Key Accountable Measures (KAMs) 2016/17

Update on progress: Quarter 2 YTD (April -September 2016)

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1. Purpose and Conventions

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.

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 vear.

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.

2. 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.

3. 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 in the last section of this report..

4. 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 32.

Therefore, of the measures reported:

- 22 (69%) are reported as 'green' or are on track to be delivered by year end.
- 4 (13%) is reported as 'amber' behind schedule, but expected to be delivered within the year
- 6 (19%) are reported as 'red' not delivered, or not expected to be delivered within the year

Chart 1 below shows outturns by Strategic Priority.

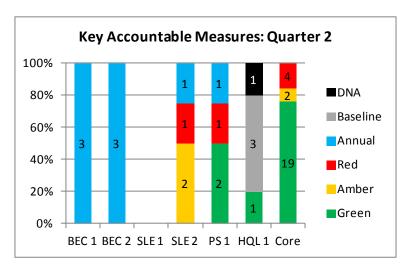


Chart 1

- 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' or 'red', details of the assessment, any remedial action taken and any strategic action required can be viewed in the Exception Reports at the end of section 6.

5. Quarterly service requests for reviews of measures / targets

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.

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

Milestone - Market Street Redevelopment: Submit detailed planning application to WBC Planning Committee

REQUEST: To redefine the target as November 2016 (currently September 2016) as the planning application will be submitted, albeit slightly behind schedule, following additional work by Highways Officers to deliver an improved scheme.

Core Business - g. Planning and housing

Subject to examination, adopt the Site Allocations Development Plan Document (DPD) by December 2016:

REQUEST: To redefine the target as June 2017 (currently December 2016). Following the oral hearings the planning inspector has asked for main modifications which require further public consultation, therefore there is insufficient time to be able to complete the adoption by December 2016.

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

Exception reports for KSMs by Strategic Priority:

Nick Cart	er / Kevin (Griffin	10	Q2 2016/17		AMBER		
Indicator Ref:	SLE2ict02	Increase	number of West Be	erkshire premises ab	ole to receive Superfa	ast Broadband serv	vices 24Mb	o/s or above
Executive	2014/15	2015/16		2016	5/17		Target	Polarity
	Year End	Year End	Q1	Q2	Q3	Q4		
RAG	*	*	*	*				
Qrtly outturn				94%	Higher is better			
YTD outturn	75%	83%	84%	84.9%				2000

REASON FOR AMBER:

Gigaclear have overcome a number of technical challenges and now have a much improved relationship with highways, submitting paperwork on time. They are expanding their network build in more areas and starting catch-up on planned delivery.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

Issues resolved but currently running 3 months behind schedule with plan in place to catch-up and 100% complete delivery before 31/12/2017.

STRATEGIC ACTIONS REQUIRED

None

N	ick Carter			CEO	Q2 2016/17	RED		
Indicator Re	ef: CEO 1	Mileston	e - Market Street Redevelopment: Submit detailed planning application to WB					ng Committee
Fire southing	2014/15	2015/16		20	016/17		Tauant	
Executive	Year End	Year End	Q1	Q2	Q3	Q4 Target F		Polarity
RAG	-	-	*	•				
Qrtly outturn	-	-					Sep-16	
YTD outturn	-	-	On track	Delayed				

REASON FOR RED:

Planning Committee date delayed until 23 November as Highway Officers had raised concerns and requested more traffic modelling to be undertaken. This has now been undertaken.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

Traffic modelling has been undertaken and Highways are content the planning application can be fully supported.

FINANCIAL IMPLICATIONS:

None

SERVICE PLAN UPDATES REQUIRED:

None

STRATEGIC ACTIONS REQUIRED:

Request to redefine target as the planning application will be submitted, albeit slightly behind schedule, following additional work by Highways Officers to deliver an improved scheme. Suggest November 2016

N	ick Carter			Q2 2016/17		AMBER			
Indicator	· Ref	Depend		Wilestone 1 - London Road Industrial Estate Redevelopment (LRIER) with St. Modwen Plc. nt 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					
Executive	2014/15	2015/16		2016	5/17		Target	Polarity	
	Year End	Year End	Q1	Q2 Q3 Q4		Q4			
RAG	-	-	©	•					
Qrtly outturn	-	-	-	April- 17					
YTD outturn	-	-	-	Behind schedule					

REASON FOR AMBER:

Continued delay due to ongoing court action. The Judicial Review action was won in the high court, however the appellant has sought leave to appeal the decision on the grounds of procurement and this is still pending.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

