

Appendix 1: Cabinet Measures



Leader Portfolio - Cllr. Martin Tett

- Buckinghamshire residents are skilled and ready for employment

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|--|---|---------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|---|--|
| 1 Number of BCC apprenticeships | Performing better than South-East and National | Cumulative (year to date) | Monitor | 16 | 14 | 21 | 27 | 26 | ↓ | □ Monitor | This does not include employees who are completing apprenticeships alongside their substantive jobs. | We are on track for the number of young people recruited onto the Bucks CC apprenticeship scheme. We were hoping to recruit 30 new starts excluding schools and we have achieved 26. This is a significant improvement on the number of number of apprentices started in the previous year (16). |
| 2 Number of adults on Adult Learning provision | High | Cumulative (academic year to date, from Q2) | 5,300 | 7,715 | 7,715 | 4,496 | 5,405 | 6,437 | ↑ | ★ Green | The recruitment of learners is on target and should earn both the grant and fee income that were budgeted. Outreach provision is moving to support mental health groups as the number of unemployed is falling. The long term unemployed we work with have multiple issues. | The recruitment of learners is on target and should earn both the grant and fee income that were budgeted. |

- The creation of more jobs for local people

NB: This RAG is made up of measures from the 'the creation of more jobs for local people' sections found in the leader and transportation portfolio's

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on latest result | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action | |
|---------|---|-------------|---------------------------|------------------------------|-------------|-------------|-------------|-------------|------------------------|--------------------------|---|---|--|
| 3 | Claimant count in Bucks | Low | Current position | 2,300 | 2,620 | 2,595 | 2,680 | 2,630 | 2,995 | ↑ | Red | Buckinghamshire 2,995; 0.9%; 6 of 27 Hertfordshire 8,335; 1.1% ; 6 of 38 Oxfordshire 2,940; 0.7%; 2 of 38 TV Berkshire 5,820; 1.0%; 5 of 38 | Buckinghamshire's claimant count rate remains well below the national rate, ranking 3rd lowest among LEPs and 6th lowest among county council areas. However, the recent trend (since October) has been for Buckinghamshire's claimant count to rise faster than across the country as a whole and faster than in neighbouring authorities. |
| 4 | Number of new job openings (Labour Insight data) | High | Cumulative (year to date) | 61,876 | 61,876 | 16,539 | 33,882 | 47,891 | 66,980 | ↑ | Green | | There were 7,210 advertised job openings in Buckinghamshire in March, 2,221 (44.5 per cent) more than in the previous March and 1,321 (22.4 per cent) more than in February. |
| 5 | Number of New Business Registrations as defined by Companies House | High | Cumulative (year to date) | 4,696 | 4,696 | 1,212 | 2,630 | 3,894 | 5,262 | ↑ | Green | | New business registration were up 21% on last years figures. BBF supported more businesses than ever before; 13,012 in 2016/17 (equivalent to 55 per day), either online, phone or face to face with brokerage to private sector provision also growing at a very healthy rate. BBF was awarded "Highly Commended" for the Improving the Business Environment in the Enterprising Britain Awards 2016 |
| 6 | 'Business deaths' as defined by ONS | Low | Annual outturn only | 2,500 | 2,645 | | 2,665 | N/A | ↑ | Red | Deaths per 10,000 residents (16+): BCC 63.3, SE 52.3, GB 48.3. Births: BCC 91.3, SE: 76.7, GB: 73.5. This means that BCC has a net increase of business births, with 28 more business births than deaths, compared to 24 for SE and 25 for GB | This metric measures number of business deaths per 10,000 residents. Increase in stock is 1,180. Gap between births and deaths results from more births and static deaths. (https://bbf.uk.com/news/new-firm-formation-2015) | |
| 7 | 500 new jobs created | High | Cumulative (year to date) | 500 | 634 | 0 | 4 | 240 | 519 | ↑ | Green | | Creation of 519 jobs directly attributable to Buckinghamshire Business First intervention. |
| 8 | Businesses relocation to Bucks either from within the UK or from Foreign Direct Investment(FDI) | High | Cumulative (year to date) | 10 | 10 | 0 | 3 | 8 | 24 | ↑ | Green | | 24 business relocated to Bucks in 2016/17 of which 14 were foreign owned |

- Improved access to high speed broadband

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|--|
| 9 Bucks-Herts Broadband Project to provide broadband to 40,000 homes and the Superfast Extension Programme to achieve 95 % superfast broadband coverage | Green | Current position | Green | Green | Green | Green | Green | Green | → | * Green | No benchmark data available as this is a specific project. | Contract 1 (Phase 1) was delivered to time, under budget and exceeding premises targeted. Over 45,000 premises in Buckinghamshire benefited from fibre broadband infrastructure with over 42,000 of those premises now being able to access superfast broadband (>24Mbps). Bucks passed the 90% superfast coverage earlier this year, which is behind most counties, but work on Contract 2 (Phase 2) has started which will take Bucks to 95% by 2018. Take-up on the connections from contract 1 has now exceeded 44% which is in the top ten out of 44 projects nationwide. |

- Protecting our high quality natural environment

NB: This RAG is made up of measures from the "protecting our high quality natural environment" sections found in the leader, planning & environment and transportation portfolio's

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|--------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|--|
| 10 Seeking to secure appropriate mitigation of impacts of HS2 construction during 2017-2026 and the permanent railway | Green | Current month only | Green | Green | Green | Green | Green | Green | → | * Green | No benchmark data available as this is a specific project. | We have secured 130 mitigation packages aimed at offsetting the impact of HS2 in areas affected by the construction route. |



