



**SOCIAL CARE, HEALTH AND HOUSING SCRUTINY COMMITTEE**

**2.00 pm THURSDAY, 16 MARCH 2017**

**COUNCIL CHAMBER - PORT TALBOT CIVIC CENTRE**

**PART 1**

1. To receive any declarations of interest from Members
2. To receive the Minutes of the previous Social Care, Health and Housing Scrutiny Committee held on 9 February 2017 (*Pages 5 - 10*)

**To scrutinise decision, information and monitoring issues being reported by:**

**Head of Commissioning and Support Services**

3. Business Support Community Care Service Report Card (*Pages 11 - 24*)
4. To select appropriate items from the Cabinet Board Agenda for pre-scrutiny (Cabinet Board reports enclosed for Scrutiny Members).
5. Any urgent items (whether public or exempt) at the discretion of the Chairman pursuant to Section 100B (4) (b) of the Local Government Act 1972
6. Access to Meetings to resolve to exclude the public for the following item(s) pursuant to Section 100A(4) and (5) of the Local Government Act 1972 and the relevant exempt paragraphs of Part 4 of Schedule 12A to the above Act.

## **PART 2**

7. To select appropriate private items from the Cabinet Board Agenda for pre-scrutiny (Cabinet Board Reports enclosed for Scrutiny Members).

**S.Phillips**  
**Chief Executive**

**Civic Centre**  
**Port Talbot**

**Friday, 10 March 2017**

### **Committee Membership:**

**Chairperson:**      **Councillor Mrs.D.Jones**

**Vice**  
**Chairperson:**      **Councillor Mrs.A.Wingrave**

**Councillors:**      Mrs P.Bebell, A.Carter, J.S.Evans, H.N.James,  
J.Miller, Mrs.S.Paddison, C.Morgan, L.M.Purcell,  
Mrs C.Edwards, A.Taylor and D.Whitelock

### **Notes:**

- (1) *If Committee Members or non-Committee Members wish to have relevant items put on the agenda for future meetings, then please notify the Chief Executive/Chair eight days before the meeting.*
- (2) *If non-Committee Members wish to attend for an item of interest, then prior notification needs to be given (by 12.00 noon on the day before the meeting). Non-Committee Members may speak but not vote, or move or second any motion.*
- (3) *For pre scrutiny arrangements, the Chair will normally recommend forthcoming executive items for discussion/challenge. It is also open to Committee Members to request items to be raised - though*

*Members are asked to be selective here in regard to important issues.*

- (4) The relevant Cabinet Board Members will also be invited to be present at the meeting for Scrutiny/ Consultation purposes.*
- (5) Would the Scrutiny Committee Members please bring the Cabinet Board papers with them to the meeting.*

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**SOCIAL CARE, HEALTH AND HOUSING SCRUTINY COMMITTEE**

**(Committee Rooms A/B - Neath Civic Centre)**

**Members Present:**

**9 February 2017**

**Chairperson:** Councillor Mrs.D.Jones

**Vice Chairperson:** Councillor Mrs.A.Wingrave

**Councillors:** A.Carter, J.S.Evans, H.N.James,  
Mrs.S.Paddison, C.Morgan, L.M.Purcell,  
Mrs C.Edwards and D.Whitelock

**Officers In Attendance** A.Jarrett, N. Jarman, Mrs.A.Thomas L. Jones,  
S.Adie, G. Evans, , Ms.S.Jenkins,  
Mrs.J.Duggan, G. Pascoe, and N.Evans

**Cabinet Invitees:** Councillors P.D.Richards and J.Rogers

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1. **TO RECEIVE THE MINUTES OF THE PREVIOUS SOCIAL CARE, HEALTH AND HOUSING SCRUTINY COMMITTEE HELD ON 13 DECEMBER 2016**

The minutes were noted by the Committee.

2. **TO RECEIVE THE SCRUTINY FORWARD WORK PROGRAMME 2016/2017.**

The Committee noted the work programme.

3. **CORPORATE IMPROVEMENT OBJECTIVE - PROSPERITY FOR ALL (HOUSING) QUARTER THREE HIGHLIGHT REPORT 2016/2017**

Members considered a report on the Corporate Improvement Objective – Prosperity for All in respect of the Housing element.

Members asked why the number of private rented tenancies made available that were available and likely to be available for at least 6 months had reduced. Officers responded that there had been properties secured in the private sector and that subsequently more

funding had become available to more would be made available in due course.

