

## O&S Board Performance Report: Quarter 2 2017/18

2017-18 Corporate Performance Indicator
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RAG Rating		Direction of Travel (DOT)	
GREEN	On or better than target On Track	↑	<b>Short Term:</b> Performance is better than the previous quarter <b>Long Term:</b> Performance is better than at the same point last year
		→	<b>Short Term:</b> Performance is the same as the previous quarter <b>Long Term:</b> Performance is the same as at the same point last year
RED	Worse than target Off track	↓	<b>Short Term:</b> Performance is worse than the previous quarter <b>Long Term:</b> Performance is worse than at the same point last year

Sub-committee	Indicator and Description	Value	2017/18 Annual Target	2017/18 Q2 Target	2017/18 Q2 Performance	Short Term DOT against Q1 2017/18		Long Term DOT against Q2 2016/17		Comments
Towns and Communities	No. of Stage 1 complaints received	Smaller is better	N/A	N/A	366	↑	210	-	NEW	There was a 26% reduction in the number of Stage 1 complaints received by services within the remit of the Committee, from 210 complaints in Quarter 1 to 156 complaints in Quarter 2. This reduced volume has helped to improve the timeliness of responses, though this remains below target. The volume and timeliness of responses to Stage 2 complaints has remained fairly steady, with 35 complaints received in Quarter 2 compared with 36 in Quarter 1, and timeliness remaining just below target (at 94.4% in time against a target of 95%).
	% of Stage 1 complaints closed in 15 days	Bigger is better	95%	95%	84.4% RED	↑	83%	-	NEW	
	No. of Stage 2 complaints received	Smaller is better	N/A	N/A	71	↑	36	-	NEW	
	% of Stage 2 complaints closed within 20 days	Bigger is better	95%	95%	94.4% RED	→	94.4%	-	NEW	<b>Corrective Action:</b> Staffing shortages that affected the performance of the Housing Complaints team earlier in the year have now been addressed and 100% of complaints were closed within timescale during September, so officers are confident of performance improving in Quarters 3 and 4. The complaint handling process within the Housing service also continues to be reviewed, and it is the intention to co-locate Housing complaints and contractor complaints staff once current ICT and accommodation issues have been resolved, in order to improve the quality and timeliness of responses to Housing complaints. The Towns and Communities Overview and Scrutiny Sub-Committee intends to establish a topic group looking at how complaints are dealt with within these services, focusing particularly on those relating to housing repairs and anti-social behaviour.
	% of housing repairs completed within target	Bigger is better	96%	96%	92% RED	↓	99.03%	↑	89.68%	Performance is below target for housing repairs completed within the target timescale with 12,140 repairs in time against a total of 13,195 repairs (92%). Performance is worse than last Quarter (99%) but has improved compared to the same period last year (89.68%).  <b>Corrective Action:</b> A service improvement action plan has been put in place with the responsive repairs maintenance contractor. The action plan is monitored and scrutinised at regular review meetings that have been arranged specifically for this purpose and are in addition to the normal contractual and partnership meetings.
	Contractor liaison with residents during regeneration work	TBC	TBC	TBC	N/A	-	N/A	-	NEW	Performance against this indicator is not available yet as the delivery partner has not been selected yet. A decision is due to be made by the Cabinet in January 2018. The means of collecting this indicator will then be agreed with the successful contractor.