- Improved health and wellbeing for all of our residents

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------|----------------------|------------------------------|-------------|-------------|---------------------------------|---------------|-----------------------|--------------------------|--|--|
| 1 a) Number of the eligible population invited to an NHS Health Check. Per quarter. | High | Current quarter only | 7,969 (each quarter) | 32,616 | 7,769 | 8,356 | 6,738 (Q3 result) | not available | ↓ | ■ Red | Data runs a quarter behind. Q4 data not yet due. Decrease of 1,627 in Q3 compared to Q2. | The majority of invitations are issued by GP practices. There were fewer invitations sent out in Q3 (which is the latest result) than in Q1 and Q2. This is expected as a result of the pressures in primary care over the Christmas and winter period. Work with GP practices will continue to encourage invitation letters to be sent. There is new national insight work on how letters can be worded to encourage participation and this is being shared with practice leads. |
| 2 b) Number of the eligible population invited to an NHS Health Check. Year to date. | High | Cumulative (year to date) | 31,877 (annual) | 32,616 | 7,769 | 16,125 | 22,863 (Q1-Q3) | not available | ↑ | ■ Red | Data runs a quarter behind. Q4 data not yet due. Increase of 6,738 from Q2 to Q3 and performance is at 72% of the target performance at Q3 (not 75% of the annual target). | As above. |
| 3 a) Number of people who received an NHS Health Check | High | Current quarter only | 15,939 (annual) | 14,400 | 3,409 | 3,481 | 3,102 for Q3 only (9,992 Q1-Q3) | not available | ↓ | ■ Red | Data runs a quarter behind. Q4 data not yet due. 63% of annual target delivered at Q3 (not 75% of annual target). | Well documented pressures in primary care have impacted on performance. However GP practices remain the most cost effective way to deliver the programme. The outreach provider has experienced understaffing and a high turnover of key staff, including their project coordinator for Buckinghamshire. A communications campaign is planned to improve uptake by residents in Buckinghamshire. GP practices which have not reached their target will be prioritised for quality assurance visits. The outreach provider is covering some of the capacity gap resulting from vacancies by bringing in staff from other areas for some sessions. However recruitment and retention remain a challenge. |

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|---|--|------|----------------------|--|-------|-------|-------|-------|---------------|---|-------|--|--|
| 4 | b) % of people who were invited for a NHS Health Check that received an NHS Health Check | High | Current quarter only | 50% (each quarter) | 44.2% | 43.9% | 41.7% | 46.0% | not available | ↑ | Red | Data runs a quarter behind. Q4 data not yet due (47.9% England 2015/16) | As above. |
| 5 | Percentage of sexual health clients offered an appointment in 48 hours | High | Current quarter only | 98% | 100% | 100% | 90% | 98% | not available | ↑ | Green | Data runs a quarter behind. Q4 data not yet due. No national data published. | This indicator is important because rapid access to sexual health services is key to prevent onward transmission of HIV and/or other sexually transmitted infections. Problems experienced with the new single point of telephone access in Q2 have now been resolved and performance is meeting the target with all patients offered a sexual health appointment within 48 hours (2 working days) in Q3 which meets the required national clinical standard. |
| 6 | Number of current smokers achieving a 4 week quit | High | Current quarter only | Local target: 1520 Qtly target: 380 | 1,535 | 311 | 246 | 301 | not available | ↑ | Red | Data runs a quarter behind. Q4 data not yet. | In Quarter 3, 301 current smokers achieved a 4-week quit which was below the local target of 380. This is due to a national fall in smoking quitters due partly to the availability of e-cigarettes. In addition the proportion of adults in Buckinghamshire who smoke has reduced to 11%. The National Institute for Clinical and Health Excellence has set a standard for the number of smoking quitters which should be achieved and is based on the proportion of adults who smoke. If the lower number of smokers is taken in to account, the number of local quitters does meet this standard and the target for number of quitters will be reduced for 2017/18 to reflect this. |
| 7 | % of smokers who achieve a quit of those attempting | High | Current quarter only | 50.0% (local target) | 55.5% | 58.1% | 53.0% | 59.8% | not available | ↑ | Green | Data runs a quarter behind. Q4 data not yet due. 51.0% (England 2015/16) | Q1: 302/520. Q2: 242/457. Q3: 301/503. This measure of performance is on target and exceeds the England average in 2015/16. |

