Appendix B



Corporate Plan 2016/17 Performance Report

Quarterly Performance Scorecard (data for Quarter 2 - 30 September 2016)

Please note: Although care is taken to ensure data is as accurate as possible, delays in data input can result in changes in figures when reports are re-run retrospectively.

Document Details

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Contact: Tanya Palmowski ext 22764 tanya.palmowski@rotherham.gov.uk

Created by: Tanya Palmowski, Sue Wilson, Deborah Johnson, Scott Clayon, Julian Hurley, Jonathan Priestly, Marcus Williamson, Ian Henderson, Stuart Booth, Robert Cutts, Stuart Purcell, Simon Dennis and Justin Homer

Summary

| ~ | Measure progressing above or in line with target set | 23 | 22.3% |
|----------|---|----|-------|
| | Measure progress has been satisfactory but is not fully reaching target set | 21 | 20.4% |
| × | Measure has not progressed in accordance with target set | 14 | 13.6% |
| * | Measure under development (e.g. awaiting data collection or target-setting) | 0 | 0.0% |
| | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) | 16 | 15.5% |
| | Measure information not yet available (e.g. due to infrequency or timing of information/data) | 29 | 28.2% |

| 0 | Numbers have improved | 28 |
|---|---------------------------------------|----|
| | Numbers are stable | 16 |
| U | Numbers have got worse | 21 |
| | Direction of Travel is not applicable | 38 |

Corporate Priority 1 – Every child making the best start in life

| | | - | | | | |
|-----|-----|-----------|---|---|---|--|
| | | Overall s | tatus (relevant to target) | | | |
| > | | > | Measure progressing above or in line with target set | * | Measure under development (e.g. awaiting data collection or target-setting) | |
| , K | Кеу | • | Measure progress has been satisfactory but is not fully reaching target set | | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) | |
| | | X | Measure has not progressed in accordance with target set | | Measure information not yet available (e.g. due to infrequency or timing of information/data) | |

| | | | | | | | | | | | | | Data available | dependent upon t | ne frequency of re | porting | | Data notes (where measure has not |
|---|--|---------|--|---|-------------------------------|------------------|---------------------------|--|---------|-----|------------------|--|----------------------|----------------------|--------------------|---------|--------|---|
| | Lead Accountability | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall | | Anı | nual | Qua | rterly | | | | progressed in accordance with the target set provide details of what is being done to |
| Outcome | (Strategic Director) | | | | | | | | status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| | | 1.A1 | Early Help – Early Help service to identify and support families at the right time to help prevent social service involvement | measure) | Mel Meggs - CYPS | low | Monthly | No target (to be used a measure to watch over the next 12 months) | | U | 347.1 | 320 | 354.4 | 390.7 | 356.7 | 357.4 | 390.7 | Data shows an 'as at' position at the end of the reporting period. There is no good or bad performance however the aim is to ensure performance is in line with the national average. The locality management team have clear processes in place for regular review of CIN cases to ensure timely progression and to avoid drift, this work happens on a rolling basis and ensures that workers and team managers are challenged where appropriate in respect of the effectiveness of CIN planning. A measure of success of the Early Help Offer, over time, will be a reduction in CIN as families are offered support before concerns escalate to require social care involvement. |
| + | | 1.A2 | | The number of families engaging with the Families for Change programme as a percentage of the troubled families target | David McWilliams - CYPS | high | Monthly | 100% (882 families by end of March 2017) | • | 0 | 100% | 100% | 24% | 46% | 33% | 40% | 46% | Target of 100% is by March 2017. Performance is reported cumulatively and is therefore YTD. |
| all forms of abuse, violence and neglec | | 1.A3 | Children's Social Care Improvement - Ensure that all children in need work is managed robustly and that appropriate decisions and actions are agreed | % children who had a social care concern raised within 12 months of the last concern ending (Re-referrals) (Priority measure) | Mel Meggs - CYPS | low | Monthly | April - September 26% October - March 23% | × | U | 22.8% | 30.6% (note- Corporate Plan stated 30.9%) | 29.9% | 30.4% | 30.1% | 29.6% | 30.4% | Rolling year indicator including data from the 12 months prior to the end of each reporting period. This indicator is a reflection of the quality of practice and as this improves so the indicator should reduce. The service continues to fail to hit the locally set target of 23% which reinforces the findings of our audit programme which is trying to help us move beyond compliance. A detailed review of these cases has been commissioned to help us understand what has occurred as it is out of keeping with a previously improved performance. |
| ed and safeguarded from | lan Thomas, Strategic Director Children and Young People's Services | 1.A4 | Children's Social Care Improvement – Ensure that al Child Protection Plan work is managed robustly and that appropriate decisions and actions are agreed with partner agencies | % children who are subject to repeat child protection plans (within 24 months) (Priority measure) | Mel Meggs - CYPS | low | Monthly | 4% | × | O | 4% | 4.7% | 6.1% | 6.6% | 7.0% | 7.1% | 6.6% | Rolling year indicator including data from the 12 months prior to the end of each reporting period. Performance has improved but figures are much higher than they should be. Deep dive audit being undertaken to establish any correlation between this and the CPP review last year to assess whether plans were ceased prematurely as they should not be ended until the child is no longer at risk. |
| Children, young people and families are protect | | 1.A5 | LAC Sufficiency Strategy – Increase in the proportion of children who are cared for in a family based setting | Increase in the proportion of children who are cared for in a family based setting (Priority measure) | Mel Meggs - CYPS | high | Monthly | 87.5% | × | U | 80.5% | 84.5% | 84.4% | 84.4% | 84.2% | 84.9% | 84.4% | Research shows that family based placements result in improved life chances and outcomes for children and young people in care more effectively than residential homes. Although we have had an overall increase in our children in care population the number of children not living in a family based setting has remained the same which maybe an early indication of an improving trajectory. Alongside our drive to increase the number of local foster carers there are also a number of service improvement activities are underway to address this i.e. Family Group Conferencing and improving foster carer support. |
| A. Childr | | 1.A6 | | Number of CSE referrals | Mel Meggs - CYPS | Not applicable | Monthly | No target - not applicable | | | | 200 | 52 | 35 | 14 | 9 | 12 | No target as numbers fluctuate significantly and are therefore difficult to predict. The number of CSE cases remains relatively stable showing only a small increase as proportion of overall referrals. |

