

## Quarter 1 2021-22 Corporate Performance Indicators Report

Corporate policy

Adult Social Services, Health and Housing Cttee

|                  | PI Description   | 2020/21 | Q1<br>2020/21 | Q                      | 1 2021/22 | !        | Q1 2021/22  |
|------------------|--|---------|---------------|------------------------|-----------|----------|---|
|                  |  | Value   | Value         | Value                  | Target    | DoT      | Comment   |
| Adult So         | cial Services and Public Health Directorate  |         |               |                        |           |          |   |
| DASSR-<br>OP-002 | % of Adults with a learning disability aged 18-64 in paid employment   | 15.1%   | 13.7%         | 12.6%                  | 13%       | •        | 49 out of 390 Service Users. Performance slightly below Q1 target. 2 more service users in paid employment to achieve target. There are 12 services users furloughed, which is due to end September.  |
| DASSR-<br>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 | 83.1%   | 81%           | 95.1%                  | 85%       |          | 78 out of 82 service users.   |
| DASSR-<br>OP-004 | Rate of admissions into residential and nursing care per 100,000 population 65+ (Minimise)   | 312.2   | 44.6          | 78.2                   | 84.4      | •        |   |
| DASSR-<br>OP-010 | Number of admissions into residential and nursing care aged 65+ (Minimise)   | 98      | 14            | 25                     | 27        | •        |   |
| DASSR-<br>OP-005 | % of Carers who received an assessment during the year   | 56.3%   | 13.9%         | 22.8%                  | 15%       |          |   |
| DASSR-<br>OP-006 | % of Clients (receiving long-term community services) on a Direct payment  | 40.5%   | 40.6%         | 39.3%                  | 40.5%     | •        | 430 out of 1094 Service Users. 3 more service users on a DP to achieve Q1 target. Analysing why Service Users have stopped receiving a DP, over the last year, to understand reasons for reduced performance                                |
| DASSR-<br>OP-007 | % of Adults with learning disabilities who live in their own home or with their family   | 74.8%   | 74.4%         | 75.6%                  | 75%       |          |   |
| DASSR-<br>OP-009 | % of People whose personal outcomes of an adult safeguarding intervention were met   | 98.1%   | 100%          | 98.4%                  | 95%       | <b>₽</b> |   |
| DASSR-<br>PH-003 | Number of people quitting smoking through smoking cessation service (1QA)  | N/A     | N/A           | 127<br>(Q4<br>2020/21) | N/A       | N/A      | Monitored a quarter in arrears, latest data is Q4 2020/21. Smoking cessation services continued to be offered with some modifications made to delivery to support social distancing. Remote consultations delivered by the in-house team of |

| PI Code          | PI Description  | 2020/21 | Q1<br>2020/21 | Q                       | Q1 2021/22 |     | Q1 2021/22   |
|------------------|---|---------|---------------|-------------------------|------------|-----|--|
|                  |   | Value   | Value         | Value                   | Target     | DoT | Comment  |
|                  |   |         |               |                         |            |     | sessional advisors, helped to mitigate some of the reduction in GP surgery and pharmacy activity. (No data reported from Q4 19/20 to Q3 20/21, no targets applicable in 20/21).  |
| DASSR-<br>PH-004 | % of Eligible people who have received an NHS<br>Health Check (1QA) | N/A     | N/A           | 0.7%<br>(Q4<br>2020/21) | N/A        | N/A | Monitored a quarter in arrears, latest data is Q4 2020/21. NHS Health Checks continued to be offered with some modifications made to delivery to support social distancing. (No data reported from Q4 2019/20 to Q3 2020/21, no targets applicable in 2020/21).  |
| Environn         | nent and Community Services Directorate (RSP                        | )       |               |                         |            |     |  |
| ECSR-<br>ENS-005 | % of HMOs inspected within 20 days of application                   | 10%     | N/A           | 0%                      | 80%        | N/A | There have only been 2 HMO applications received in April to June period and these have not yet been inspected. This was due to the officer's risk assessment deeming the risk of Covid-19 being excessive to both the officers and residents due to the inherent nature of HMOs. As the infection rate falls, figures for the second quarter are anticipated to reflect improvement in formal inspection rates. |
| ECSR-<br>ENS-006 | Number of formal hazard assessments carried out                     | 10      | N/A           | 2                       | 20         | N/A | The number of formal hazard assessments undertaken remains low for Q1 due mainly to Covid-19 impact. Dwellings (especially those with multiple occupancy) are high risk settings and as such risk assessments have had an impact on officer ability to inspect. We are starting to observe this having a reduced impact and anticipate this to be reflected in the results produced for Quarter 2.               |