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|----|--|------|----------------------|---|--------|-------|-------|-------------------------|---------------|---|---------|---|--|
| 8 | Percentage of clients attending community weight management services who complete a 12 week attendance who achieve a 5-10% weight loss | High | Current quarter only | 40% (local target) | 66.1% | 75.3% | 68.0% | 67.3% | not available | ↓ | ★ Green | Data runs a quarter behind. Q4 data not yet due. 56% (England 2015/16) | Q1: 67/89. Q2: 282/415. Q3: 224/333. 67.3% (224/333) exceeds the local target of 40%. This measure of performance also exceeds the national benchmark (56%). |
| 9 | Successful completion of alcohol treatment | High | Current quarter only | 45.0% | 46.5% | 50.4% | 46.8% | 47.8% | not available | ↑ | ★ Green | Data runs a quarter behind. Q4 data not yet due. 39.2% (England 2015/16) | Q1: 136/270. Q2: 130/278. Q3: 129/270. 47.8% (129/270) exceeds the local target of 45%. We are in the top quartile compared to our local comparator areas. The proportion of service users coming back with drug or alcohol problems (following treatment) is also low. |
| 10 | Successful completion of drug treatment | High | Current quarter only | 15.0% | 16.6% | 18.4% | 18.1% | 19.4% | not available | ↑ | ★ Green | Data runs a quarter behind. Q4 data not yet due. 15.2% (England 2015/16) | Q1: 159/866. Q2: 153/846. Q3: 160/824. This measure of performance is on target. Bucks continues to exceed local and national targets for successful treatment completions for drugs and is in the top quartile compared to our local comparator areas. This is a particular achievement as the adult service is being reprocedured during which performance can decline. This has not happened with adult substance misuse services in Buckinghamshire, and the performance has increased since the last quarter. |
| 11 | Proportion of drug clients who successfully complete treatment and then re-present within 6 months | Low | Current quarter only | Less than 15.0% | 13.4% | 7.9% | 4.9% | 7.4% | not available | ↑ | ★ Green | Data runs a quarter behind. Q4 data not yet due. 11.5% (England 2015/16) | Q1: 6/76. Q2: 4/81. Q3: 7/94. This measure of performance is on target. Bucks continues to exceed local and national targets for representations for drugs. |
| 12 | Proportion of alcohol clients who successfully complete treatment and then re-present within 6 months | Low | Current quarter only | Less than 10.0% | 7.0% | 5.3% | 7.5% | 4.7% | not available | ↓ | ★ Green | Data runs a quarter behind. Q4 data not yet due. 9.3% (England 2015/16) | Q1: 3/57. Q2: 6/80. Q3: 4/85. This measure of performance is on target. Bucks continues to exceed local and national targets for representations for alcohol. |
| 13 | Total footfall of people per year involved with health walks | High | Current quarter only | 28,000 (local target) Qtly target = 7,000 | 35,180 | 8,375 | 9,474 | 10,368 (Q3 result only) | not available | ↑ | ★ Green | Data runs a quarter behind. Q4 data not yet due. No national data published | Simply Walk continues to engage and retain high numbers of Bucks residents with a total of 80 weekly walks now making up the programme including 16 new, short walks that were developed as part of Active Bucks. We believe this programme is now the biggest local authority health walk programme in the country. |

- Buckinghamshire communities are safe places to live

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|-------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|---|---|
| 14 Reduce re-offending when compared to the Force Average - Spent whole time in custody | Low | Rolling 12 months | 30.0% | 25.0% | 25.0% | 17.0% | 16.0% | 50.0% | ↑ | ■ Red | <p>Force Average: 48%</p> <p>Data is 1 quarter in arrears at all times so Mar 17 is actually Q3 data (end Dec 2016). In previous qtrs, Bucks has consistently performed well when compared to other areas in the Thames Valley.</p> <p>The reasons for variations large variations between quarters (25% Q1, 17%Q2, 16% Q3, 50%Q4) relate to a particularly entrenched new incoming cohort of offenders and police practice enabling more arrests and charges.</p> | <p>This target monitors how we successful we are at rehabilitating offenders, which is the outcome we're working towards. However, the reality is that these offenders are some of the most entrenched and need long term and specialist interventions. Performance is under target as offenders have chaotic lifestyles and there is a significant struggle in obtaining the support they need to secure housing, mental health treatment and an alternative way of obtaining funds (e.g. a job). If an offender is not rehabilitated successfully (as will be the case for many) then them being in custody demonstrates that enforcement (as a less desired option to rehabilitation) is working. Our performance showing 50% of our cohort in custody means we have failed to rehabilitate them but, positively, they are not causing harm in the community because they have been removed. Offender Management is currently undergoing a review and Bucks is putting themselves forward as a pilot for a new approach which will improve the cohort and access to interventions.</p> |
| 15 Reduce re-offending when compared to the Force Average - Were charged | Low | Rolling 12 months | 26.0% | 23.0% | 23.0% | 26.0% | 29.0% | 36.0% | ↑ | ■ Red | <p>Force Average: 31%</p> <p>Data is 1 quarter in arrears at all times so Mar 17 is actually Q3 data (end Dec 2016). In previous quarters Bucks has consistently performed well when compared to other areas in the Thames Valley.</p> <p>The reasons for variations large variations between quarters (23% Q1, 26%Q2, 29% Q3, 36%Q4) relate to a particularly entrenched new incoming cohort of offenders and police practice enabling more arrests and charges.</p> | <p>This target monitors how we successful we are at rehabilitating offenders, which is the outcome we're working towards. However, the reality is that these offenders are some of the most entrenched and need long term and specialist interventions. Performance is under target as offenders have chaotic lifestyles and there is a significant struggle in obtaining the support they need to secure housing, mental health treatment and an alternative way of obtaining funds (e.g. a job). If an offender is not rehabilitated successfully (as will be the case for many) then them being charged demonstrates that enforcement (as a less desired option to rehabilitation) is working. Our performance showing 36% of our cohort in custody means we have failed to rehabilitate them but, positively, they are not causing harm in the community because they have been removed. Offender Management is currently undergoing a review and Bucks is putting themselves forward as a pilot for a new approach which will improve the cohort and access to interventions.</p> |

