

Quarter 3 2020-21 Corporate Performance Indicators Report

Corporate policy

Adult Social Services, Health and Housing

| PI Code | PI Name | 2019/20 | Q3 2019/20 | Q3 202 | 20/21 | Q3 2020/21 |
|------------------|--|---------|---------------|--------|-------|--|
|] | | Value | Value | Value | DoT | Note |
| DASSR- OP-002 | % of Adults with a learning disability aged 18-64 in paid employment | 13.7% | 14.7% | 15.4% | | Q3 data is based on November 20 as this is the latest data available. Cumulative measure - 60 of 390 service users in employment. Despite the continued impacts of Covid-19 on our economy, the number of service users in paid employment has increased by 6 since the start of the financial year. The Council will continue to prioritise supporting people into, and maintaining, paid employment wherever possible. |
| DASSR- OP-003 | % of People receiving rehabilitative support who have a reduced level of service or no service required at the end of their rehabilitative support | 86.7% | 86.3% | 82.5% | • | Q3 Data is based on November 20 which is the latest data available from our health partners. |
| DASSR- OP-004 | Rate of admissions into residential and nursing care per 100,000 population 65+ (Minimise) | 335 | 237.4 | 175.2 | | During the period April to August the CCG funded all admissions to nursing care. These placements are now being reviewed by social workers to establish whether some of these should now be funded by the council. Of 27 CCG funded admissions during this period only 1 so far have been transferred to the Council to fund. |
| DASSR- OP-010 | Number of admissions into residential and nursing care aged 65+ (Minimise) | 103 | 76 | 55 | | There were 27 CCG funded admissions during the period April to August. Of these, only 1 CCG funded admission has been included in the 55 Council admissions so far this year. |
| DASSR- OP-005 | % of Carers who received an assessment during the year | 56.5% | 42.9% | 40.6% | ₽ | 314 from 774 carers assessed. Q3 performance is only just below the same period last year, which is good considering the impacts of the pandemic. Carers assessments remain a key priority for the department especially during this difficult period when we know many carers are under more pressure in supporting their loved ones. |
| DASSR- OP-006 | % of Clients (receiving long-term community services) on a Direct payment | 41.5% | 41.6% | 41.9% | | 450 service users with a DP. |
| DASSR- OP-007 | % of Adults with learning disabilities who live in their own home or with their family | 74.3% | 74.8% | 74.4% | ₽ | Provisional figure. 290 of 390 service users are living in their own home or with their family. |
| DASSR- OP-009 | % of People whose personal outcomes of an adult safeguarding intervention were met | 96.8% | 94% | 98.2% | | 112 of 114 people achieved their personal outcomes. Performance for achieving personal outcomes can fluctuate |

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|------------------|---|---------|---------------|-------|-------|--|
| | | Value | Value | Value | DoT | Note |
| | | | | | | depending on the persons views relating to the type of abuse. 90% or above is seen as good performance. |
| DASSR- PH-003 | Number of people quitting smoking through smoking cessation service (1QA) | N/A | 202 | N/A | N/A | No figures reported as service suspended due to the Covid-19 pandemic. This occurred in March 2020 in line with NHS |
| DASSR- PH-004 | % of Eligible people who have received an NHS Health Check (1QA) | N/A | 6.4% | N/A | N/A | England (NHSE) guidance. Following the publication of the third phase of NHS response to COVID-19 which called for the restoration of primary care and community health care services to near-normal levels, the Primary Care Team have been supporting providers to reinstate the NHS smoking cessation service. This includes guidance on modifications to ensure services comply with social distancing measures. Quarter one activity was minimal and significantly less than the same period last year. This equates to a reduction greater than 33%. The degree to which providers have been able to reinstate services varies across providers depending on a number of operational factors including access to PE, staff capacity and service prioritisation. The direction of travel is currently unclear and dependent on government advice, the impact of COVID cases locally and the additional pressures of the 2020-21 flu vaccination season. The Primary Care Team is continuing to support providers to reinstate services including offering guidance on service modifications. Multiple communications to providers regarding service reinstatement and supplier relief measures have been disseminated over the summer months. The smoking cessation programme continued throughout quarter two, although activity is lower relative to the same period last year. Service modifications which include telephone consultations have enabled the smoking cessation team including sessional advisors to continue operating the programme. |
| | % of HMOs inspected within 20 days of application | 80.43% | 80% | 0% | • | Due to Covid-19, the RSP have not been undertaking physical inspections as before. Any backlog (that cannot be addressed remotely/informally) will addressed upon the Covid-19 restrictions being lifted. |