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Crime and Disorder	% of "I" calls responded to within target	Bigger is better	90%	90%	61% (Apr-Sep Average) RED	↑	51% (Apr-Jun Average)	↓	72% (whole of 2016/17)	The percentage of calls reached within the target times of 15 minutes has improved over the summer months, from 46% in July, to 63% in August then 74% in September. It is over this period that alterations have also been made to the tri-borough model including outstanding calls being managed on an incident list for each borough, rather than as a single incident list for all three boroughs, as was the case when the pilot began.
	% of "S" calls responded to within target	Bigger is better	90%	90%	53% (Apr-Sep Average) RED	↑	40% (Apr-Jun Average)	↓	60% (whole of 2016/17)	The percentage of calls reached within the target time of one hour has improved over the summer months; from 37% in July, to 50% in August then 73% in September. It is over this period that alterations have also been made to the tri-borough model including outstanding calls being managed on an incident list for each borough, rather than as a single incident list for all three boroughs, as was the case when the pilot began.
	Deployable police resources compared with establishment (Dedicated Ward Officers only)	TBC	TBC	TBC	86%	↓	90%	-	NEW	Data is not currently available for all officers at a borough level due to classifications created as part of the tri-borough policing pathfinder that commenced earlier this year. However the figure for DWOs for Quarter 2 is 86% - slightly below Quarter 1's outturn of 90%. Over half of the abstractions during Quarter 2 were for officer training. A section in the C&D OSC report provides more details on the various measures reported under this headline. This is not information which can easily be obtained from Metropolitan Police systems, however the MPS is in the process of standardising information on a performance dashboard ready for the new year.
	% of ASB reports relating to traveller incursions	N/A	N/A	N/A	0.58%	-	1%	-	NEW	In Q2 2017/18 there were 1548 calls which had an opening code relating to ASB in Havering. Of these, 1026 were 'closed' as ASB. Of those 1,026, six (0.58%) related to five separate traveller incursions. Of these five separate incursions, three took place on three consecutive days in July within a few hundred metres of each other, so it may have been the same group at each location.  For comparison in Q1 2017/18 there were 1,050 calls to the Metropolitan Police closed as relating to 'Anti-Social Behaviour' in Havering. Of these, 11 calls (1%) related to three separate traveller incursions.

Sub-committee	Indicator and Description	Value	2017/18 Annual Target	2017/18 Q2 Target	2017/18 Q2 Performance	Short Term DOT against Q1 2017/18		Long Term DOT against Q2 2016/17		Comments
Health	Obese children (4-5 years)	Smaller is better	Similar to or Better than England (9%)	TBC	10.8% (2015/16) RED	-	N/A	↓	10.4% (2014/15)	<p>Prevalence of obesity amongst 4-5 year olds in Havering has seen no significant change over the past 8 years. In 2015/16 Havering remained significantly worse than England but similar to London</p> <p><b>Corrective Action:</b> Directed by Havering's 'Prevention of Obesity Strategy 2016-19', our borough working group continues to progress actions that are within the gift of the local authority and partners, and within available budgets. These actions include:</p> <ul style="list-style-type: none"> <li>• Increasing support for breastfeeding via infant feeding cafés in children's centres and launching a Breastfeeding Welcome scheme for local venues and businesses to sign up to</li> <li>• Health Visitors and Early Help Practitioners developing a 'Starting Solid Foods' workshop to co-deliver in Children's Centres</li> <li>• Increasing promotion of Healthy Start vouchers for free fruit, vegetables and milk to low-income families, and working with local businesses to increase acceptance of these</li> <li>• The Health and Wellbeing in Schools Service, Havering Catering Services, Havering Sports Collective and School Nursing Service working together to streamline and develop the healthy eating and physical activity support they offer to children and families via schools,</li> <li>• Developing a Sugar Smart campaign, encouraging public venues and local businesses to make pledges to reduce promotion, sales and, ultimately, consumption of sugar.</li> </ul>
	Percentage of patients who are satisfied with the GP out of hours services (Partnership PI)	Bigger is better	Better than England (66%) (TBC by Havering CCG)	N/A	67% (2017) GREEN	-	N/A	↓	68%	The latest available data (July 2017) on patient experience of GP out-of-hours shows no significant difference between the percentage of patients satisfied with the service in Havering and the England average. Havering CCG is responsible for this performance indicator.
	The number of instances where an adult patient is ready leave hospital for home or move to a less acute stage of care but is prevented from doing so, per 100,000 population (delayed transfers of care)	Smaller is better	TBC	TBC	TBC	-	TBC	-	N/A	The number of patients delayed on a snapshot day has no longer been collected nationally since April 2017. A new measure has been published on the DTOC website looking at the average number of days delayed in the month, and we are currently awaiting clarification as to whether this is to become the new ASCOF measure 2C. Once this has been clarified, we can set a local target accordingly.

