

Quarter 3 2021-22 Corporate Performance Indicators Report

Corporate policy

Adult Social Services, Health and Housing Cttee

PI Code	ode Pl Name		Q3 2020/21	Q	3 2021/22		Q3 2021/22	
		Value	Value	Value	Target	DoT	Note	
Adult So	cial Services & Public Health Directorate	_	_			_		
DASSR- OP-002	% of Adults with a learning disability aged 18-64 in paid employment	12.6%	15.4%	10.3%	14%	•	41 out of 398 service users. Very high performing in 2020/21- 3rd in London. National employment challenges impacting – variety of reasons for this drop including people furloughed not returning to their job, firms closing due to pandemic, service users not wanting to return to paid work preferring voluntary work. The support provider is working with those who wish to return to work.	
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	83.1%	82.5%	90.7%	85%		284 out of 313 service users.	
DASSR- OP-004	Rate of admissions into residential and nursing care per 100,000 population 65+ (Minimise)	303.3	175.2	281.4	231.4		90 admissions in 9 months, 16 over target. Increase mainly a result of Discharge to Assess National policy. People leaving hospital earlier in their recovery, less well, and moving	
DASSR- OP-010	Number of admissions into residential and nursing care aged 65+ (Minimise)	97	55	90	74	•	into a care home on a short-term basis and then remaining in the care home as family value the security. There is also pent-up demand of people with complex needs, in the community due to the pandemic.	
DASSR- OP-005	% of Carers who received an assessment during the year	56.3%	40.6%	44.3%	45%		364 out of 822 carers.	
DASSR- OP-006	% of Clients (receiving long-term community services) on a Direct payment	40.1%	41.9%	38.5%	41.5%	•	424 out of 1102 service users. Very high performing and 2nd in London in 2020/21. Although not meeting our ambitious target, performance has improved on Q2 (37.8%) and is strong. Direct payments impacted by the pandemic across all Councils with service users and carers preferring the security of a Council-managed service over a direct payment.	

Pl Code	PI Name	2020/21	Q3 2020/21	Q	Q3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
DASSR- OP-007	% of Adults with learning disabilities who live in their own home or with their family	74.8%	74.4%	76.6%	75%		305 out of 398 service users
DASSR- OP-009	% of People whose personal outcomes of an adult safeguarding intervention were met	98.1%	98.2%	95.9%	95%	•	71 out of 74 investigations
DASSR- PH-003	Number of people quitting smoking through smoking cessation service (1QA)	N/A	N/A (Q2)	37 (Q2)	80 (Q2)	N/A	Data for this indicator is reported a quarter in arrears. Performance remains affected by COVID-19 vaccination efforts and the restricted face to face consultations. This is due to GP surgeries being occupied with vaccinating residents, dealing with the backlog of routine clinical work and turnover of healthcare staff working in primary care. We are encouraging providers to target the service at residents more at risk of cardiovascular disease and COVID-19 and training new stop smoking advisors as they are recruited. Smoking cessation in the trusts has now moved online and is reporting good successes.
DASSR- PH-004	% of Eligible people who have received an NHS Health Check (1QA)	0.7%	N/A (Q2)	1.4% (Q2)	3.6% (Q2)	N/A	Data for this indicator is reported a quarter in arears. Following the impact of COVID 19 restrictions, performance increased by 111% in this quarter in comparison with Q1, 2021-22 but remains under the Q2 target and below what is required to achieve the annual 7.5% target. Covid-19 continued to impact on the delivery of the programme during the period and a national supply issue with consumables (blood tubes) further interrupted the service during the quarter.
DASSR- PH-006	Healthy life expectancy at 65 (Men)	13.7	13.7	13.8	12	•	13.7 reported in 20/21 relates to 2016-18. 13.8 is latest available data which relates to the 2017-19 period. 2018-20 data has not yet been published and is due in May 2022. The