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|------------------|--|------------|---------------|-------|-------|---|
| | | Value | Value | Value | DoT | Note |
| ECSR- ENS-006 | Number of formal hazard assessments carried out | 121 | 69 | 3 | • | Due to Covid-19, the RSP have not been undertaking physical inspections as before. Any backlog (that cannot be addressed remotely/informally) will addressed upon the covid-19 restrictions being lifted. |
| ECSR- ENS-013 | Number of private sector dwellings improved | N/A NEW | N/A NEW | 2 | N/A | Due to Covid-19, the RSP have not been undertaking physical inspections as before - to verify the improvements that may be required within properties (and so are unable to record numbers in the manner previously set forward). Most cases are addressed remotely, through both desktop assessments (where possible) and increased dialogue with both tenants and landlords. Officers are committed to inspecting where there is a critical threat to resident safety and enhanced Covid safe protocols can be established (from data to date, none have met this threshold). |
| ECSR- ENS-014 | Number of private sector long term vacant dwellings returned to occupation due to council action | N/A NEW | N/A NEW | 0 | N/A | The Richmond Empty Property Officer commenced their post on 31/12/2020. As such for Quarter 4 a more detailed narrative will be provided, including the officer's initial findings |
| HRR-HS- 001 | Number of family households with dependent children in B&B accommodation for 6 weeks+ (Minimise) | 0 | 0 | 0 | | |
| HRR-HS- 002 | Number of households living in Temporary Accommodation (Minimise) | 316 | 314 | 288 | | |
| HRR-HS- 003 | Number of homeless cases prevented | 94 | 78 | 79 | | |
| HRR-HS- 004 | Number of properties where major disability adaptations have been completed | 132 | 103 | 39 | • | Number of DFGs(Disabled Facilities Grants) affected by pandemic and specifically slowdown across the construction and building sectors, as adjustments to new and often frequent changes in rules and guidance emerged. Further adaptation works completed in 3rd Quarter have not been closed on system, as this is done after payments are made, and will rollover to next quarter. |

Education & Children's Services

| PI Code | PI Name | 2019/20 | Q3 2019/20 | Q3 20 | 20/21 | Q3 2020/21 |
|--------------------------|---|---------|---------------|-------|-------|--|
| | | Value | Value | Value | DoT | Note |
| CEGR- AFC- CIN-001 | % of Assessments completed within 45 working days | 95% | 94% | 96% | | |
| CEGR- AFC- CIN-002 | % of Referral decisions made within 24 hours | 97% | 98% | 88% | ₽ | (316/360) All referrals are screened by receiving teams and should be allocated to a worker within 24 hours of receipt from SPA. What we do know is all referrals are screened in a timely way however allocation performance has been impacted during the year by the unprecedented circumstances and increased workloads. Performance is now increasing and had increased to 92% in December. |
| CEGR- AFC- CIN-003 | % of Initial Child Protection Conferences (ICPC) held within 15 Working Days of S47 Enquiry | 91.3% | 95.5% | 100% | | |
| CEGR- AFC- CIN-004 | % of Children subject to Child Protection Plan for 4 weeks or more, who have been visited within last 20 working days | 89% | 94% | 93% | ₽ | 137/147 - there were 10 children not recorded as visited in the last 20 working days as at the end of December. During the third quarter where visits could not safely take place in person due to illness or self-isolation, children were seen virtually however these were not treated as statutory visits. Visits to all children subject to plans continues to be closely monitored on a weekly basis with managers during performance meetings and during case supervision meetings. Where any challenges arise in being able to visit any child police safe and well checks are arranged. |
| CEGR- AFC- CIN-006 | % of Social work open cases with a supervision discussion recorded within 8 weeks | 85% | 74% | 80% | 1 | 676/842 of all children had been reviewed in a case supervision in the last eight weeks as at the end of December. There have been additional challenges since September when workloads increased further following children's return to school. What we do know is that supervision meetings are regularly being held however recording of these is not always timely. We established the 'Reflecting teams' process during Q3 and initial sessions were held during November and December- this consists |