None

STRATEGIC ACTIONS REQUIRED:

None

Rachael War	dell / Tandra	Forster		ASC	Q2 2016/17		RED	
P&S1as	sc04	% of WBC	BC provider services inspected by Care Quality Commission (CQC) that are rated the area of "safe"					etter by CQC in
Fyequative	2014/15	2015/16		20	016/17		Tayaat	Polarity
Executive	Year End	Year End	Q1	Q2	Q3	Q4	Target	
RAG			•	•				
Qrtly outturn	3/4	3/4	4/5	4/5			100 %	Higher is better
YTD outturn	75%	75%	80 %	80 %			-	

REASON FOR RED: A CQC inspection in 2015 rated Willows Edge as good but highlighted one area, Safe as requiring improvement. This was on the basis that the service was not always safe because there were not always sufficient staff available to meet people's needs. The provider's medicines procedure did not provide guidance to staff on the circumstances when medicines may be given covertly. However, individual guidelines were provided in one case where this might be necessary and appropriate best interests agreements had been obtained. The full report can be found here http://www.cqc.org.uk/location/1-111590066

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

Willows Edge has worked with the Care Quality team to improve performance, a recent CQ report has evidenced that we now meet CQC requirements. We are currently embedding outcomes, and in 3 months we are confident we will be a good service in all areas.

FINANCIAL IMPLICATIONS: None

SERVICE PLAN UPDATES REQUIRED: KPI now includes Shared Lives and Reablement services for 2016/17.

STRATEGIC ACTIONS REQUIRED: Whilst improvements are identified, the CQC do not consider the home is at significant risk and will not prioritise a review. The home will remain categorised as 'requiring improvement' until a further review takes place.

Rachael W	/ardell/Mac	Heath	Chil	dren and Family Ser	Q2 2016/17		AMBER		
Indicator Ref:	CBac&f10		The number o	The number of weeks taken to conclude care proceedings (Children Social Care)					
	2014/15	2015/16		2010	5/17		Target	Polarity	
Executive	Year End	Year End	Q1	Q2	Q3	Q4			
RAG	-	*	*	*					
Qrtly outturn	-	-	-					Lower is better	
YTD outturn	31	23	30	30				better	

REASON FOR AMBER:

This indicator measures the average number of weeks taken to conclude care proceedings for those concluded year to date. Although the majority of our cases fall within this threshold, there are a minority of cases where long delays have been unavoidable. The average has been pushed up as a result. There is a concern that is impacting on this indicator, that has been flagged at the Local Family Justice Court and is an issue shared by other Berkshire Authorities, as the court timetabling and capacity issues within Reading Court are impacting on cases being heard and delaying legal proceedings. This continues to be raised in meetings with the HoS and the Judiciary.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

An additional line has been added to our Internal performance report to allow us to monitor 'month on month' as well as year to date performance.

There continues to be discussion at Performance Board to ensure that delays are unavoidable and in the best interests of the child/young person concerned.

STRATEGIC ACTIONS REQUIRED:

None required.

Nick Carte	r / Sean An	derson		Customer Services	Q2 2016/17		RED				
Indicator Ref:	CBdcus01		The average n	umber of days take	n to make a full deci	sion on new Benef	it claims				
Executive	2014/15	2015/16		2016	5/17		Target	Polarity			
	Year End	Year End	Q1	Q1 Q2 Q3 Q4							
RAG	*	•	*	•							
Qrtly outturn	-	-	-		<18.5 days	Lower is better					
YTD outturn	17.86 days	19.04 days	22.8 days	22.8 days 23.14 days							

REASON FOR RED: In order to meet immediate (December 2015) budgetary requirements, experienced contractors had their contracts terminated in February 2016. The contractors were initially employed as a temporary resource to enable the Council to avoid potential redundancy costs arising out of the anticipated impact of Universal Credit on the Housing Benefit Caseload. Contractors by their nature come at a significant mark-up compared to their full time equivalent and with Universal Credit now scheduled for full working age implementation by 2020/21 it was cost beneficial to take on full-time staff. Whilst the new staff work up their experience it was known that performance would slip compared to previous years and indeed this has been the case. As we work through the year there is evidence that indicates that turnaround times are improving and whilst it will not be possible to achieve on-target this year it is thought that as long as the establishment remains stable and not withstanding any as yet unforeseen consequences of the welfare reform programme this service should improve next year.