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|----|---|------|-------------------|---------|--------|--------|--------|--------|--------|---|-----------|--|---|
| 16 | Reduce re-offending when compared to the Force Average - Were not arrested and spent no time in custody | High | Rolling 12 months | 25.0% | 35.0% | 35.0% | 37.0% | 33.0% | 14.0% | ↓ | ■ Red | <p>Force Average: 20% Data is 1 quarter in arrears at all times so Mar 17 is actually Q3 data (end Dec 2016). In previous quarters Bucks has consistently performed well when compared to other areas in the Thames Valley.</p> <p>The reasons for variations large variations between quarters (35% Q1, 37%Q2, 33% Q3, 14%Q4) relate to a particularly entrenched new incoming cohort of offenders and police practice enabling more arrests and charges.</p> | <p>This target monitors how we successful we are at rehabilitating offenders, which is the outcome we're working towards. However, the reality is that these offenders are some of the most entrenched and need long term and specialist interventions.</p> <p>Performance is under target as offenders have chaotic lifestyles and there is a significant struggle in obtaining the support they need to secure housing, mental health treatment and an alternative way of obtaining funds (e.g. a job).</p> <p>This indicator reports that 14% of offenders have been successfully rehabilitated - i.e. ex-offenders are not showing any signs of offending whilst out in the community.</p> <p>Offender Management is currently undergoing a review and Bucks is putting themselves forward as a pilot for a new approach which will improve the cohort and access to interventions.</p> |
| 17 | Making communities safer by tackling crime: Number of victim based crimes | Low | Rolling 12 months | Monitor | 22,183 | 22,479 | 22,789 | 23,214 | 22,701 | ↓ | ▫ Monitor | <p>The performance of this indicator has been improving steadily over the last 3 reporting periods.</p> | <p>Crime & Disorder work areas are currently in public consultation and responses will influence the focus over the next 3 years on how we spend partnership funding and what we put extra focus on, especially in terms of victimisation.</p> |
| 18 | Making communities safer by tackling crime: % change in the number of victim based crimes | Low | Rolling 12 months | Monitor | +11.8% | +10.3% | +8.1% | +6.3% | +4.5% | ↓ | ▫ Monitor | <p>The performance of this indicator has been improving steadily over the last 3 reporting periods.</p> | <p>Following public consultation and data analysis, the priorities over the next 3 years on how we spend partnership funding and what we put extra focus on, has been laid out in the Safer Bucks Plan.</p> |
| 19 | Reducing the risk of violent crime (non-domestic): Number of violence with injury cases | Low | Rolling 12 months | Monitor | 2,280 | 2,408 | 2,466 | 2,373 | 2,373 | → | ▫ Monitor | <p>The result is in line with the Thames Valley and the performance of this indicator has been improving significantly over the last 3 reporting periods</p> | <p>Following public consultation and data analysis, the priorities over the next 3 years on how we spend partnership funding and what we put extra focus on, has been laid out in the Safer Bucks Plan.</p> |

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|----|--|------|---------------------------|----------------------------------|----------|----------|----------|----------|----------|---|-----------|--|---|
| 20 | Reducing the risk of violent crime (non-domestic): % Change in the number of violence with injury cases | Low | Rolling 12 months | Monitor | +30.3% | +33.9% | +24.5% | +8.7% | +3.0% | ↓ | ◻ Monitor | The result is in line with the Thames Valley and the performance of this indicator has been improving significantly over the last 3 reporting periods | Violence had been increasing against the trend of many other crime types. Violence is being included as one of the 4 priority themes for the next 3 years in the Safer Bucks Plan, alongside vulnerability/exploitation, re-offending and community resilience. |
| 21 | Increasing the number of businesses who have been assisted by the Trading Standards service | High | Cumulative | Improve by increasing the number | 2,154 | 2,706 | 2,887 | 2,982 | 3,144 | ↑ | ★ Green | Performance has exceeded last year's performance (2,154). | This includes the number of businesses with whom we have a Primary Authority Partnership, those who are Trading Standards Approved members of trade approval schemes (such as Checkatrade or TrustMark) and those who are members of the Eat Out Eat Well (healthy eating) scheme. |
| 22 | Increasing the savings for residents as a result of interventions and investigations by the Trading Standards service | High | Cumulative (year to date) | Improve by increasing the number | £296,445 | £115,294 | £118,444 | £128,524 | £406,637 | ↑ | ★ Green | See narrative column | Q1 includes compensation awarded to victims of a gardening rogue trader prosecuted by the service totalling £97,650. Q4 includes compensation awarded to victims of fraud following the prosecution of a money launderer totalling £241,000. NB: To keep the data comparable to 15-16, these amounts exclude money saved for the victims of scams (mainly phone / letter) which the service now records. |
| 23 | Improvement in risk category for those clients working with the Independent Domestic Violence Adviser from initial assessment to close of case | High | Cumulative (year to date) | 60.0% | 74.7% | 67.0% | 75.2% | 79.5% | 80.2% | ↑ | ★ Green | The risk assessment figure for Q4 is provisional. It is likely that the figure will reduce when male data is collected & combined, however it will not vary the overall achievement of meeting the target. There has been an improvement in risk and safety compared to 2015/2016 data. The IDVA service will be canvassing a range of domestic violence services in 2017/2018 to benchmark the cost of IDVAs and current average improvement in risk and safety against other services across the country in order to compare our local service in respect of value for money and effectiveness. | Performance continues to meet expectations |