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| | | | | | | of action learning set sessions which will offer practical and emotional support to managers and team leaders in key roles who support practitioners. There are 3 Reflective Teams consisting of a mixture of Heads of Services /Managers and Team Leaders from each service. These sessions will be followed up every 6 - 8 weeks thereafter. |
| CEGR- AFC-CL- 001 | % of Care Leavers aged 19-21 years in Employment, Education or Training | 69% | 61% | 76% | | |
| CEGR- AFC-CL- 002 | % of Care Leavers aged 19-21 years in suitable accommodation | 87% | 90% | 95% | | |
| CEGR- AFC-CL- 003 | % of Eligible young people with an up to date pathway plan (16-18-year olds) | 86% | 82% | 98% | | |
| CEGR- AFC- CLA-002 | % of CLA missing from care receiving return home interviews (1QA) | 58% | 52% | 55% | | |
| CEGR- AFC- CLA-003 | % of CLA visited within statutory timescale | 89.7% | 89.4% | 88.1% | | 104/118 - Face to face visits continue in the main, where this is not happening due to placement restrictions and carers/child's health these continue to be held in a virtual form. Every effort is made to conduct and record visits to children and young people in timely manner and this is closely scrutinised on a case by case basis via management within the service. What we do know is recording of visits in a timely way has impacted on performance. |
| CEGR- AFC- CLA-004 | % of CLA placed 20+ miles from home (Minimise) | 27% | 19% | 25% | • | |
| CEGR- AFC- CLA-005 | % of CLA with 3+ placements (within 12 months) (Minimise) | 8% | 5% | 7% | • | |

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|--------------------------|--|------------|---------------|--------|-------|--|
| | | Value | Value | Value | DoT | Note |
| CEGR- AFC- CLA-007 | % of CLA placed with in-house foster carer | 30% | 32% | 66% | | |
| CEGR- AFC- CLA-009 | Average number of days between entering care and moving in with adoptive family (Minimise) | 293 | 368 | 400 | ₽ | |
| CEGR- AFC- CLA-010 | % of CLA at 31 March who have been CLA 12+ months with a final warning/reprimand or conviction during the year. (Minimise) | 3.51% | 3.51% | 0% | | |
| | % of Children Looked After (CLA) who have gone missing that are offered a return home interview within 72hrs (1QA) | N/A NEW | N/A NEW | 96.4% | N/A | |
| CEGR- AFC-EA- 008 | % of 16-17-year olds in apprenticeships | 1.8% | 1.4% | 0.97% | ₽ | |
| CEGR- AFC-EA- 011 | % of Young people leaving emotional health service as a planned exit | 63% | 65% | 74% | 1 | (39 out of 53 young people). As a result of increasing waiting times we have been more proactive in reviewing our waiting list and asking young people and families to opt-in to treatment. This has resulted in increased numbers appearing to dis-engage from the service. It is likely these clients would have disengaged but spread out across the year, rather than focused in a quarter. We hope that this means that those waiting are ready and willing to engage when they reach the top of the waiting list. |
| | % of Resident families who were able to send their children to their top 3 choice primary school | N/A NEW | 95.4% | 96.5% | | |
| | % of Resident families who were able to send their children to their top 3 choice secondary school | N/A NEW | 82.5% | 82.6% | | |

