

West Berkshire Council Performance Report

Key Accountable Measures 2016/17

Update: Quarter One

compiled by:

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1. Purpose of this report

To provide an update on progress against the council's Key Accountable Measures (KAMs) for 2016/17.

The key measures within this report have been distilled from those routinely monitored and managed through individual service delivery plans to focus more singularly on those which are of particular importance / significance key in delivering the strategic priorities in the Council Strategy and to the core business of the council as a whole. This report therefore:

- provides assurance to the Executive that the objectives laid out in the Council Strategy are being delivered;
- provides assurance to the Executive that areas of significance / particular importance are performing;
- acts as an early warning system, flagging up areas of significance / particular importance which are not performing or are not expected to perform as hoped;
 - o and therefore ensures that adequate remedial action is put in place to mitigate the impact of any issues that may arise.

2. Conventions used in this report

Throughout the report we have used a RAG 'traffic light' system to report progress:

- means we have either achieved / exceeded, or expect to achieve what we set out to do;
- means we are behind schedule, but still expect to achieve or complete the measure / activity by year end;
- indicates that we have not achieved, or do not expect to achieve, the activity or target within the year;
- indicates that data can only be reported at a single point of the year and progress cannot be tracked – e.g. GCSE results or the road condition survey, whilst;
- indicates that quarterly data is unavailable when this report was published
- indicates that a measure is not targeted and results are being recorded as a baseline for future monitoring.
- (E) (P) indicates that an outturn is an estimate/provisional and will be confirmed during the year.

Where measures are reported as 'red' or 'amber', an exception report provides (a) a description of why the measure / activity will not be achieved / completed, (b) the impact of not achieving, (c) the remedial action being taken to mitigate the impact of this as well as (d) the revised anticipated year end position (e) if any actions is required from Strategy Board.

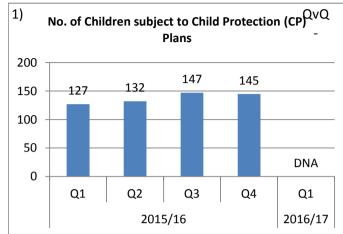
3. Comparative outturns

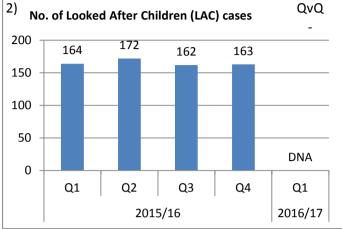
This will only relate to standardised, nationally reported measures. By default the data is compared to England as a whole. Our relative standing is presented as quartiles (i.e. 4th quartile up to 1st quartile). Where available, this is included against the previous year's

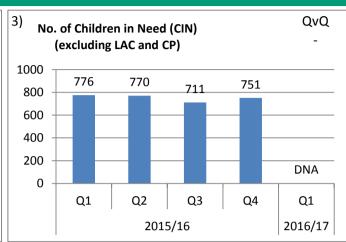
outturn. Where a direct, national comparison is not available, this is labelled as 'local'. Because of the timescales involved in central government, compiling, validating and publishing relative statistics, these are only published 6-12 months in arrears, sometimes longer.

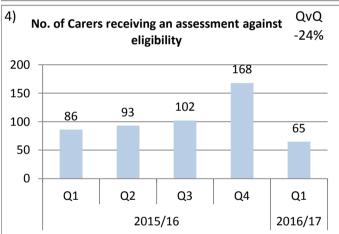
4. Measures of Volume

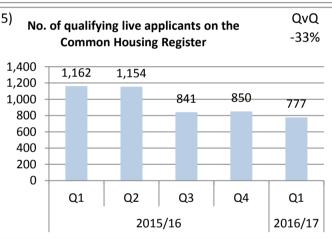
In addition to the key accountable measures, a number of contextual measures are recorded. These are non-targeted measures, which serve to illustrate the workload in a service, as well as how this may have changed from the previous quarter, or on a like-for like basis, to the same period last year. These are presented in a dashboard below.