Members asked for the reasons why a review of homelessness had been delayed given that the individuals are some of the most vulnerable. Officers stated that the review had in fact commenced and was approximately 60% complete any outcome from the review will be implemented during the next financial year.

Following scrutiny the report was noted.

4. **CORPORATE IMPROVEMENT OBJECTIVE - IMPROVING OUTCOMES IMPROVING LIVES QUARTER THREE HIGHLIGHT REPORT 2016/2017**

Members considered the report on the Corporate Improvement Objective; Improving Outcomes Improving Lives.

Members noted that the take up of Direct Payments had increased however, concern was raised that the number of hours of care and support had reduced. Officers explained that this was because the care and support packages were now more tailored to individuals.

Officers noted the concerns of Members that the percentage of referrals screened within 24 hours was 58% as opposed to 74% for the previous year. Officers explained that this was because of capacity and a lack of resources but this has been addressed and the figure will increase by the end of the year.

Members noted that there had been a significant increase in the number of adult safeguarding referrals and asked whether this was due to increased awareness. Officers stated that it was due to a number of factors including an increased awareness. Officers also stated the majority of the increase was in respect of residential care homes that were in escalating concerns.

Members asked for an update on phase 2 of the Gwalia contract. Officers stated that the process was ongoing and negotiations had been difficult. It is hoped that agreement will be reached shortly and then a full update will be provided.

Officers were asked whether there was any delay in people receiving direct payments. Officers stated that there were no delays at present but there had been some issues previously following the departure of

the relevant officer with responsibility for Direct Payments. There had been specific problems with the recruitment of personal assistants but this had also been addressed.

Members were informed that the Council was monitoring those homes that had been placed in escalating concerns by CSSIW particularly where there had been safeguarding referrals. Members asked for a further report to be presented to the Committee in relation to the homes.

Members asked for assurance that individuals were not being bullied to take Direct Payments. The Director stated categorically that this was not happening.

Following scrutiny the report was noted.

5. **DIRECTORATE SUPPORT SERVICE REPORT CARD**

Members considered the Directorate Support Office Service Report Card.

Members asked whether the appeal caseload had had an effect on sickness absence within the unit. Officers stated that this was not the case.

Members requested that a report be brought back to the Committee in relation to the Welfare Rights Unit as it was accepted that the work of this unit was invaluable and should be congratulated.

Following scrutiny the report was noted.

6. **WESTERN BAY AREA PLANNING BOARD REGIONAL COMMISSIONING AND SUPPORT TEAM SERVICE REPORT CARD 2016/2017**

Members considered the Western Bay Area Planning Board Regional Commissioning and Support Team Service report card.

Members asked whether there was a possibility that pressures on the service will increase due to increased media coverage. Officers stated that it was not possible to confirm this either way but there will be continual problems faced by individuals.

Members asked whether an individual needs to have a fixed address to access services to help and support them. Officers confirmed that individuals do not need have a fixed address.

Following scrutiny the report was noted.

## 7. **PRE-SCRUTINY**

The Committee scrutinised the following matters:

### Cabinet Board Proposals

#### 7.1 Homecare Service – CSSIW Inspection Report

Members considered a report that was the outcome of the CSSIW inspection of the in house Homecare service undertaken in 2016.

Members welcomed the report and the positive assessment made by CSSIW. They asked whether CSSIW undertake similar inspections with private sector providers. Officers confirmed that the inspections are the same.

Following scrutiny the report was noted.

#### 7.2 Pre-Paid Cards to Support Direct Payments

Members considered a report that sought to change the provider of the Pre-Paid Cards.

Members asked who would be liable for the cost of the cards. Officers confirmed that this would be passed on to the users. Members asked for their concerns to be noted that they hoped this did not cost too much and lessen the funding available as Direct Payments. Officers stated that they would provide the actual cost per card outside of the meeting.

Members asked whether there are any limitations on what can be purchased on the card and if not why aren't the payments paid directly into a bank account. Officers stated that like other pre-paid credit or debit type cards there are no limitations on what can be purchased. It was further confirmed that whilst many individuals have bank accounts there are some who are unable to open a bank account and thus the pre-paid card is a necessity for them.



Members raised concern that the cards could be mis-used by individuals and officers confirmed that like anything there was this possibility although spending is monitored to ensure that the right types of services are purchased.

