2019 Version 1.2

**Contact: Jane Fowler** 

Version 1.0	16 March 2017	Refreshed following approval of the PIF
Version 1.1	30 October 2017	Commentary for all measures included
Version 1.2	25 September 2019	Corporate Structure Updates

This document provides information on the performance management system and reporting tools.

#### Introduction

The Council has a statutory duty under the Local Government Scotland Act 2003 to provide Best Value and a commitment to continuous improvement, as well as to report honestly and transparently on performance and achievements. This is called Public Performance Reporting (PPR).

Our performance management tool – Pyramid – is available for all council employees and councillors to freely access.

The information and data contained within Pyramid covers all aspects of council business. Performance information is presented on Scorecards. There are Scorecards at Council, Executive Director level and Service level. If required Scorecards are also available at Team level.

#### Council Scorecard

The Council Scorecard shows the council's performance of our Financial and Human Resources, Complaints, Customer Service, Efficiencies, Assets, Risks and Improvements.

The Council Scorecard is reported twice-yearly through the Audit and Scrutiny Committee following which it is published on the Council's website. Publishing the Scorecard forms part of our PPR duty.

#### **Executive Director Level Scorecard**

The Executive Directors Scorecard has two 'views' or parts. One view shows the performance of its Financial and Human Resources, Complaints, Customer Service, Efficiencies, Assets, Risks and Improvements. This is the Scorecard View.

The other view shows the performance against its agreed Outcomes. This is the Outcome View. These are the Outcomes from each Service within the Executive Director's responsibility and they are mapped against the Argyll and Bute Outcome Improvement Plan (ABOIP – formally the SOA). Each outcome has a simple traffic light and trend arrow to indicate the level of performance for that particular outcome and commentary which provides context for the performance.

The Executive Directors Scorecards are reported quarterly through the Councils Strategic Committees following which they published on the Council's website. Publishing the Scorecards form part of our PPR duty.

#### Service Scorecard

The Service Scorecard also has two 'views' or parts. Again, one view shows the service's performance of its Financial and Human Resources, Complaints, Customer Service, Efficiencies, Assets, Risks and Improvements. It also shows a summary of the Service's performance against its agreed Outcomes, illustrated by a simple traffic light and trend arrow. This is the Scorecard View.

The other view, the Outcome View, shows all the Outcomes along with every Service success measure that underpins each Outcome. The agreed performance of each success measure is also visible. This typically includes the Target, Actual performance achieved, the Benchmark and supporting commentary. The allocated budget of each Outcome is also shown here. These quarterly Scorecards are not published, they are intended for internal operational use. However, an annual Scorecard is published along with the Annual Performance Review for each Service.

#### Team Scorecard

Team Scorecards are used to record and monitor operational – team level performance and are used as required by different audiences. These Scorecards are not published, they are intended for internal operational use.

#### Area Scorecard

The four administrative Areas each have their own Scorecard showing information that is important to that particular area. This would typically be Success Measures' performance and target at a local level along with the overall Council performance for that period. The Area Scorecards are quarterly, with the latest quarter presented at the most appropriate meeting. By nature they are public Scorecards.

#### Thematic Scorecards

Sometimes it's helpful to group information together by theme, this allows performance of a particular subject to be scrutinised by council, executive director, service or theme. These Scorecards are made publically available as required.

Integrated Joint Board (IJB) and Health and Social Care Partnership (HSCP) A Scorecard of the IJB's latest performance is available to view here. The Resources and Improvement for the HSCP is also available. The Resources and Improvements are shown at area level for Adult Care and as a whole for Children and Families. These Scorecards are publically available.

#### Plans, Strategies and Registers

The strategic Plans of the Council are shown in Pyramid. This includes Improvement Plans, Efficiency Savings Plans, Gaelic Language Plan, Equalities Action Plan, Strategic Risk Register and the Customer Charter. This information typically is for internal operational use.

#### Corporate Human Resource Information

All the HR information that is possible to display is available in this one location. Information is then referenced out for reporting at Council, Executive Director, Service or Area level. These Scorecards are made publically available as required.

#### Audits, Health & Safety and Critical Activity Recovery Plans (CARPs)

The Council carries out an internal programme of audits. The results of the audits, any recommendations and delivery progress is reported and monitored here.

Likewise, Health & Safety audits and incident investigations are recorded here along with the progress of any actions arising from the audits or investigations.

The monitoring of the CARPs is included in this section and also shows how many are on track / off track / complete. This information typically is for internal operational use.

## Service Planning Guidance 2019-2022



## 25 September 2019 Version 1.11

**Contact: Jane Fowler** 

Version 1.2	11 November 2016	Amended BO30
Version 1.3	16 November 2016	Combined BO19 and 20
Version 1.4	22 February 2017	Refreshed following approval of the PIF
Version 1.5	13 October 2017	Protocol guidance and monitoring of plans added, section 3 removed, ABOIP wording amended.
Version 1.6	30 October 2017	Commentary for all measures included
Version 1.7	5 February 2018	Commentary stipulates 'red, amber or green' performance
Version 1.8	11 May 2018	2019/20 Timeline changed
Version 1.9	11 July 2018	Timeline, Business Outcomes, Duty/Power and timeline all added or amended (2019-22)
Version 1.10	24 June 2019	Incorporates Internal Audit recommendations regarding the QA of Service Plans and roles & responsibilities.
Version 1.11	25 September 2019	Corporate Structure Updates

#### 1. Introduction

This document provides guidance for the completion of the Service Plans for 2020/23 in line with the Council's Performance and Improvement Framework (PIF).

The Service Plan is a 3-year plan. It illustrates the planned activity by a Service to contribute to the delivery of the Corporate Plan and the ABOIP.

The Service Plan is approved by Council in February each year. At this meeting the budget is also allocated and set. Following the Council meeting the Service Plan is built in Pyramid in the form of Service Scorecards.

It is through the Service Scorecards that the performance of each success measure – and ultimately each Service - is monitored, reported and scrutinised. This reporting and monitoring is done on a regular, quarterly basis.

It is therefore important that the success measures included in the Service Plan are the 'right' measures – and that they are relevant and important to the Service and delivering the Corporate Plan and ABOIP.

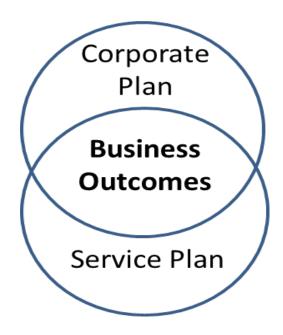
The aligning of both the Service Plan and budget settlement over a 3- year period allows the Success Measure targets and timelines to be profiled over the 3-year period. Where possible longitudinal trend for Success Measures is desired.