- Buckinghamshire communities are supported to help themselves

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---------|---|-------------|-----------|--------------------------------------|-------------|-------------|-------------|--------------------|-----------------------|--------------------------|---|---|
| 24 | Number of individual young people accessing community leased BCC youth centres | High | Quarterly | 1850 | | | | | | | | |
| | | | | | 1,930 | 3,353 | 2,080 | 2,099 | ↑ | ★ Green | The number of young people accessing youth centres has remained largely consistent and above target. | The CISCO wifi was a new service in 2016. The usage is building quarter on quarter. The Q4 period has seen consistent attendance at clubs across Buckinghamshire. |
| 25 | Number of sessions provided for young people at community leased BCC youth centres | High | Quarterly | 256 | | | | | | | | |
| | | | | | 393 | 335 | 487 | 364 | ↓ | ★ Green | The number of sessions provided in youth centres has varied each month but has been at least 30% above the quarterly target during 2016/17. In Q4, performance was 42% above the target of 256. | Youth Centres continue to develop the range of providers/organisations who deliver programmes from their premises. |
| 26 | Number of e-materials (e-books, e-audio etc.) loaned | High | Quarterly | 23,750 per quarter (95,000 per year) | 89,242 | | | | | | | |
| | | | | | 23,391 | 24,097 | 22,161 | 23,471 (Q4 result) | ↑ | ● Amber | Just short of target but up nearly 5% on previous year. | Library use during December is generally lower but there has been service disruption due to upgrades by all 3 e content suppliers during Q3 and loss of BCC library web pages over new year. Have increased the use of social media to publicise more e Content in Q4 |
| 27 | Number of WIFI sessions in libraries | High | Quarterly | 12,500 per quarter (50,000 per year) | n/a | | | | | | | |
| | | | | | | 12,000 | 13,815 | 16,000 | ↑ | ★ Green | Above target | The CISCO Wi-Fi was a new service in 2016 usage is building quarter on quarter. |
| 28 | Number of "Learn My Way" enrolments | High | Quarterly | 119 per quarter (475 per year) | | | | | | | | |
| | | | | | 110 | 77 | 79 | 136 (Q4 result) | ↑ | ● Amber | Final quarter showed a large increase from 79 enrolments in Q3 to 136 in Q4. However the year end figure of 402 is still short of the annual target (475) hence the amber RAG. | |
| 29 | Increase the percentage of calls to the contact centre resolved at first point of contact | High | Quarterly | 70.0% | 79.3% | | | | | | | |
| | | | | | 72.7% | 72.1% | 70.7% | 65.9% | ↓ | ★ Green | Improvements to the website and the increase in digital solutions has meant a decrease in First Call Resolution as more customers self serve online and quick transactional calls are replaced by more complex calls. | Reduction in First Call Resolution indicate digital solutions are keeping Customers online |
| 30 | Percentage of people who phoned the Council when they could have used the website | Low | Quarterly | Monitor | 25.9% | | | | | | | |
| | | | | | 21.9% | 19.9% | 23.0% | 18.7% | ↓ | □ Monitor | Reduction in calls where customers can self serve. | |

- Vulnerable Adults are safe and protected from harm

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | | | | Annual 2016/17 | Trend on last year | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|--|--------|------------------------------|--|--|--|----------------|--------------------|--------------------------|---|---|
| 1 Overall satisfaction of people who use services with their care and support | High | Annual outturn only - data not due, provisional only | 65.0% | 61.0% | | | | 60.1% | ↓ | ● Amber | The user survey data here is provisional, final data will be available in September 2017, but we are not expecting any significant change. The performance for this measure is lower this year (60.1%) compared to last year (61.0%). The measure is calculated from the results of a survey carried out between January and March and reflect how our users feel about their services during this period, and the only way we can directly influence this is to ensure that service users are satisfied with the services they are given. | Part of our Client Review Plan for 2017/18, is to give further training to our social work practitioners to have conversations which take a more holistic approach to clients and their needs and also asks them directly about how we can enable them to have more contact within their communities to enhance quality of life and satisfaction with our services. |
| 2 Social Care related quality of life | High | Annual outturn only - data not due, provisional only | 19.5 | 18.8 | | | | 19.3 | ↑ | ● Amber | The user survey data here is provisional, final data will be available in September 2017, but we are not expecting any significant change. The performance for this measure has improved this year compared to last year and is just short of target. The measure is calculated from the results of a survey carried out between January and March and reflects how our users feel about their services during this period, and the only way we can directly influence this is to ensure that service users services improve their quality of life. | Part of our Client Review Plan for 2017/18, is to give further training to our social work practitioners to have conversations which take a more holistic approach to clients and their needs and also asks them directly about how we can enable them to have more contact within their communities to enhance quality of life and satisfaction with our services. |
| 3 Proportion of people who use services who say those services make them feel safe & secure | High | Annual outturn only - data not due, provisional only | 75.0% | 74.0% | | | | 80.2% | ↑ | ★ Green | 2015/16 Benchmarks: 85.5% (national); 86.5% (comparator) Performance has increased substantially from the previous year's performance and is above the target set for the year. | Performance has increased substantially from the previous year, but is still below national and comparator group benchmarks from 2015/16. Further benchmarking will be completed when comparative data is available for 2016/17. This measure is derived from the annual user survey from which we received 492 responses. Performance has decreased very slightly compared to the previous year and is below the previous year's comparator group and national performance. We are pleased with the improvement achieved over the last year and are keen to ensure this improvement continues. We have already started work to analyse responses and have recently conducted further research via a number of focus groups, to better understand the issues and challenges faced by our service users. The detailed analysis resulting from the focus groups and this survey will inform our approach to delivering care and support services over the coming year and drive improvement where possible. |