Officers stated that Members should be mindful that pre-paid cards were already in place and being used by individuals and the recommendation was to identify an alternative provider and if Members suggested removing the cards totally then this would disadvantage a number of individuals.

Following Scrutiny the Committee was supportive of the proposals to be considered by Cabinet Board.

8. **ACCESS TO MEETINGS TO RESOLVE TO EXCLUDE THE PUBLIC FOR THE FOLLOWING ITEM(S) PURSUANT TO SECTION 100A(4) AND (5) OF THE LOCAL GOVERNMENT ACT 1972 AND THE RELEVANT EXEMPT PARAGRAPHS OF PART 4 OF SCHEDULE 12A TO THE ABOVE ACT.**

9. **PRE-SCRUTINY**

The Committee scrutinised the following private matters.

**Cabinet Board Proposals**

10.1 **Supporting People Local Commissioning Plan 2017/2020**

Members considered the Local Commissioning Plan for Supporting People for the period 2017/2020.

Members were concerned that the intention was to reduce from 10 organisations that the Council contracts with to one and would this mean the Council would go for the cheapest option. Officers stated that it is envisaged that it could be a consortia of organisations or one larger organisation but regardless of this the Council would not automatically go for the cheapest option.

Members asked for clarity on the Quality Impact Assessment as it was not easy to understand which protected characteristics the proposals would affect and in addition the assessment stated that the service does not currently collect this data. Officers stated that it was an admin error for the lack of clarity but confirmed that there would be no detriment to service users.

Members requested that further training be arranged for Officers in relation to the Equality Impact Assessments.

Following scrutiny the Committee was supportive of the proposals to be considered by Cabinet Board.

## 10.2 Consultant Procurement

Members considered the report that sought to extend the contract of a consultant who was undertaking a role as an Interim Principal Officer.

Members were advised that it had become increasingly difficult to attract the correct calibre of individual to posts such as Principal Officers.

Members asked would this decision leave the Council open to challenge. Officers confirmed that potentially it could but the risk of service failure for not taking the decision far outweighs the risk of challenge.

Officers stated that there would be a further report brought back to the Committee to highlight the staffing changes and restructuring that had taken place given the significant amount of change that had been undertaken over the past 15 or so months.

Following scrutiny the Committee was supportive of the proposals to be considered by the Cabinet Board.

**CHAIRPERSON**

## NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

### Social Care, Health and Housing Scrutiny Committee

16 March 2017

### Report of the Head of Commissioning and Support Services

#### Matter for Monitoring

**Wards Affected:** All Wards

#### **Business Support Community Care Service Report Card 2016-17**

#### **Purpose of the Report**

1. To present for Scrutiny the Service Report Card for the Business Support Community Care section

#### **Executive Summary**

2. The Social Care, Health and Housing Cabinet Board at its meeting on 9 June 2016 approved the Divisional Business Plan for Commissioning and Support Services
3. Each Business Unit within the Division is required to complete a Service Report Card for each financial year, outlining the following:
  - Performance against last year's Action Plan and Targets

- The challenges and opportunities faced in the short and medium term
  - The actions and targets for the 12 months from April 2016 to March 2017.
4. The service report card, set out in Appendix A, summarises the service priorities, key measures and key actions for the Business Support Community care section.

### **Financial Impact**

5. The work delivered is funded by revenue budget only.

### **Equality Impact Assessment**

6. There are no equality impacts associated with this report.

### **Workforce Impacts**

7. These are covered within the appended report.

### **Legal Impacts**

8. There are no legal impacts associated with this report.

### **Risk Management**

9. A risk matrix for the Directorate has been prepared which incorporates the risk within the service area.

**Then list any other impacts that are relevant – see Appendix 1 for details of some other general duties that may apply.**

### **Consultation**

10. Employees within the individual services and external customers, where relevant have been consulted in the development of the service report card.