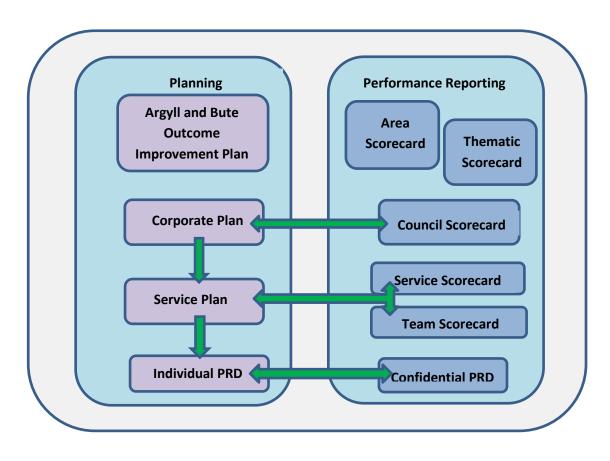
The Service Plan is split into two distinct sections – a Strategic Plan (locked down) and a Business Plan (flexible).

Service Plans have three key purposes -

- ➤ They allow Managers to illustrate how their services will contribute to the delivery of the Corporate Plan (CP) and the Argyll and Bute Local Outcome Improvement Plan (ABOIP)
- > They are the key tool for allocating the budget to agreed Outcomes.
- ➤ They are made public and therefore contribute to our statutory requirements for Public Performance Reporting (PPR).

The diagram below illustrates how the Service Plan links the Corporate Plan / ABOIP to Team Plans and the individual PRD





The Corporate Plan sets out our Vision, Mission, Values, Strategic Priorities and Corporate Outcomes.

Our Corporate Outcomes are delivered through the 17 Business Outcomes. The Business Outcomes are the link between the Corporate Plan and service delivery.

Service delivery is monitored through the Success Measures with appropriate and realistic Targets, Timescales, and where possible Benchmarks to support a culture of continuous improvement.

Success Measures are delivered by Teams and reported through Team, Service and Executive Director Scorecards. This illustrates the 'golden thread' and ensures that every Individual, Team and Service is contributing to our Corporate Outcomes; The Corporate Plan and the ABOIP

#### 2. Service Plan Completion

#### Overview

Service Plans are recorded in a database and Services are supported throughout the service planning process. The end result is a fully costed plan showing the Business Outcomes, supporting Success Measures, Targets, Timescales and Benchmarks written in plain language.

The following will be useful for completion:

- > The most recent Service Annual Performance Review (APR) for your service
- ➤ The Service Plan for the current year (2019-20)
- ➤ The ABOIP
- ➤ Data from the Local Government Benchmarking Framework (LGBF) and any other relevant benchmarking data e.g. SOCITM, APSE
- Budgeting challenges if changes impact on proposed Success Measures, Targets and Timescales they may need to be revised as appropriate.

#### **Workshops and Quality Assurance**

HROD will hold workshops every Head of Service. The workshops will support the writing and developing the Service Plans.

Heads of Service self-book their preferred time / location using the document on the i-drive. \\abck-fs01\chiefexec\Service Planning 2020-23

Either during or following the workshop Services will begin to write the Service Plan, this will be determined and different for each Service.

Once the Service Plan is complete HROD will Quality Assure the Service Plans.

#### The QA process will:

- commence on 14 August 2019
- > cover the quality of the success measures, targets, timelines and benchmarks

- be a critical friend ask 'why is it important we measure this?'
- cover the use of plain English and avoiding jargon wherever possible
- apply a consistent approach for all Services taking into account service delivery variations

A summary of the QA process will be included in the final DMT and SMT reports on the Service Planning process.

#### **Detailed Guidance**

#### LOCKED-DOWN STRATEGIC SECTION OF THE SERVICE PLAN

#### **Service Purpose**

This is where the purpose of the Service is briefly explained.

This would typically be a short paragraph or 2-3 sentences.

#### **Service Resources**

A simple summary of People (counted in FTE) and Budget for the Service is noted here.

The FTE count for the period of the Service Plan should be entered here by the Service, Strategic Finance will supply the Budget figures.

#### Significant Challenges Facing The Service

Up to 10 Key Challenges that have been identified by the Service are listed here.

Operational Risks are linked to each Significant Challenge, these are monitored and reported on by the Head of Service.

#### The Difference We Make

This lists the Business Outcomes that your Service will contribute to along with the corresponding budget.

The database will automatically extract the information for this section from the detail entered in the Success Measures section.

#### FLEXIBLE BUSINESS PLAN SECTION OF THE SERVICE PLAN

This Business Plan section will be reviewed as a part of continuous improvement.

This section of the Service Plan contains the details of the Business Outcomes, the Success Measures, Targets, Timescales and Benchmarks.

The Business Outcomes are chosen from a drop-down list. This illustrates the strategic element and will be locked down for the life of the Service Plan.

To demonstrate delivery of the Business Outcomes the service identifies appropriate Success Measures, Targets, Timescales and where possible Benchmarks. This

section of the Service Plan is live. It is monitored by the Executive Director, Head of Service and Third Tier Managers. This operational section can be reviewed as a part of continuous improvement.

To help illustrate how a Service contributes to the delivery of the Corporate Plan and the ABOIP there is a requirement to answer a simply 'challenge' question.

For every Success Measure the question 'Why Measure This?' has to be answered.

The answer should be short, succinct and provide a clear explanation of what you are measuring and why. This will be entered into the database and illustrated both in the Service Plan and on the Service Scorecard.

- An Outcome describes the difference we will make through the work that we do
- ➤ Each Business Outcome should be underpinned by Success Measures, each having a Target, Timescales and where possible, a Benchmark.
- ➤ The measures should be measures that count not just measures you can count.
- Include measures which describe the quality of your service and the impact on customers. Identifying what is being done to deliver improved Outcomes for our communities and customers.
- You must be able to set a target or forecast against each measure, if not then consider changing the measure.
- ➤ The Target and / or Timescale for Success Measures can be for the life of the Service Plan i.e. up to 2023.
- ➤ If a measure is already incorporated into the ABOIP this should be included wherever possible.
- ➤ The Local Government Benchmarking Framework (LGBF) includes measures which should be considered for inclusion wherever possible.

From 2018/19 onwards Services strategies and project plans are noted in the Service Plan as a Success Measure, and illustrated in Pyramid as a single Success measure. Services will be responsible for updating the overall progress of the plan (on track, on track to revised timeline, complete), provide commentary and attach the latest progress / monitoring report as an attachment in the commentary. The actual strategies or project plans will not be built or monitored in Pyramid, the current local detailed monitoring practices will remain in place.

To align the Service Planning process more closely with budgeting challenges the database has a 'drop down' menu for Services to identify which Success Measures are a Statutory Duty or Power to deliver. This information can be pulled through into the main report for budget allocation if requested or simply used as a management tool.