| | | | | | | | | | | | | | Data available | e dependent upon t | he frequency of re | eporting | | Data notes (where measure has not |
|----|---|----------|--|--|------------------------------|------------------|------------------------|---|----------------|-----|--|--|---|--|--------------------|----------|--------|--|
| | Lead | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | f Target | 0 | | An | nual | Qu | arterly | | | | progressed in accordance with the target provide details of what is being done to |
| пе | Accountability (Strategic Director) | | | | | | | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| | | 1.A7 | Child Sexual Exploitation - an increased awareness of CSE and an increase in the number of police prosecutions as a result of joint working | Number of prosecutions | Mel Meggs - CYPS | high | Monthly | No target - no applicable | t | U | 12 | 37 (note the Corporate Plan states 43 (June 2015 - May 2016)) | 7 | 5 | 1 | 2 | 2 | Parameters used to define 'CSE prosecution were: 1. Recorded criminal offence, tagged as bei related to CSE. 2. Offence was finalised (referred to as 'detected') across dates shown in table. 3. Only those offences that resulted in a sus or suspects being charged or summonsed to court were included. |
| | - | 1.A8 | | Number of victims/survivors accessing post abuse support services (new referrals) | Mel Meggs - CYPS | high | Monthly | No target - no applicable | t | 0 | | 524 | 104 | 143 | 35 | 65 | 43 | Data recorded monthly from April 2016. This measure includes all new referrals, bo cases or newly referred historic cases. Contracts for longer term CSE support and therapy commenced 1st July 2016. |
| | | 1.B1 | Early Help – Increase the take- up of free Early Childcare for disadvantaged families | % of entitled 2 year olds accessing childcare | Karen Borthwick - CYPS | high | Termly | 80% | • | 0 | | 78% (summer term 15) | Not applicable | 79.5% (summer term) | | | | Termly data shown in the closest reporting quarter to the end of term. This relates to a at position and cannot be aggregated up in end. Take-up levels follow a pattern with the Spring term having highest levels of take-up year. The position at Q2 is in line with expectations. |
| | | 1.B2 | Sustainable Education and Skills | % children and young people who attend a good or better schools | Karen Borthwick - CYPS | high | Termly | 90% | • | 0 | | 82.4% (summer term 15) | 84.9% | 86% | | | | The latest comparison to the national aver 83% as of 31 st March 2016. Rotherham a are 3.2% above the national average. The published on the OFSTED DataView webs |
| | - | 1.B3 | Sustainable Education and Skills – challenge all schools, academies and education settings who are not providing at least a 'good' level of education to our children | The progress a pupil makes from the end of primary school to the end of secondary school. (Key Stage 4 Progress 8 Measure) | Karen Borthwick - CYPS | high | Annual | No target - target for future years to be set inline with or above the national average | | | No data - new measure | / No data - new measure | , | Data due to be released during Q3 | | | | As this is a new measure for secondary accountability in 2016 there is currently no performance data. Any targets in future ye would be set in line with or above the natio average. Provisional data due to be released during |
| | | 1.B4 (a) | Sustainable Education and Skills – Reduce the number of | Persistent absence rate a) Primary School | David McWilliams | low | Termly | 8.4% | - | | 2.9% (can't use this to compare performance as it was measured against a different definition) | 10.7% (Academic year end outturn 2015/16) | Not applicable | Half Term 1 Data due to be released during Q3 | | | | Changes in the DfE definition mean that the annual target was recalculated (now definiless than 90% attendance). The next repoperiod for the purpose of the scorecard will November and at the end of Quarter 3 we reporting up to the end of Half Terms 1. Year End relates to the 2015/16 academia and is based on half terms 1-6 (cumulative). |
| | - | 1.B4 (b) | children and young people persistently absent from school | Persistent absence rate b) Secondary School | David McWilliams | low | Termly | 13.8% | • | | 7.5% (can't use this to compare performance as it was measured against a different definition) | 15.3% (Academic year end outturn 2015/16) | Not applicable | Half Term Data due to be released during Q3 | | | | Changes in the DfE definition mean that the annual target was recalculated (nowe defiless than 90% attendance). The next repoperiod for the purpose of the scorecard will November and at the end of Quarter 3 we reporting up to the end of Half Terms 1. |
| | - | 1.B5 (a) | Sustainable Education and | Reduction in the number of exclusions from school which are a) Fixed term (Secondary school) | Karen Borthwick - CYPS | low | Termly | 3,000 | • | | 4,210 | Not yet available (Academic Year) | 1,072 (Academic term end outturn) | Not yet available (Termly data) | | | | Termly data shown is the closest reporting to the end of term. Year end related to ac year. Sept 16 to July 17 is new academic Overall status based on newly available of Quarter 1 |
| CI | lan Thomas, Strategic Director hildren and Young People's Services | 1.B5 (b) | Skills – Reduce the number of school days lost to exclusion | Reduction in the number of exclusions from school which are b) Permanen (Secondary school) | Karen Borthwick - CYPS | low | Termly | 30 | • | | 50 | September 2015 - July 2016 (cumulative - based on end of academic | 47 September 2015 - July 2016 (cumulative - based on end o academic year) | (Termly data) | | | | Termly data shown is the closest reporting to the end of term. Year end related to ac year. Sept 16 to July 17 is new academic Overall status based on newly available d Quarter 1 |

| | | | | | | | | | | | | | Data available de | pendent upon th | ne frequency of re | porting | | Data notes (where measure has not |
|-------|---|----------|--|--|---------------------------------|------------------|------------------------|---|-------------------|----------|--|---|----------------------|-------------------------------------|--------------------|---------|--------|--|
| | Lead | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | | | An | nual | Quarte | erly | | | | progressed in accordance with the ta provide details of what is being done |
| • * | Accountability (Strategic Director) | | | | | | | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| | | 1.B6 | Sustainable Education and Skills – Enable hard to reach young people to achieve their full potential through education employment or training | % of young people aged 16-18 who are Not in Education, Employment or Training (NEET) | David McWilliams - CYPS | low | Monthly | 3.1% (note - Corporate Plan included 4.9%) | ~ | O | 5.9% | 5.3% (note - Corporate Plan included 5.1%) | 5.5% | 2.4% | 5.8% | 8.6% | 2.4% | The annual target for NEET has been a to reflect the changes in the tracking co introduced by DfE in September 2016 (in cohort to academic age 16/17). The target of 3.1% is taken as an average a November, December and January moreturns. Due to these in year changes treported for the end of Q2 is not an average to the previous 3 months, but is actual mofigure. As this is the first month the revihas been reported, there is no compar available for region, statistical neighbours. |
| | | 1.B7 (a) | Special Educational Needs | Percentage of Education Health and Care Plans completed in statutory timescales (based on NEW Plans issued cumulative from September 2014) (Priority measure) | Karen Borthwick - CYPS | high | Monthly | 90% by April 2018 | • | U | | 58.3% (note - the Corporate Plan states 52.4%) | 67% | 65% | 66% | 65% | 64% | Data relates to completion EHC plans reporting period. There is a national fall over the summe when schools are on holiday, and cann reached to complete their part in the pr |
| | | 1.B7 (b) | and Disabilities (SEND) – Improve personal outcomes for our young people with SEND to enable them to make choices that lead to successful adult lives | Percentage of Education Health and Care Plans completed in statutory timescales (based on Conversions from Statements to EHCP cumulative from September 2014) (Priority measure) | Karen Borthwick - CYPS | high | Monthly | 90% by April 2018 | • | ၁ | | 85.5% (note - the Corporate Plan states 81.6%) | 58% | 53% | 56% | 52% | 52% | Data relates to completion EHC plans reporting period. Performance gaining some stability, termajority of conversions have now mov Inclusion Department. There is a natio over the summer months when school holiday, and cannot be reached to compart in the process. |
| | | 1.B8 | Sustainable Education and Skills | % of children aged 0-5 living in the Rotherham area who are registered with a Children's Centre | David McWilliams - CYPS | High | Quarterly | 95% | • | 0 | 98.2% | 91.4% | 89% | 91% | | | | Data available on a quarterly basis. The a data collection from children centres validation process therefore there may lag between quarter end and availability Target has changed from 94% to 95% in line with OFSTED requirements |
| | | 1.B9 (a) | Sustainable Education and Skills – ensure that all vulnerable groups attain at the | a) % "Looked After Children" (LAC) achieving Level 4 or above at Key stage 2 for reading, writing and maths combined | Karen Borthwick - CYPS | high | Annual | 52% National 2015 Figure | | | 35.7% (note the Corporate Plan states 43%) | Not yet available (Academic Year) | | | | | | Data due to be released during Q3 Year end 2014/15 figure reset to 35.7/ validation. |
| | - | 1.B9 (b) | same level as their peers | b) % "Looked After Children" (LAC) achievement against Key stage 4 Progress 8 measure | Karen Borthwick - CYPS | high | Annual | Not applicable | | | Not available | Not yet available | | | | | | Data due to be released during Q3 |
| | ŀ | NOTE: | | For attainment of vulnerable groups and adult learning please see Priority 4 | | | | | | | | | | | | | | |
| | | 1.C1 | | Smoking status at time of delivery (women smoking during pregnancy) (Priority measure) | Jo Abbott - Public Health | Low | Quarterly/ Annual | 18.4% by 2016/17 (local target) | • | ၁ | 18.3% | 18.1% | | lot yet available December 2016) | | | | National ambition 11% or less by the e 2016/17 quarter 2 data due December Status and DoT are based on Q1 data |
| | Terri Roche, | 1.C2 (a) | Deliver services for the 0-19 | Reduce year-on-year levels of childhood obesity for: a) Reception year children (age 4/5) (Priority measure) | Jo Abbott - Public Health | Low | Annual | Downward trend in excess weight by 2020 | | | 9.9% | Not yet available | | | | | | PH indicators dependent on annual da data expected February 2017 (PHOF) |
| | Director Public Health | 1.C2 (b) | year olds – to support children and families to achieve and maintain healthier lifestyles | Reduce year-on-year levels of childhood obesity for: b) Year 6 children (age 10/11) (Priority measure) | Jo Abbott - Public Health | Low | Annual | Downward trend in excess weight by 2020 | | | 21.6% | Not yet available | | | | | | PH indicators dependent on annual data expected February 2017 (PHOF) |
| | | 1.C3 | | Chlamydia detection rate (15-24 year olds) - CTAD (Persons) | Jo Abbott - Public Health | High | Annual | At least 2,300 per 100,000 (national target) | | | 2,141 per 100,000 (2014) | 1,738 per 100,000 (2015) | | | | | | PH indicators dependent on annual da Improvement plan in place. Provider w Sexual Health Facilitator at PHE to im |
| | lan Thomas, trategic Director | 1.C4 (a) | Ensure that all children and young people with emotional | % of referrals triaged for urgency within 24 hours of receipt. | Nicole Chavaudra | High | Monthly | 100% | * | • | 90.5% | 99.4% | 88.2% | 100% | 100.0% | 100% | 100% | Whole service restructure taken place / CAMHS and vacancies filled which is having a positive impact on waiting tim |
| Ch | ildren and Young eople's Services | 1.C4 (b) | wellbeing and mental health needs, receive prompt support and treatment | % of triaged referrals that were assessed within 3 weeks. | Nicole Chavaudra | High | Monthly | 95% | × | 0 | 27.8% | 26.3% | 26.4% | 28.60% | 28% | 28% | 28.60% | Whole service restructure taken place / CAMHS and vacancies filled which is having a positive impact on waiting tim |