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|--------------------------|---|------------|---------------|--------|-------|--|
| | | Value | Value | Value | DoT | Note |
| CEGR- AFC-EA- 016 | % of Young people who were reported missing from home who are offered a return home interview within 72 hrs (1QA) | N/A NEW | N/A NEW | 86.1% | N/A | |
| CEGR- AFC- SEN-001 | Number of Education, Health and Care Plans (Minimise) | 1,503 | 1,490 | 1,521 | N/A | |
| AFC- | % of Statutory Education, Health and Care Plans completed within 20 weeks (excluding exceptions) | 96% | 93% | 82% | • | (31/38) AfC's SEND Service, like other Local Authorities, continues to operate within the challenging landscape of Covid-19. The number and pattern to requests for education, health and care needs assessment continues to reflect similar trends and volumes to previous years; there has been no significant drop in business demand. This and the next reporting quarters coincide with other, significant business pressures (undertaking the phase transfer of students) which is a complex, volume activity. The SEND Service is reliant on other services providing advice for education, health and care needs assessments within statutory time frames in order to issue education, health and care plans within statutory time frames. Those services, especially NHS services and Social Care - are operating under significant pressures. The team has been carrying an EHC Coordinator vacancy since before the beginning of this reporting quarter. This is now recruited, with the post holder having joined the SEND Service in December 2020. |
| CEGR- AFC- SEN-003 | % of Children and young people with EHCP (Education, Health and Care Plans) who are educated within the borough | 65% | 62% | 66% | | |
| CEGR- AFC- SEN-004 | % of Requests where an Education, Health, & Care (EHC) needs assessment was declined (Minimise) | N/A NEW | N/A NEW | 11.1% | N/A | |
| CEGR- AFC- SEN-005 | % of Needs assessments where an EHC Plan was issued | N/A NEW | N/A NEW | 84.4% | N/A | |

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| CEGR- AFC- SEN-006 | % of EHCPs judged to good or better by internal Quality Assurance (QA) process | N/A NEW | N/A NEW | 25% | N/A | (4/16) Please note this relates only to the auditing of existing plans completed through multi agency audit work. We have agreed a number of SMART improvement recommendations (which are being tracked within our Learning and Improvement tracker) to address identified issues including around encouraging different means to recording children and young people's views as part of Section A, finding a sustained way of gathering parental feedback as part of QA process and also revisiting the Annual Review (AR) good practice with the SEND service in terms of ensuring all areas of the plan are checked and challenged at AR point. |
| CEGR- AFC- SEN-007 | % of Amended EHCPs judged to good or better by internal Quality Assurance (QA) process | N/A NEW | N/A NEW | 88% | N/A | |
| | % of Parents and carers who are satisfied with their child's EHCP | N/A NEW | N/A NEW | 78.6% | N/A | |
| CEGR- AFC- SEN-009 | % of Annual reviews of EHC Plans held within the statutory timescale (12 months) | N/A N/A NEW | N/A NEW | Data not yet available | N/A | |
| | % of Annual review decisions made within 4 weeks | N/A NEW | N/A NEW | Data not yet available | N/A | Work is ongoing with SEND database providers to make improvements to the annual review workflow which will make our data more meaningful and enable reporting. This |
| CEGR- AFC- SEN-011 | % of Drafted amended EHC Plans issued within 8 weeks of the annual review decision | N/A NEW | N/A NEW | Data not yet available | N/A | piece of work has highlighted the challenges with the complexity of this process which are widely recognised across the SEND network. |
| CEGR- AFC- SEN-012 | % of Final amended EHC Plans issued within 8 weeks of the draft amended EHC Plan | N/A NEW | N/A NEW | Data not yet available | N/A | |
| AFC- | % of Parents and carers who are satisfied with their engagement in the annual review of their child's EHC Plan | N/A NEW | N/A NEW | 33.3% | N/A | |