For management information purposes 'tick boxes' will allow Services to identify if a Success Measure is incorporated into the ABOIP or LGBF. This information isn't pulled through into the main report for budget allocation.

#### **Key Service Improvements**

Key Improvements identified from a variety of sources are listed here including Customer Service improvements.

This operational section is also reviewed as a part of continuous improvement.

Key Improvements can be added throughout the life of the Service Plan. Detail of the Improvement should be emailed to – <u>performance@argll-bute.gov.uk</u> following which it will be built in Pyramid for monitoring and reporting purposes.

#### **Improvement Source Codes**

APR	Annual Performance Review
PSIF	Public Service Improvement Framework or other self-assessment
Al	Audit or Inspection key recommendation
CS	Customer Service Action Plan
ES	Employee Suggestion
BVR	Best Value Review
DAP	Digital Action Plan
QPR	Quarterly Performance Report
0	Other – Please specify

#### **Pyramid Protocol**

The following protocols should be followed:

- ➤ A commentary must be included for all Success Measures, irrespective of whether performance is red, amber or green.
- Where a strategic or project plan is noted in Pyramid timely commentary must be provided and supported by a report inserted as an attachment in the commentary.

DRAFT Business Outcomes 2019-2022								
<b>Corporate Outcome</b>	BO Ref	Business Outcome						
	BO101	We Ensure Information And Support Is Available For Everyone						
People Live Active, Healthier And Independent Lives	BO102	We Provide Support, Prevention And Opportunities To Help People Make Better Lifestyle Choices						
macpendent lives	BO103	We Enable A Choice Of Suitable Housing Options						
People Will Live In Safer And Stronger	BO104	Our Communities Are Protected And Supported						
Communities	BO105	Our Natural And Built Environment Is Protected And Supported						
Children And Young People Have The	BO106	Our Looked After Young People Are Supported By Effective Corporate Parenting						
Best Possible Start	BO107	The Support And Lifestyle Needs Of Our Children, Young People And Their Families Are Met						
Education, Skills And Training Maximise	BO108	All Our Children And Young People Are Supported To Realise Their Potential						
Opportunities For All	BO109	All Our Adults Are Supported To Realise Their Potential						
	BO110	We Support Businesses, Employment And Development Opportunities						
Our Economy Is Diverse And Thriving	BO111	We Influence And Engage With Businesses And Policy Makers						
	BO112	Argyll & Bute Is Promoted To Everyone						
We Have An Infrastructure That		Our Infrastructure Is Safe And Fit For The Future						
Supports Sustainable Growth	BO114	Our Communities Are Cleaner And Greener						
	BO115	We Are Efficient And Cost Effective						
Enablers	BO116	We Engage And Work With Our Customers, Staff And Partners						
	BO117	We Encourage Creativity And Innovation To Ensure Our Workforce Is Fit For The Future						

Timeline: Service Planning 2020-23 (For 20/21 Budget Allocation)

Ref	Date	Item	Lead
01	24 June 2019	Service Planning detailed guidance agreed by the SMT	HROD
02	w/c 8 July 2019	Service Planning 2020/23 process starts	HROD
03	Kick-off to 2 Aug 2019	Workshops held with Head of Service Support offered to admin/performance staff in Services	HROD
04	14 August 2019	Draft Service Plans exported from Database	HROD
05	14 – 30 August 2019	Draft Service Plans Quality Assured	HROD/ Heads of Service / Ex. Dir.
06	14 October 2019	Draft Service Plans reviewed and agreed by DMTs in advance of presentation at SMT on 28 October (no finance)	Heads of Service
07	28 October 2019	First draft Service Plans reviewed by the SMT (no finance)	Heads of Service / Ex. Dir.
08	11 November 2019	Final draft Service Plans reviewed by the SMT (no finance)	Heads of Service / Ex. Dir.
09	12 November 2019	Economic Development & Strategic Transportation and Roads & Amenity Service Plans reviewed by Environmental, Development and Infrastructure Committee (no finance) on 5 December 2019	D&I Directorate
10	12 November 2019	Customer Services and Strategic Finance Service Plans reviewed by Policy & Resources Committee (no finance) on 12 December 2019	Customer Services Directorate
11	15 November 2019	Education Service Plan reviewed by Community Services Committee (no finance) on10 December 2019	Education Directorate
12	28 November 2019	Planning, Housing and Regulatory Services Service Plan reviewed by PPSL Committee (no finance) on 18 December 2019	D&I Directorate
13	Mid Jan 2020	Strategic Finance add draft Budget data to draft Service Plans	Strategic Finance
14	14 January 2020	Draft Service Plans with finance included in Budget Pack for P&RS Committee on13 February 2020	Strategic Finance
15	21 February 2020	Draft Service Plans with finance included in Budget Pack for Council on 20 February 2020	Strategic Finance

## Information Guide for the Quarterly Reporting Cycles



## 25 September 2019 Version 1.2

**Contact: Jane Fowler** 

Version 1.0	16 March 2017	Refreshed following approval of the PIF
Version 1.1	17 October 2017	Revised to contain the Council reports 6 monthly to the ASC
Version 1.2	25 September 2019	Corporate Structure Updates

This document provides information for the Quarterly Performance Reporting Cycle.

#### <u>Introduction</u>

The Quarterly Reporting cycle reports performance on both an annual and quarterly basis. Scrutiny of performance is an essential tool for improvement and is carried out at all levels of the Council by Senior Officers, Managers and Elected Members. Reports are submitted to the appropriate Strategic and Area Committees on a quarterly and annual basis.

Each quarter Service performance is initially scrutinised by the Chief Executive and Executive Directors. The Scorecards are extracted from Pyramid and supported with written reports that highlight the successes, challenges and actions to support the challenges. Performance information at Service level is 'rolled up' to Executive Director level and therefore is included in the quarterly performance reports. The performance reports are then submitted to the appropriate Strategic and Area Committees on a quarterly basis to allow scrutiny from Elected Members.

The Council performance report and Scorecard is submitted to the Audit and Scrutiny Committee on a 6-monthly basis for reporting and scrutiny by Elected Members.

Service level performance is scrutinised by Executive Directors, Heads of Service and Third Tier Managers on a quarterly basis.

Team level performance is reported and monitored at Executive Director, Head of Service and Third Tier Manager level on a quarterly basis.

Individual performance is monitored annually through the PRD where personal development to meet the needs of the Team, Service and Council are identified and agreed.

All Scorecards and reports are posted on the Councils website after presentation at the Strategic Committees.

#### Detail

Two weeks after period end Executive Directors and Heads of Service meet to discuss Service performance. This additional week has been included to assist with scrutiny at Executive Director level and accommodate unavoidable late data being updated in Pyramid.

Three weeks after period end bi-lateral meetings occur between the Chief Executive and Executive Directors. The Quarterly Performance reports and Scorecard printouts are both written and provided by the Directorate Support Officers. Actual meeting dates and times are agreed by the PA's.