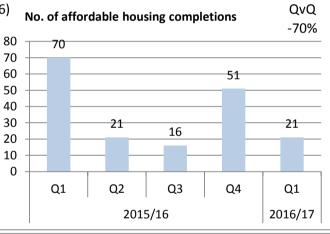




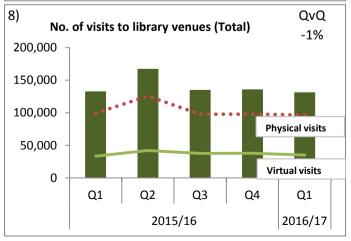


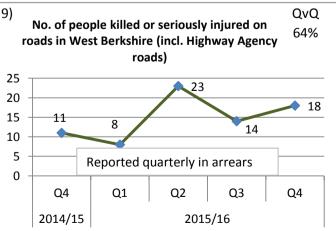






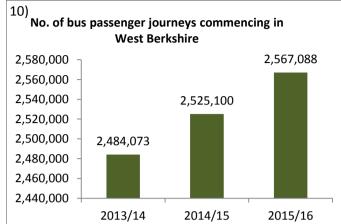


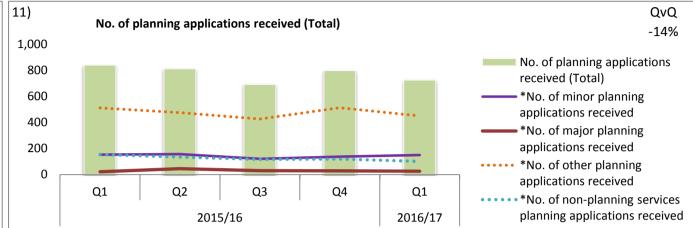


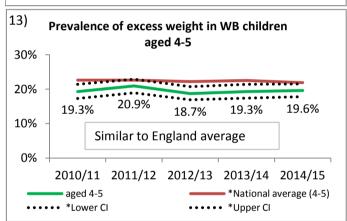


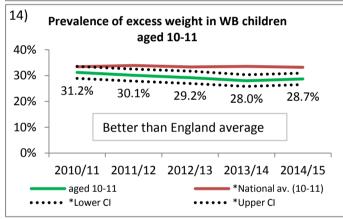


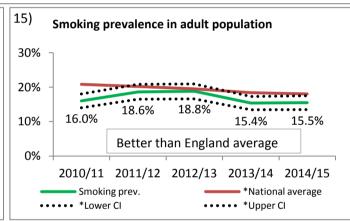
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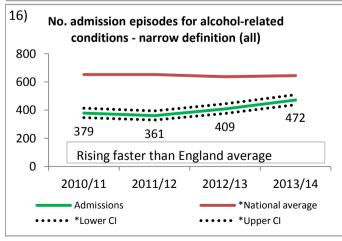