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| | | Value | Value | Value | DoT | Note |
| CEGR- AFC- SEN-014 | % of Young people who are satisfied with their engagement in the annual review of their child's EHC Plan | N/A NEW | N/A NEW | 77.8% | N/A | |
| AFC- | % of Young people with SEND in NC Year 10 and 11 who have had a "Next Steps" interview by the end of the school year target | N/A NEW | N/A NEW | 39.7% | N/A | No delivery took place with Year 10s in Q3 as we prioritised Year 11 SEND learners to support them in making post 16 choices and applications for September 2021. We are contacting schools now (early January) with the offer for Year 10s EHCP and SEN Support (and Year 9s in special schools and SRP mainstream) for virtual delivery over Q4. This academic year, 2020/21, we delivered NS interviews to EHCP and SEN Support learners in Year 11. The measure is based on residency and the cohort size is made up of the group of learners that have EHCPs and that we (with PfA) have triaged as needing support and SEN Support learners that schools have also referred to us, for whom a NS would be deemed helpful. (60/151) |
| CEGR- AFC- SEN-016 | % of Parental appeals to the SEND Tribunal that are agreed in favour of the local authority | N/A NEW | N/A NEW | 0% | N/A | Four conceded, two negotiated agreement, one was withdrawn and one in favour of parents. |
| CEGR- AFC-SF- 002 | % of Under 5's in reach area (each locality named) registered with their children centre | 61% | 63% | 50.4% | ₽ | 6,363 children registered out of 12,624. The decrease in registrations in Q3 2020-21 is a reflection of the fact that the Children's Centres premises have been closed for much of the year due to Covid-19 and when they have been open, they are not able to operate at anywhere near previous capacity. The registration process has been moved online, but to date the numbers registering in this way are small. |

| PI Code | PI Name Q3 Q3 2019/20 Q3 Q3 2020/ | | 20/21 | Q3 2020/21 | | |
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| | | Value | Value | Value | DoT | Note |
| CEGR- AFC-SF- 003 | % of Families identified within the Strengthening Families initiative who are deemed to be 'turned around' at time payment claims are submitted | N/A NEW | N/A NEW | 53.7% | N/A | Cumulatively over the last 9 months we have finished working with 136 families. 25 claims were submitted for families deemed turned around during each of the first two quarters and 23 in quarter 3. Claims cannot be submitted until 6 months after families close to services, therefore performance in this area will increase towards the end of the year. However current performance demonstrates we are on track to complete the programme in April 2021 with 100% of our targets met if we continue on the current trajectory. |

Environment, Sustainability, Culture and Sports Services

| PI Code | PI Short Name | 2019/20 | 0 Q3 2019/20 Q3 | | 20/21 | Q3 2020/21 |
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| FICOde | FI Short Name | | Value | Value | DoT | Note |
| CEGR- PPA-001 | Tonnes of CO2 emissions (Scope 1 and Scope 2) | 6,473.6 | 6,473.6 | 6,025.6 | | Data is reported a year in arrears, so the result reported in the 'Q3 20/21 value' column relates to 2019/20 financial year with the 18/19 result reported in 19/20 columns |
| ECSR- CLLS- 001 | Physical visits to library sites rate (per 1,000 population) | 5,379 | 4,242 | 185 | • | Government guidance to mitigate the spread of COVID has had a very significant impact upon attendances at council culture, leisure and sporting facilities. Certain facilities are not able to re-open in a COVID compliant manner and remain closed |
| ECSR- CLLS- 002 | Number of e-book issues (per 1,000 population) | 421 | 305 | 358 | | |
| 10.11.5- | Electronic / virtual visits to libraries (rate per 1,000 population) | 1,622 | 1,128 | 1,301 | | |
| ECSR- CLLS-004 | Total number of eMagazine and eNewspaper issues | N/A NEW | N/A NEW | 29,976 | N/A NEW | This is the result for the cumulative 3 months Oct-Dec. The 9-month (April to December) cumulative result is 75039. |