As an indication as to where we are in a national context, the recently released performance figures from the DWP place current performance within the national average for quarter 1 of 2016/17.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS: Over the coming months, we will improve performance to ensure we achieve the target of <18.5 days during Q4, even though we will not be able to reach this target for the year overall.

FINANCIAL IMPLICATIONS: Potential loss of Subsidy Grant around 'Local Authority error overpayments' as a result of delays in processing claims, this area is being closely monitored to avoid such an occurrence.

SERVICE PLAN UPDATES REQUIRED: Should resources need reviewing in the light of the reduction in Administration Subsidy, performance targets will need to be re-aligned to match the reduced capacity of the service.

STRATEGIC ACTIONS REQUIRED: Nothing at this stage but performance targets may need revisiting in light of the comments made above.

Nick Carte	r / Sean An	derson		Customer Services	Q2 2016/17		RED	
Indicator Ref:	CBdcus01	The ave	rage number of day	s taken to make a f	ull decision on chang	ges in a Benefit clai	mants circ	cumstances
Executive	2014/15	2015/16		2016	6/17		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	12.16 days				

REASON FOR RED: In order to meet immediate (December 2015) budgetary requirements, experienced contractors had their contracts terminated in February 2016. The contractors were initially employed as a temporary resource to enable the Council to avoid potential redundancy costs arising out of the anticipated impact of Universal Credit on the Housing Benefit Caseload. Contractors by their nature come at a significant mark-up compared to their full time equivalent and with Universal Credit now scheduled for full working age implementation by 2020/21 it was cost beneficial to take on full-time staff. Whilst the new staff work up their experience it was known that performance would slip compared to previous years and indeed this has been the case. As we work through the year there is evidence that indicates that turnaround times are improving and whilst it will not be possible to achieve on-target this year it is thought that as long as the establishment remains stable and not withstanding any as yet unforeseen consequences of the welfare reform programme this service should improve next year.

As an indication as to where we are in a national context, the recently released performance figures from the DWP place current performance within the national average for quarter 1 of 2016/17.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS: Over the coming months, we will improve performance to ensure we achieve the target of <8 days during Q4, even though we will not be able to reach this target for the year overall.

FINANCIAL IMPLICATIONS: Potential loss of Subsidy Grant around 'Local Authority error overpayments' as a result of delays in processing claims, this area is being closely monitored to avoid such an occurrence.

SERVICE PLAN UPDATES REQUIRED: Should resources need reviewing in the light of the reduction in Administration Subsidy, performance targets will need to be re-aligned to match the reduced capacity of the service.

STRATEGIC ACTIONS REQUIRED: Nothing at this stage but performance targets may need revisiting in view of the above.

Rachael War	dell / Tandra	Forster		ASC	Q2 2016/17		RED	
OP3as	c14	Decrease the level of delayed transfers of care (DTOC) from hospital and those attributa acute and non-acute settings (ASCOF 2C Part 2)						cial care from
Evecutive	2014/15	2015/16		20	16/17		Target	Polarity
Executive	Year End	Year End	Q1	Q2	Q3	Q4		
RAG		*		•				
Qrtly outturn	4.5	7.5	16.7	<4.0	Lower is better			
YTD outturn	4.5	7.5	16.7					20001

REASON FOR RED:

During the early part of 2016/17 (Q1), as a system we experienced unprecedented demand in A&E, this was highlighted nationally by acute trusts. Increased demand in A&E has meant more pressure for social care to support hospital discharge.

The key challenge for West Berkshire remains access to both homecare and nursing/residential placements, which is responsible for 70% of all social care delays. This means we struggle to get a small group of people out of hospitals and their average length of stay stacks up; taken together these represent the most significant cause of delays.

We are considering options to look at how we create capacity in the residential/nursing market but this will be challenging particularly from a budget perspective. We will continue to monitor and strive to improve on our performance but there are no easy answers.

July/ August are showing an improved performance for delays attributable to ASC. (dropped to 13.8) providing evidence that we have had a greater success at getting people out of hospital.

National Sept data will not be available until mid November 2016

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

The team have been doing some intensive work to improve discharge arrangements including a weekly systems call. Work continues with North Hants, we now participate in regular systems calls, have met with the CCG lead and are starting to see improvements in the discharge process.

7 day working and work through Joint Care Pathway (JCP) scheme continues.

Building relationships with North Hants and Swindon to improve discharge pathways.

Main challenges continue to be sourcing external care.

DToC continues to be an area that will be targeted through the Better Care Fund (BCF) Plan 201617, monitored by Health and Wellbeing Board (H&WB).