Following the bi-lateral meetings the Executive Directors Performance Reports are submitted to the agreed Strategic Management Team meeting. Following which they are submitted to the appropriate Strategic Committees by the

Directorate Support Officer copying in HROD for posting reports and Scorecards on the Web after the Strategic Committees.

The Council 6 monthly report and Scorecard is submitted to the Audit and Scrutiny Committee by HROD.

Area Committees receive quarterly performance reports and if requested a Scorecard that is tailored to each Area. The report presents both local and council wide performance indicators side-by-side. This enables Area Committees to compare performance in their area against council wide targets.

A detailed timeline is produced annually once the Strategic Committee meeting schedule is agreed.

2019/20 QUARTERLY PERFORMANCE REPORTS - SUBMISSION TO STRATEGIC COMMITTEE MEETINGS								SUBMISSION TO AREA COMMITTEE MEETINGS					
	HoS + EX DIR MEETINGS	CE & EX DIR MEETINGS	SMT CUT OFF	SMT MEETING DATE	AUDIT AND SCRUTINY	COMMUNITY SERVICES	POLICY AND RESOURCES	EDI	PPSL	B&C	МАКІ	H&L	ОП
FQ1 April - June 2019/20  Submission Date to Committee Services Strategic Committee Meeting date	w/c 15 July	w/c 22 July	24-Jul	29-Jul		13-Aug 05-Sep	16-Jul 15-Aug	20-Aug 12-Sep	29-Aug 18-Sep	29-Aug 05-Sep	30-Aug 06-Sep	14-Sep 21-Sep	06-Sep 13-Sep
FQ2 July - September 2019/20  Submission Date to Committee Services Strategic Committee Meeting date	w/c 14 Oct	w/c 28 Oct	06-Nov	11-Nov	22-Nov 17-Dec	15-Nov 10-Dec	12-Nov 12-Dec	12-Nov 05-Dec	28-Nov 18-Dec	28-Nov 05-Dec	29-Nov 06-Dec	14-Dec 21-Dec	06-Dec 13-Dec
FQ3 October - December 2019/20  Submission Date to Committee Services Strategic Committee Meeting date	w/c 13 Jan	w/c 27 Jan	05-Feb	10-Feb		18-Feb 12-Mar	14-Apr 14-May	11-Feb 05-Mar	27-Feb 18-Mar	27-Feb 06-Mar	28-Feb 07-Mar	15-Mar 22-Mar	07-Mar 14-Mar
FQ4 January - March 2019/20  Submission Date to Committee Services Strategic Committee Meeting date	w/c 13 April	w/c 27 April	06-May	11-May	22-May 16-Jun	19-May 11-Jun	Dates Not Set Expect	12-May 04-Jun	28-May 17-Jun	29-May 05-Jun	30-May 06-Jun	14-Jun 21-Jun	06-Jun 13-Jun
**Note Late Submission Date													

## Quarterly or 6-monthly Performance Report Guidance And Template



## 25 September 2019 Version 1.2

**Contact: Jane Fowler** 

Version 1.0	17 May 2019	Produced following approval of Performance Report Template
Version 1.2	25 September 2019	Corporate Structure Updates

#### Introduction

We report our performance on a quarterly, 6-monthly and annual basis.

This document provides guidance for completing the Quarterly or 6-Monthly Performance Report for presenting at Strategic Committees. Annual reporting is carried out in the form of Service Annual Performance Reviews and the Council Annual Report. This guidance does not cover annual reporting procedures.

Scrutiny of performance is an essential tool for improvement and is carried out at all levels of the Council by Senior Officers, Managers and Elected Members.

Performance reports are submitted to the appropriate Strategic Committees on a quarterly or 6-monthly basis. The performance report provides an overview of how the Services under the remit of each Executive Director is performing towards delivering our outcomes.

After each quarter performance is initially scrutinised by the Heads of Service and Managers. This is followed by scrutiny performed by the Executive Director and Head of Service, and then in bilateral meetings between the Chief Executive and Executive Directors.

For the bilateral meetings the Scorecards and Management Information are extracted from Pyramid by HROD. These are supported with a written report that highlights the successes, challenges and actions to support the challenges that relate the each Executive Directors responsibilities.

Performance information at Service level is 'rolled up' to Executive Director level and therefore is included in the quarterly performance reports.

The reports we publish should be balanced, proportional and appropriate for the audience. It is important that we are self-aware and identify our achievements as well as our challenges.

All Scorecards and reports are posted on the Councils website after presentation at the Strategic Committees and form part of our statutory Public Performance Reporting duty.

#### Detail

Two weeks after financial quarter end HROD will extract an initial report from Pyramid that details all the success measures. (The Pyramid report). This is the earliest the Pyramid report is run to allow data and commentary to be entered by the named officer. This initial report will have minimum formatting as its use is primarily to assist the Directorate Support Officers coordinate their appropriate responses.

The Pyramid report will detail the name and id of each measure, the target, actual performance and if entered, the supporting commentary. This will be presented for each Executive Director and the Council as a whole.

Three weeks after financial quarter end HROD will extract a final report from Pyramid. Again this report will detail all the success measures but will be fully formatted. This final report can be used at the bi-lateral meeting and the information extracted to support the writing of the Quarterly Performance Report (below).

The timing for running the reports and bi-lateral meetings are outlined in the Performance and Improvement Framework (PIF). They are further detailed in the Performance Management paper that is submitted to SMT on an annual basis.

#### The Quarterly Performance Report

The report has 4 sections for completion. Each section is detailed below. Every Section should be completed by Business Outcome in numerical order.

#### Section 1 – Success Measure Summary

This is a summary of the total number of Success Measures and performance status for the Executive Director. An explanation should be provided for any success measures with No Data.

#### Section 2 - Delivering Our Outcomes

Everything we do delivers our vision and aligns from our individual PRDs, Team Plans, Service Plans, and Business Outcomes to Corporate Outcomes. The template follows this alignment.

The Template is pre-populated specifically with the Business Outcomes for each Executive Directors responsibility. Achievements are identified and listed by Business Outcome. A focus purely on Pyramid performance measures should be avoided.

Additional rows can be added as required. The Corporate and Business Outcome detail will retain the formatting for copying and pasting.

#### Section 3 – Our Challenges

This section details our short-term challenges and our key challenges. There are many factors that may impact on performance or service delivery.

A short-term challenge is generally a challenge that is expected to be resolved within a financial quarter. It could be an operational challenge, staff shortage or a delay with implementing a change or application. Short-term challenges are simply listed along with the abbreviated Service id for ease.

A key challenge is generally a challenge that is expected to last longer than a financial quarter or is more strategic in nature.

The key challenge should be clearly but simply explained and detail the action identified to address the challenge.