| | | | | | | | | | | | | | Data available | dependent upon th | he frequency of re | porting | | Data notes (where measure has not |
|---------|-------------------------|---------|--------|---------|-----------------|------------------|------------------------|--------|---------|-----|------------------|------------------|----------------------|----------------------|--------------------|---------|--------|---|
| | Lead Accountability | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall | | Ann | nual | Qua | rterly | | | | progressed in accordance with the target set provide details of what is being done to |
| Outcome | (Strategic Director) | | | | | | | | status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |

Corporate Priority 2 – Every adult secure, responsible and empowered

| | Overall s | tatus (relevant to target) | | | |
|-----|-----------|---|---|---|--|
| | > | Measure progressing above or in line with target set | * | Measure under development (e.g. awaiting data collection or target-setting) | |
| Key | • | Measure progress has been satisfactory but is not fully reaching target set | | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) | |
| | × | Measure has not progressed in accordance with target set | | Measure information not yet available (e.g. due to infrequency or timing of information/data) | |

| | | | | | | | | | | | | | Data available | dependent upon th | e frequency of rep | orting | | |
|----------------------|---|---------|---|--|--|----------------|--|--|-------------------|-----|---------------------------------|----------------------|---|--|---|---|---|--|
| | Lead | Ref No. | Action | Measure | Lead officer | Good | Frequency | Target | | | Ann | nual | Qua | rterly | | | | Data notes (where measure has not progressed in accordance with the target set provide details |
| Outcome | Accountability (Strategic Director) | | | | | performance | of reporting | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | of what is being done to improve performance) |
| | | 2.A1 | | Smoking prevalence (18+) (Priority measure) | Jo Abbott - Public Health | Low | Annual | Reduction of 1 percentage point each year from baseline position. | | | 18.4% (Now 19.4%)* (2014) | 18.1% (2015) | | | | | | Target = local target. National ambition to reduce to 18.5% by end of 2015. PH indicators dependent on annual data. *Data in PHOF now sourced from Annual Population Survey. Affects 2014 figure. |
| | | 2.A2 | | % of physically inactive adults (aged 16+) | Jo Abbott - Public Health | Low | Annual | No national target but local aim to increase physical activity for people with long term conditions | | | 31.5% (2014) | 30.6% (2015) | | | | | | PH indicators dependent on annual data |
| nier lives | Terri Roche, Director Public Health | 2.A3 | Implement Health and Wellbeing Strategy to improve the health of people in the borough | Excess weight in adults (aged 16+) | Jo Abbott - Public Health | Low | Annual | National ambition: a downward trend in the level of excess weight averaged across all adults by 2020. | | | 73.3% (2012-14) | Not yet available | | | | | | PH indicators dependent on annual data. 2013-2015 data expected November 2016 (PHOF) |
| abled to live health | | 2.A4 | - | Suicide rate (all ages) (Persons) | Jo Abbott - Public Health | Low | Annual | No national target but national recommendation to have a local action plan | | | 9.7 per 100,000 (2012-14) | Not yet available | | | | | | PH indicators dependent on annual data. 2013-2015 data expected November 2016 (PHOF) |
| A. Adults are ena | | 2.A5 a) | | Successful completion of drug treatment – a) opiate users (aged 18-75) | Jo Abbott - Public Health | High | Annual | No national target. Local ambition to be within LA Comparators Top Quartile | | | 7.3% (2014) | Not yet available | | | | | | PH indicators dependent on annual data. 2015 data expected November 2016 (PHOF). |
| | | 2.A5 b) | | Successful completion of drug treatment –b) non-opiate users (aged 18-75) | Jo Abbott - Public Health | High | Annual | As above | | | 52.6% (2014) | Not yet available | | | | | | PH indicators dependent on annual data. 2015 data expected November 2016 (PHOF). |
| | | 2.A6 a) | | Number of people supported through welfare provision - Food parcels provided | Justin Homer, Assistant Chief Executive's Directorate | Not applicable | Quarterly (Monthly data also available) | Not target - not applicable | | | Not available | 2,526 | 810 food parcels 1,634 people supported | 892 food parcels 1568 people supported | 330 food parcels 480 people supported | 261 food parcels 524 people supported | 301 food parcels 464 people supported | The Local Welfare Provision (LWP) measure is split and includes food parcels provided, whereas the data collected includes the number of individual beneficiaries (adults and children) and crisis loans, which just register the number of loans, not the numbers of households benefitting. There is other food in crisis provision in Rotherham, but this is not directly funded through LWP. Council-wide/partnership service. |
| | Shokat Lal, Assistant Chief Executive | 2.A6 b) | | Number of people supported through welfare provision - Crisis loans | Justin Homer, Assistant Chief Executive's Directorate | Not applicable | Quarterly (Monthly data also available) | Not target - not applicable | | | Not available | 1,041 | 248 loans (£20,706 value) | 130 loans (£10,325 Value) | 26 loans (£1,630 Value) | 43 loans (£3,550 Value) | 61 loans (£5145 Value) | As above |
| | | 2.B1 | | No. of Safeguarding investigations (Section 42 enquiries) completed (Priority measure) | Sam Newton - Adult Social Care and Housing | High | Quarterly | Baseline year | | 0 | Not available | 568 | 130 | 155 | | | | New measure 2015/16 based on new adults safeguarding collection and Care Act changes to safeguarding. Data not robust enough to use for full year target setting in 16/17 but in year quarter and year to date (accumulative) comparisons will be possible during 16/17. Q1 figure revised - previous value referred to individuals involved in S42 enquiries in quarter not those completed. |