| | | 2019/20 | Q3 2019/20 | | | Q3 2020/21 Key Performance indicators | |
|----------------------|---|------------|--------------|---------------|------------|---|--|
| PI Code | PI Short Name | Value | Value | Value | DoT | Note | |
| ECSR- CLLS-005 | Number of new eLibrary members | N/A NEW | N/A NEW | 699 | N/A NEW | As above – this is 3-month result; the cumulative 9-month result is 4,286. | |
| ECSR- CLLS-006 | Total Library Facebook reach | N/A NEW | N/A NEW | 71,721 | N/A NEW | As above – this is a 3-month result; the cumulative 9-month result is 183,759. | |
| ECSR- CLLS-007 | Total Library Twitter impressions | N/A NEW | N/A NEW | 158,709 | N/A NEW | As above – this is a 3-month result; the cumulative 9-month result is 631,515. | |
| ECSR- CPL-008 | Total number of participants in Arts Programmes | 23,000 | 22,119 | 7,720 | • | Government guidance to mitigate the spread of COVID has had a very significant impact upon attendances at council culture, leisure and sporting facilities. Certain facilities are not able to re-open in a COVID compliant manner and remain closed | |
| ECSR- CPL-009 | Number of visitors to Orleans House Gallery | 38,127 | 30,763 | 9,123 | - | As above. Orleans House Gallery was only open for October, 4 days in November and two weeks in December. | |
| ECSR- CWR- 001 | % of Household waste sent for reuse, recycling and composting (1QA) | 43.6% | 43.3% (Q2) | 39.5% (Q2) | - | Provisional result | |
| ECSR- CWR- 002 | Domestic food waste recycled as % of total household waste (1QA) | 4% | 3.7% (Q2) | 3.5% (Q2) | • | Provisional result | |
| ECSR- CWR- 007 | % of Local Authority Collected Waste (LACW) recycled (1QA) | 42.5% | 41.3% (Q2) | 39.6% (Q2) | • | Provisional result | |
| ECSR- CWR- 008 | KG household waste per household (cumulative) (Minimise) (1QA) | N/A NEW | N/A NEW | 482 (Q2) | N/A | Provisional result | |
| ECSR- CWR- 010 | Reports about non collection of waste (cumulative) (Minimise) | N/A NEW | N/A NEW | 24,686 | N/A | The start of the new recycling and waste collection contract coincided with the COVID lockdown and circumstances resulting in | |
| ECSR- CWR- 011 | % of reported missed waste collections cleared within contractual timescales (cumulative) | N/A NEW | N/A NEW | 35% | N/A | additional tonnages of household recycling ar waste to be collected. This, together with initia poor performance from the contractor has resulted in a higher number of missed | |