The action is supported by –

Identifying if the key challenge is on-going - Y/N Action Detail Milestones – Date(s) of the actions detailed Responsible Person – Name and Delegation

Key Challenges Resolved in previous quarter.

These are simply listed for completeness and audit but are no longer reported on

#### Section 4 – Our Off-Track Performance Indicators

This should contain a summary of success measures within Pyramid that are off-track for the reporting period.

The information should include the Pyramid id code, success measure name, target, actual performance, trend, supporting commentary and a graph showing 5 quarters of performance.

This information can be found in the Pyramid report from HROD.

#### Submission and Presenting Quarterly Performance Report

Following bilateral meetings the Quarterly Performance Reports should be submitted in the first instance to the SMT. Following which they should be submitted to the earliest Strategic Committee.

The Council 6-monthly report should be submitted at the earliest Audit and Scrutiny Committee meeting following the 6-month reporting period.

#### Roles and Responsibilities

#### HROD

Responsible for maintaining the performance management system. This includes presenting the success measures as clear as the system and Service allow.

Responsible for extracting and formatting the reports from Pyramid. Responsible for compiling the Council 6-monthly report, submission and presentation at the Audit and Scrutiny Committee.

#### **Directorate Support Officers**

Have a Quality Assurance role, ensuring Pyramid is populated with the data, and appropriate commentary.

Responsible for compiling the Executive Directors report for the bi-lateral performance meetings.

Responsible for submitting the Executive Directors report to the agreed SMT meeting following the bi-lateral meeting.

Responsible for ensuring the Quarterly Performance Report is completed and consistently formatted for submission to the Strategic Committees.

Submitting the Quarterly Performance Reports to the relevant Strategic Committee.

Submit a copy of the final report to HROD – <a href="mailto:performance@argyll-bute.gov.uk">performance@argyll-bute.gov.uk</a>

SMT 24 June 2019: PIF Updates and Calendar – Appendix 1

#### Managers and Senior Officers

Responsible for their appropriate Scorecard.

Responsible for ensuring that Pyramid is populated with data and appropriate commentary.

Responsible for performing scrutiny and proposing actions or improvements to overcome challenges.

#### **Elected Members**

Responsible for scrutinising performance across the Council and at all levels.

Council Performance Report –	Period:	
SUMMARY OF PERFORMANCE - No. of Success Measures:		
Green		
Red		
No Data		
Delivering Our Outcomes		
Corporate Outcome 1 - People live active, healthier and independent lives		
1.		
2.		
Corporate Outcome 2 - People will live in safer and stronger communities		
1.		
2.		
Corporate Outcome 3 - Children and young people have the best possible start		
1.		
2.		
Corporate Outcome 4 - Education, skills and training maximise opportunities for all		
1.		
2.		
Corporate Outcome 5 - Our economy is diverse and thriving		
1.		
2.		
Corporate Outcome 6 - We have an infrastructure that supports sustainable growth		
1. 2.		
Getting it right		
1. 2.		
Our Challenges		
Current Short-term Operational Challenges [Include Service id]		
1.		
1 <del>1</del> .		

2.		
3.		
4.		
Current	Key Challenges and Actions to address the Ch	nallenges
Key Challenges and Actions to address the Challen	nges	
Business Outcome		
1. Challenge -		
1. Action Detail –		
Carried Forward From Previous Quarter:	Action Milestone Dates:	Responsible Person:
Y/N		
Key Challenges and Actions to address the Cha	llenges	
Business Outcome		
2. Challenge - 2. Action Detail -		
2. Action Detail -		
Carried Forward From Previous Quarter:	Action Milestone Dates:	Responsible Person:
Y/N	Action winestone bates.	Responsible Ferson.
,,,,		
1		1
Key Challenges and Actions to address the Cha	llenges	
Business Outcome		
3. Challenge -		
3. Action Detail -		
Carried Forward From Previous Quarter:	Action Milestone Dates:	Responsible Person:
Y/N		
Key Challenges and Actions to address the Cha	llenges	

Business Outcome		
4. Challenge -		
4. Action Detail -		
Carried Forward From Previous Quarter:	Action Milestone Dates:	Responsible Person:
Y/N		
·		
,	·	
Key Challenges and Actions to address the	ne Challenges	
Business Outcome	•	
5. Challenge –		
5. Action Detail –		
Carried Forward From Previous Quarter:	Action Milestone Dates:	Responsible Person:
Y/N		
.,		
	Key Challenges Resolved In Previous Quarter	
Business Outcome		
1.		
2.		
3.		
Business Outcome		
1.		
2.		
3.		
4.		
	Our Off-Track Performance Indicators	
INDICATOR REF		-
TREND TARGET ACTUAL OV	VNER COMM	ENTARY

	FQ1 19/20	FQ1 19/20		
_				
INDICATO	OR REF			
TREND	TARGET	ACTUAL	OWNER	COMMENTARY
	FQ1 19/20	FQ1 19/20		

# Information Guide for the Service Annual Performance Reviews

### **Guidance, Template and Timeline**



### 25 September 2019 Version 3.1

**Contact: Jane Fowler** 

Version 1.0	16 March 2017	Refreshed following
		approval of the PIF
Version 2.0	26 June 2017	Change of scrutiny
		committee name (ASC)
Version 3.0	3 April 2018	Refreshed narrative and
		align APR with Business
		Outcomes
Version 3.1	25 September 2019	Corporate Structure
		Updates

This document provides information on the Service Annual Performance Review (APR).

#### Introduction

The Service APR is undertaken at the end of each financial year and is an opportunity for the Head of Service to summarise and review the Key Successes, Challenges and Improvement Actions to address the Challenges. This is supported by the Scorecard, Case Studies and a note of any consultations with the resulting improvement actions.

Within the Key Successes are the improvements listed from the previous year's review. Performance against these improvements is noted.

The Service Plan and Scorecard are key to the review as it will enable stakeholders to track the delivery of the agreed Business Outcomes, and the delivery of the Corporate Plan and ABOIP. It will also form the basis of key improvements for the future.

APRs are first approved by the Executive Director before being reported to SMT and then to the relevant Strategic Committees.

The Service APR also forms the basis for the Council Annual Report. Both are published on the council website and form part of our Public Performance Reporting duties.

### Detail

The Service APR has four sections for completion. All sections illustrate alignment by Business Outcome.

#### **Key Successes**

This should include the Key Improvements identified from –

- > The previous years' APR along with the progress made
- > Improvements identified during the year and noted in the Service Plan.

There is an opportunity to detail the positive contribution made to our communities in the form of Case Studies.

### **Key Challenges**

Any Key Improvements not completed within the agreed timescale plus any additional challenges that have been identified should be noted here.

### **Key Improvement Actions**

The Key Improvement actions to redress the Challenges are noted here.