| | | | | | | | | | | | | | Data available | dependent upon the | frequency of rep | orting | | |
|--------------------|--|----------|---|--|---|--|--------------|-------------------------------------|-------------------|-------------|---|--|---|--|------------------|--------|--------|--|
| | Lead | Ref No. | Action | Measure | Lead officer | Good performance | Frequency | Target | | | Anı | nual | Qua | rterly | | | | Data notes (where measure has not progressed in accordance with the target set provide details |
| Outcome | Accountability (Strategic Director) | | | | | performance | of reporting | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | of what is being done to improve performance) |
| ř. | | 2.B2 | Integrate health and care services to consolidate and share resources to reduce duplication and provide excellent services | Average delayed transfers of care from hospital attributable to adult social care or both health and adult social care per 100,000 population (Priority measure) | Sam Newton - Adult Social Care and Housing | Low | Quarterly | 1.5 | • | 0 | 2.3 | 1.6 | 2.9 | 2.1 | | | | Data provided by NHS England, Data shows "as at" position at the end of each quarter. Qtr 1 figures showing an increase in reported delays but these are being challenged by service with Health partners. Investigations are on-going and performance clinic scheduled for early Sept 2016. Expect agreed resubmission of data to improve performance to nearer target. |
| of care and suppo | | 2.B3 | People get the information and advice early and help to make informed choices about care and support | Number of people provided with information and advice at first point of contact (to prevent service need) | Sam Newton - Adult Social Care and Housing | High | Quarterly | Baseline year | | 0 | | 944 | 719 | 824 | | | | New for Corporate Plan. Note - process for capturing implemented November 2015 so data not robust enough to use for full year target setting in 16/17. Indicator improving to reflect service process. |
| ised model o | | 2.B4 (a) | | Proportion of Adults receiving long term community support who receive services via self-directed support (Priority measure) | Sam Newton - Adult Social Care and Housing | High | Quarterly | 76% | • | 0 | 76.4% | 75.7% | 79.6% | 79.9% | | | | Data shows "as at" position at the end of each quarter |
| in a personal | | 2.B4 (b) | Improved approach to personalised services – always putting users and carers at the centre | Proportion of Carers in receipt of carer specific services who receive services via self-directed support (Priority measure) | Sam Newton - Adult Social Care and Housing | High | Quarterly | 46.7% | • | > | 0% | 29.2% | 100% | 100% | | | | Data shows "as at" position at the end of each quarter, MH data not yet included this will reduce to below 100% and close to target - TBC |
| ind resilient with | Anne Marie Lubanski, Strategic Director Adult | 2.B5 | of everything we do | Number of carers assessments | Sam Newton - Adult Social Care and Housing | High | Quarterly | 2500 | × | U | 2566 | 2420 | 430 | 341 | | | | This figure accumulates in year, activity for both Q1 and Q2 is below expected. Issues have been identified with numbers of carer assessments recorded by our MH partner and these are being addressed by service. Further discussions with service will identify plans to improve in Q3 and Q4. |
| pendent a | Social Care and Housing (Commenced 8th August 2016). | 2.B6 | Modernise Enablement | The proportion of people (65+) still at home 91 days after discharge into rehabilitation (Priority measure) | Sam Newton - Adult Social Care and Housing | High | Annual | 91% | | | 83.5% | 89.6% | | | | | | Data captured Oct-Mar (discharges Oct-Dec followed up 91 days later) |
| safe, inde | ragust 2010). | 2.B7 | Services to maximise independence, including: • Intermediate care | No of admissions to residential rehabilitation beds (Intermediate Care) | Sam Newton - Adult Social Care and Housing | High | Quarterly | 600 | ~ | 0 | 587 | 613 | 153 | 159 | | | | Accumulative measure progressing in line with target. |
| upported to be | | 2.B8 | Enabling Prevention agenda Developing community assets | Proportion of new clients who receive short term (enablement) service in year with an outcome of no further requests made for support | Sam Newton - Adult Social Care and Housing | High | Quarterly | 74% (2015/16) 2016/17 target tbc | | > | 85.2% | 86.1% | 95.6% | 85.0% | | | | Data shows "as at" position at the end of each quarter. Target not yet confirmed - to confirm for Q3 following provisional national results release which will allow benchmarking of good performance |
| arers are si | | 2.B9 a) | | a) Permanent admissions to residential care for adults (Priority measure) | Nathan Atkinson - Adult Social Care and Housing | Low | Quarterly | 17.6 (27 admissions) | • | > | 12.3 (20 admissions) Accumulative | 20.03 (31 admissions) | 1.94 (3 admissions) | 4.52 (7 admissions) | | | | Data shows "as at" accumulative position at the end of each quarter |
| lividuals and c | | 2.B9 b) | Development of Adult Care Market Position Statements to provide alternatives to traditional | b) Permanent admissions to residential care for older people (Priority measure) | Nathan Atkinson - Adult Social Care and Housing | Low | Quarterly | 797 (390 admissions) | • | > | 958.5 (469 admissions) Accumulative | 819.52 (401 admissions) | 102.18 (50 admissions) | 224.81 (110 admissions) | | | | Data shows "as at" accumulative position at the end of each quarter |
| B. Indi | | 2.B9 c) | care, maximise independence and stimulate the market | c) % spend on residential and community placements (Priority measure) | Sam Newton - Adult Social Care and Housing | Low residential and high community placements | Quarterly | Baseline year | | 0 | not previously | Not available not previously been required | Residential 38.48% (against budgeted 35.35%) Community 46.23% (against budgeted 40.56%) | Residential 36% (against budgeted 35.35%) Community 44% (against budgeted 40.56%) | | | | New for Corporate Plan and measure reporting development yet to be finalised and confirmed. Q2 shows improving direction of travel towards budgeted spend. |
| | | 2.B10 | | Supporting people with a Learning Disability into employment | Sam Newton - Adult Social Care and Housing | High | Quarterly | 6.0% | • | ၁ | 6.0% | 5.6% | 5.7% | 5.7% | | | | Data shows "as at" position at the end of each quarter |
| | | 2.B11 a) | Improve satisfaction levels | Overall satisfaction of people who use care and support services - a) service users | Sam Newton - Adult Social Care and Housing | High | Annual | 72% | | | 65.0% | 70.0% | | | | | | Annual score collected in ASC User Survey |
| | | 2.B11 b) | of those in receipt of care and support services | Overall satisfaction of people who use care and support services - b) carers | Sam Newton - Adult Social Care and Housing | High | Biennial | 50% | | | 48.6% | Biennial | | | | | | Biennial collection from carers survey next schedule 16/17. |

Corporate Priority 3 – A strong community in a clean safe environment

| | Overall s | status (relevant to target) | | | |
|------|-----------|---|---|---|--|
| , ey | ¥ | Measure progressing above or in line with target set | * | Measure under development (e.g. awaiting data collection or target-setting) | |
| ¥ | • | Measure progress has been satisfactory but is not fully reaching target set | | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) | |
| | X | Measure has not progressed in accordance with target set | | Measure information not yet available (e.g. due to infrequency or timing of information/data) | |