| PI Code          | PI Description   | 2020/21 | Q1<br>2020/21 |       |        | 2   | Q1 2021/22  |
|------------------|--|---------|---------------|-------|--------|-----|---|
|                  |  | Value   | Value         | Value | Target | DoT | Comment   |
| ECSR-<br>ENS-013 | Number of private sector dwellings improved  | 0       | N/A           | 4     | 15     | N/A | As with ECSR-ENS-006 above, the service is still recovering from Covid-19 impacts. It should be noted there is a typical lag in data due to compliance timescales stipulated by officers being around 2-3 months. Results for Quarter 2 are expected to reflect this.   |
| ECSR-<br>ENS-014 | Number of private sector long term vacant dwellings returned to occupation due to council action | 0       | N/A           | 0     | 0      | N/A | A total of 70 inspections have been carried out from the list of 581 empty dwellings provided by Council Tax and general complaints. Ongoing investigations and enforcement work are continuing to bring back into use those properties that have been vacant for several years. Working in partnership with Council Tax has brought about two properties being put forward for "forced sale" which should bring these back into occupation.  |
| Housing          | and Regeneration Directorate   |         |               |       |        |     |   |
| HRR-HS-<br>001   | Number of family households with dependent children in B&B accommodation for 6 weeks+ (Minimise) | 0       | 0             | 0     | 0      | -   |   |
| HRR-HS-<br>002   | Number of households living in Temporary<br>Accommodation (Minimise)                             | 282     | 316           | 311   | 298    |     | By the end of Q1 the use of temporary accommodation had increased by 29 placements, which is 13 placements more than expected. This is due to the increased number of homeless applications received, particularly after the easing of lockdown measures since April 2021 and with a notably increased incidence of domestic abuse being the driving factor behind the homelessness, which also limits the ability to prevent homelessness. In addition, the challenges of the coronavirus pandemic have made it difficult to rehouse |

| PI Code        | le PI Description   | 2020/21 | Q1<br>2020/21 | Q     | 1 2021/22 | 2   | Q1 2021/22   |
|----------------|---|---------|---------------|-------|-----------|-----|--|
|                |   | Value   | Value         | Value | Target    | DoT | Comment  |
|                |   |         |               |       |           |     | applicants who are in temporary accommodation due to difficulties in attending viewing appointments within the private sector. With the further easing of lockdown measures, lettings activity will increase which will help to reduce the numbers in temporary accommodation. |
| HRR-HS-<br>003 | Number of homeless cases prevented  | 86      | 28            | 32    | 20        |     |  |
| HRR-HS-<br>004 | Number of properties where major disability adaptations have been completed | 97      | 15            | 34    | 28        |     |  |

## **Education & Children's Services Cttee**

| DI Codo                  | DI Decerintien  | 2020/21 | Q1 2020/21 | Q1    | 2021/22 |     | Q1 2021/22   |
|--------------------------|---|---------|------------|-------|---------|-----|--|
| PI Code                  | PI Description  | Value   | Value      | Value | Target  | DoT | Note   |
| CEGR-<br>AFC-CIN-<br>001 | % of Assessments completed within 45 working days   | 95.4%   | 94.7%      | 97.1% | 95%     |     |  |
| CEGR-<br>AFC-CIN-<br>002 | % of Allocation decisions made within 24 hours  | 86.1%   | 85.6%      | 93.2% | 100%    |     |  |
| CEGR-<br>AFC-CIN-<br>003 | % of Initial Child Protection Conferences (ICPC) held within 15 Working Days of S47 Enquiry                           | 98%     | 100%       | 100%  | 88%     | 1   |  |
| CEGR-<br>AFC-CIN-<br>004 | % of Children subject to Child Protection Plan for 4 weeks or more, who have been visited within last 20 working days | 95.2%   | 91.8%      | 95.9% | 100%    |     |  |
| CEGR-<br>AFC-CIN-<br>006 | % of Social work open cases with a supervision discussion recorded within 8 weeks                                     | 73.4%   | 87.2%      | 81.8% | 95%     | •   | 82% (719/879) - children's cases had been discussed in case supervision within the last eight weeks as at the end of June - an improved performance since the end of Q4 (73%). |