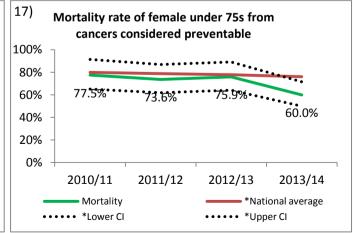


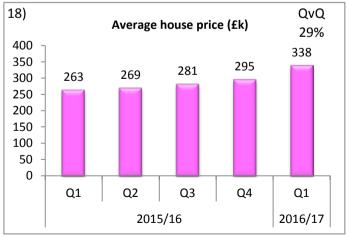


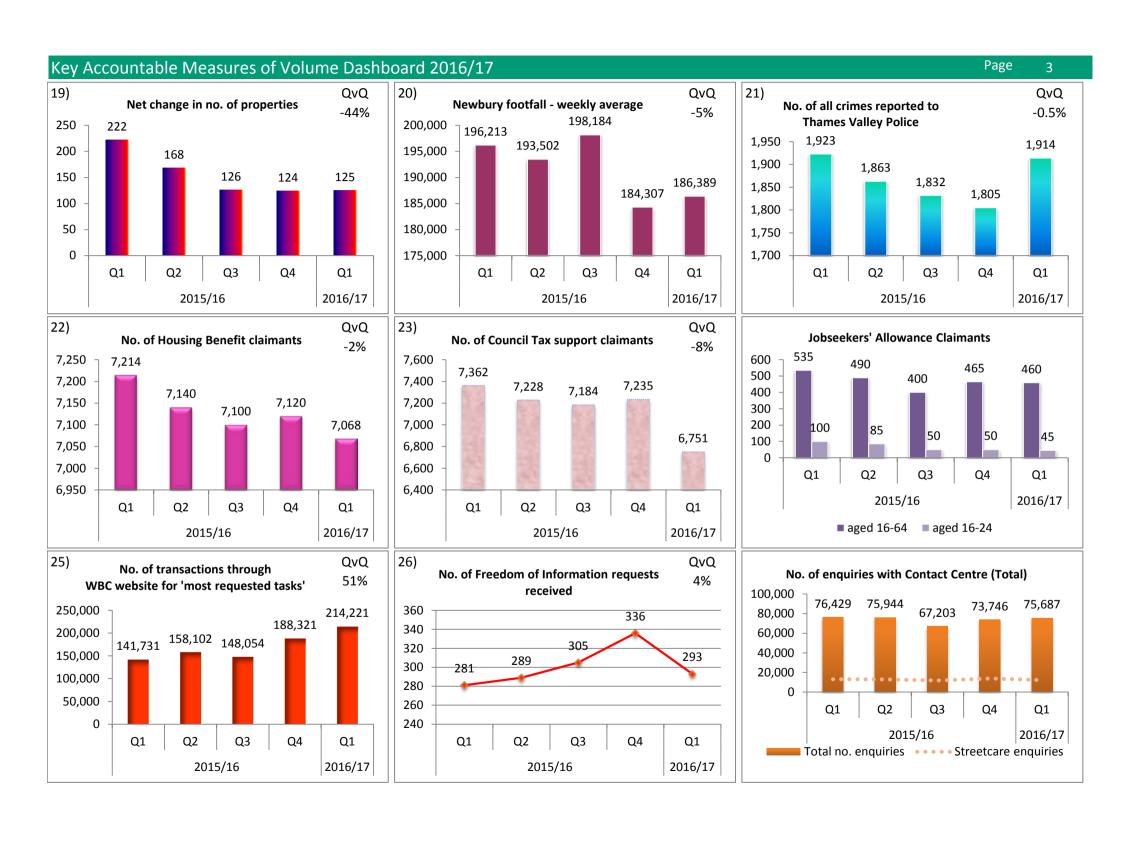












5. Overview of Performance

Across this reporting framework as a whole, 44 KAMs are captured, which are appraised by the Executive through this reporting mechanism. In the report, these are aligned to the strategic priorities laid out in the Council Strategy.

Education operates on an academic year. Therefore, attainment results refer to the 2015/16 academic year, where exams were taken in September 2016.

Of the 44 reported measures, outturns are available for 20.

Therefore, of the measures reported:

- 16 (80%) are reported as 'green' or are on track to be delivered / achieved by year end.
- 4 (20%) is reported as 'amber' not achieved, or do not expect to achieve, the activity or target within the year

No measures have been reported as 'red'. Chart 1 below shows outturns by Strategic Priority.

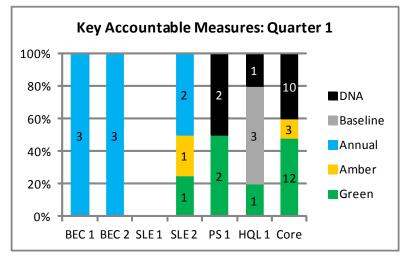


Chart 1

- BEC 1 Improve educational attainment
 BEC 2 Close the educational attainment gap
- SLE 1 Enable the completion of more affordable housing
- SLE 2 Deliver or enable key infrastructure improvements in relation to roads, rail, flood prevention, regeneration and the digital economy
- PS 1 Good at safeguarding children and vulnerable adults
- HQL 1 Support communities to do more to help themselves

Core - Core business

For those measures reported as 'amber' (behind schedule, but achievable by year end) details of the assessment, any remedial action taken and any strategic action required are included in the following Exception Reports.