| | | | | | | | | | | | | D | ata available depe | ndent upon the fred | quency of reporting | g | | Data notes (where measure has not |
|---|---|---------|--|--|---|---------------------------------|------------------------|--|-------------------|-----|--------------------------------|--|--|---|---------------------|--------|--------|--|
| | Land Annumentalities | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overell | | Ann | ual | Qua | rterly | | | | progressed in accordance with the target set provide details of what is being done to |
| Outcome | Lead Accountability (Strategic Director) | | | | | | | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| | | 3.A1 | | Reported instances of anti-social behaviour in Rotherham | Karen Hanson - Regeneration and Environment | Low | Quarterly | 5% reduction on 2015-16 | × | U | 15,553 Incidents | 14,355 Incidents 8% Decrease (1,198) | 3,835, a 7% increase (257 incidents) on Q1 15/16 | 4295 - a 12% increase (446 on Q2 15/16) | | | | Police reports of anti-social behaviour continue to increase with 446 more reported incidents than in the same quarter last year . A range of multi-agency interventions continue to take place in hotspot areas. A review of the use of tools and powers to tackle ASB will take place in November alongside a refocussing of the priorities of the Anti-Social Behaviour Theme Group to establish a revised action plan. |
| | | 3.A2 | Ensure that the Safer Rotherham Partnership is robust and fit for purpose. Develop an effective Community Safety Strategy and Performance Management Framework | Reported instances of hate incidents in Rotherham | Karen Hanson - Regeneration and Environment | Not applicable | Quarterly | No Target - Not Applicable (Note - Corporate Plan stated 25% increase on 2015-16) | | | 178 Incidents | 254 Incidents 43% Increase (76) | 85, a 93% increase (41 incidents) on same period 15/16 | Hate Crime 79, a 22% (14 on Q2 15/16) Hate Incidents 67, an 86% increase (31 on Q2 15/16) | | | | It is recognised that hate crimes and hate incidents are currently under reported and therefore significant effort is being made across the Safer Rotherham Partnership to increase public confidence in reporting. For this reason, it is not considered appropriate to have a target to reduce reported incidents and increases are seen as a positive response to awareness raising. This year has seen a significant increase in reported hate crimes and incidents. A multiagency, police-led operation (Solar) is dedicated to raising the issues and tackling the instances of reported crimes. |
| o. | | 3.A3 | | Reported instances of domestic abuse in Rotherham | Karen Hanson - Regeneration and Environment | Not applicable | Quarterly | No Target - Not Applicable (Note - Corporate Plan stated 10% increase on 2015-16) | | | 1,384 Incidents | 1,770 Incidents 28% Increase (386) | 503, a 19% increase (80 incidents) on same period 15/16 | Crimes 473, a 7% increase (32 on Q2 15/16) Incidents 1205, a 2% increase (19 on Q2 15/16) | | | | Recruitment to a new Domestic Abuse Co- Ordinator has taken place which commenced on 24th October 2016. This post will be responsible for the effective development and delivery of a domestic abuse strategy, data and performance management and a review of existing governance structures. Reported indicidents of domestic abuse have reduced by 30 (473) at the end of quarter 2 compared to (503) at the end of quarter 1. |
| Communities are strong and help people to feel safe | Damien Wilson, Strategic Director Regeneration and Environment | 3.A4 | Ensure an robust, effective and efficient licensing service | % of licence holders that demonstrate adherence to the requirements of the Council's Hackney Carriage and Private Hire Policy (Priority measure) | Karen Hanson - Regeneration and Environment | High | Quarterly | 100% of 1) eligible licence holders that have subscribed to the DBS online update service; 2) drivers that have completed the council's safeguarding awareness course; 3) vehicles that, where required to do so, have had a taxi camera installed (or are committed to having one installed); 4) drivers that have obtained the BTEC / NVQ qualification. | × | | Not available - new measure | Not available - new measure | Q2 Will be first reporting | Figures for each sub-indicator: 1) 100% 2) 97% 3) 96% 4) 56% | | | | - 97% of drivers have completed the Council's safeguarding training, the remaining 3% have had their licence suspended and are not currently driving a licensed vehicle. - 96% of vehicles that require a camera by the end of Q2 have had one fitted (or made a commercial commitment to have one fitted). Enforcement action will be taken in relation to the 4% that have not had a camera fitted (or made an arrangement to do so). - 56% of drivers have obtained the BTEC / NVQ qualification. The Council will take a proportionate approach in relation to the enforcement of this requirement, and recognises the cost and effort that is involved in obtaining this qualification. Enforcement action will be taken in relation to any drivers that have not attempted to obtain the qualification (or are unlikely to obtain it within a reasonable timescale). |
| - é | | 3.A5 a) | Rotherham residents are satisfied with their | a) How satisfied or dissatisfied are you with your local area as a place to live | Tracy Holmes, Assistant Chief Executive's office | High - very or fairly satisfied | 6 monthly | >79% | • | U | | 79% June 2015 82% December 2015 satisfied or fairly satisfied | 80% June 2016 satisfied or fairly satisfied | | | | | The LGA polling on resident satisfaction is conducted on a 6 monthly basis and was requested by the Commissioners. |
| | | 3.A5 b) | local area and borough as a place to live | b) Overall, all things considered, how satisfied or dissatisfied are you with Rotherham Borough as a place to live | Tracy Holmes, Assistant Chief Executive's office | High - very or fairly satisfied | 6 monthly | >69% | • | 0 | | 69% June 2015 61% December 2015 very or fairly satisfied | 62% June 2016 satisfied or fairly satisfied | | | | | The LGA polling on resident satisfaction is conducted on a 6 monthly basis and was requested by the Commissioners. |
| | | 3.A6 | | Number of people borrowing books and other materials (Cumulative) (Priority measure) | Paul Woodcock - Regeneration and Environment | High | Quarterly | 25,000 | • | 0 | 25,684 | 22,472 | 11,717 | 16,621 | | | | Performance is comparing favourably to quarter 1 performance but because of the way the indicator is calculated the yer end target cannot be guaranteed to be achieved. |

| | | | | | | | | | | | D | ata available depe | ndent upon the free | quency of reporting | g | | Data notes (where measure has not |
|---|----------|---|---|---|------------------|------------------------|---------------|-------------------|-------------|----------------------------------|----------------------------------|----------------------|----------------------|---------------------|--------|--------|---|
| | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | | | Anr | nual | Qua | rterly | | | | progressed in accordance with the targe provide details of what is being done to |
| Lead Accountability (Strategic Director) | | | | | | | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| | 3.A7 | Create a rich and diverse cultural offer and thriving Town Centre | Aggregate Pedestrian footfall in the Town Centre | Paul Woodcock - Regeneration and Environment | High | Quarterly | >23,699,399 | × | O | Not available | 23,699,399 | 5,641,296 | 5,898,148 | | | | 15/16 a baseline year, aggregate pedestria measured from fixed cameras at All Saints Square, High Street, College Street and Centenary Market. A new Fixed Camera or Effingham Street went online Feb 2016 so suggest inclusion of that camera from 17/18 The target set for 16/17 is to maintain curre Town Centre footfall in the face of recent projections of a downward trend. Footfall indicator completed for Q2 which shows a 7 decline on Q2 last year and a 5% increase compared to Q1 this year. The overall statu DOT is based on a comparison to data for the same period last year. |
| | 3.B1 | | Levels of Street Cleanliness not more that 5% of sites are considered to be below standard (Grade A or B in CoP) | Karen Hanson - Regeneration and Environment | Low | Quarterly | <5% | • | > | 0% | 0% | 0% | 0% | | | | Levels of Street Cleanliness are being maintained through quarters 1 & 2 and the Council is on target to achieve its outturn 1 of <5%. |
| | 3.B2 (a) | | Percentage of the principal road network in need of significant repair | Karen Hanson - Regeneration and Environment | Low | Annual | 4% | | | 3% | Not yet available | | | | | | 2015/16 Information from the Department Transport used to measure and report performance against this measure is not currently available. |
| | 3.B2 (b) | | % of the non-principal road networks in need of repair | Karen Hanson - Regeneration and Environment | Low | Annual | 7% | | | 6% | Not yet available | | | | | | The target is based on the national average condition and the Council aspires to be go better. The national average has improve 8% to 7%. DfT 2015/16 data not yet available. |
| | 3.B2 (c) | Deliver a cleaner, greener Rotherham to ensure that it is a safe and attractive | % of unclassified roads in need of repair (Priority Measure) | Karen Hanson - Regeneration and Environment | Low | Annual | <28% | • | O | 24% | 24% | 23% | 23% | | | | Nationally, the average condition achieved this indicator is 18% (based on the latest 1 DFT data). It is recognised that this is curre unachievable and a realistic locally a targe been set at 28% with a programme of addi investment. This will be reviewed in 17/18 view to continued improvement. The Cou has invested £5m over two years - 2015/1 prevent the deterioration of highways and bring the condition of Rotherham's roads of the National Average. In addition, a furti £10m of capital investmemnt has been apfor a 2017 - 2020 programme of works. |
| | 3.B3(a) | place to live, work and visit | Effective enforcement action taken where evidence is found a) Fly Tipping (fixed penalty notices and prosecutions) | Karen Hanson - Regeneration and Environment | High | Quarterly | Baseline Year | | 0 | Not available - baseline year | Not available - baseline year | 4 | 12 | | | | Increased enforcement action continues to place against perpetrators of fly-tipping. Wadoption of new powers to issue Fixed Pel Notices for offences and additional action planned for environmental crime enforcem pro-active enforcement will continue to ser increases this year. |
| Damien Wilson, Strategic Director | 3.B3(b) | | Effective enforcement action taken where evidence is found b) Other enviro-crime (fixed penalty notices and prosecutions) | Karen Hanson - Regeneration and Environment | High | Quarterly | Baseline Year | | U | Not available - baseline year | Not available - baseline year | 14 | 7 | | | | Following approval of the 'Time for Action' approach to tackling environmental crime, options have been developed to ensure a significant increase in enforcement activity environmental offences. It is anticipated the significant increases will be recorded from quarter 3 onwards. |
| Regeneration and Environment | 3.B4(a) | | Following re inspection of grounds maintenance works achieve no more than 5% defective/not to standard works (Priority measure) | Karen Hanson - Regeneration and Environment | Low | Quarterly | <5% | > | • | 0% | 0% | 0% | 0% | | | | Performance is being maintained through 1st & 2nd quarters and the Council is con the end target of <5% will be achieved |
| | 3.B4(b) | | Number of grounds maintenance customer contacts | Karen Hanson - Regeneration and Environment | Low | Quarterly | <719 | × | 0 | Not available | 719 | 332 | 286 | | | | Performance has improved against the fir- quarter. 2nd quarter contacts (which are busiest time of the year and include activi such as grass cutting etc) are within the expected parameters to achieve the ovea target. |
| | 3.B5 | | Number of missed bins per 100,000 collections | Karen Hanson - Regeneration and Environment | Low | Quarterly | 60 | • | 0 | 38.33 | 62.7 | 62.28 | 52.11 | | | | Quarter 2 has seen a welcomed reduction number of missed collections. The Head Street Scene commenced in post during (2016 and a full review of waste services i underway. This includes a review of the r of existing vehicles which has caused sig issues in the past. |