| DI Codo                  | DI Deceription   | 2020/21              | Q1 2020/21        | Q1                     | 2021/22 |     | Q1 2021/22  |
|--------------------------|--|----------------------|-------------------|------------------------|---------|-----|---|
| PI Code                  | PI Description   | Value                | Value             | Value                  | Target  | DoT | Note  |
|                          |  |                      |                   |                        |         |     | Supervision meetings are being regularly held; however, the recording of supervision has been delayed due to the increased workloads for social workers and supervising managers during the pandemic. |
| CEGR-<br>AFC-CL-<br>001  | % of Care Leavers aged 19-21 years in<br>Employment, Education or Training   | 66%                  | 75%               | 69%                    | 60%     | •   |   |
| CEGR-<br>AFC-CL-<br>002  | % of Care Leavers aged 19-21 years in suitable accommodation   | 91.5%                | 93.0%             | 93.4%                  | 90%     |     |   |
| CEGR-<br>AFC-CL-<br>003  | % of Eligible young people with an up to date pathway plan (16-18-year olds)   | 100%                 | 98.2%             | 91.1%                  | 90%     | •   |   |
| CEGR-<br>AFC-<br>CLA-011 | % of Children Looked After (CLA) who have<br>gone missing that are offered a return home<br>interview within 72hrs (1QA) | N/A                  | N/A               | 89.1%<br>(Q4<br>20/21) | N/A     | •   | This KPI is reported a quarter in arrears (1QA). No targets were applicable in 20/21; this was an amended KPI introduced in that year (hence no 19/20 result for comparison).                         |
| CEGR-<br>AFC-<br>CLA-002 | % of CLA missing from care receiving return interviews (1QA)   | 58%<br>(Q4<br>19/20) | 58%<br>(Q4 19/20) | 53%<br>(Q4<br>20/21)   | N/A     | •   | This KPI is reported a quarter in arrears (1QA).<br>No targets were applicable in 20/21   |
| CEGR-<br>AFC-<br>CLA-003 | % of CLA visited within statutory timescale  | 89.1%                | 87.7%             | 95.2%                  | 100%    |     |   |
| CEGR-<br>AFC-<br>CLA-004 | % of CLA placed 20+ miles from home (Minimise)   | 23.1%                | 23.6%             | 22.8%                  | 20%     |     |   |
| CEGR-<br>AFC-<br>CLA-005 | % of CLA with 3+ placements (within 12 months) (Minimise)  | 9.0%                 | 7.8%              | 10.2%                  | 10%     | •   |   |

| DI Cada                  | DI Deceription  | 2020/21 | Q1 2020/21 | Q′    | 1 2021/22    |     | Q1 2021/22   |
|--------------------------|---|---------|------------|-------|--------------|-----|--|
| PI Code                  | PI Description  | Value   | Value      | Value | Target       | DoT | Note   |
| CEGR-<br>AFC-<br>CLA-007 | % of CLA placed with in-house foster carer  | 68.0%   | 60.2%      | 68.1% | 50%          | •   |  |
| CEGR-<br>AFC-<br>CLA-009 | Average number of days between entering care and moving in with adoptive family (Minimise)  | 365     | 362        | 526   | 426          | •   | This is a national adoption scorecard measure (ALB1) highlighting the number of days between entering care and an adoption order being granted. It is a rolling average of children adopted in the last three years. The cohort size is very small (5 children) therefore exceptions are suppressed as identifiable. Timeliness has been impacted by legal complexity and assessment of foster carers as adopters. Adoption by foster carers means that the children experience a stable placement and is a positive outcome. An alternate measure (ALB10) is available that excludes children who are adopted by their foster carers and brings the days between entering care and adoption order to just 247 days. |
| CEGR-<br>AFC-<br>CLA-010 | % of CLA at 31 March who have been CLA 12+ months with a final warning/reprimand or conviction during the year. (Minimise)                                  | 3.2%    | 0%         | 4.4%  | 5%           | •   |  |
| CEGR-<br>AFC-EA-<br>008  | % of 16-17 year olds in apprenticeships   | 1.0%    | 1.8%       | 1.2%  | Data<br>Only | •   |  |
| CEGR-<br>AFC-EA-<br>011  | % of Young people leaving emotional health service as a planned exit  | 72%     | 56%        | 75%   | 65%          |     |  |
| CEGR-<br>AFC-EA-<br>012  | % of 16-17 year olds who are confirmed as not in Education, Employment, or training status (including those whose status is not currently known) (Minimise) | 3.0%    | N/A        | 2.4%  | 3.5%         | N/A |  |