Pl Code	PI Name	2020/21	Q3 2020/21	Q	Q3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
							Council has a range of programmes in place to delay the onset of long-term illness including the dementia prevention and care framework, reducing physical inactivity, diabetes prevention, flu vaccination and awareness raising, winter wellness and COVID infection prevention and control effort into Care Homes
DASSR- PH-007	Healthy life expectancy at 65 (Women)	13.2	13.2	11	12	•	13.2 reported in 20/21 relates to 2016-18. 11 year result reported in current quarter relates to 2017-19 as 2018-20 data has not yet been published - this is due in May 2022. Although not significantly different to the London or England averages, healthy life expectancy for women at age 65 in Richmond fluctuates and has fallen compared to the previous period 2016-18. This is the number of years lived in good health. The Council has a range of programmes in place to delay the onset of long term illness include the dementia prevention and care framework, reducing physical inactivity, diabetes prevention, flu vaccination and awareness raising, winter wellness and COVID infection prevention and control effort into Care Homes
Environm	nent & Community Services Directorate						
ECSR- ENS-005	% of HMOs inspected within 20 working days of application	10%	0%	90%	80%		
ECSR- ENS-006	Number of formal hazard assessments carried out	10	3	59	60		
ECSR- ENS-013	Number of private sector dwellings improved	0	0	67	65		

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PI Code	PI Name	2020/21	Q3 2020/21	Q3 2021/22			Q3 2021/22
		Value	Value	Value	Target	DoT	Note
ECSR- ENS-014	Number of private sector long term vacant dwellings returned to occupation due to council action	0	0	20	6	•	
Housing	& Regeneration Directorate						
HRR-HS- 001	Number of family households with dependent children in B&B accommodation for 6 weeks+ (Minimise)	0	0	0	0		
HRR-HS- 002	Number of households living in Temporary Accommodation (Minimise)	282	288	334	330	•	
HRR-HS- 003	Number of homeless cases prevented	86	79	69	59	•	
HRR-HS- 004	Number of properties where major disability adaptations have been completed	97	39	68	83		In total 68 DFGs have been completed, and there are a further 19 cases where payments have been made and are expected to be completed by the end of this financial year. Due to staff shortages resulting from staff contracting the coronavirus, the HIA have experienced delays with starting work on site, which may impact end of year performance.

Education & Children's Services Cttee

Pl Code	PI Code PI Name		Q3 2020/21	Q	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
CEGR- AFC- CIN-001	% of Assessments completed within 45 working days	95.4%	95.5%	92.6%	95%	•	
CEGR- AFC- CIN-002	% of Allocation decisions made within 24 hours	86.1%	87.8%	98.0%	100%		

Pl Code	PI Name	2020/21	Q3 2020/21	Q	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
CEGR- AFC- CIN-003	% of Initial Child Protection Conferences (ICPC) held within 15 Working Days of S47 Enquiry	98.0%	100%	88.9%	88%	•	
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	95.2%	93.2%	96.7%	100%		
CEGR- AFC- CIN-006	% of Social work open cases with a supervision discussion recorded within 8 weeks	73.4%	80.3%	81.8%	95%	•	730/893: A combination of staff sickness, increasing COVID isolation and challenges in recruiting permanent social workers has contributed to performance challenges during the quarter, although performance has improved from Q2 moving to 82%, which is closer to the minimum expected level of performance of 85%.
CEGR- AFC-CL- 001	% of Care Leavers aged 19-21 years in Employment, Education or Training	66.0%	75.6%	53.7%	60%	•	
CEGR- AFC-CL- 002	% of Care Leavers aged 19-21 years in suitable accommodation	91.5%	94.9%	91.5%	90%	•	
CEGR- AFC-CL- 003	% of Eligible young people with an up to date pathway plan (16-18 year olds)	100%	98.1%	97.1%	90%	•	
CEGR- AFC- CLA-003	% of CLA visited within statutory timescale	89.1%	88.1%	86.7%	100%	•	104/120: 3 of the 16 children whose visits were not made in time have subsequently been seen and their visits recorded. Reasons for the delayed visits to remaining children include:-children isolating due to covid, young people missing from their placements and other young people are choosing not to engage with services. The delays have been further impacted by worker sickness, staff vacancies and workload