- Vulnerable adults are supported to lead independent lives

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action | |
|---------|--|-------------|---------------------------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|-------------------------|---|--|
| 4 | Proportion of adults with learning disabilities who live in their own home or with their family | High | Snapshot | 66.0% | 65.0% | 65.0% | 63.4% | 67.4% | 67.3% | ↓ | ★ Green | <p>2015/16 Benchmarks: 75.4% (national); 72.3% (comparator)</p> <p>Performance increased in Q3 following a data clean-up exercise, no further clean up activity beyond regular maintenance was required in Q4. This performance has increased from the previous year.</p> | <p>Performance has improved compared to the previous year's outturn and exceeded the target set for the year, although this is below national and comparator group performance for 2015/16. Further benchmarking will be completed when comparator data is available for 2016/17.</p> <p>Data quality issues which have previously impacted on performance have been addressed, there is ongoing monitoring and exception reporting in place to ensure that any future issues are addressed in a timely manner.</p> |
| 5 | Proportion of adults in contact with secondary mental health services who live independently with or without support | High | Snapshot | 78.0% | 75.8% | 74.5% | 84.0% | 83.5% | 84.5% | ↑ | ★ Green | <p>2015/16 Benchmarks: 58.6% (national); 51.5% (comparator)</p> <p>Performance maintained in Q4, above target for 2016/17 and significantly higher than 2015/16 outturn.</p> | <p>Performance is above target for the year and has increased compared to the previous year's outturn. This performance is also significantly higher than both national and comparator group performance for 2015/16.</p> <p>We aim to maintain this excellent level of performance and drive further improvement where possible in 2017/18.</p> |
| 6 | Permanent admissions to residential care for 18 to 64 year olds. Rate per 100,000 of population. | Low | Cumulative (year to date) | 13.5 | 12.4 | 1.6 | 3.6 | 6.9 | 11.2 | ↑ | ★ Green | <p>2015/16 Benchmarks: 13.3 (national); 11.4 (comparator)</p> <p>The rate of admissions of younger adults is low, has improved compared to the previous year and has outperformed the year end target.</p> | <p>This indicator measures the number younger adults (18-64) admitted to long term residential or nursing care and is expressed as a rate per 100,000 population. This rate is lower than the target (lower performance is better) and this has continued to year end. This performance is better than the national and comparator group outturns for 2015/16, further benchmarking will be conducted when 2016/17 comparator data is available. In terms of actual numbers, this rate represents 39 permanent admissions made in the year.</p> |
| 7 | Permanent admissions of older people (65+) into residential care. Rate per 100,000 of population. | Low | Cumulative (year to date) | 550.0 | 485.8 | 79.5 | 185.2 | 287.5 | 450.5 | ↑ | ★ Green | <p>2015/16 Benchmarks: 628.2 (national); 563.3 (comparator)</p> <p>The rate of OP admissions is low, has improved compared to the previous year's performance and is within the target for 2016/17.</p> | <p>This indicator measures the number older adults (65+) admitted to long term residential or nursing care and is expressed as a rate per 100,000 population. This rate is lower than the target (lower performance is better) and this represents excellent performance in the context of increases in the aging population of Buckinghamshire. This performance is substantially better than the national and comparator group outturns for 2015/16, further benchmarking will be conducted when 2016/17 comparator data is available. In terms of actual numbers, this rate represents 440 permanent admissions made in the year.</p> <p>Adult Social Care has developed preventative, reabling and other community-based services which support people to live independently and in the community. The success of these interventions is evidenced, in part, by the low rate of admission to residential and/or nursing care despite increasing demographic pressures.</p> |

| | | | | | | | | | | | | | |
|----|---|------|--|-------|-------|-------|-------|-------|-------|---|-------|--|---|
| 8 | Number of people receiving monitored assistive technology | High | Year to date | 6,500 | 5,519 | 5,164 | 5,359 | 5,550 | 5,729 | ↑ | Red | <p>This is a local indicator and as such there is no benchmarking information available</p> <p>Performance has increased over the year but the rate of increase was too low to achieve the target.</p> <p>An ambitious target (18% increase on previous year performance) was set which did not align to the timescales for implementation of the new service.</p> | <p>The performance reported for 2016/17 is the highest number reported for this indicator over the past three years and represents an increase of 4% compared to the previous year.</p> <p>We are undergoing a redesign of the Assistive Technology service to deliver our ambition to support significantly more people to live independently with technology-based support. The focus during this year has been to implement a new referral pathway and ensure capacity and expertise is best deployed to support the increase. The new service will soft-launch in February 2017, with a full launch planned for May 2017. Action is to complete implementation of new referral pathway and commence wide scale rollout of the new service.</p> |
| 9 | Percentage of older people still at home 91 days after hospital discharge. (re-ablement) (Measured for 1 qtr. of the year only) | High | Annual outturn only - provisional only | 75.0% | 66.0% | | | | 70.6% | ↑ | Amber | <p>2015/16 Benchmarks: 82.7% (national); 83.3% (comparator)</p> <p>Percentage of older people still at home 91 days after hospital discharge here is provisional, final data will be available in September 2017, but we are not expecting any significant change.</p> | <p>Reablement has now tightened up on the admission criteria through better screening and assessment process thus ensuring that people accessing the service have Reablement potential. Hitherto, people were supported in Reablement who were very ill, and/or end of life which would have had a negative impact on the performance indicator. The ASCOF measure is made up of performance data from BCC and BHT, for 2016/17 BCC performance was 75% whilst performance for BHT was 68% - both of which have improved from the previous year but are below the national and comparator group performance for 2015/16 of 82.7% and 83.3% respectively. A new system has been put in place to report specifically on outcomes from people who received BCC Reablement service – this will be reported monthly from AIS and direct contact with former service users – this will help to identify any issues affecting the BCC performance and we will be working with BHT colleagues to form a plan for improvement.</p> |
| 10 | Number of delayed transfers of care from hospital which are attributable to social care (Rate per 100,000 population) | Low | Snapshot average | 2.0 | 1.3 | 1.2 | 1.4 | 1.3 | 1.1 | ↓ | Green | <p>2015/16 Benchmarks: 4.8 (national); 6.4 (comparator)</p> <p>Performance has outperformed the target - BCC is top of the comparator group and 10th highest nationally.</p> | <p>This indicator measures the number of people who have a delayed discharge from hospital whilst waiting for a Social Care package, expressed as a rate per 100,000 population. Performance for Buckinghamshire has improved slightly compared to the previous year, which equates places us at the top of the comparator group, and 10th highest nationally. The overall rate of delayed transfers of care in Buckinghamshire, including delays attributable to health services, is 10.2.</p> <p>It is paramount that we maintain our current systems of work and facilitate discharges in a timely manner. There are at times capacity issues in the market which is critical we address to maintain this performance and build on it further.</p> |
| 11 | Proportion of people receiving direct payments | High | Year to date | 33.0% | 37.0% | 38.9% | 40.3% | 41.0% | 40.2% | ↓ | Green | <p>2015/16 Benchmarks: 28.1% (national); 29.8% (comparator)</p> <p>Performance has increased year on year and this has continued during 2016/17. The outturn for this indicator is above target.</p> | <p>Performance is above target at year end and this is the highest outturn we have achieved over the past 4 years. Our performance is above the 2015/16 national and comparator group performance and further benchmarking will be conducted when data is available for 2016/17.</p> <p>Although we have outperformed the target set for 2016/17, the migration of Pohwer Managed accounts over to the new digital solution may have made the end of year outturn may decrease slightly and we will be monitoring this closely over 2017/18.</p> |