| | | | | | | | | | | | | D | ata available deper | ndent upon the free | quency of reporting | g | | Data notes (where measure has not |
|---------|----------------------|---------|--|--|--|------------------|------------------------|--------|---------|------------------|------------------|----------------------|---|---|---------------------|--------|----------------------|---|
| | Lead Accountability | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall | | Ann | nual | Quar | terly | | | | progressed in accordance with the target set provide details of what is being done to |
| Outcome | (Strategic Director) | | | | | | | status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) | |
| | | | Ensure an efficient and effective waste and recycling service | % of waste sent for reuse (recycling and composting) | Karen Hanson - Regeneration and Environment | High | Quarterly | 45% | • | O | 40.02% | 43.11% | Estimated performance as at 30.6.16 = 50.34% Forecasted performance as at 31.3.17 = 44.99% | 30.9.16 = 50.41% Forecasted performance as at | | | | The 45% target has been calculated using the performance of the PFI plant over 2015/16 and the 2015/16 performance rates from Kerbside, HWRC & Bring site recycling. Recycling currently above target due to expected Spring/Summer collected Green waste. As this recycling isn't collected Autumn/Winter recycling performance will reduce over the course of the year, so estimated 31.3.17 figure also supplied to give true reflection of performance. It is hoped the PFI waste treatment plant will continue over the year to improve its recovery of recycling that will help to meet the target. Q2 figures are estimated as performance figures from some of our waste treatment facilities have only been received for Jul & Aug so far. Sept's data will be received by the end of Oct (always comes a month later than month end as processers have to collate their data) but this is after this returns are required to be submitted by dpt. |

Corporate Priority 4 – Extending opportunity. Prosperity and planning for the future

| | Overall s | status (relevant to target) | | | |
|-----|-----------|---|---|---|--|
| e e | Y | Measure progressing above or in line with target set | * | Measure under development (e.g. awaiting data collection or target-setting) | |
| × | • | Measure progress has been satisfactory but is not fully reaching target set | | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) | |
| | X | Measure has not progressed in accordance with target set | | Measure information not yet available (e.g. due to infrequency or timing of information/data) | |

| | | | | | | | | | | | | | Data available | dependent upon the | e frequency of rep | orting | | Data notes (where measure has not |
|---------------------------------|---|---------|---|---|--|------------------|--|---|---------|-----|--|---|----------------------|---|--------------------|--------|--------|---|
| | Lead Accountability | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall | | Anı | nual | | | | | | progressed in accordance with the target set provide details of what is being done to |
| Outcome | (Strategic Director) | | | | | | | | status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| nded across the borough | | 4.A1 | | Survival rate of new businesses (3 years) (Priority measure) | Paul Woodcock - Regeneration and Environment | High | Annual | 57.5% | | | 63.1% | Not yet available | | | | | | RIDO has taken a leading role in the development of the SCR Growth Hubs key business support programme for new buisinesses known as Launchpad This is a £4m SCR wide initiative and offers specialist support for new and early stage businesses, including networking events, workshops, coaching and one to one mentoring. A business accelerator programme has been developed in partnership with UK Steel Enterprise. |
| portunities expa | | 4.A2 | Deliver economic | Number of jobs in the Borough (Priority measure) | Paul Woodcock - Regeneration and Environment | High | Annual | 1,000 new jobs p.a. (10,000 over 10 years). No specific target for 2016/17 until 2015/16 data is available | | | 92,300 | Not yet available | | | | | | Awaiting figures, new measure. May wish to consider deleting this measure due to the timing of data |
| mployment op | Damien Wilson, Strategic Director Regeneration and Environment | 4.A3 | growth (via the Economic Growth Plan, Business Growth Board and Sheffield City Region) | Increase Number of Business Births / Start Ups per 10,000 Resident Population 16+ years old) | Paul Woodcock - Regeneration and Environment | High | Annual | 50 | | | 47 | 47 | | | | | | Latest figure from ONS Business Demography 2014 dataset shows 47 start-up enterprises per 10,000 adult population. No change from 14/15 performance. Set target to increase to 50 for 2016/17. (2015-16 target was 35) |
| l to grow and e | | 4.A4 | | Overall number of businesses in the Borough (Priority measure) | Paul Woodcock - Regeneration and Environment | High | Annual | 6,500 | | | 5,715 | 6,390 | | | | | | Target for 2015-16 was > 5,390. Specific target set for 2016-17. |
| sses supported | | 4.A5 | | Narrow the gap to the UK average on the rate of the working age population economically active in the borough | Paul Woodcock - Regeneration and Environment | Low | Quarterly | Reduce gap to 0.7% | | U | 2.8% gap | 1% gap | 2.60% | data not yet available (Dec 2016) | | | | Latest figures from ONS APS March 2016. Rotherham = 75.1%, Uk rate = 77.7%, so gap has increased since last return . Quarter 2 data will not be available until Dec 2016 |
| A. Busine | | 4.A6 | | Median average gross weekly wage for full-time employees working in the borough. Percentage of UK average | Paul Woodcock - Regeneration and Environment | High | Annual | 91.5% | | | 92.1% | 90.7% | | | | | | Annual measure. Next data due Nov16 |
| | | 4.B1 | | Number of new homes delivered during the year (Priority measure) | Tom Bell - Adult Social Care and Housing | High | Annual (interim quarterly data also available) | 731 | • | O | 633 | 663 | 201 | 178 | | | | This indicator is off target compared to the 1st quarter of the year however it is anticipated performance will be accelerated throughout the 3rd & 4th quarters as completions come through for payment before year end. The overall status has therefore been rated Amber as year end target will be achieved but DOT rated as worseneing which it is compared to the previous quarter. |
| rented or home ownership sector | | 4.B2 | Implement the Housing Strategy 2016-2019 to provide high quality | % of stock that is non-decent (Priority measure) | Tom Bell - Adult Social Care and Housing | Low | Annual (interim quarterly data also available) | 0.5% | ~ | 0 | 0% (note Corporate Plan stated - 0.67%) | 0% (note - Corporate Plan stated 1.3%) | 1.30% | 0.18% | | | | Of the 237 non-decent properties at year start, 199 have become decent. With the internal refurbishment programme running until the end of March 2017; the remaining 38 properties are scheduled for works on the internal refurbishment project over quarters 3 and 4 of 2016/17 programme. The full internal refurbishment project is schedule for delivery with this financial year with no properties expected to carry into the following financial year, as such the target of 0.5% non-decent properties forecasted for year end is forecast to be achieved. |