PI Code	PI Name	2020/21	Q3 2020/21	Q:	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
							pressures with the teams supporting these children.
CEGR- AFC- CLA-004	% of CLA placed 20+ miles from home (Minimise)	23.1%	25.0%	24.0%	20%		
CEGR- AFC- CLA-005	% of CLA with 3+ placements (within 12 months) (Minimise)	9.0%	7.3%	5.8%	10%		
CEGR- AFC- CLA-007	% of CLA placed with in-house foster carer	67.95%	66.2%	57.6%	50%	•	
CEGR- AFC- CLA-009	Average number of days between entering care and moving in with adoptive family (Minimise)	365	400	Data not yet availabl e	426	TBC	Official updated result awaited.
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)	3.2%	0%	3.1%	5%	•	
CEGR- AFC- CLA-011	% of Children Looked After (CLA) who have gone missing that are offered a return home interview (RHI) within 72hrs	89.1%	96.4%	91.7%	100%	•	
CEGR- AFC- CLA-002	% of CLA missing from care receiving a return home interview (RHI)	52.8%	56.1%	53.3%	50%	•	
CEGR- AFC-EA- 008	% of 16-17 year olds in apprenticeships	1.01%	0.97%	1.18%	Data only		
CEGR- AFC-EA- 011	% of Young people leaving emotional health service as a planned exit	73.9%	73.6%	74.5%	65%		

PI Code	PI Name	2020/21	Q3 2020/21	Q	Q3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
CEGR- AFC-EA- 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)	2.95%	N/A	3.87%	3.5%	N/A	Data as at November 21. NEET data is submitted to the DfE and published figure is a 3 month average submitted in January therefore quarterly reporting is for information only.
CEGR- AFC-EA- 016	% of Young people who were reported missing from home who are offered a return home interview (RHI) within 72 hrs	88.0%	86.1%	86.8%	100%		
CEGR- AFC- SEN-001	Number of ECHPs (No Polarity)	1,549	1,521	1,649	Data only	N/A	
CEGR- AFC- SEN-002	% of Education, Health and Care Plans (EHCPs) completed within statutory timescale of 20 weeks	83.3%	81.6%	53.7%	80%	•	36/67 EHCP assessments were completed within the statutory timescale of 20 weeks. One late exception was applied. Staffing: recruitment is ongoing; a Team Manager and Senior EHC Coordinator posts started in post w/b 3 January 2022. Work through the newly appointed SEND Parent Engagement Officers, and work with and through the Parent Carer Forums and through the SEND Information, Advice and Support Service is anticipated to improve parental interaction in the future. Other factors impacting on performance include: - Increase in Staff sickness levels due principally to Covid-19 illness Health advice for Education, Health & Care Needs Assessments continues to be routinely delayed. This issue has been raised with those agencies and work is ongoing to understand the causes of delays, and to improve timeliness Competing Priorities: while requests for Education, Health & Care Needs Assessments

Pl Code	PI Name	2020/21 Q3 2020/21 Q3 2021/22			Q3 2021/22		
		Value	Value	Value	Target	DoT	Note
							have slightly reduced during Q3, significant EHC Coordinator capacity has been focused on managing phase transfer (the movement of children with EHCPs from primary to secondary school). The carefully planned activity, which must be delivered within a statutory, national deadline, has been impacted by significantly more parents requesting a special school place (this increase is happening nationally). The lack of special school placements creates challenges in finalising a plan in a timely way with a named school. This has knock-on impact on the SEND Service's ability to deliver this work within the planned window, requiring it to be prioritised later in Q3 than anticipated. Consequently, some completions of Education, Health & Care Needs Assessments and issuance of Education, Health & Care Plans have been delayed.
CEGR- AFC- SEN-003	% of Children and young people with EHCPs who are educated within the borough	66.6%	66.4%	66.9%	65%		
CEGR- AFC- SEN-004	% of Requests where an Education, Health, & Care (EHC) needs assessment was declined (No Polarity)	38.9%	11.1%	14.3%	Data Only	Data Only	
CEGR- AFC- SEN-005	% of Needs assessments where it was decided to issue an EHCP (No Polarity)	74.6%	84.4%	94.1%	Data only	Data only	
CEGR- AFC- SEN-006	% of New EHCPs assessed to be good or better	82%	25%	50%	60%	•	A strengthened and more challenging multi- agency quality assurance framework was implemented in 2021/22. Since implementing the new framework, there has been steady