- Vulnerable children are safe and protected from harm

Red

► Quality

Red

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------------|---------|----------|----------|----------|----------|----------|-----------------------|--------------------------|---|---|
| 1 % of case audits with a good or outstanding rating | High | Month only (not quarterly data) | 60% | 71% | 83% | 61% | 67% | 50% | ↓ | ■ Red | On average around 66% of audits have been rated as good or outstanding during 2016/17. Since September 2016, performance has been consistently above target (60%) and peaked at 100% in February, however has fallen to 50% during March 2017 (Q4). | There is evidence through audits and other forums such as Family Group Conferences that standards continue to improve. This is being reflected in what is recorded on a child's record as seen in the April Ofsted monitoring visit. The expectations of auditors remain appropriately high and moderations provide relevant challenge to ensure that there is consistency. The recent staff restructures have had an adverse impact on the number of audits completed while staff settle into their new teams and roles. |
| 2 % of social work staff supervisions completed | High | Month only (not quarterly data) | 89% | 67% | 69% | 57% | 56% | 77% | ↑ | ■ Red | The % of supervisions completed has improved throughout the year and the best performance was seen in February 2017 (80%). It remains below target but is on an upward trend. The average % of supervisions completed for the full year 2016/17 is in line with 2015/16 (67% in March 2016). | Improvements in the consistency and quality of supervision continue. The pace of improvement expected will be accelerated through planned development sessions across the service with all managers starting in May 2017. |
| 3 % of EH Panel referrals that meet level 3 threshold | High | Month only (not quarterly data) | 85% | 96% | 82% | 94% | 100% | 83% | ↓ | ● Amber | The overall percentage of families meeting the appropriate Level 3 threshold has decreased to 83% in Q4, compared to 90% for the rest of the financial year (2016-2017). This is due to high volume of families coming through during this period (Q4). | Although the target of 85% was not met, the achievement of 83% remains a positive result given the increased volume of referrals in Q4. |
| 4 % repeat referrals | Low | Month only (not quarterly data) | 25% | 25% | 33% | 36% | 34% | 30% | ↓ | ■ Red | % of repeat referrals has been above the target of 25% since April 2016 and is around 10% higher than other areas. Performance for our Statistical Neighbours is 20%, in the South East it's 24% and in England it's 22%. Improvements can be seen in the latest quarter (Q4) with a reduction to 30% which is the lowest it has been during 2016/17. | System issues have now been resolved, workshops with managers looking at decision making have been held. Managers themselves are being asked to audit repeat referrals which helps managers reflect on their own decision making. Domestic Abuse has been seen as a high repeat referral issue and we are putting in some bespoke training around risk assessments. Managers are now attending the Multi-Agency Risk Assessment Conferences giving better oversight of these high risk cases. Domestic Abuse Triage between agencies has been reintroduced and will be reviewed. A commissioned review by BI&I is also doing a deep dive into repeat referrals. |
| 5 Number of children with a repeat Child Protection Plan | Low | Month only (not quarterly data) | Monitor | 93 | 104 | 109 | 88 | 78 | ↓ | □ Monitor | There has been a reduction again in March 2017 (Q4) in relation to the number of children on repeat CP Plans (78). This is the lowest number of children on repeat plans at month end since April 2015. | The impact of the Strengthening Families conference model introduced in April 2016 continues to evidence its impact on children's outcomes from conference and the auditing of cases where there are repeat plans is contributing to the ongoing decrease in children who are subject to repeat child protection plans. |