| DI Codo                  | DI Decementian  | 2020/21    | Q1 2020/21 | Q1    | 1 2021/22    |                    | Q1 2021/22  |
|--------------------------|---|------------|------------|-------|--------------|--------------------|---|
| PI Code                  | PI Description  | Value      | Value      | Value | Target       | DoT                | Note  |
| CEGR-<br>AFC-EA-<br>016  | % of Young people who were reported missing from home who are offered a return home interview within 72 hrs (1QA)             | 88%        | 91%        | 80%   | 100%         |                    | The red line for this KPI is 20 percentage points below the 100% target which reflects good practice standards. Hence green rated against target. |
| CEGR-<br>AFC-<br>SEN-001 | Number of ECHPs (No Polarity)   | 1,549      | 1,530      | 1,582 | N/A          | No<br>polarit<br>y |   |
| CEGR-<br>AFC-<br>SEN-002 | % of Education, Health and Care Plans (EHCPs) completed within statutory timescale of 20 weeks                                | 83.4%      | 98%        | 80.4% | 80%          | •                  | 41/51 EHCP assessments were completed within the statutory timescale of 20 weeks. No exceptions were applied.                                     |
| CEGR-<br>AFC-<br>SEN-003 | % of Children and young people with EHCPs who are educated within the borough   | 66.7%      | 65%        | 67.5% | 65%          |                    |   |
| CEGR-<br>AFC-<br>SEN-004 | % of Requests where an Education, Health, & Care (EHC) needs assessment was declined (No Polarity)                            | 38.9%      | N/A        | 15.9% | Data<br>only | N/A                |   |
| CEGR-<br>AFC-<br>SEN-005 | % of Needs assessments where it was decided to issue an EHCP (No Polarity)  | 75%        | 81%        | 97%   | Data<br>only | N/A                |   |
| CEGR-<br>AFC-<br>SEN-006 | % of New EHCPs assessed to be good or better  | 82%        | N/A        | 100%  | 60%          | N/A                | This relates to 4 New EHCPs.  |
| CEGR-<br>AFC-<br>SEN-007 | % of Amended EHCPs judged to be good or better  | 82%        | N/A        | 81%   | Data<br>only | INI/ (A            | A target for these KPIs will be set around Q2 / Q3 of the 2021/22 financial year.   |
| CEGR-<br>AFC-<br>SEN-008 | % of Parents and carers who are satisfied with<br>their involvement in agreeing their child's EHCP<br>and with the end result | 81%        | N/A        | 90%   | Data<br>only | N/A                | As above comment re target for 2021/22.   |
| CEGR-<br>AFC-<br>SEN-009 | % of Annual reviews of EHCPs held within the statutory timescale (12 months)  | N/A<br>NEW | N/A        | 38%   | Data<br>only | N/A                |   |

| DI Codo                  | DI Deceription  | 2020/21    | Q1 2020/21 | Q1    | 2021/22      |     | Q1 2021/22 |
|--------------------------|---|------------|------------|-------|--------------|-----|------------|
| PI Code                  | PI Description  | Value      | Value      | Value | Target       | DoT | Note       |
| CEGR-<br>AFC-<br>SEN-010 | % of Annual review decisions made within 4 weeks  | 58.2%      | 56.9%      | 54.7% | Data<br>only | •   |            |
| CEGR-<br>AFC-<br>SEN-011 | % of Drafted amended EHCPs issued within 8 weeks of the annual review decision  | 44.2%      | 31.7%      | 39.0% | Data<br>only |     |            |
| CEGR-<br>AFC-<br>SEN-012 | % of Final amended EHCPs issued within 8 weeks of the draft amended EHCP  | 44.2%      | N/A        | 69.0% | Data<br>only | N/A |            |
| CEGR-<br>AFC-<br>SEN-013 | % of Parents and carers who are satisfied with<br>their engagement in the annual review of their<br>child's EHCP                                | 100%       | N/A        | 75%   | Data<br>only | N/A |            |
| CEGR-<br>AFC-<br>SEN-014 | % of Children and Young people who are satisfied with their engagement in the annual review of their EHCP                                       | 81.3%      | N/A        | 92.3% | Data<br>only | N/A |            |
| CEGR-<br>AFC-<br>SEN-015 | % of Next Steps interviews delivered to SEND learners by the end of Year 11   | N/A<br>NEW | 47.4%      | 27.1% | Data<br>only | •   |            |
| CEGR-<br>AFC-<br>SEN-016 | % of Parental appeals to the SEND Tribunal that are agreed in favour of the local authority   | 25%        | N/A        | 11%   | Data<br>only | N/A |            |
| CEGR-<br>AFC-SF-<br>002  | % of Under 5's in reach area (each locality named) registered with their children centre  | 48%        | 58%        | 45%   | 67%          | •   |            |
| CEGR-<br>AFC-SF-<br>003  | % of Families identified within the Strengthening Families initiative who are deemed to be 'turned around' at time payment claims are submitted | 100%       | N/A        | 59%   | 30%          | N/A |            |