FINANCIAL IMPLICATIONS: Increased cost in fines attributed to ASC as a result of higher number of delayed bed days.

SERVICE PLAN UPDATES REQUIRED: None.

STRATEGIC ACTIONS REQUIRED: None

Rachael Wa	ardell / June (Graves	Care, Commis	Q2 2016/:	17	AMBER				
Indicator Ref: CBgcchs09 Maintain % of claims for Discretionary Housing Payment, determ relevant information						ed within 28 days	following	receipt of all		
Executive	2014/15	2015/16		201	6/17		Target	Polarity		
	Year End	Year End	Q1	Q2	Q3	Q4				
RAG	*	*	*	*						
Qrtly outturn	82 / 95	66 / 68	29 / 50	70 %	Higher is better					
YTD outturn	86.3 %	97.1 %	58.0%	58.0% 62.5%						

REASON FOR AMBER:

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

We have had no DHP officer since the 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 did appoint but within a couple of weeks this person successfully applied for a secondment to a full-time role.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN:

We have had no DHP officer since the 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 did appoint but within a couple of weeks this person successfully applied for a secondment to a full-time role.

STRATEGIC ACTIONS REQUIRED:

None.

John Ash	worth / Gary	Lugg	Pla	nning and Countrys	Q2 2016/17		RED	
CBO2p	c11	Subjec	t to examination, ac	lopt the Site Allocat	ions Development	Plan Document (DP	D) by Dec	ember 2016
Fugguting	2014/15	2015/16		2016	5/17		Tayant	Polarity
Executive	Year End	Year End	Q1	Q2	Q3	Q4	Target	
RAG	-		*	•				
Qrtly outturn	-	-	-	-			Dec 16	-
YTD outturn	-	Behind schedule	On track					

REASON FOR RED:

Following the oral hearings into the Housing Site Allocation Development Plan Document (HSA DPD), the planning Inspector has proposed a series of modifications to the plan which need to be consulted on before he issues his final report into the HSA DPD. The council received notification of the modifications in the 3rd week of October which the Inspector regarded as main modifications (which require consultation) rather than minor modifications. Consequently there is insufficient time to be able to complete the processes required for adoption of the plan in December.

REMEDIAL MANAGEMENT ACTION BEING UNDERTAKEN AND ALTERNATIVE PLANS:

Having submitted the HSA DPD for examination to the Planning Inspectorate the council has no control over the timing of the Planning Inspector's final report. Officers are working as close as possible with the Inspector to ensure that they can provide answers to any further questions he might have. In addition, Council in December will decide if it wishes to consult on the Examiners proposed modifications to ensure that there is minimal delay resulting from this extra consultation.

FINANCIAL IMPLICATIONS:

The slippage of the project should not impact on the budget 2016/17 as the plan should be adopted in June 2017 and the money can clearly be carried forward to pay for the outstanding examination costs already incurred.

SERVICE PLAN UPDATES REQUIRED:

None.

STRATEGIC ACTIONS REQUIRED:

Request to redefine target to June 2017.

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 8-9: quarterly outturn and RAG (red, amber, green) rating
- o Column 10: supporting commentary or volume data.

Key Accountable Measures by Priority 2016/17

BEC 1 - Imp	prove educational attainment								
ACADEMIC	Year								
Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	12015/16	National Rank/Quartil e 2015/16	Target AY 2015/16	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
	Yr1 Phonics: Proportion of pupils achieving expected level in Phonics decoding	55%	4th	Due in Jan-17	dna	78%	Annual	Annual	Finalised, verified data will be published in Q4
	At KS4, the average attainment 8 score is in the top 25% of English Local Authorities	-	-	-	dna	Top 25%	Annual	Annual	Finalised, verified data will be published in Q4
BEC1edAY	At KS2, the percentage achieving the national standard is in the top 25% in England for reading, writing and maths combined	-	-	-	dna	Top 25%	Annual	Annual	Finalised, verified data will be published in Q4

BEC 2 - Clo	se the educational attainment gap										
ACADEMIC	Year										
Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	Target AY 2015/16		1 RAG / Outturn		(YTD) RAG / Outturn	Q2 Comment
BEC2edAY(Yr1 Phonics: Proportion of pupils eligible for Free School Meals (FSM) achieving expected level in Phonics decoding	55%	4th	Due in Jan-17	dna	59%	©	Annual	©	Annual	Finalised, verified data will be published in Q4
BEC2edAY:	To improve on 2015 rankings for disadvantaged pupils in KS2 for 2016	-	-	-	dna	Improve	©	Annual	©	Annual	Finalised, verified data will be published in Q4
BEC2edAY:	To improve on 2015 rankings for disadvantaged pupils in KS4 for 2016	-	-	-	dna	Improve	©	Annual	©	Annual	Finalised, verified data will be published in Q4