## **Recommendations**

11. That the scrutiny committee note the report.

## **Reasons for Proposed Decision**

12. That the scrutiny committee undertakes its performance monitoring role.

## **Appendices**

13. Appendix One - Business Support Community Care Service Report Card

## **List of Background Papers**

14. Commissioning and Support Services Divisional Business Plan

## **Officer Contact**

15. Robert Hopkins, Business Strategy Manager Tel: 01639 684773; email: r.hopkins@npt.gov.uk

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**Service Report Card 2016-2017**  
**Business Strategy - Community Care Services (1.4.16 - 31.12.16)**

**Section 1:**  
**Brief description of the service**

The Business Strategy Community Care Services section is a sub section within Commissioning & Support Services; the section has a number of multi-functional roles within it, but predominantly that of supporting approximately **600** Full Time Equivalent (**FTE**) Social Care & Health Colleagues with key business support tasks. The section is located in satellite offices across the County Borough such as the Community Mental Health team in Gelligron, Cimla Hospital and Rhodes House in Port Talbot. Some of the teams we support include the Community Mental Health Teams, the Integrated Community Resource Teams and Social Work Networks as well as the Protection of Vulnerable Adults Team.

The Business Strategy Manager is responsible for ensuring that the service is operating with minimal backlogs, within budget, with a low rate of sickness and with a workforce who are encouraged to develop their skills.

We also have a dedicated Performance Management Team who are responsible for providing strategic management information to Senior Managers and Welsh Government.

Some of the functions provided by the Section include:

- Business Planning
- Case Management Business Support
- Sickness Management
- IT Governance
- Database Management and Re-design
- Data Processing
- Performance Reporting and Statistical analysis

The Section consists of **31.87 FTE** staff. In addition, we are developing a pool of Foundation Apprentices who continue to provide a valuable peripatetic service to our social work teams.

**Section 2:  
Overall Summary of Performance for 2015-16**

Performance across the Service during 2015-16 has been good; the Service met service priorities which were formally monitored by the Head of Service through the supervision and appraisal processes of senior officers within the Section. Although no formal performance measures were in place during 2015-16, new measures were considered in preparation for this years' Service Business Plan and the necessary monitoring processes adopted. Performance Measures are monitored on a quarterly basis.

The service has operated to date within its required budget. Our sickness rates are lower than the Directorate and Council averages.

We are actively working on creating electronic (e-files) files for all Community Care case files.

We have successfully recruited Foundation Apprentices and supported them in the workplace and through academic studies.

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**Section 3:  
Service Priorities 2016-17**

Priority	Actions to deliver priority	Officer Responsible	Timescale	What will be different? Measures and/or Outcomes
1. Ensure compliance with the revised performance management framework for the Social Services Well Being Act 2014	Develop processes, systems and IT reports to capture new suite of performance measures for 16-17.	Mike Potts (MP)	March 2017	100% of new Quantitative Performance Indicators & Measures will be reported to Scrutiny and Welsh Government:
2. Ensure robust systems are in place to contribute towards Business Strategy's Forward Financial Plan	Discuss and review staffing structure on a monthly basis. Make business case decisions as and when	Rob Hopkins (RH)	Throughout 2016-17	The service will operate from within budget. FFP savings achieved.



targets. Community Care Admin contributions comprise of £31,500 “vacancy factor” savings	vacancies arise. Record all activity on a monitoring spreadsheet. Link closely with Budget Officer.			
3. Ensure robust systems are in place to reduce the risks of any potential breaches in information security	Established an Information Security working group. (Including Corporate IT colleagues)  Action Plan devised and monitored on a quarterly basis.	Rob Hopkins (RH)	Throughout 2016-17	100% of Action Plan Tasks have been completed.  Risk of breaches is reduced.
4. The number of working days per full-time equivalent (FTE) lost due to sickness, to be lower than the corporate average	Sickness tracker established to ensure compliance with policy.  Regular spot checks by manager to ensure all staff receive a timely Return To Work interview.  Robust application of the Maximising Attendance at work policy.	Rob Hopkins (RH)	Throughout 2016-17	The number of working days per full-time equivalent (FTE) lost due to sickness, to be lower than the corporate average
Page 17 Ensure all administrative staff supporting Community Care Services have a Performance Development Review (PDR) by 31st March 2017	Hierarchical approach to deliver reviews to all staff.  All staff have PDR’s booked in by 31 <sup>st</sup> March 2017.  Tracker established to ensure compliance.	Rob Hopkins (RH)	March 2017	100% of staff in receipt of a new style PDR by 31st Mar 2017
6. To support the Head of Commissioning and Support Services in all contentious matters relating to staffing e.g. Grievances, Disciplinary and Capability, across the Social Services, Health and Housing Directorate	Staff to receive suitable training to undertake the task in hand.  Staff to have the capacity to complete the task.	Rob Hopkins (RH)	Throughout 2016-17	Completion of Investigations as and when required.  Completion of Training.  Completion of Investigations to an adequate and timely standard.
7. Administrative support to Network and Community Resource Teams – Provide a business support service which is continuously improving	Progression with the conversion of paper based files to electronic.  We will enhance existing customer questionnaire.	Lucy Jones (LJ)	Throughout 2016-17	Ongoing Increase of electronic case files that are accessible electronically.  Annual questionnaire of Practitioners undertaken and findings analysed.