**Environment, Sustainability, Culture and Sports Services Cttee** 

| PI Code           | PI Description   | 2020/21    | Q1<br>2020/21 |       | 1 2021/22 |     | Q1 2021/22  |
|-------------------|--|------------|---------------|-------|-----------|-----|---|
|                   |  | Value      | Value         | Value | Target    | DoT | Note  |
| ECSR-<br>CLLS-001 | Physical visits to library sites rate (per 1,000 population)   | 296        | 0             | 204   | 189       |     |   |
| ECSR-<br>CLLS-003 | % of All library reservation requests supplied within 7 calendar days  | 88%        | N/A           | 78%   | 75%       | N/A |   |
| ECSR-<br>CLLS-004 | Electronic / virtual visits to libraries (rate per 1,000 population)   | 1,830      | N/A           | 547   | 472       | N/A |   |
| ECSR-<br>CLLS-005 | Number of new eLibrary members   | 5,551      | 2,570         | 825   | 750       | •   |   |
| ECSR-<br>CLLS-008 | Number of library issues (hard copy) (per 1,000 population)  | N/A<br>NEW | N/A           | 861   | 405       | N/A |   |
| ECSR-<br>CLLS-009 | Number of electronic library issues (per 1,000 population)   | N/A<br>NEW | N/A           | 262   | 106       | N/A |   |
| ECSR-<br>CLLS-011 | Total Social Media reach (including Facebook reach, Twitter impressions, Blog views and more) per 1,000 population | N/A<br>NEW | N/A           | 977   | 1,586     | N/A | Events and activities are not running when Covid restrictions are in place and these are usually a significant source of engagement.  Covid restrictions were in place for a month longer than expected leading to deferral of events and reduction in engagement than would have been assumed.  The Q1 figure does not include statistics for Instagram, which was not possible to be collated for Q1 but that will be available for Q2. |
| ECSR-<br>CPL-008  | Total number of participants in Arts Programmes  | 8,966      | 2,231         | 762   | 1,875     | •   | The target set for the numbers of participants within Arts programmes for the 2021/22 year is an ambitious one which reflects the Service desire to encourage residents and visitors back to Arts programmes.  Whilst government restrictions may have ceased, there is still a reluctance among a substantial number of residents and visitors to  |

| PI Code          | PI Description  | 2020/21            | Q1<br>2020/21          | Q1                     | 2021/22 |     | Q1 2021/22   |
|------------------|---|--------------------|------------------------|------------------------|---------|-----|--|
|                  |   | Value              | Value                  | Value                  | Target  | DoT | Note   |
|                  |   |                    |                        |                        |         |     | attend indoor classes and events. The Arts Service is still maintaining a mixture of social distancing measures to meet visitors' expectations.  The uncertainty associated with the Government Roadmap meant the scaling back of the Q1 participation programmes. This effected our family programme. The Service had also hoped to commence education programmes from the Easter term, but this was not possible.  The 2020/21 figure included a significant commitment to digital engagement, which was the only way the service could reach our visitors/ audience/ community. In comparison, during first month of Q1 of 2021/22 the service was gearing up to reopen venues and the focus was on visits in person, with an impact upon digital engagement. |
| ECSR-<br>CPL-009 | Number of visitors to Orleans House Gallery                                       | 9,123              | 0                      | 4,259                  | 4,375   |     |  |
| ECSR-<br>CWR-001 | % of Household waste sent for reuse, recycling, and composting (cumulative) (1QA) | 43.6%<br>(2019/20) | 43.6%<br>(Q4<br>19/20) | 40.4%<br>(Q4<br>20/21) | N/A     | •   | This indicator is reported a quarter in arrears (1QA), so is the full year 2020/21 result and represents a drop in performance of 2.4% compared to 2019/20. This is a largely the impact of Covid-19, in particular the temporary cancellation of garden waste collections. The lowest performance (38.9%) was recorded in Q1 2020/21 when Covid-19 impacts were greatest, since when performance has improved significantly (to 41.6% in October to December 2020 period and 40.9% in January to March 2021 period).  |