PI Code	PI Name	2020/21	Q3 2020/21	Q	Q3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
							improvement in the quality of EHCPs. The following are some of the factors that are contributing to this improvement: clarity on the potential impact of the EHCP on the child; increased specification and quantification of recommended provision; and evidence of holistic outcomes.
CEGR- AFC- SEN-007	% of Amended EHCPs judged to be good or better	82.0%	87.7%	96.9%	Data only		
	% of Parents and carers who are satisfied with their involvement in agreeing their child's EHCP and with the end result	80.8%	78.6%	75.0%	Data only	•	
CEGR- AFC- SEN-009	% of Annual reviews of EHCPs held within the statutory timescale (12 months)	N/A NEW	N/A NEW	46.1%	Data only	N/A	
CEGR- AFC- SEN-010	% of Annual review decisions made within 4 weeks	49.4%	57.5%	41.5%	Data only	•	
CEGR- AFC- SEN-011	% of Drafted amended EHCPs issued within 8 weeks of the annual review decision	39.0%	31.7%	37.3%	Data only		
CEGR- AFC- SEN-012	% of Final amended EHCPs issued within 8 weeks of the draft amended EHCP	28.1%	31.7%	72.4%	Data only		
	% of Parents and carers who are satisfied with their engagement in the annual review of their child's EHCP	100%	33.3%	100%	Data only		

Pl Code	PI Name	2020/21	Q3 2020/21	Q	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
CEGR- AFC- SEN-014	% of Children and Young people who are satisfied with their engagement in the annual review of their EHCP	80.7%	77.8%	71.4%	Data only	•	The satisfaction measures are from a small cohort so subject to greater skew.
CEGR- AFC- SEN-015	% of Next Steps interviews delivered to SEND learners by the end of Year 11	N/A Revised KPI	N/A Revised KPI	45.9%	Data only	N/A	
CEGR-AFC- SEN-016	% of Parental appeals to the SEND Tribunal that are agreed in favour of the local authority	20%	0%	0%	Data only	•	
CEGR- AFC-SF- 002	% of Under 5's in reach area (each locality named) registered with their children centre	47.8%	50.4%	43.9%	67%	•	Note minimum level expected (redline threshold) is 40% due to Covid: 5,441 children registered from a target of 12,401. The decrease in registrations over the last 18 months is a reflection of the effect of the COVID-19 pandemic. Children's Centre premises were closed for a considerable amount of time, and when they re-opened it was with limited capacity. Although provision was placed online (Facebook) as much as possible, users did not need to be registered in order to access this. The registration process was moved online, and while this has generated some registrations, it is very low compared to the numbers gained when families attend the centres in person. Centres have recently been able to extend their in person provision, and the number of registrations has shown a slight increase over the last month.
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	100%	53.7%	73.3%	60%		

Environment, Sustainability, Culture and Sports Services Cttee

	Difficility, Sustainability, Culture and Sp	2020/21	Q3		3 2021/22		O2 2024/22
PI Code	ode PI Name		2020/21	Q3 202 1/22			Q3 2021/22
		Value	Value	Value	Target	DoT	Note
Chief Exe	ecutive's Group						
CEGR- PPA-001	Tonnes of C02 emissions (Scope 1 and Scope 2) (Minimise)	6,025.55	6,025.55	See RCES report	4,593.0		See RCES report elsewhere on this agenda.
Environn	nent & Community Services Directorate						
ECSR- CLLS- 001	Physical visits to library sites rate (per 1,000 population)	296	185	1,228	565	•	
ECSR- CLLS- 003	% of All library reservation requests supplied within 7 calendar days	88%	83%	83%	75%		
ECSR- CLLS- 004	Electronic / virtual visits to libraries (rate per 1,000 population)	1,830	1,301	1,657	1,415	•	
ECSR- CLLS- 005	Number of new eLibrary members	5,551	4,286	1,759	2,250	-	The rate of new eLibrary members has continued to slow due to the increase in physical visits but also because one of our popular resources Pressreader unexpectedly no longer allows us to collect these figures showing new users signing up to the service. New members through Pressreader typically averaged to average 450 new members per quarter when we could access these figures. This would have been expected to slow but would still be providing a significant number to our overall indicator. We would expect the return for Q3 to be close to double as currently reported.