| | | Pof No. Action | | | | | | | | | | | | Data available | dependent upon th | e frequency of rep | orting | | Data notes (where measure has not |
|---|--|----------------------|---------|---|--|---|------------------|--|--------|-------------------|-----|---|---|----------------------|----------------------|--------------------|--------|--------|--|
| | | | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | | | An | nual | | | | | | progressed in accordance with the target set provide details of what is being done to |
| Outcor | Lead Accounta (Strategic Dire | | | | | | | | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| the social rented, private | | | 4.B3 | accommodation | Number of new social rented homes started in year | Tom Bell - Adult Social Care and Housing | High | Annual (interim quarterly data also available) | 60 | • | U | 49 | 77 | 46 | 4 | | | | This indicator is off target compared to the 1st quarter of the year however it is anticipated performance will be accelerated throughout the 3rd & 4th quarters as completions come through for payment before year end. The overall status has therefore been rated Amber as year end target will be achieved but DOT rated as worsening which it is compared to the previous quarter. |
| which meets their need, whether in | Anne Marie Lub Strategic Dire Adult Social Cai Housing (Commenced August 2016 | ctor e and 8th | 4.B4 | | Number of new affordable home ownership units started in year | Tom Bell - Adult Social Care and Housing | High | Annual | 148 | × | 0 | 51 | 58 | 2 | 2 | | | | In future affordable home ownership will become the predominant tenure in affordable housing delivery. This is because the Government's "Starter Homes" agenda will replace rented affordable housing delivered through the planning system as \$106 units. Additionally from 2016 the Affordable Homes Programme of grant funding will end. This will be replaced by the "Shared ownership & Affordable Homes Programme 2016 – 2021" (SOAHP) |
| B. People live in high quality accommodation whi | | | 4.B5(a) | Private rented housing – improving standards through selective licensing | % of eligible properties which have applied for a license, within Selective Licensing areas (Priority measure) | Karen Hanson - Regeneration and Environment | High | Monthly | 95% | | 0 | Not available | 87% | 84% | 91% | 88% | 90% | 91% | In both Eastwood and Dinnington, more private rented properties have been identified than had originally been estimated when the Council set its target for this measure using information from the 2011 census. Underestimating the number of properties in Eastwood has resulted in significantly better performance than had been expected. For example by the end of quarter 2, 151% of properties in Eastwood had registered under the scheme. This however inflates the performance for the whole Selective Licensing Scheme and to compensate for this, in order to provide customers with more accurate performance information the Council cap its performance across all Selective Licensing areas at 100%. This means performance for the overall scheme at the end of the 2 nd quarter is 91%, 7% higher than for quarter 1. The Council is therefore maintaining excellent progress delivering against this indicator and is confident the 95% year – end target will be achieved. |
| | | | 4B5(b) | | % of privately rented properties compliant with Selective Licensing conditions within designated areas (Priority Measure) | Karen Hanson - Regeneration and Environment | High | Annual | 70% | | | Not available as not previously required | Not available as not previously required | | | | | | An inspection regime is in place to test compliance. So far 500 of the 1000 those properties licensed have been inspected and where non compliance has been identified remedial actions have been taken to prevent formal action being taken by the Council. Interim performance data for this measure will be available in the 3rd quarter of the year. |
| ving their ment | | | 4.C1 | | Increase the number of people aged 19+ supported through a learning programme | Karen Borthwick - CYPS | high | Annual (academic year from September to July) | 300 | × | U | 289 | 264 | | | | | | Whilst not achieving the target of recruiting an additional 300 learners, the service has seen some positive movement with a 17% increase in overall enrolments during the 15/16 academic year. |
| rning impro | | | 4.C1 a) | | Increase the % of people aged 19+ supported through a learning programme who have: a) Obtained a formal qualification | Karen Borthwick - CYPS | high | Annual (academic year from September to July) | 95% | > | 0 | 94% | 95% | | | | | | An increase in the number of learners achieving a qualification has seen the service improve performance by 1% achieving the target of 95%. |
| access lea | lan Thomas, Str Director Childre Young Peopl Services | n and | 4.C1 b) | Adults are supported and have access to learning opportunities | Increase the % of people aged 19+ supported through a learning programme who have: b) Progressed/working towards another level | Karen Borthwick - CYPS | high | Annual (academic year from September to July) | 40% | ~ | 0 | 26% | 41% | | | | | | Progression during 15/16 has seen a significant increase with 41% of learners indicating that they are continuing their learning |
| Adults supported to access learning improving the chances of securing or retaining employment | | | 4.C1 c) | | Increase the % of people aged 19+ supported through a learning programme who have: c) Obtained or got a better job | Karen Borthwick - CYPS | high | Annual (academic year from September to July) | 20% | × | 0 | 12% | 13% | | | | | | The service has seen a slight increase in the number of learners moving in to full or part time employment but still falls sort of the target. |
| C. Adults | | | 4.C2 | | Increase the number of people working towards an English for Speakers of Other Languages (ESOL) accredited qualification | Strategic Director CYPS | High | Annual (academic year from September to July) | 50 | • | U | 70 | 67 | | | | | | Target exceeded although the introduction of longer courses for ESOL qualifications has affected the numbers of learners that can be enrolled during one year. |

Corporate Priority 5 – A modern, efficient Council

| | Overall s | status (relevant to target) | | | |
|-----|-------------|---|---|---|--|
| , e | > | Measure progressing above or in line with target set | * | Measure under development (e.g. awaiting data collection or target-setting) | |
| ¥ | • | Measure progress has been satisfactory but is not fully reaching target set | | Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target) | |
| | × | Measure has not progressed in accordance with target set | | Measure information not yet available (e.g. due to infrequency or timing of information/data) | |