SLE 1 - Enable the completion of more affordable housing

*NB. No targeted measures have been assigned. Actions are currently being monitored by the Corporate Programme 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/Quart ile 2014/15	17015/16	National Rank/Quartil e 2015/16	YE target 2016/17		l RAG / utturn		YTD) RAG / Outturn	Q2 Comment
SLE2ht03	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	©	Annual	Reports at Q4
SLE2ict02	Increase number of West Berkshire premises able to receive Superfast Broadband services 24Mb/s or above		local	57,340 (82.8%)	local	65,287 (94.2%)	•	57,859 (83.5%)	•	58,832 (84.9%)	See exception report for details.
CEO1	Milestone - Market Street Redevelopment: Submit detailed planning application to WBC Planning Committee	-	-	Complete	local	Sep-16	*	On track	-	Delayed	See exception report for details. Request to amend target date.
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	•	Delayed	See exception report for details.

PS 1 - Good at safeguarding children and vulnerable adults

Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
PS1asc03	Maintain % of safeguarding concerns responded to within 24 hours.	91%	local	94%	local	92%	★ 95%	★ 91.4%	Q2: 148 / 167
PS1asc04	% of WBC provider services inspected by Care Quality Commission (CQC) that are rated good or better by CQC in the area of "safe"	-	local	75%	local	100%	♦ 80.0%	80.0%	Q2: 4 / 5 See exception report for details.
PS1c&f01	Improved Ofsted rating for Children and Families Service	-	-	Inadequate	-	> previous	Annual	Annual	We are awaiting a re-inspection from Ofsted. This is likely to take place before March 2017.
PS1c&f02	Positive endorsement of progression from Peer Review of Children and Families Service	-	-	-	-	Mar-17	Annual	★ On track	The Safeguarding Peer Review acknowledged a number of positives through their visit and have made recommendations which continue to be progressed through the Children's Services Improvement Programme. A key priority being progressed in the service is 'there should be a focus on always doing the basics well in Children's Social Care rather than trying to deliver everything at the same time and the Team considering that now is a good time to focus on key issues when there is a strong stable workforce and a leadership team that can invoke and lead change.

HQL 1 - Support communities to do more to help themselves

Ref	Title	Year end 2014/15	National Rank/Quart	Year end 2015/16	National Rank/Quartil	YE target 2016/17		RAG / utturn		YTD) RAG / Outturn	Q2 Comment
	All 6 communities involved in the Building Community Together have developed their community plan	-	ile 2014/15	6	e 2015/16	-	<i>m</i>	5	<i>m</i>	5	Community conversations are underway in 5 of the 6 areas and local plans are under development. Hungerford and Lambourn's plans have been reported to BWB Board. Greenham will start their community conversation with a physical activities and sports event in March 17 (at the request of the community).
HQL1pdcr(No of staff and volunteers that received Restorative Practice Training	-	-	859	local	-	<i>m</i>	137	m	155	Q2: 18 YTD: 155 95 have returned for Practice Integration Days.
HQL1pdcr0	No of children and young people that have received Restorative Practice Training	-	-	452	local	-	<i>m</i>	150	<i>m</i>	200	Q2: 50 YTD: 200 50 CYP who have been nominated as Peer Mentors across West Berkshire received input on restorative practices and maintaining or attaining emotional health well-being; at the Peer Mentoring Conference.

HQL 1 - Support communities to do more to help themselves

Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
HQL1phw	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	& dna	
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	★ On track	Currently working with 5 communities (Purley, Hamstead Marshall, Enborne, Brightwalton and Thatcham) to refresh their Parish Plans.