### **Consultation and Engagement**

Details of Consultations that have taken place, a summary of customer responses and the improvement actions undertaken in response to the consultation are detailed here. This in itself is part of our Public Performance Reporting duties – You Said / We Did.

### **Service Annual Performance Review Template**

### **Annual Performance Review 20...-20....**

<Name of Service>

### **KEY SUCCESSES** Key Improvements from previous year's annual performance review Business Outcome..... Business Outcome..... 2 Other Key Improvements during 2018/19 Business Outcome..... 1..... Business Outcome..... Case Studies illustrating the positive contribution to our communities Business Outcome..... Business Outcome.....

KEY CHALLENGES AND ACTIONS TO ADDRESS CHALLENGES		
Key improvements from previous year's APR not completed plus any additional challenges that have been identified		
Business Outcome		
Challenge		
Action		
Completion Date		
Business Outcome		
Challenge		
Action		
Completion Date		
Business Outcome		
Challenge		
Action		
Completion Date		

CONSULTATION AND ENGAGEMENT				
Supports Business Outcome				
We asked (focus of consultation)	You said (customer response)	We did (improvement actions)		
Supports Business Outcome				
We asked (focus of consultation)	You said (customer response)	We did (improvement actions)		
Supports Business Outcome				
	You said (customer response)	We did (improvement actions)		
We asked (focus of consultation)	You said (customer response)	We did (improvement actions		

### <Name of Head of Service and date>

Attach Service Scorecard to this report and submit for approval (Scorecard provided by HROD)

Timeline: Service Annual Performance Reviews 2019/20

Ref	Date	Event	Lead
01	29 April 2019	APR template and guidance agreed by the SMT and sent to Heads of Service for completion.	Jane Fowler
02	27 May 2019	<u>Draft_APRs</u> on agenda at DMTs for initial overview / approval	Heads of Service / Ex Dir / SMT
03	5 June 2019	APRs submitted to HROD for final formatting prior to SMT approval on 10 June 2019 performance@argyll-bute.gov.uk	Heads of Service
04	10 June 2019	APRs reviewed at SMT meeting on 10 June 2019	Heads of Service / Ex Dir / SMT
05	16 July 2019	APRs submitted to Committee Services for P&RC meeting 15 August 2019	Directorate CuS
06	1 August 2019	APRs submitted to Committee Services for PPSL meeting on 21 August 2019	Directorate D&I
07	13 August 2019	APRs submitted to Committee Services for CS meeting on 5 September 2019	Directorate ED
08	20 August 2019	APRs submitted to Committee Services for EDI meeting on 12 September 2019	Directorate D&I
09	27 August 2019	All APRs submitted to Council meeting on 26 September 2019 prior to publication on website	Jane Fowler
10	1 October 2019 - TBC	Content of approved APRs extracted into the Council's Annual Report – final review by SMT	Jane Jarvie

### Information Guide for the Council Annual Report



### 25 September 2019 Version 2.2

**Contact: Jane Fowler** 

Version 1.0	21 July 2017	Refreshed following
		approval of the PIF
Version 2.0	3 April 2018	Revised timeline
Version 2.1	11 June 2019	Council Scorecard included in CAR
Version 2.2	25 September 2019	Corporate Structure Updates

This document provides information on the Council Annual Report

### **Introduction**

The Council has a statutory duty to report on its performance annually. The Report is presented in variety of formats to help communicate the challenges and success of the past financial year and is key to the Public Performance Reporting duties. Scrutiny of performance is an essential tool for improvement and is carried out at all levels of the Council by Senior Officers, Managers and Elected Members.

#### Detail

The Council Annual Report is compiled from the Service Annual Performance Reviews which are undertaken close to year-end each year. In order to appeal to a wider audience the style and format of the Report may change, making better use of the web, social media and formatting tools. The change in style also takes into account the requirements of the council balanced with the needs of our communities and citizens.

The Councils performance for the financial year is presented through the Council Scorecard which is included in the Council Annual Report.

In the Report we focus not just on what we have done but also how we have done it by highlighting the role of consultation/listening to our communities in achieving change.

The Report promotes the contribution that consultation findings have had on how the council has made changes, help communicate that we listen to our communities, encourage people to get involved in working with us and attract more people to read the annual report.

### Timeline: Council Annual Report 2019/20

Ref	Date	Item	Lead
01	27 May 2019	HROD receives the Service Annual Performance Reviews as submitted to SMT	Head of Service
02	3 June 2019	HROD liaises with the CPP to ensure consistency across Outcomes	HROD
03	17 June 2019	HROD passes collated information to Communication team for formatting	Comms Team
04	30 September 2019	Draft Council Report submitted to DMT for review (TBC)	Comms Team
05	14 October 2019	Draft Council Report submitted to SMT for review (TBC)	Comms Team
06	17 October 2019	Draft Council Report submitted to P&RC for approval	Comms Team
07	28 November 2019	Council Annual Report submitted to Council for noting	Comms Team
08	28 November 2019	Council Annual Report posted on Website	HROD

### Information Guide for the Local Government Benchmarking Framework



### 25 September 2019 Version 1.1

**Contact: Jane Fowler** 

Version 1.0	16 March 2017	Refreshed following approval of the PIF
Version 1.1	25 September 2019	Corporate Structure Updates

This document provides information of the Local Government Benchmarking Framework (LGBF).

#### Introduction

The Accounts Commission defines the performance information that Councils must publish locally in the following financial year. Publishing performance information is a statutory duty and is called Public Performance Reporting – PPR.

#### Detail

It is essential for Councils to have performance information which helps them agree their priorities and then report effectively and clearly to their communities. Performance information needs to be easily accessible and easily understood by our communities and citizens. This will allow the council's performance to be assessed and compared. Furthermore, good performance information is an essential tool for all councillors.

Councils have been encouraged by the Accounts Commission to develop their performance reporting and performance measures. To further support this the Local Government Benchmarking Framework was established in 2012.

Since its conception the LGBF has and will continue to develop.

The LGBF annually collates defined performance measures from each of the 32 Scottish local councils. The performance measures meet the Best Value principles and the characteristics of each performance measure are clearly defined and met. This is to ensure that 'what' is being measured is comparable as much as possible between all 32 councils.

The ability to compare performance across all 32 councils is Benchmarking. Benchmarking is a valuable tool for identifying improvements and supports all councils to improve services by learning and working together. Trend data is also identified and assists with noting commonalities between councils.

The 32 councils all differ in terms of geography, population and areas of deprivation. These differences should be taken into account when comparing our performance with other councils. To help make these comparisons more meaningful and share good practice we are part of a 'family group' of eight other councils with similar characteristics, including population and deprivation.

There are two sets of Family Groups - People's Services and Corporate Services.

- Within People's Services we are part of Group 2 along with Angus; East Lothian; Highland; Midlothian; Moray; Scottish Borders and Stirling.
- Within Corporate Services we are part of Group 1 along with Aberdeenshire; Dumfries and Galloway; Eilean Siar; Highland; Orkney Islands; Scottish Borders and Stirling.