	Developed tracker to regularly monitor backlogs of key business tasks.			Manageable backlogs.
8. Administrative support to all other Community Care Services Teams – Provide a business support service which is continuously improving.	<p>Progression with the conversion of paper based files to electronic.</p> <p>We will enhance existing customer questionnaire.</p> <p>Developed tracker to regularly monitor backlogs of key business tasks.</p>	Lucy Jones (LJ)	Throughout 2016-17	<p>Ongoing Increase of electronic case files that are accessible electronically.</p> <p>Annual questionnaire of Practitioners undertaken and findings analysed.</p> <p>Manageable backlogs</p>
9. Performance Management – provide a performance management function which is continuously improving.	<p>Production of Data Dashboards</p> <p>New suite of Performance Measures</p> <p>Resurrection of Performance Management Oversight Group</p>	Mike Potts (MP)	Throughout 2016-17	<p>% of Adult Services Management Group (ASMG) Statistics and Data Dashboards which have been disseminated within agreed timescale</p> <p>% of ASMG Statistics and Data Dashboards which have required re-issue.</p> <p>Conduct Annual Questionnaire of Social Work Managers</p>

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**Section 4:  
Service Performance Quadrant 2016-17**

Overall, we are on target to achieve our service priorities for the financial year 2016-17.

New performance measures have been identified and developed for 2016-17; despite this officers within the service have embraced the new measures, some have been difficult to capture and have required additional work to set up. It is for this reason there will be areas where either data is not available or has only been produced during the year. These are being established and will help towards more meaningful analysis and understanding of performance as they mature and become embedded in practice.

**Service Measure 1** - Good progress has been made in ensuring we are compliant with the requirements of reporting performance of the new Social Services & Wellbeing Act.

**Service Measure 2** - See CM02 below (Budget Expenditure)

**Service Measures 3 & 4** - A successful pilot of producing electronic case files took place in 3 of our teams during 16-17. This will be rolled across the service during 17-18.

**Service Measure 5** - 100% of all data requests were submitted within the prescribed timescale. Of which, none required re-issue due to reporting errors.

Measure	Comparative Performance			2016-17 Qtr. 1 (cumulative)	2016-17 Qtr. 2 (cumulative)	2016-17 Qtr. 3 (cumulative)
	2014-15 Actual (Full Year)	2015-16 Actual (Full Year)	2015-16 Qtr. 1-3 (cumulative)			
<b>Service Measure 1 (Priority 1):</b> The percentage of new Quantitative Performance Indicators that are: a) <input type="radio"/> Able to be reported b) <input checked="" type="radio"/> A work in progress c) <input type="radio"/> Unable to be reported	<i>N/A (New Indicator)</i>			a) 71% b) 29% c) 0%	a) 93% b) 7% c) 0%	a) 93% b) 7% c) 0%
<b>Service Measure 2 (Priority 1):</b> The percentage of new Quantitative Performance Measures that are: a) <input type="radio"/> Able to be reported b) <input type="radio"/> A work in progress c) <input type="radio"/> Unable to be reported	<i>N/A (New Indicator)</i>			a) 50% b) 50% c) 0%	a) 67% b) 33% c) 0%	a) 67% b) 33% c) 0%
<b>Service Measure 3 (Priority 3):</b> 100% of Information Security Action Plan Tasks have been completed.	<i>N/A (New Indicator)</i>			<b>0%</b>	<b>22%</b>	<b>40%</b>