| | | 2019/20 Q3 2019/20 | | Q3 2020/21 | | Q3 2020/21 | |
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| PI Code | PI Short Name | Value | Value | Value | DoT | Note | |
| | | | | | | collections being reported. As part of a wider performance improvement plan active from September 2020, a new dedicated missed collection team was introduced as well as new management and supervision practices and recruitment of full-time permanent staff. The number of missed collections has reduced, with the reported missed collections for the most recent 3-month period (Oct-Dec – 4,331) over 40% lower than the figure reported for the previous 3-month period (Jul-Sept - 7,596). During the quarter 3 period (Oct-Dec) there was a month on month reduction of reported missed collections and for November and December, 95% and 97% adherence to the Service Level Agreement (SLA) respectively. | |
| ECSR- CWR- 012 | Number of Street Cleansing reports / requests for service (cumulative) (Minimise) | N/A NEW | N/A NEW | 635 | N/A | | |
| ECSR- CWR- 003 | % of Public streets with acceptably low levels of litter after cleansing | 98% | 99% | 97% | ₽ | | |
| ECSR- CWR- 013 | % of public streets with acceptably low levels of detritus accumulations after cleansing | N/A NEW | N/A NEW | 97% | N/A | | |
| ECSR- CWR- 004 | Average time taken to clear a reported fly-tip (Minimise) | 3.5 | 3.8 | 3.4 | | | |
| ECSR- HOS-005 | Total number of fly-tipping enforcements (Cumulative number of penalty notices and warning letters issued to addresses) | 1,291 | 1,012 | 1,041 | N/A (neither high nor low is better) | | |
| ECSR- HOS-006 | Total number of fly-tipping incidents identified by or reported to the Council (cumulative) | N/A NEW | N/A NEW | 1,686 | N/A (neither high nor | | |

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| PI Code | PI Short Name | Value | Value | Value | DoT | Note | |
| | | | | | low is better) | | |
| ECSR-P- 001 | % of Major planning applications processed within 13 weeks or statutory timeframe | 80% | 100% | 50% | • | The KPI for Q3 is calculated from two major applications within the time period Oct- December. One application received had a significant number of issues to be resolved prior to a decision being made. Government target is for 60% of major applications to be processed within 13 weeks. | |
| ECSR-P- 002 | % of Non-Major planning applications processed within 8 weeks or statutory timeframe | 97% | 97% | 94% | • | | |
| ECSR-P- 0021A | % of Council's decisions on major and non-major applications which are overturned at appeal (Minimise) | N/A NEW | N/A NEW | 1.4% | N/A | Reported one quarter in arrears, KPI shown for Q2. | |
| | % of RSP Service requests with an initial response within the 'defined timescale' | N/A NEW | N/A NEW | N/A | N/A | The volume of service requests has increased 150% due to Covid-19 enquiries. It will be a struggle to provide meaningful data this year due to high Covid-19 related enquiries from March 20 onwards. We prioritised the high-risk issues but there were inevitable delays in logging complaints. Also, as the situation changed so rapidly some complaints were addressed by events or became irrelevant within a short timeframe, as we moved in and out of lockdown and different tiers. | |
| ECSR- ENS-011 | Safeguarding older people – % successful physical interventions in cases of residents being targeted by financial scams and abuse | N/A NEW | N/A NEW | 96% | N/A | | |
| ECSR- ENS-012 | Safeguarding young people – % of successful physical interventions for restricted sales such as knives, alcohol, fireworks, tobacco and e-cigarettes | N/A NEW | N/A NEW | 92% | N/A | | |
| ECSR- ENS-015 | % of Alcohol and regulated entertainment licences issued within 10 working days of the conclusion of the 28-day consultation period, excluding those that are subject to a licensing hearing | N/A NEW | N/A NEW | 40% | N/A | We have been prioritising Covid-19 related work. Licences have been granted and the licensees advised but issuing of licences has been delayed. | |

| DI Codo | PI Short Name | 2019/20 | Q3 2019/20 | Q3 2020/21 | | Q3 2020/21 |
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| FICOUE | | Value | Value | Value | DoT | Note |
| EUSK- ENS-016 | % of New high-risk massage & special treatment premises inspections carried out within 20 working days of the premises being ready to trade | N/A NEW | N/A NEW | N/A | N/A | No result as massage and special treatment premises were closed for several months during the two national lockdowns. |