Nick Cart	er / Kevin (Griffin	6	AMBER				
Indicator Ref:	SLE2ict02	Increase	number of West Be	ices 24Mb/s or above				
Executive	2014/15	2015/16		Target	Polarity			
	Year End	Year End	Q1	Q2	Q3	Q4		
RAG	*	*	•					
Qrtly outturn							94%	Higher is better
YTD outturn	83%	83%	84%					

Gigaclear have struggled with some technical challenges and the submission highways paperwork.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

Issues resolved but currently running 3 months behind schedule with plan in place to catch up.

STRATEGIC ACTIONS REQUIRED

None

Nick Carte	Nick Carter / Sean Anderson Customer Services 22 July										
Indicator Ref:	CBdcus01		The average n	it claims							
Executive	2014/15	2015/16		2016/17							
	Year End	Year End	Q1	Q2	Q3	Q4					
RAG	*	•	*								
Qrtly outturn							<18.5	Lower is			
YTD outturn	17.86 days	19.04 days	22.8 days				- days	better			

This was anticipated as a result of ending agency cover for peak workloads as part of the budget saving for 2016/17 and was compounded by the sickness absence and subsequent resignation of a benefit assessor.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

None other than monitoring performance weekly

STRATEGIC ACTIONS REQUIRED:

Ideally, the employment of additional assessor resource but, in the current budget climate this is not being proposed. Corporate Board will work with Customer Services to evaluate the request from the Service to review the targets, and if required, to propose an alternative target as part of Q2 performance reporting for the approval of the Executive Committee.

Nick Carte	Nick Carter / Sean Anderson Customer Services 12 July 20							
Indicator Ref:	CBdcus01	The ave	rage number of day	mants circumstances				
Executive	2014/15	2015/16		2016	5/17		Target	Polarity
	Year End	Year End	Q1	Q2	Q3	Q4		
RAG	*	*	*					
Qrtly outturn	-	-	-				<8 days	Lower is better
YTD outturn	6.18 days	5.85 days	13.31 days					.5 5 5 6 6

This was anticipated as a result of ending agency cover for peak workloads as part of the budget saving for 2016/17 and was compounded by the sickness absence and subsequent resignation of a benefit assessor.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

None other than monitoring performance weekly

STRATEGIC ACTIONS REQUIRED:

Ideally, the employment of additional assessor resource but, in the current budget climate this is not being proposed. Corporate Board will work with Customer Services to evaluate the request from the Service to review the targets, and if required, to propose an alternative target as part of Q2 performance reporting for the approval of the Executive Committee.

Rachael Wa	ardell / June	e Graves	Care Commis	ssioning, Housing &	Safeguarding	July 201	6	AMBER
Indicator Ref:	dicator Ref: CBgcchs09 Maintain % of claims for Discretionary Housing Payment (DHP), determined within 28 day relevant information							ng receipt of all
Executive	2014/15	2015/16		Target	Polarity			
	Year End	Year End	Q1	Q2	Q3	Q4		
RAG	*	*	*					
Qrtly outturn	82 / 95	66 / 68	-				70%	Higher is
YTD outturn	96.39/	86.3% 97.1%	29 / 50					better
11D Gattain	80.376	37.1/0	58.0%					

Resources have been reduced - 1FTE post has been reduced to 0.5FTE, post currently vacant.

We have had no DHP officer since beginning of April 2016. Other staff have therefore been picking up assessments on top of their own current workloads. We have been out to recruitment and have appointed but are currently awaiting pre-employment checks before we can agree a start date.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

We have had no DHP officer since beginning of April 2016. Other staff have therefore been picking up assessments on top of their own current workloads. We have been out to recruitment and have appointed but are currently awaiting pre-employment checks before we can agree a start date.

STRATEGIC ACTIONS REQUIRED:

None

6. Quarterly service requests for amendments to measures / targets are noted in the comments column below.

In 2015/16, a new performance framework was introduced that gave Heads of Service the option to amend their service plans on a quarterly basis in order to ensure they reflect the reality of the service. This would for example include, which measures were still relevant, where they are reported to and any agreed targets. As part of the quarterly reporting, approval for any amendments is sought from the appropriate decision maker e.g. changes to Key Accountable Measures will need to be approved by Corporate Board and Executive Committee.