| PI Code          | PI Description   | 2020/21           | Q1<br>2020/21         | Q1                        | 2021/22      |     | Q1 2021/22  |
|------------------|--|-------------------|-----------------------|---------------------------|--------------|-----|---|
|                  |  | Value             | Value                 | Value                     | Target       | DoT | Note  |
| ECSR-<br>CWR-002 | Domestic food waste recycled as % of total household waste (cumulative) (1QA)            | 4.4%<br>(2019/20) | 4.4%<br>(Q4<br>19/20) | 3.7%<br>(Q4<br>20/21)     | N/A          | •   | This indicator is reported a quarter in arrears (1QA), so is the full year 2020/21 and represents a drop from 4.4% in 2019/20. In tonnage terms two thirds of this drop occurred in Q3. Within this period an issue was identified with food waste collections that was addressed with Serco and the service are monitoring tonnages for each vehicle round to identify areas of low participation. |
| ECSR-<br>CWR-007 | % of Local Authority Collected Waste (LACW) recycled (cumulative) (1QA)                  | 40.7%             | 38.9%                 | 40.9%                     | Data<br>Only |     |   |
| ECSR-<br>CWR-008 | KG household waste per household (cumulative) (Minimise) (1QA)                           | N/A               | N/A                   | 934.5<br>(Q4<br>2020/21)  | N/A          | N/A | Result shown is for previous quarter (Q4) as indicator reported 1QA.  No targets were applicable in 20/21; targets for 21/22 have been set.   |
| ECSR-<br>CWR-009 | Net carbon impact of waste collection service (Minimise) (1QA)                           | N/A<br>NEW        | N/A                   | -0.134<br>(Q4<br>2020/21) | N/A          | N/A | No targets were applicable in 20/21; targets for 21/22 have been set.   |
| ECSR-<br>CWR-003 | % of Public streets with acceptably low levels of litter after cleansing                 | 99%               | 100%                  | 97%                       | 98%          | •   |   |
| ECSR-<br>CWR-013 | % of Public streets with acceptably low levels of detritus accumulations after cleansing | 99%               | 100%                  | 96%                       | 97.5%        | •   |   |
| ECSR-<br>CWR-012 | Number of Street Cleansing reports / requests for service (cumulative) (Minimise)        | 905               | 315                   | 277                       | 222          | •   | There is an increased level of on-street litter clearance requests within the period attributable to the lifting of restrictions linked to increasing number of groups meeting outdoors and increased footfall as retail and hospitality venues re-open.  |

| PI Code          | PI Description   | 2020/21     | Q1<br>2020/21        | Q1                           | Q1 2021/22   |     | Q1 2021/22  |
|------------------|--|-------------|----------------------|------------------------------|--------------|-----|---|
|                  |  | Value       | Value                | Value                        | Target       | DoT | Note  |
| ECSR-<br>CWR-004 | Average time (days) taken to clear a reported fly-<br>tip (1QA) (Minimise)   | 4 (2019/20) | 4<br>(Q4<br>2019/20) | 4.14<br>(Q4<br>2020/21)      | 5            | •   | Result shown is for previous quarter (Q4) as this indicator reported 1QA. Although no targets were applicable in 20/21, the target here represents the contractual standard.  |
| ECSR-<br>CWR-005 | Reports about non collection of waste per 100,000 bins collected (cumulative) (Minimise)                                   | N/A<br>NEW  | N/A                  | 115                          | 25           | N/A | Within this period the collection services suffered a detrimental impact from significant resource absence within the Serco contract, through a combination of Covid 19 isolation requirements, driver shortage affecting service deployment. In addition, contractual performance issues are addressed through contract management framework. Figure provided is reflective of average for the period. |
| ECSR-<br>CWR-011 | % of reported missed waste collections cleared within contractual timescales (cumulative)                                  | 48.2%       | N/A                  | 65.9%                        | 95%          | N/A | Within this period the collection services suffered a detrimental impact from significant resource absence within the Serco contract, through a combination of Covid 19 isolation requirements, driver shortage affecting service deployment. In addition, contractual performance issues are being addressed through contract management framework.  |
| ECSR-<br>HOS-005 | Total number of fly-tipping enforcements (Number of penalty notices and warning letters issued to addresses) (No Polarity) | 1,336       | 262                  | 345                          | Data<br>only | N/A |   |
| ECSR-<br>HOS-006 | Total number of fly-tipping incidents identified by or reported to the Council (cumulative) (No Polarity)                  | 2,216       | 432                  | Data not<br>yet<br>available | Data<br>only | N/A | This result is not yet available, requires reconciliation of data reports to remove duplicate or erroneous data entries.  |
| ECSR-P-<br>001   | % of Major planning applications processed within 13 weeks or statutory timeframe  | 91.7%       | 100%                 | 100%                         | 90%          |     |   |
| ECSR-P-<br>002   | % of Non-Major planning applications processed within 8 weeks or statutory timeframe                                       | 96%         | 97%                  | 91%                          | 80%          | 1   |   |