PI Code	PI Name	2020/21	Q3 2020/21	Q:	Q3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
ECSR- CLLS- 008	Number of library issues (hard copy) (per 1,000 population)	N/A New	N/A New	3,501	1,215	N/A	
ECSR- CLLS- 009	Number of electronic library issues (per 1,000 population)	N/A New	N/A New	814	318	N/A	
ECSR- CLLS- 011	Total Social Media reach (incl Facebook reach, Twitter impressions, Blog views and more) per 1,000 population	N/A New	N/A New	3,477	4,758	N/A	Social media engagement still depressed by the reduction in the events and activities programmes. There was a sizable increase in November during the Literature Festival but Omicron has led to cancellation and postponement of library events. In Q2 it was reported that Instagram figures were not able to be incorporated due to changes in Instagram reporting. This has now been resolved and this has helped boost the Q3 picture.
ECSR- CPL-008	Total number of participants in Arts Programmes	8,966	7,720	10,246	8,291		
ECSR- CPL-009	Number of visitors to Orleans House Gallery	9,123	9,123	16,948	21,875	•	Onsite visiting has continued to be disrupted with Covid hesitancy as well as recent Omicron developments. As restrictions are relaxed and confidence recovers for visitors it is expected that performance will improve. In the meantime, we are continuing to develop the outdoor events and promoting the gallery as a safe space.
ECSR- CWR- 001	% of Household waste sent for reuse, recycling, and composting (cumulative) (1QA)	40.4%	40.1% (Q2)	40.7% (Q2)	45.5% (Q2)	•	The result represents a small but significant improvement compared to the 40.1% achieved in Q2 2020/21. Larger performance improvements were hampered by the temporary cancellation of garden waste collections at the start of the gardening season this year, along with other Covid related impacts including higher than

PI Code	PI Name	2020/21	Q3 2020/21	Q	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
							normal levels of staff absence and driver shortages.
ECSR- CWR- 002	Domestic food waste recycled as % of total household waste (cumulative) (1QA)	3.7%	3.7% (Q2)	4.2% (Q2)	4.5% (Q2)		The result represents a significant improvement compared to the 3.65% achieved in Q2 2020/21. Further improvements are anticipated in 2022 as food waste recycling collections are rolled out to more purpose-built flats and interventions targeted at existing low-performing food waste rounds along with wider food waste focussed communications are delivered.
ECSR- CWR- 003	% of Public streets with acceptably low levels of litter after cleansing	99%	100%	99%	98%	•	
ECSR- CWR- 004	Average time (days) taken to clear a reported fly- tip (1QA) (Minimise)	4.14	4 (Q2)	4.3 (Q2)	5 (Q2)	•	
ECSR- CWR- 005	Reports about non collection of waste per 100,000 bins collected (cumulative) (Minimise)	N/A NEW	N/A NEW	212.8	59	N/A	The reliability of waste collections was adversely affected by a significant resource absence within the Serco contract resulting from Covid 19 related crew isolation and driver shortages. Additionally, contractual performance issues are being addressed through the contract management framework
ECSR- CWR- 007	% of Local Authority Collected Waste (LACW) recycled (cumulative) (1QA)	40.7%	40.1% (Q2)	40.3% (Q2)	Data only		
ECSR- CWR- 008	KG household waste per household (cumulative) (Minimise) (1QA)	934.5	458.9 (Q2)	437.6 (Q2)	435 (Q2)		

PI Code	PI Name	2020/21	Q3 2020/21	Q:	Q3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
ECSR- CWR- 009	Net carbon impact of waste collection service (Minimise) (1QA)	-0.2	N/A	-0.214 (Q2)	-0.233 (Q2)	N/A	This indicator was first reported at the end 2020/21. The 21/22 targets have been recalculated based on the Mayor of London's updated 'Ready Reckoner' tool. The tool does not make it easy to trace the cause of any changes in results. However, the improved performance compared to Q1 (-0.192) is likely to reflect the significant improvement in recycling performance.
ECSR- CWR- 011	% of reported missed waste collections cleared within contractual timescales (cumulative)	48%	35%	72%	95%		The reliability of waste collections was adversely affected by a significant resource absence within the Serco contract resulting from Covid 19 related crew isolation and driver shortages. Performance has improved significantly compared to the same period last year with contractual performance issues continuing to be addressed through the contract management framework.
ECSR- CWR- 012	Number of Street Cleansing reports / requests for service (cumulative) (Minimise)	1,659	1,389	1,436	1,200	•	Q3 normally shows a seasonal increase in reporting of between 30% to 40% directly relating to leaf fall; this year, however, leaf fall was greater over a prolonged period due to a wet and warmer autumn.
ECSR- CWR- 013	% of Public streets with acceptably low levels of detritus accumulations after cleansing	98.74%	98%	96%	97.5%	•	
ECSR- HOS-005	Total number of fly-tipping enforcements (Number of penalty notices and warning letters issued to addresses) (No Polarity)	1,336	1,041	1,101	Data only	N/A	