Core Business – d. Providing benefits

Customer Services have requested that the target for the following be revised, due to reduction in use of agency cover, staff sickness absence and vacant post:

CBdcus01 - The average number of days taken to make a full decision on changes in a Benefit claimants circumstances

CBdcus01 - The average number of days taken to make a full decision on new Benefit claims

Corporate Board is working with the Service to assess this measure and, if applicable, a recommendation will be made as part of the report at quarter two.

(Please refer to the Exception Reports above for full details.)

7. Performance Outturns by Strategic Priority and Core Business

The main body of the report presents performance outturns by Strategic Priority in detail. Along with a description of the measure, the table also provides:

- o Column 1: a reference code
- o Column 2: the title of the measures
- o Column 3-6 previous years' outturns and comparative performance
- o Column 7: the current year's target
- o Columns 8: quarterly outturn and RAG (red, amber, green) rating
- o Column 9: supporting commentary or volume data.

Key Strategic Measures by Priority 2016/17

Summary of Outturns: Strategic Priority	2016/17
Green ★	4
Amber ♦	1
Red ■	0
Total reported	
Annual (not yet reported)	8
Baseline (not targeted) 🗯	3
Data not available	3
Total unreported	

	prove educational attainment								
ACADEMIC Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	Target AY 2015/16		Q1 RAG / Outturn	Q1 Comment
BEC1edAY 06	Yr1 Phonics: Proportion of pupils achieving expected level in Phonics decoding	55%	4th	Due in Jan-17	dna	78%	©	Annual	Reports at Q4
BEC1edAY 08	Measure to be confirmed: At KS4, the average attainment 8 score is in the top 25% of English Local Authorities	-	-	Due in Jan-17	dna	Baseline	©	Annual	Reports at Q4
BEC1edAY 09	Measure to be confirmed: At KS2, the percentage achieving the national standard is in the top 25% in England for reading, writing and maths combined	-	-	Due in Jan-17	dna	Baseline	©	Annual	Reports at Q4

BEC 2 - Clo	se the educational attainment gap							
Academic `	Year							
Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	Target AY Q1 RAG / 2015/16 Outturn		Q1 Comment
BEC2edAY(Yr1 Phonics: Proportion of pupils eligible for Free School Meals (FSM) achieving expected level in Phonics decoding		4th	Due in Jan-17	dna	59%	Annual	Reports at Q4
	Measure to be confirmed: To improve on 2015 rankings for disadvantaged pupils in KS2 for 2016	-	-	Due in Jan-17	dna	Baseline	Annual	Reports at Q4
1	Measure to be confirmed: To improve on 2015 rankings for disadvantaged pupils in KS4 for 2016	-	-	Due in Jan-17	dna	Baseline	Annual	Reports at Q4

SLE 1 - Enable the completion of more affordable housing

SLE 2 - Deliver or enable key infrastructure improvements in relation to roads, rail, flood prevention, regeneration and the digital economy

Ref	ITitle	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q1 Comment
	Ensure that no more than 5% of the principal road network (A roads) is in need of repair	3%	47/147 2nd	2%	dna	5%	Annual	Reports at Q4
	Increase number of West Berkshire premises able to receive Superfast Broadband services 24Mb/s or above	83%	local	57,340 (82.8%)	local	65,287 (94.2%)	57,859 (83.5%)	See exception report for details.

^{*}NB. No targeted measures have been assigned. Actions are currently being assigned by Strategy Board. See Measures of Volume for 'No. of affordable housing completions'

SLE 2 - Deliver or enable key infrastructure improvements in relation to roads, rail, flood prevention, regeneration and the digital economy

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q1 Comment
CEO1	Milestone - Market Street Redevelopment: Submit detailed planning application to WBC Planning Committee	-	-	Complete	local	Sep-16	★ On track	
CEO3	Milestone 1 - London Road Industrial Estate Redevelopment (LRIER) with St. Modwen Plc. Dependent on determination on JR (Aug/Sept 16) - St Modwen to create a business plan and present to the Project Steering Group for approval during Q1 2017	-	-	Complete	local	Apr-17	Annual	Potential start date April 2017

PS 1 - Good at safeguarding children and vulnerable adults

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17		1 RAG / utturn	Q1 Comment
PS1asc03	Maintain % of safeguarding concerns responded to within 24 hours.	91%	local	94%	local	92%	*	92%	
PS1asc04	% of WBC provider services inspected by Care Quality Commission (CQC) that are rated good or better by CQC in the area of "safe"	-	-	75%	dna	100%	*	80.%	Q1: 4 / 5 Relates to three homes, Shared Lives, and Re-ablement service.