Core Business - a. Protecting our children

Ref	Title	Year end 2014/15	National Rank/Quart	Year end 2015/16	National Rank/Quartil	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
CBac&f05	To maintain a high percentage of (single) assessments being completed within 45	70%	ile 2014/15 124 / 152 4th	83%	local	90%	♦ 86.6%	★ 93.5%	Q2: 703 / 752
CBac&f10	The number of weeks taken to conclude care proceedings (children social care)	31	local	dna	local	<=26 weeks	→ 30	♦ 30	See exception report for details.
CBac&f12	Percentage of Looked After Children with Health Assessments on time	63%	local	98%	local	>90%	★ 92.7%	★ 97.1%	Q2: 99 / 102
CBac&f13	Percentage of Looked After Children with Dental Checks completed on time	68%	local	88%	local	>90%	★ 97.2%	★ 94.3%	Q2: 99 / 105

Core Business	: - a. Protectin	lg our childre	n
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Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	I Year end	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
CBac&f14	Placement moves - stability of placement of Looked After Children - number of moves (3 or more in a year)	5%	5 / 152 1st	5%	local	<=10%	★ 0.6%	★ 4.7%	Q2: 7 / 149
CBac&f15	% of Leaving Care Clients with Pathway Plans	100%	local	97%	local	>=95%	96.9%	★ 98.0%	Q2: 99 / 101
CBapdcr0 6	Child Protection Reviews - held on time	-	-	0.979	-	>=95%	* 100%	★ 98.7%	Q2: 75 / 76
CBapdcr0	Looked after children cases which were reviewed within required timescales	-	-	0.993	-	>=95%	★ 99.3%	* 100%	Q2: 144 / 144

Core Business - c. Bin collection and street cleaning

Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
CBccep11	Maintain the proportion of household waste recycled/composted/reused/recovered (Local Indicator)	82%	local	80.3% (E)	local	80%	★ 78.4% (P)	★ 82.1% (E)	Q2: 18,165 / 21,073 YTD: 36,790 / 44,824 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.
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	Annual	★ Good	

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Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	17015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 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	♦ 22.8 days	23 14 davs	2015/16 Q2 = 19.09 days See exception report for details.
	The average number of days taken to make a full decision on changes in a Benefit claimants circumstances	6.18 days	local	5.85 days	dna	<8 days	♦ 13.31 days	■ 12.16 days	2015/16 Q2 = 6.48 days See exception report for details.

Core Business - e. Collecting Council Tax and Business rates

Ref	l l itla	Year end	IDanb/()uart	Year end	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
CBecus04	The 'in –year' collection rate for Council Tax	98%	dna	99%	dna	99%	★ 30%	5/7%	For comparison: 2015/16 Q2 return = 58%
CBecus05	The 'in-year' collection rate for Business Rates	99%	dna	99%	dna	99%	★ 34%	★ 59.3%	For comparison: 2015/16 Q2 return = 59%

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

Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn		Q2 (YTD) RAG / Outturn		Q2 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%	*	82.9%	Q2: 1,010 / 1,219
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	118 / 152 4th	7.5	127 / 152 4th	4	•	16.7	•	dna	Confirmed data will be available from mid-November due to 2 month delay of NHS figures used. Q1 data confirmed. See exception report for details.
CBfasc10	Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	93%	14 / 151 1st	79%	117 / 152 4th	82%	*	81.5%	*	85.3%	
CBfcchs07	Maintain percentage of financial assessments within 3 weeks of referral to the Financial Assessment & Charging Team	99%	local	99%	local	90%	*	99.5%	*	99.6%	Q2: 336 / 337 YTD: 741 / 744

Core Business - g. Planning and housing

Ref	Litle	Year end	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
R CBgccnsu	Maintain % of people presenting as homeless where the homelessness has been relieved or prevented	78%	local	79%	local	75%	★ 80.8%	X1.X%	Q2: 60 / 72 YTD: 157 / 192

Core Business - g. Planning and housing

Ref	Title	Year end 2014/15	National Rank/Quart ile 2014/15	Year end 2015/16	National Rank/Quartil e 2015/16	YE target 2016/17	Q1 RAG / Outturn	Q2 (YTD) RAG / Outturn	Q2 Comment
CBgcchs0	Maintain % of claims for Discretionary Housing Payment, determined within 28 days following receipt of all relevant information	86%	local	97%	local	70%	♦ 58.0%	62.5%	Q2: 15 / 24 See exception report for details.
CBgcchs1	Approve 95% of high priority Disabled Facilities Grants within 9 weeks of receipt of full grant application	100%	local	97%	local	80%	* 100%	* 83.0%	
CBgpc11	Subject to examination, adopt the Site Allocations Development Plan Document (DPD) by December 2016	-	-	Behind schedule	local	Dec-16	★ On track	Behind schedule	See exception report for details. Request to redefine target.
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%	★ 79.1% (E)	Q2: 15 / 21 YTD: 34 / 43
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%	★ 66.4%	★ 71.4% (E)	Q2: 90 / 117 YTD: 177 / 248
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%	★ 94.0% (E)	Q2: 277 / 303 YTD: 629 / 669