<p><b>Service measure 4 (Priority 7):</b> The % electronic case files that are accessible electronically in the pilot site (Afan).</p>	<p><i>N/A (New Indicator)</i></p>	<p><b>11.4%</b></p>	<p><b>17.7%</b></p>	<p><b>28.6%</b></p>
<p><b>Service measure 5 (Priority 8):</b> The % electronic case files that are accessible electronically in the Safeguarding Team.</p>	<p><i>N/A (New Indicator)</i></p>	<p><b>36.0%</b></p>	<p><b>51.6%</b></p>	<p><b>73.2%</b></p>
<p><b>Service Measure 6 (Priority 9):</b> % of ASMG Statistics and Data Dashboards which have a) been disseminated within agreed timescale b) required re-issue</p>	<p><i>N/A (New Indicator)</i></p>	<p><b>a) 100%</b> <b>b) 0%</b></p>	<p><b>a) 100%</b> <b>b) 0%</b></p>	<p><b>a) 100%</b> <b>b) 0%</b></p>

**Section 5:**  
**Financial Quadrant 2016-17:**

The service is projecting to underspend for the year end. This has happened primarily with natural turnover. Our FFP target of £31.500 is on course to be met.

Measure	2015-16 Actual (Full Year)	2016-17 Qtr. 1 (projected to year end)	2016-17 Qtr. 2 (projected to year end)	2016-17 Qtr.3 (projected to year end)
<b>Corporate Measure (CM02):</b> % revenue expenditure within budget Revenue Budget £	-12.12%  Underspend  £786,400	+5.69%  Overspend  £876,888	-8.27%  Underspend  £876,888	-8.01%  Underspend  £876,888
<b>Corporate Measure (CM03):</b> Amount of FFP savings at risk	N/A	N/A	N/A	N/A

## Section 6: Employee Quadrant 2016-17

Sickness performance across the service remain below the council average. The service did experience some long term sickness during Quarters 2 and 3 but these were managed effectively back to work.

Regular spot checks are undertaken to ensure all staff returning to work following sickness receive a timely back to work interview. Sickness is also discussed confidentially in the services fortnightly management meetings.

In relation to staff engagement, there is a working group made up of senior officers and trade unions looking at how to progress and measure this; discussions are ongoing and a decision has not yet been made about corporately developed or individual surveys, optional or mandatory.

Performance regarding appraisals was slow during Quarters 1 & 2 but has picked up in Quarter 3 with only 11 staff awaiting an appraisal before the year end. These will be completed by the 31<sup>st</sup> March 2017.

No staff left the service in an unplanned way.

Measure	2015-16 Actual (Full Year)	2016-17 Qtr. 1 (projected to year end)	2016-17 Qtr. 2 (projected to year end)	2016-17 Qtr.3 (projected to year end)
<b>Corporate Measure (CM04):</b> Average FTE (full time equivalent) working days lost due to sickness absence				
<b>Service:</b> Business Strategy Comm Care Total Service FTE days lost in the period	N/A	1.5 45	4.3 147	4.8 169
<b>Directorate:</b> Social Services Health & Housing	N/A	3	6.7	9.8
<b>Council:</b>	N/A	2.4	4.6	7.3
Page 3	<b>2015-16 Actual (Full Year)</b>	<b>2016-17 Qtr. 1 (cumulative)</b>	<b>2016-17 Qtr. 2 (cumulative)</b>	<b>2016-17 Qtr. 3 (cumulative)</b>
<b>Corporate Measure (CM11):</b> Staff engagement Measure	N/A (New Indicator)	See Note above		
<b>Corporate Measure (CM05):</b> % of staff who have received a performance appraisal during 2016-17 (Target 100%) Number of staff who have received a performance appraisal during 2016-17	NA NA	8.82% 3	11.7% 4	67.6% 23
<b>Corporate Measure (CM06):</b> Number of employees left due to unplanned departures	NA	0	0	0

## Section 7: Customer

Two formal Compliments were received about members of the team although anecdotally, compliments are received on a regular basis but not documented. We will work on a formal compliments system during 17-18.

A customer satisfaction survey will take place in the 4<sup>th</sup> quarter of 16-17 requesting feedback from social work and health professionals on the services they received from us.

Measure	2015-16 Actual (Full Year)	2016-17 Qtr. 1 (cumulative)	2016-17 Qtr. 2 (cumulative)	2016-17 Qtr. 3 (cumulative)
<b>Corporate Measure (CM07):</b> Total number of complaints Internal External (from the public)	0 0	0 0	0 0	0 0
<b>Corporate Measure (CM08):</b> Total number of compliments Internal External (members of the public)	0 0	1 0	1 0	1 0
<b>Corporate Measure (CM09):</b> customer satisfaction measure/s	N/A	New measure		