PS 1 - Good at safeguarding children and vulnerable adults

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17		Q1 RAG / Outturn	Q1 Comment
PSICATUL	Improved Ofsted rating for Children and Families Service	-	-	-	-	> previous	2	dna	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
レくしんかけいり	Positive endorsement of progression from Peer Review of Children and Families Service	-	-	-	-	> previous	2	dna	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.

HQL 1 - Support communities to do more to help themselves

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q1 Comment
HQL1pdcr0	All 6 communities involved in the Building Community Together have developed their community plan	-	-	6	-	-	<i>≈</i> 5	5 communities are actively having community conversations; Greenham is not having a traditional community conversation and is instead having a sports/physical activity led community engagement strategy, in response to feedback from local residents. This will be led by Public Health
HQL1pdcr(No of staff and volunteers that received Restorative Practice Training	-	-	859	local	-	≈ 137 (P)	996 in total since June 15; some training records are incomplete from Q1 so this will be an under-estimate

HQL 1 - Support communities to do more to help themselves

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17		21 RAG / Outturn	Q1 Comment
HQL1pdcr(No of children and young people that have received Restorative Practice Training	-	-	452	local	-	222	150	150 children - new pilot schools Q1 - 402 children and young people trained in total since September 16
HQL1phwb	Tackle loneliness and social isolation by increasing the number of people who have connected with a service through the village agents volunteer scheme.	-	-	dna	local	120 per Quarter		dna	Meeting with provider scheduled for 4 August 2016
HQL1ss03	Provide a range of support and advice to community groups on the development of parish plans, engaging with partners and the community	Achie- ved	local	Complete	local	Complete	*	On track	Currently working with 4 communities (Purley, Hamstead Marshall, Enborne and Brightwalton) to refresh their Parish Plans.

Summary of Outturns: Core Business	2016/17
Green ★	12
Amber ♦	3
Red •	0
Total reported	15
Annual (not yet reported)	0
Baseline (not targeted) 🗯	0
Data not available	10
Total unreported	10

Core Business - a. Protecting our children

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q1 Comment
CBac&f05	To maintain a high percentage of (single) assessments being completed within 45 working days	70%	local	83%	local	90%	፟ dna	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
CBac&f10	The number of weeks taken to conclude care proceedings (children social care)	31	local	tbc	local	<=26 weeks	፟ dna	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
CBac&f12	Percentage of Looked After Children with Health Assessments on time	63%	local	98%	local	>90%	፟ dna	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
CBac&f13	Percentage of Looked After Children with Dental Checks completed on time	68%	local	88%	local	>90%	ಔ dna	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.

Core Business - a. Protecting our children

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG Outtur	(Q1 Comment
CBac&f14	Placement moves - stability of placement of Looked After Children - number of moves (3 or more in a year)	5%	local	5%	local	<=10%	፟ dn	na (Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
CBac&f15	% of Leaving Care Clients with Pathway Plans	100%	local	97%	local	>=95%	ಔ dn	na l	Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
CBapdcr0 6	Child Protection Reviews - held on time	-	-	-	-	95%	ಔ dn	na (Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.
CBapdcr0 7	Looked after children cases which were reviewed within required timescales	-	-	-	-	95%	ಔ dn	na (Director sign off for Q1 data, beyond that used at service/partnership level, is delayed and (by agreement) will be completed after the Peer Review process.