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Individuals	% of service users receiving direct payments	Bigger is better	36%	36%	32.6% RED	↓	33.8%	↓	36.6%	Performance is currently below target, and we have seen a 2% reduction in the proportion of service users who are receiving their care via a Direct Payment since the same time last year.  <b>Corrective Action:</b> A Personal Assistant Co-ordinator has now joined the Joint Commissioning Unit. A working group has also been established to look at the processes around Direct Payments
	Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+)	Smaller is better	660	310	209.8 GREEN	↓	108.1	↑	344.5	To the end of quarter 2, there had been 97 older people newly admitted into long term residential or nursing care. At the same stage last year there had been 158, representing a 39% decrease (where lower is better). As with previous quarters the majority of new admissions are over the age of 85.
Environment	Average no. of days taken to remove fly-tips	Smaller is better	1 day	1 day	1.33 days RED	↓	0.8 days	↑	1.8 days	Q2 performance is above the 1 day target (where lower is better) and worse than during the last three quarters. Performance has however improved compared to the same period last year.  <b>Corrective Action:</b> This indicator measures the time from when a fly tip is reported to the Council until it is removed and in some instances includes the time taken for Enforcement Officers to investigate the waste for evidence. Once the report of the fly tip has been passed to the Street Cleansing team the vast majority are cleared within the 1 day target. Officers are considering ways to streamline the process to improve performance. This could include sending all reports of fly tips direct to the Cleansing team and them informing Enforcement if evidence is present, or exploring ways that the new "in cab" recording system can be used to provide the data for this indicator. If this is possible it would measure the response times of the street cleansing team rather than the whole process, so performance could not be compared with previous years.
	The level of waste per head of population presented to East London Waste Authority (ELWA)	Smaller is better	441.01 kg per head	220.50 kg per head	235.65 kg per head (Provisional) RED	↓	118.4kg per head (Provisional)	-	NEW	This PI measures the total waste delivered to the ELWA. This includes collected household waste, waste from the reuse and recycling centre and municipal waste from Highways and Parks management activities. If tonnages continue at this level throughout the year we would outturn above target, however tonnages are projected to decrease through the winter months as the amount of garden waste reduces .  <b>Corrective Action:</b> Various waste prevention campaigns focusing on home composting, reuse, and Love Food Hate Waste, particularly through the Sainsbury's funded food waste reduction activities and through the Rewards and Incentives Scheme's Food Waste Challenge, are in place to help achieve the target. We are also reviewing operations in Highways and Grounds Maintenance to reduce waste and, with the ELWA, are considering strengthening policies targeting potential commercial waste entering the domestic waste stream at the household reuse and recycling centre.

Sub-committee	Indicator and Description	Value	2017/18 Annual Target	2017/18 Q2 Target	2017/18 Q2 Performance	Short Term DOT against Q1 2017/18		Long Term DOT against Q2 2016/17		Comments
Children & Learning	% of young people leaving care who are in education, employment or training at ages 18 -21	Bigger is better	75%	75%	60.3% RED	↓	60.9%	↓	63.8%	<p>The percentage of care leavers in education, employment or training was on a downward trajectory at the end of Quarter 2 but is expected to improve as destinations become better known.</p> <p><b>Corrective Action:</b> The Leaving Care Service as a whole is being reviewed and strengthened as part of the Face-to-Face Pathways Programme. Six Pathway Co-ordinators have been recruited who will work directly with young people and care leavers to help them plan their transitions into adulthood. We expect these roles to support our care leavers in identifying their education/employment route. The introduction of these roles will also enable planning for adulthood to commence as soon as young people become eligible for leaving care services.</p>
	Total no. of in-house foster carers	Bigger is better	90	90	77 RED	↓	78	↓	81	<p>Despite the recruitment of new in-house foster carers running ahead of schedule, retirements etc have meant that the total number of in-house foster carers has remained below target.</p> <p><b>Corrective Action:</b> The innovation programme will re-design the fostering offer and create an offer of specialist foster carers. This will be targeted towards placements for 11-17 year olds with complex needs and will come with an enhanced financial and support package. The innovation programme launched in Q2 and the current plan is to have four specialist carers in place by the end of the financial year so performance is expected to increase in Q3 and 4</p>
	% of looked after children placed in LBH foster care	Bigger is better	40%	40%	39.7% RED	↑	39.6%	↑	39.2%	<p>The percentage of looked after children placed in LBH foster care is just 0.3% below target.</p> <p><b>Corrective Action:</b> This KPI is based on the total proportion of in-house and family &amp; friend placements. By reforming the in-house offer it is expected to see an increase in performance throughout the year.</p>