Further information on the LGBF can be found by clicking this <u>link</u>, with further information on 'family groups' can be found <u>here</u>.

## Completion Guidance for indicators required for the LGBF-SPI



### 25 September 2019 Version 1.3

**Contact: Jane Fowler** 

Version 1.0	27 February 2017	Refreshed following approval of the PIF
Version 1.1	1 May 2018	Dates amended for 2017/18 submission
Version 1.2	29 September 2018	Refreshed following on- line submission process
Version 1.3	25 September 2019	Corporate Structure Updates

#### Introduction

This document provides guidance for the completion of the annual Statutory Performance Indicators (SPIs) as part of the Local Government Benchmarking Framework (LGBF).

The Improvement Service (IS) issues a link to an on-line formatted pro-forma. The detailed guidance, metadata, definitions and any other directions from statutory bodies are made available to HR Organisational Development (HROD). The formatted pro-forma is normally available in late April / early May and is required to be fully completed and returned to the IS by the 31<sup>st</sup> August each year.

HROD liaises with the IS and a member of staff identified by each relevant Head of Service (HoS), known as the SPI Co-ordinator. HROD issues the downloaded proforma, documentation and information to the SPI Co-ordinators; ensures that the pro-forma is fully completed and returned within the deadline and deals with any queries from SPI Co-ordinators.

HROD collates and submits the completed pro-formas from the SPI Co-ordinators to Internal Audit (IA) who audit selected SPIs and completed the online pro-forma.

Each SPI Co-ordinator completes their own section and returns it to HROD.

#### Detail

The SPI Co-ordinator is responsible for ensuring that all data and explanations are checked and endorsed by the relevant HoS then submitted to HROD by late May. Evidence of compliance may be asked for by HROD or IA.

The SPI Co-ordinator must retain details of data source and calculations for audit purposes. If relevant, reports must be generated from source systems as explained in the detailed guidance and retained. Particular attention must be paid to capturing data for the specified time period(s).

The pro-forma highlights the scale of any changes between the current year and last year's figure. Where the change is greater than 10% a box will appear in the 'reason for change' column. Narrative outlining the reasons for the scale of change must be noted here. There is also a requirement with some indicators to indicate whether we are fully or partially compliant.

HROD will update the SMT if there are any pressure points concerning the return.

There may be delays caused by year-end accounting, these are inevitable and should be notified to HROD who will communicate this to IA.

The IS may issue amended guidance or pro-formas. HROD will also check the IS web site periodically to ensure no communications have been missed. HROD will coordinate the circulation and response.

HROD consolidates the pro-forma responses and any variance explanations from Services to IA. Timing to be agreed with regard to any delayed SPIs.

Each year IA select a selection of SPIs for auditing, HROD informs the SPI Coordinators of this decision.

IA works with the SPI Co-ordinators to ensure that the data is supportable. <u>IS</u> website for more information.

IA may meet with our external auditor to agree the final position. This is an opportunity for the auditors to comment on the process regards positive and difficult aspects. The comments are passed to the relevant SPI Co-ordinators as appropriate.

IA reports the findings of their audit to the SMT and Audit Committee entitled: *Review of LGBF Indicators 2017-18.* 

HROD submit the audited and completed pro-forma to the IS by 30 August.

The data is consolidated by the IS and published on the <u>LGBF Website</u>.

HROD ensures that a reference to this website is included in the Council's Public Performance Reporting with the link included on the Council's Website and elsewhere as appropriate.

### Timeline responsibilities

Ref	Date	Item	Lead
01	13 May 2019	HROD receives the formatted pro-forma from IS	HROD
02	24 May 2019	HROD check IS website for amended guidance.	HROD
03	31 May 2019	Local SPI Co-ordinators submit completed pro-forma to HROD	SPI Co-ordinator
04	5 June 2019	HROD passes consolidated pro-forma to IA for auditing	HROD
05	24 July 2019	IA completes audit of selected SPIs	IA
06	5 August 2019	Draft SPI return submitted to D&I DMT	HROD
07	August 2019	IA may meet with external auditor to agree final position and comment on any aspects	IA
08	19 August 2019	SPI return at SMT prior to submission to IS	HROD
09	30 August 2019	HROD submit the completed pro-forma to IS	HROD

### **Public Performance Reporting Guidance**



### 25 September 2019 Version 1.1

**Contact: Jane Fowler** 

Version 1.0	04 December 2018	Refreshed following
		approval of the PIF
Version 1.1	25 September 2019	Refreshed following approval of the PIF

This document provides information of the Councils statutory Public Performance Reporting (PPR) duty.

#### Introduction

The Council has a statutory duty under the Local Government Scotland Act 2003 to provide Best Value and a commitment to continuous improvement, as well as to report honestly and transparently on performance and achievements. This is called Public Performance Reporting (PPR).

All items of information that relate to PPR are posted on the Council Website, but they are also available in other forms. Some items of information are automatically available in hard copy such as Council Tax Leaflet, all are available in hard copy if requested.

Listed below are the items of information publication, all items are expected to be published within 1 month of approval. Additionally to this list, service specific reports, plans and reviews are published by each Service.

### <u>Plans</u>

- ➤ ABOIP Argyll & Bute Outcomes Improvement Plan
- Corporate Plan
- Service Plans
- Corporate Improvement Plan
- Argyll and Bute Local Development Plan

### Reports and Information

- Executive Director Quarterly Performance Reports & Scorecards
- Council 6-monthly Performance Reports & Scorecards
- Council Annual Report
- Service Annual Performance Reviews
- Education Standards and Quality Annual Reports
- ➤ ABOIP (SOA) Annual Report
- Annual Financial Accounts
- Staffing Watch figures for HR information
- Biodiversity Duty Report
- Climate Change Report
- ➤ LGBF Local Government Benchmarking Framework
- Annual and Quarterly Complaint Figures
- Asset Management Scorecard
- Procurement Contracts Awarded

### Committee Reports

Audit and Scrutiny Committee

- Various Strategic Committee
   Area Committee Performance Reports and Scorecard (Quarterly)

## Glossary and Elements of Argyll and Bute Council's Performance and Improvement Framework



### 25 September 2019 Version 1.2

**Contact: Jane Fowler** 

Version	Date	Amended
V 1.0	21 March 2017	
V 1.1	04 December 2018	Updated PIF, ABOIP
V 1.2	25 September 2019	Corporate Structure Updates

### Glossary and Elements of Argyll and Bute Council's Performance and Improvement Framework

### **Glossary**

ABOIP Argyll and Bute Outcomes Improvement Plan. Previous Single

Outcome Agreement (SOA).