Core Business - c. Bin collection and street cleaning

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q1 Comment
CBccep1:	Maintain the proportion of household waste recycled/composted/reused/recovered (Local Indicator)	82%	local	80.3% (E)	local	80%	★ 76.3% (E)	Q1: 16,864 / 22,100 This quarters result is an estimate based on partial availability of data and will not be finalised until the next quarter. This result is also subject to change once figures are validated and confirmed by DEFRA after quarter 4. This is below the year end target due to Energy from Waste (EFW) closure in April. This will average out and increase during the year.
CBccep14	Maintain an acceptable level of litter, detritus and graffiti (as outlined in the Keep Britain Tidy local environmental indicators).	Satisfac- tory	-	Good	dna	Satisfactory	፟ dna	Reports at Q2

Core Business - d. Providing benefits

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q1 Comment
CBdcus01	The average number of days taken to make a full decision on new Benefit claims	17.86 days	local	19.04 days	local	<18.5 days	V JJ.X davs	2015/16 Q1 return was 19.18 days. See exception report for details
CBdcus02	The average number of days taken to make a full decision on changes in a Benefit claimants circumstances	6.18 days	dna	5.85 days	dna	<8 days	• 13.31 days	See exception report for details.

Core Business - e. Collecting Council Tax and Business rates

Ref	llitle	Year end	National Rank/Qua rtile	l Year end	National Rank/Quartil	YE target 2016/17			Q1 Comment
			2014/15	2013/10	e 2015/16	2010/17			
CBecus04	The 'in –year' collection rate for Council Tax	98%	dna	99%	dna	99%	*	30%	For comparison: 2015/16 Q1 return = 29%
CBecus05	The 'in-year' collection rate for Business Rates	99%	dna	99%	dna	99%	*	34%	For comparison: 2015/16 Q1 return = 36%

Core Business - f. Ensuring the wellbeing of older people and vulnerable adults

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17		1 RAG / Jutturn	Q1 Comment
CBfasc06	Proportion of clients with Long Term Service (LTS) receiving a review in the past 12 months	62%	local	95%	local	75%	*	93.7%	Q1: 1,121 / 1,196
CBfasc07	Decrease the level of delayed transfers of care (DTOC) from hospital and those attributable to social care from acute and non-acute settings (ASCOF 2C Part 2)	4.5	dna	7.5	dna	4	8	dna	Not available until mid-August
CBfasc10	Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	93%	local	79%	local	82%	*	81.5%	Q1: 88 / 108
CBfcchs07	Maintain percentage of financial assessments within 3 weeks of referral to the Financial Assessment & Charging Team	99%	local	100%	local	90%	*	99.5%	Q1: 405 / 407

Core Business - g. Planning and housing

Ref	Title	Year end 2014/15	National Rank/Qua rtile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17		Q1 RAG / Outturn	Q1 Comment
CBgcchs0	Maintain % of people presenting as homeless where the homelessness has been relieved or prevented	78%	local	79%	local	75%	*	80.8%	Q1: 97 / 120
CBgcchs0	Maintain % of claims for Discretionary Housing Payment, determined within 28 days following receipt of all relevant information	86%	local	97%	local	70%	•	58.%	Q1: 29 / 50
CBgcchs1	Approve 95% of high priority Disabled Facilities Grants within 9 weeks of receipt of full grant application	100%	local	97%	local	80%	*	100%	
CBgpc11	Subject to examination, adopt the Site Allocations Development Plan Document (DPD) by December 2016	-	-	Behind schedule	local	Dec-16	*	On track	
CBgpc12	60% of 'major' planning applications determined within 13 weeks or the agreed extended time.	(56/76) 74%	88/125 3rd	(56/70) 80%	72/125 3rd	60%	*	86.4% (E)	Q1: 19 / 22. Estimate
CBgpc13	65% of 'minor' planning applications determined within 8 weeks or the agreed extended time.	(320/446) 72%	73/125 3rd	(298/411) 73%	78/125 3rd	65%	*	65.3% (E)	Q1: 79 / 121. Estimate
CBgpc14	75% of 'other' planning applications determined within 8 weeks or the agreed extended time.	(1146/142 7) 80%	29/125 2nd	(1,127/1,274) 89%	32/125 2nd	75%	*	96.2% (E)	Q1: 331 / 344. Estimate