| PI Code          | PI Description   | 2020/21    | Q1<br>2020/21 | Q1    | Q1 2021/22 |     | Q1 2021/22   |
|------------------|--|------------|---------------|-------|------------|-----|--|
|                  |  | Value      | Value         | Value | Target     | DoT | Note   |
| ECSR-P-<br>0021A | % of Council's decisions on major and non-major applications which are overturned at appeal (Minimise)   | 0.96%      | 0.30%         | 0.90% | 2%         | •   | Note: following ESCS Cttee meeting in September 2021, the 2020/21 results have been updated and now show correct comparative values.   |
| ECSR-<br>ENS-010 | % of Regulatory Services Partnership service requests with an initial response within the 'defined timescale'  | 91.2%      | N/A           | 80%   | 90%        | N/A | The level of service requests received by officers is consistently very high which has caused delays in updating case records. This means that the performance figure reported is likely not to be reflective of the true level of performance. Officers are working to resolve this recording issue in time for Q2 reporting.   |
| ECSR-<br>ENS-011 | Safeguarding older people – number of physical interventions in cases of residents being targeted by financial scams and abuse   | 100        | N/A           | 28    | 25         | N/A |  |
| ECSR-<br>ENS-012 | Safeguarding young people – number of physical interventions for restricted sales such as knives, alcohol, fireworks, tobacco, and ecigarettes   | 92         | N/A           | 27    | 25         | N/A |  |
| ECSR-<br>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 | 47%        | N/A           | 79%   | 95%        | N/A | The issue of licences following the 28-day consultation period has slowed due to other work pressures within the licensing and administrative teams.  The reopening of hospitality and beauty premises in Quarter 1 generated additional work demands due to a significant increase in volume of requests, including Temporary Event Notices, licence renewals and complaints relating to licensed premises, which were deemed to be a priority. |
| ECSR-<br>ENS-016 | % of New high-risk massage & special treatment premises inspections carried out within 20  | N/A<br>NEW | N/A           | 100%  | 95%        | N/A |  |

| Pl Code          | PI Code PI Description  |            | Q1<br>2020/21 | Q1 2021/22 |        |     | Q1 2021/22 |
|------------------|---|------------|---------------|------------|--------|-----|------------|
|                  |   |            | Value         | Value      | Target | DoT | Note       |
|                  | working days of the premises being ready to trade   |            |               |            |        |     |            |
| ECSR-<br>ENS-024 | % of Successful contacts for positive Covid-19 cases referred to the Local Contact Tracing Service by the National Test & Trace service | N/A<br>NEW | N/A           | 63.4%      | 50%    | N/A |            |

Finance, Policy and Resources Cttee

| PI Code              | PI Description  | 2020/21    | Q1<br>2020/21 | Q     | Q1 2021/22   |     | Q1 2021/22  |  |  |  |  |
|----------------------|---|------------|---------------|-------|--------------|-----|---|--|--|--|--|
|                      |   | Value      | Value         | Value | Target       | DoT | Note  |  |  |  |  |
| Chief Exe            | Chief Executive's Group   |            |               |       |              |     |   |  |  |  |  |
| CEGR-<br>COM-<br>002 | Total number of offers available in a period -<br>Business Offers Scheme  | 194        | N/A           | 196   | 200          | N/A |   |  |  |  |  |
| CEGR-<br>CS-001      | Overall Crime rate (per 1,000 residents) (Minimise)   | 58.70      | 13.67         | 14.66 | 15.15        | •   | Richmond was the second safest borough in London during Q1.   |  |  |  |  |
| CEGR-<br>CS-002      | % Reduction in the number of callouts from the police to high risk victims as identified by the Multi-Agency Risk Assessment Conference (MARAC) | 40.3%      | 31.4%         | 44.8% | 30%          |     |   |  |  |  |  |
| CEGR-<br>CS-005      | Total number of reported domestic abuse incidents and crimes  | 2,379      | 611           | 524   | Data<br>only | N/A |   |  |  |  |  |
| CEGR-<br>CS-007      | Number of referrals into commissioned VAWG services (Independent Domestic Violence Advisors)  | N/A<br>NEW | N/A           | 147   | 100          | N/A |   |  |  |  |  |
|                      | Number of residents engaged/supported to find work through the Council's employment service   | N/A<br>NEW | N/A           | 124   | 50           | N/A |   |  |  |  |  |
|                      | Number of residents provided with a training outcome through the Council's employment service   | N/A<br>NEW | N/A           | 75    | 37           | N/A |   |  |  |  |  |
| CEGR-<br>EDO-004     | Number of Richmond Work Match Secured Jobs  | N/A<br>NEW | N/A           | 9     | 18           | N/A | Whilst lower than the KPI target for Q1, the recent restructuring of the Work Match Service (with a |  |  |  |  |