**Benchmarking** Benchmarking refers to the comparison of a business's

processes and performance with those of other organisations in order to see how well it is doing in relation to others. In turn, benchmarking may be a learning tool, and can be used to identify areas for business improvement. Typical things to

benchmark are quality, time and cost.

Benchmarking may be used to compare organisations that have similar characteristics (e.g. other rural authorities) or with 'best

in class' organisations.

'Longitudinal benchmarking' may refer to the comparison of a

single organisation's performance over time.

Best Value The duty of Best Value, which was set out in the Local

Government in Scotland Act (2003), requires that Public Services make arrangements to secure continuous

improvement in performance whilst maintaining an appropriate

balance between quality and cost. In making these

arrangements and securing that balance, Public Services must have regard to economy, efficiency, the equal opportunities requirements, and to contribute to the achievement of

sustainable development.

(https://www.gov.scot/publications/scottish-public-finance-

manual/best-value/best-value/)

**Consultation** Consultation is the dynamic process of dialogue between

individuals or groups, based upon a genuine exchange of views, with the objective of influencing decisions, policies or

programmes of action (Consultation Institute).

Continuous Improvement

Continuous improvement is the improvement of products, services or processes through incremental and breakthrough improvements. Improvement should not be seen as a series of one-off activities that are completed and then forgotten; instead, improvement should be seen as being an ongoing process.

### **Corporate Plan**

The Corporate Plan sets out the council's strategic priorities and how these relate to the council's corporate outcomes and mission as well as to the vision and outcomes we share with our community planning partners.

#### **Engagement**

Engagement involves an on-going mutually beneficial two-way partnership between the council and stakeholders. Decision-making may be shared between the parties. Engagement differs from consultation because the relationship between the parties is ongoing.

#### **External evaluations**

Some parts of the council are subject to external evaluations and inspections. These may lead to the identification of Areas for Improvement.

### **Inspections**

Some parts of the council are subject to external evaluations and inspections. These may lead to the identification of Areas for Improvement.

### Internal selfevaluation

As part of the PIF's monitoring and review activities, the council requires people at all levels to engage in self-evaluation. We need to reflect honestly on our activities and functions to help identify areas for improvement.

### Local Government Benchmarking Framework

The Local Government Benchmarking Framework (LGBF) brings together a range of information about the performance of Scottish councils. The LGBF has published benchmarking data for a range of indicators annually since 2010-11. The LGBF indicators cover seven service areas that, together, account for over 60% of local government spending. These service areas are: children, corporate, adult social care, culture and leisure, environmental, housing and economic development.

### Local Government in Scotland Act (2003)

The Local Government in Scotland Act (2003) placed a statutory duty of Best Value upon local authorities in the discharge of their functions. The Act also required local authorities to engage in, and demonstrate, continuous improvement.

### Local Outcomes Improvement Plan

The Local Outcomes Improvement Plan is a joint statement from the Argyll and Bute Community Planning Partnership. It sets out the partnership's vision for achieving long term outcomes for communities in Argyll and Bute. It is supported by locality plans and delivery plans. The LOIP outcomes are the same as six of the seven corporate outcomes.

#### LOIP

Local Outcomes Improvement Plan. Former name of SOA. Now known as ABOIP.

Performance and Improvement Framework The Performance and Improvement Framework sets out how the council approaches its performance and improvement functions to ensure that it meets its obligations to deliver Best Value to the people of Argyll and Bute.

Performance management

Performance management involves the assessment of an employee, process, equipment or other factor to gauge progress towards predetermined goals. On the basis of the observed performance, actions should be taken to make improvements as required.

Performance Management System (Pyramid) The council uses a software programme called QPR to manage its performance information. Locally, this system is referred to as Pyramid.

Performance measures

Performance measures are quantifiable indicators that are used to assess how well the organisation is achieving its intended objectives or outcomes. The review of performance measures is an integral part of performance management, and enables managers to assess in an objective manner how their business is operating and whether improvement is required. To achieve this, measures should be SMART: Specific, Measureable, Agreed upon, Realistic and Timebound. Measures should be associated with targets and, where possible, benchmarks.

Performance Review and Development (PRD)

PRDs are annual appraisals carried out for individual members of staff. PRDs look at performance over the previous year and set out targets and development needs for the year ahead. Corporate and other training needs are identified and planned for, based on information submitted in an individual's PRD.

PIF

See Performance and Improvement Framework

Public Performance Reporting (PPR) All performance that is reported to the public. Some performance reporting is carried out as a statutory activity. Most reporting is desirable. PPR is required as part of Best Value, and can reduce numbers of Freedom of Information Requests.

**PPR** 

See Public Performance Reporting.

**Pyramid** 

The council uses a software programme called QPR to manage its performance information. Locally, this system is referred to as Pyramid.

Scrutiny

Scrutiny requires assessing evidence (e.g. relating to performance indicators, benchmarking data and financial processes) to enable the examination of policies and procedures, and the formation of recommendations for improvement.

#### Self-evaluation

A lot of improvement activity starts with some form of self-evaluation. The key point of self-evaluation is that it is something we do ourselves, about ourselves. Self-evaluation can range from simple and informal activities (e.g. SWOT) through to more complicated, formal exercises (e.g. PSIF). All self-evaluation activities have in common the need for open and honest reflection. Self-evaluation may also be referred to as self-assessment in some places.

### Single Outcome Agreement

Former name of the LOIP. Now known as ABOIP

**SOA** See Single Outcome Agreement

#### **Elements**

The key elements of the Performance and Improvement Framework are:

- Argyll and Bute Outcomes Improvement Plan (ABOIP)
- Corporate Plan
- Service Plans (incorporating improvement plans)
- Team Plans
- Performance Review and Development Plan (PRD)

Together, these plans set out the main activities that the council carries out in the delivery of its functions. The actions set out in these plans may be complemented by thematic plans, locality plans, and workforce plans.

# Where to go, and who to contact, for additional support relating to Argyll and Bute Council's Performance and Improvement Framework



### 25 September 2019 Version 1.3

**Contact: Jane Fowler** 

Version	Date	Amended
Version 1.1	28 Aug 2017	Change of contact for D&I
Version 1.2	30 April 2018	Updated contact details
Version 1.3	25 September 2019	Corporate Structure Update

### Where to go, and who to contact, for additional support relating to Argyll and Bute Council's Performance and Improvement Framework

If you have any queries about the Performance and Improvement Framework, contact either the HR&OD Business Partner (Performance and Improvement) or the key officer listed below.

Contact details are given below.

HROD Business Partner (Performance and Improvement)	Lisa Bond
Douglas Hendry, responsibility for Education.	Morag Brown
Community Planning	Samantha Somers
Douglas Hendry, responsibility for Legal & Regulatory Services and Commercial Services.	Fiona Ferguson
Pippa Milne, responsibility for Customer Support Services; Roads & Infrastructure Services and Development & Economic Growth.	Calum MacRaild