Pl Code	PI Name	2020/21	Q3 2020/21	Q	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
ECSR- HOS-006	Total number of fly-tipping incidents identified by or reported to the Council (cumulative) (No Polarity)	2,216	1,686	1,828	Data only	N/A	The number of verified incidents reported for 3 months October to December 2021 at 406 was considerably lower than the previous 3 month periods (637 in April-June 2021 and 785 in July-September 2021).
ECSR-P- 001	% of Major planning applications processed within 13 weeks or statutory timeframe	91.7%	50%	100%	90%		
ECSR-P- 002	% of Non-Major planning applications processed within 8 weeks or statutory timeframe	95.5%	94%	89%	80%	•	
ECSR-P- 0021A	% of Council's decisions on major and non-major applications which are overturned at appeal (Minimise)	0.96%	1.34%	2.95%	2%	•	The listed target of 2% for this KPI is considerably below the nationally prescribed designation target of 10%. Successful appeals within the quarter totalled 20 against 677 decisions. This KPI can be affected by the volume of applications and appeals determined and these volumes within each quarter do lead to a degree of fluctuation between reporting periods. In this quarter there were higher numbers of appeals allowed than usual and the overall volume of applications determined was not high. This should be considered alongside the previous two quarters of 0.90% and 1.92%.
ECSR- ENS-010	% of Regulatory Services Partnership service requests with an initial response within the 'defined timescale'	91.2%	N/A	100%	90%	N/A	The majority of service requests received by the RSP relate to noise and nuisance. The number of noise complaints is still greater than pre-pandemic levels and the service is managing the increase in complaints using existing resources (Result could not be reported in same period the previous year).

PI Code	PI Name	2020/21	Q3 2020/21	Q	3 2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
ECSR- ENS-011	Safeguarding older people – number of successful physical interventions in cases of residents being targeted by financial scams and abuse	100	96	81	75	•	
ECSR- ENS-012	Safeguarding young people – number of successful physical interventions for restricted sales such as knives, alcohol, fireworks, tobacco, and e-cigarettes	92	92	77	75	•	
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	47%	40%	100%	95%		14 new and variation applications received during the quarter, 3 referred to the licensing committee with representations. Of the remaining; 2 were withdrawn and 9 notified of grant no later than 10 working days after the consultation period closed (100%)
ECSR- 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	N/A	100%	95%	N/A	
ECSR- 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 NEW	N/A NEW	47%	50%	N/A	Q3 saw the arrival of the Omicron variant which saw cases referred triple through November into December. To better manage this demand, a new model was agreed with National Test & Trace whereby we will focus support to those most deprived postcodes in the Borough. Initial data (Q4) shows that this new model is proving effective; likely to be represented within Q4 return.

Finance, Policy and Resources Cttee

Pl Code	PI Name	Name 2020/21 Q3 Q3 2021/2		2021/22	/22 Q3 2021/22		
		Value	Value	Value	Target	DoT	Note
Chief Exec	utive's Group						
CEGR- COM-002	Total number of offers available in a period - Business Offers Scheme	194	301	151	250	•	Focus has been on supporting businesses through pandemic and on promoting shop local.
CEGR-CS- 001	Overall Crime rate (per 1,000 residents) (Minimise)	58.7	46.1	43.2	49.2		Lowest crime rate in London with the highest percentage reduction and one of only 5 London boroughs whose crime rate is lower than same period last year.
CEGR-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%	44.9%	47.9%	30%	•	The % change demonstrates that the MARAC processes are effectively reducing demand in respect of survivors cases heard at the MARAC, and that there have not been individual repeat cases.
CEGR-CS- 005	Total number of reported domestic abuse incidents and crimes (No Polarity)	2,379	1,729	1,437	N/A		Lower levels of reported incidents are not seen as positive. This is because domestic abuse figures assessed by the British Crime survey are higher. The reduction is out of step with close neighbours and London. This will be discussed at the quarterly operational group at the end of January. However, the following is noted; (a) there had been a significant increase in reported incidents during the previous year against which this period is compared. This may be associated with the pandemic and a programme of targeted messaging (b) the anticipated volume of reported incidents in Q4 will result in an increase in annual reported incidents when compared with the pre-pandemic averages of around 2,000 incidents per annum.