| PI Code          | PI Description  | 2020/21 | Q1<br>2020/21 | Q     | Q1 2021/22 |     | Q1 2021/22   |
|------------------|---|---------|---------------|-------|------------|-----|--|
|                  |   | Value   | Value         | Value | Target     | DoT | Note   |
|                  |   |         |               |       |            |     | dedicated team now in Richmond) will address this underperformance going forward. Additionally, following recent staff training on the engagement process, engagement has increased from 26% from October to March to 76% from April to June. This will have an impact on the number of job starts going forward. Also, worth noting is the recruitment of a Business Engagement and Employment team. This is continuing to take place with two new officers appointed and joining in September 2021. The third post is currently advertised, and we hope to fill for the beginning of Q3. As the borough moves out of lockdown, there is the expectation that more job vacancies will become available for local residents to access via Richmond Work Match. |
| CEGR-<br>RES-003 | % of FOI requests completed within 20-day limit                       | 59.1%   | 50%           | 71.3% | 90%        |     | Following a sharp dip in performance levels during March to July 2020, as the Council concentrated resources toward its pandemic response, recovery measures have led to a steady improvement in FOI performance. This dip in performance inevitably led to a backlog of requests, which is being addressed alongside efforts to continue to increase day to day performance. It is expected that, once the backlog is cleared in all areas, performance levels will return to pre-Covid rates, on track to meeting target.  |
| CEGR-<br>RES-004 | % of Stage 2 Corporate Complaints responded to within 15 working days | 53.3%   | N/A           | 66.7% | 50%        | N/A | There were a total of 9 stage 2 complaints in the period of which 6 were responded to within 15 working days.  |

| Pl Code         | PI Description  | 2020/21 | Q1<br>2020/21 | Q1 2021/22 |        | 2   | Q1 2021/22  |  |  |  |
|-----------------|---|---------|---------------|------------|--------|-----|---|--|--|--|
|                 |   | Value   | Value         | Value      | Target | DoT | Note  |  |  |  |
| Resource        | Resources Directorate                                       |         |               |            |        |     |   |  |  |  |
| RESR-<br>FM-001 | % of Invoices paid on time (within 30 days or agreed terms) | 84.1%   | N/A           | 80.9%      | 90%    |     | Whilst there has been an improvement in performance since the review of automated system messages there is still some work needed to identify blockages in the processing of invoices and payments. |  |  |  |
| RESR-<br>RS-001 | Council Tax Collection rate                                 | 97.7%   | 29.1%         | 29.7%      | 30%    |     |   |  |  |  |
| RESR-<br>RS-002 | Non-Domestic Rates (Business Rates) Collection rate         | 85.4%   | 28.7%         | 30.5%      | 20%    |     |   |  |  |  |

**Transport and Air Quality Cttee** 

| PI<br>Code           | PI Description   | 2020/21 | Q1<br>2020/21 | Q1 2021/22 |        |     | Q1 2021/22  |
|----------------------|--|---------|---------------|------------|--------|-----|---|
| Code                 |  | Value   | Value         | Value      | Target | DoT | Note  |
| ECSR-<br>ENS-<br>017 | % of Monitoring stations achieving the Nitrogen Dioxide air quality objectives | 36%     | N/A           | 100%       | 100%   | N/A |   |
| ECSR-<br>ENS-<br>018 | % of Monitoring stations achieving the Particulate air quality objectives      | 100%    | N/A           | 100%       | 100%   | N/A |   |
| ECSR-<br>ENS-<br>019 | % of Schools achieving air quality objectives                                  | 97.3%   | N/A           | 92%        | 100%   | N/A | Data available on for April and May and represents 12 out of 13 tested achieving the target levels. |
| ECSR-<br>ENS-<br>021 | Number of interventions by Compliance Officers for engine idling (No Polarity) | 8,104   | N/A           | 3,165      | N/A    | N/A |   |