| | | ^ | | | | | | | | | | | | | | | | |
|---|--|---------|--|---|--|------------------|--|---|---------|-----|------------------------------------|--|----------------------|----------------------|------------------|--------|--------|---|
| | | | | | | | | | | | | | Data available dep | pendent upon the fr | requency of repo | orting | | _Data notes (where measure has not |
| | Lead Accountability | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | Overall | | Anr | nual | Qua | rterly | | | , | progressed in accordance with the target set provide details of what is being done to |
| Outcome | (Strategic Director) | | | | | | | | status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) |
| strate value for money | | 5.A1 | | % Council Tax collected in the current financial year | Stuart Booth - Finance and Customer Services | High | Monthly | 97% (Top Quartile Met Authorities) | > | • | 97.2% | 97.3% | 27.7% | 54.3% | 36.4% | 45.4% | 54.3% | Performance is measured at the end of each month. The Met Council average for 15/16 was 95.4%, had Rotherham performed at the Met average it would have collected £1.976 million less from last year's Council Tax. The overall rating and DoT rating is based on a comparison against last years performance. Performance is 54.3% which is exactly the same as the same time the previous year and it is expected that the target will be achieved by the year end. |
| d resources and services demon | Judith Badger, Strategic Director Finance and Customer Services | 5.A2 | Maximising the local revenues available to fund council services | Cumulative Council Tax arrears per property | Stuart Booth - Finance and Customer Services | Low | Annual (interim quarterly amonthly data also available) | £109.22 (Top Quartile Met Authorities) | > | • | £66.98 | £68.12 | £58.59 | £51.06 | £55.81 | £53.49 | £51.06 | For 15/16 we were the third best Met Council with £68.12 per property. The Met Council average for 15/16 was £148.58. Had Rotherham performed at Met average we would currently have an additional £9.3million outstanding arrears. We currently have 14p lower arrears per property compared with the same time last year. The overall rating and DoT rating is based on a comparison against last years performance. Arrears are slightly lower that at the same time the previous year and it is expected that the target will be achieved by the year end. |
| A. Maximised use of assets and | | 5.A3 | | % non-domestic (business) rates collected in the current financial year | Stuart Booth - Finance and Customer Services | High | Monthly | 98% (Top Quartile Metropolitan Authorities) | • | O | 98.3% | 98.1% | 28.4% | 54.9% | 37.2% | 45.7% | 54.9% | Performance is measured at the end of each month. For Non Domestic Rates in 15/16 we were 8th highest Met (out of 36) with 98.1%. The Met Council average for 15/16 was 97.1%, had Rotherham performed at the Met average it would have collected £680k less from last year's Non Domestic Rates (49% of this is our share so £326,000). The overall rating and DoT rating is based on a comparison against last years performance. Although performance is slightly down on the same time the previous year when it was 55.1% it is expected that the target will be achieved by the year end. |
| s and decision making lace | Shokat Lal, Assistant Chief Executive | 5.B1 | Establishing and working to a new Local Code of Corporate Governance, encompassing: Risk management Information governance (including FOI/DSA) Business continuity Internal audit Emergency planning | Fit for purpose Annual Governance Statement 2016/17 (Priority measure) | Simon Dennis - Assistant Chief Executive's Directorate | n/a | Annual | Improved Annual Governance Statement in 2016/17 | | | Qualified Conclusion reached | Qualified Conclusion reached | | | | | | The final 2015/16 AGS was published on 30 September 2016. This includes an overall qualified conclusion on the Council's governance arrangements. Work to draw together the 2016/17 AGS will commence in early 2017. Additionally, arrangements are in place for establishing a new Local Code of Corporate Governance early in 2017. |
| ance arrangements and processes are in place | | 5.B2 | The Scrutiny | % of scrutiny recommendations which are accepted and implemented | James McLaughlin, Assistant Chief Executive's Directorate | High | Quarterly | 80% | | | not previously | Not available not previously been required | 0 | 0 | | | | To 30th September, no Scrutiny recommendations had been made, so no data is available. |
| B. Effective governar | Shokat Lal, Assistant Chief Executive | 5.B3 | function is effective; engages members and improve outcomes for Rotherham residents and communities | Number of pre-scrutiny recommendations adopted | James McLaughlin, Assistant Chief Executive's Directorate | High | Quarterly | 60% | > | O | not previously | Not available not previously been required | | 100% | | | | Pre-decision scrutiny process commenced in July 2016. Recommendations were made for the Cabinet and Commissioner Decision Making Meetings in both July and September and were accepted. It is worth noting that pre-decision scrutiny has resulted in additional recommendations and supporting existing recommendations, rather than any substantial changes to proposals. |
| န | | 5.C1 a) | Treating sustains | a) Total number of complaints received by the Council | Justin Homer - Assistant Chief Executive's Directorate | Not applicable | Monthly | No target - not applicable | | | 692 | 695 | 205 | 271 | 68 | 85 | 118 | Increase in the number of complaints received in September. This is in part due to the numbers received in CYPS. Significant month on month increase in CYPS. |

| | | | | | | | | | | | | | Data available de | pendent upon the f | requency of repo | rting | | Data notes (where measure has not | |
|---|--|---------|--|--|--|---------------------------------------|------------------------|-------------------------------|----------------|-----------|-------------------------------------|---|--|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|---|--|
| | | Ref No. | Action | Measure | Lead officer | Good performance | Frequency of reporting | Target | | | An | nual | Qua | irterly | | | | progressed in accordance with the target set provide details of what is being done to | |
| • | Lead Accountability (Strategic Director) | | | | | | | | Overall status | DOT | Year end 2014/15 | Year end 2015/16 | Q1 Apr - Jun 2016 | Q2 Jul - Sep 2016 | Jul-16 | Aug-16 | Sep-16 | improve performance) | |
| | | 5.C1 b) | complaints with respect and dealing with them in an efficient and outcome-focussed | b) % of complaints closed and within timescale (cumulative) | Justin Homer - Assistant Chief Executive's Directorate | | Monthly | 85% | • | O | 82% | 80% | 79% | 82% | 84% | 84% | 82% | Decrease in performance in September and in overall. Continuing issues in RES. Specifically Waste Management. | |
| | Shokat Lal, Assistant Chief Executive | 5.C2 | way | Number of compliments received | Justin Homer - Assistant Chief Executive's Directorate | Not applicable | Monthly | No target - not applicable | | | 604 | 603 | 183 | 168 | 54 | 65 | 49 | Small decrease from August. All Directorates have been reminded to report all received. | |
| | | 5.C3 | Resident satisfaction - Assessing overall | % of residents satisfied with the way Rotherham Metropolitan Borough Council runs things | Tracy Holmes, Assistant Chief Executive's Directorate | High - very or fairly satisfied | 6 monthly | >55% | • | O | | 55% June 2015 and 54% December 2015 very or fairly satisfied | 50% June 2016 very or fairly satisfied | | | | | The LGA polling on resident satisfaction is conducted on a 6 monthly basis and was requested by the Commissioners. | |
| | | 5.C4 | public opinion on the way the council is working and responding to customers | % of residents that have confidence in Rotherham Metropolitan Borough Council | Tracy Holmes, Assistant Chief Executive's Directorate | High - great or moderate extent | 6 monthly | >41% | • | O | | 41% June 2015 and 45% December great or moderate extent | 44% June 2016 great or moderate extent | | | | | The LGA polling on resident satisfaction is conducted on a 6 monthly basis and was requested by the Commissioners. | |
| | | 5.C5 a) | Enable customers | % of transactions a) online | Jill Craig - Finance and Customer Services | d High | 6 monthly | >36% | • | \$ | 24% | 36% | | 36% | | | | 6 monthly measure. | |
| | Judith Badger, Strategic Director Finance and Customer Services | 5.C5 b) | to be active and interact with the Council in an efficient way, accessing more | % of transactions b) face to face customers | Jill Craig - Finance and Customer Services | Low | 6 monthly | <6% | • | • | 9% | 6% | | 6% | | | | 6 monthly measure | |
| | | 5.C5 c) | services online | % of transactions c) telephony customers | Jill Craig - Finance and Customer Services | Low | 6 monthly | <58% | • | • | 67% | 58% | | 58% | | | | 6 monthly measure | |
| | | 5.D1 | Staff and managers have an opportunity to reflect on performance , agree future objectives and are aware of how they contribute to the overall vision | % PDR completion | Tracey Parkin, Assistant Chief Executive's Directorate | 1 | Annual | 95% | * | 0 | 61% | 96% | 94.5% | 96% | | | | Achievement at 96% against 95% target. Targ for 2017/18 will be agreed as part of lessons learned in autumn. | |
| | Shokat Lal, Assistant Chief Executive | 5.D2 | Sickness is managed and staff wellbeing supported | Days lost per FTE (Priority measure) | lan Henderson, Assistant Chief Executive's Directorate | Low | Monthly | 10.2 | × | O | 10.9 days (excluding schools) | 10.43 Days (excluding schools) | 11.10 days (excluding schools) | 10.71 days (excluding schools) | 10.98 days (excluding schools) | 10.63 days (excluding schools) | 10.71 days (excluding schools) | Sickness figure is an annualised projection bas on performance to date and historic profiles. Targeted intervention measures are currently being applied and further work is being undertaken to refresh management processes and target specific issues. | |
| | CHIGH EACCURVE | 5.D3 | Reduced use of interims, temporary and agency staff through effective and efficient recruitment | Reduction in Agency cost (Priority measure) | lan Henderson, Assistant Chief Executive's Directorate | Low | Monthly | 10% reduction | × | O | £2.8m | £6.8m | £2,263 (+33%) | £4,859 (+43%) | £3,071 (+35%) | £3,923 (+38%) | £4,859 (+43%) | DoT is based on projected annual expenditure against last years actual. Late submissions for payment of invoices and classification of certait consultancy expenditure as agency may be distorting annual projections. | |
| | | 5.D4 | Members are able to fulfil their roles as effective community leaders | % members receive a personal development interview leading to a structured learning and development plan | James McLaughlin, Assistant Chief Executive's Directorate | High | Annual | 85% | | | | 80% | | | | | | Annual measure. Too early in the municipal ye to assess progress. | |