Pl Code	PI Name	2020/21	Q3 2020/21	Q3	2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
CEGR-CS- 007	Number of referrals into commissioned VAWG services (Independent Domestic Violence Advisors)	N/A NEW	N/A NEW	366	300	N/A	The referral numbers include one month with the outgoing provider and two months with the new advocacy provider. The referral numbers indicate that referrals to the new service have not been overly impacted by the transition to the new provider (Hestia) and that communication and messaging has provided a sound basis for future development.
CEGR- EDO-002	Number of residents engaged/supported to find work through the Council's employment service	N/A NEW	N/A NEW	199	150	N/A	On track to overachieve end year target of 200 residents engaged.
CEGR- EDO-003	Number of residents provided with a training outcome through the Council's employment service	N/A NEW	N/A NEW	145	113	N/A	On track to achieve end year target of 150 residents trained.
CEGR- EDO-004	Number of Richmond Work Match Secured Jobs	N/A NEW	N/A NEW	45	56	N/A	Increase in secured jobs forecast to continue through quarter four. Performance will continue to be monitored monthly.
CEGR- RES-003	% of FOI requests completed within 20-day limit	59.1%	60.6%	74.4%	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- RES-004	% of Stage 2 Corporate Complaints responded to within 15 working days	53.3%	N/A	57.9%	50%		This relates to 19 stage 2 complaints of which 11 were responded to in time.

PI Code	PI Name	2020/21	Q3 2020/21 Q3 2021/22			Q3 2021/22				
		Value	Value	Value	Target	DoT	Note			
Resources Directorate										
RESR-FM- 001	% of Invoices paid on time (within 30 days or agreed terms)	84.1%	88.4%	83.9%	90.0%	₽	The drop in performance compared to the same period last year is as a result of processing an increased number of payments this year (13% increase year on year).			
RESR-RS- 001	Council Tax Collection rate	97.7%	83.0%	83.2%	82%	•				
RESR-RS- 002	Non-Domestic Rates (Business Rates) Collection rate	85.4%	70.4%	72.8%	70%					

Transport and Air Quality Cttee

PI Code	PI Name	2020/21	Q3 2020/21	Q3	2021/22		Q3 2021/22
		Value	Value	Value	Target	DoT	Note
	% of Monitoring stations achieving the Nitrogen Dioxide air quality objectives	36%	100%	89%	100%	•	Based on October/November data. This figure relates to the 70 Diffusion Tube Locations in the borough and numbers currently seeing exceedances against objectives values. It is difficult to pin-point changes to air quality across a small scale, as levels are susceptible at this scale to atmospheric variation as well as local factors. This is why the government specify annual reporting for the majority of objectives. A clearer annual picture local to the borough will become apparent with the Q4 return.
	% of Monitoring stations achieving the Particulate air quality objectives	100%	100%	100%	100%		This relates to the automated monitoring of PM 10s on the borough and based on October/November figures (latest available)

PI Code	Pl Code Pl Name		Q3 2020/21	Q3 2021/22			Q3 2021/22
		Value	Value	Value	Target	DoT	Note
ECSR- ENS-019	% of Schools achieving air quality objectives	97.3%	100%	100%	100%		This relates to areas around schools that are part of our air quality network that show current exceedances in NO2. Due to distance from the monitoring locations all schools inside the boundary of the property will be compliant.
	Number of interventions by Compliance Officers for engine idling (No Polarity)	8,104	8,104	8,379	Data only		Q3 data not complete. 2 month data as follows: - Oct-21 – 1017 - Nov-21 - 1027