Finance, Policy and Resources

| PI Code | PI Name | 2019/20 | Q3 2019/20 | Q3 2020/21 | | Q3 2020/21 |
|----------------------|--|------------|---------------|------------|-----|---|
| | | Value | Value | Value | DoT | Note |
| CEGR- COM- 002 | Total number of offers available in a period - Business Offers Scheme | N/A NEW | N/A NEW | 301 | N/A | |
| CEGR- CS-001 | Overall Crime rate (per 1,000 residents) (Minimise) | 65.48 | 49.45 | 46.13 | | |
| CEGR- CS-002 | Reduction in total police callouts for domestic violence victims in the MARAC cohort | 57.6% | 60.6% | 44.9% | • | The indicator measures total police crime reports in the 12 months prior to MARAC and the 12 months following MARAC for each MARAC case in the first- year cohort. This is on a month by month basis e.g. April 2020 MARAC: baseline would be April 2019 – March 2020; outcome would be May 2020 – April 2021. The direction of travel is therefore a barometer of the system and needs to be considered against other factors such as the increasing levels of demand in the MARAC meeting. A review of the MARAC is due to commence in 21/22 financial year; a newly formed VAWG (violence against women and girls) strategic group is also working on a dashboard and framework of KPIs (including this KPI). |
| CEGR- CS-005 | Total number of reported incidents and crimes of Domestic Abuse | N/A NEW | N/A NEW | 1,729 | N/A | It is recognised that Domestic Abuse is under- reported by around 40%. As confidence in 'the system' grows, the expectation is that the number of reported incidents should increase. |

| PI Code | PI Name | 2019/20 | Q3 2019/20 | Q3 2020/21 | | Q3 2020/21 |
|------------------|---|------------|---------------|------------|-----|--|
| | | Value | Value | Value | DoT | Note |
| CEGR- CS-006 | Number of Neighbourhood Watch co-ordinators | N/A NEW | N/A NEW | N/A | N/A | Currently data is still held by police and is not available for this quarter. By the end of March 2021, the transfer of Neighbourhood Watch Co-ordinators onto a new system OWL (Online Watch Link) is expected to be complete. The data will be reported directly from OWL system held by the Council. |
| CEGR- RES 002 | % of Stage 2 Corporate Complaints responded to within 25 working days | 51.1% | 53.9% | 50% | - | |
| CEGR- RES 003 | % of FOI requests completed within 20-day limit | 82.5% | 85.3% | 60.6% | • | |
| RESR- FM-001 | % of Invoices paid on time (within 30 days or agreed terms) | 77.4% | 78.0% | 88.4% | | |
| RESR- RS-001 | Council Tax Collection rate | 98.6% | 84.0% | 83.0% | | Collection is only marginally behind last year. Recovery resumed in late summer. |
| RESR- RS-002 | Non-Domestic Rates (Business Rates) Collection rate | 97.4% | 82.1% | 70.4% | - | Collection greatly affected by Covid-19 but as the Net Collectable Debit (NCD) has been halved by Government reliefs, impact has been diluted. |

Transport and Air Quality

| PI Code | PI Short Name | 2019/20 | Q3 2019/20 | Q3 202 | 0/21 | Q3 2020/21 |
|------------------|---|------------|---------------|--------|------|--|
| | | Value | Value | Value | DoT | Note |
| ECSR- ENS-017 | % of Monitoring stations achieving the Nitrogen Dioxide air quality objectives | N/A NEW | N/A NEW | 100% | N/A | This data is provisional and subject to ratification which takes place annually in March 2021. |
| ECSR- ENS-018 | % of Monitoring stations achieving the Particulate air quality objectives | N/A NEW | N/A NEW | 100% | N/A | This data is provisional and subject to ratification which takes place annually in March 2021. |
| ECSR- ENS-019 | % of Schools achieving air quality objectives | N/A NEW | N/A NEW | 100% | N/A | This data is provisional and subject to ratification which takes place annually in March 2021. |
| | Number of interventions by Compliance Officers for engine idling | N/A NEW | N/A NEW | 8,104 | N/A | Cumulative figure for Q1-3. Individual Q3 total is 2497. |

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