► Voice of the child
Red

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------------|---------------------------------------|----------|----------|----------|----------|----------|-----------------------|--------------------------|---|---|
| 6 % children seen during assessment | High | Month only (not quarterly data) | 100% (5% tolerance against target) | 91% | 99% | 95% | 98% | 94% | ↓ | ● Amber | Performance is consistently high in relation to children seen during assessment. There are slight fluctuations month on month however performance generally remains within the tolerance of the 100% target. During March 2017 (Q4), performance (94%) has dipped slightly below the 95% tolerance. 3 assessments make up the difference between 94% and 95%. Note: There is a 5% tolerance against the target of 100% to allow for exceptions for this indicator where a child cannot be seen for legitimate reasons (95-100% = Green, less than 95% = Amber, less than 90% = Red). | There has been significant improvement in this area because we have effectively used data to monitor the performance. Action Continue to use the data to inform on the timeliness of assessments and thereby improve outcomes for children by avoiding delay. |
| 7 % of children in need (not including CP, CLA) seen in the last <u>4 weeks</u> | High | Month only (not quarterly data) | 100% | 72% | 70% | 73% | 69% | 64% | ↓ | ■ Red | On average 70% of children in need have been seen during timescales throughout 2016/17. There has been a further reduction in March 2017 (Q4) to 64% versus 69% in Q3. Note that national guidance allows an additional 2 weeks (6 weeks in total); against this the performance is 74%. | The reduction in the % of children seen is due to an increase in the number of children in the CIN service. The established caseload for the service is 1,100 however the current caseload is 1,350. Action Business plan to go to SMT for additional resources. |
| 8 % of children subject to a Child Protection Plan seen in the last <u>2 weeks</u> | High | Month only (not quarterly data) | 98% | 90% | 85% | 83% | 77% | 81% | ↑ | ■ Red | On average 82% of children on a Child Protection Plan have been seen during timescales throughout 2016/17. Q4 (March 2017) shows a 4% improvement in performance in comparison to Q3 (77%). Note that national guidance allows an additional 2 weeks (4 weeks in total); against this the performance is 95%. After allowing a 5% margin for exceptions where children cannot be seen for legitimate reasons, the RAG against the national guidance would be green. | Timeliness has improved in Q4 however new Safeguarding Service is still bedding in. |
| 9 % Children Looked After seen in the last 6 weeks | High | Month only (not quarterly data) | 100% (5% tolerance against target) | 93% | 90% | 98% | 97% | 94% | ↓ | ● Amber | On average 95% of CLA have been seen within timescales during 2016/17. The performance has dropped slightly below the 5% tolerance for exceptions in March 2017 (Q4). Note: There is a 5% tolerance against the target of 100% to allow for exceptions for this indicator where a child cannot be seen for legitimate reasons (95-100% = Green, less than 95% = Amber, less than 90% = Red). | The number of children looked after has remained steady throughout the year. The publication and use of Social Work Standards has set the targets for good practice. Twice weekly reporting to managers has evidenced children being seen and reviewed within timescales with appropriate actions taken for any children which fall outside expected timescales. These appropriate actions focus on tracking children and countering any drift. |

► Demand
None

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---------|------------|---------------------------------|---------|----------|----------|----------|----------|----------|-----------------------|--------------------------|---|--|
| 10 | | Month only (not quarterly data) | Monitor | 47 | 56 | 32 | 19 | 23 | ↑ | ▫ Monitor | <p>The volume of families progressing to the Early Help Panel (EHP) has increased in Q4 by 25%, compared to the rest of the financial year. The average number of families by month in Q4 is 45, compared to 36 for the rest of the financial year (2016-2017).</p> <p>As anticipated in the previous commentary, Jan 17 had high numbers with 62 families progressing to the Early Help Panel.</p> | <p>The effectiveness of the Early Help Panel continues to benefit from high level partnership engagement.</p> <p>Action Ensure that multi-agency chairs meet regularly to discuss progress.</p> |
| 11 | | Month only (not quarterly data) | Monitor | 1241 | 1349 | 1429 | 1326 | 1487 | ↑ | ▫ Monitor | <p>The number of new contacts remains fairly stable. On average, a similar number of contacts have been received during 2016/17 in comparison to 2015/16. The numbers do fluctuate month on month as can be seen in March 2017 (Q4) which shows an increase versus Q3. This increase can also be seen in referrals and assessments.</p> | <p>The success of the work undertaken with partner agencies to ensure the contacts/ referrals are appropriately being made.</p> <p>Action Continue to use data to monitor this and also to continue positive liaison and direct input into training with partner agencies.</p> |
| 12 | | Month only (not quarterly data) | Monitor | 737 | 722 | 657 | 795 | 889 | ↑ | ▫ Monitor | <p>The volume of referrals has increased throughout the year, by around 30% versus 2015/16. The average number of referrals by month in 2016/17 was 764 compared to 577 during 2015/16 (approx 187 additional referrals each month). Referrals continue to be on an upward trend and experienced an increase again in March 2017 (Q4) versus Q3. An increase was also seen in contacts and assessments during March 2017.</p> | <p>Work undertaken with partner agencies has shown an improved quality of referral and volume has continued to rise. Bespoke training has been undertaken with GP's Health Professionals and School safeguarding leads. This remains under constant review and multi-agency audits have indicated the quality of referrals are appropriate. There is a clear escalation process in place for any concerns and this is a two-way process. The number of escalations has decreased, indicating positive partnership working.</p> |
| 13 | | Month only (not quarterly data) | Monitor | 387 | 455 | 441 | 444 | 530 | ↑ | ▫ Monitor | <p>On average, the number of assessments by month this year has increased but at a lower rate than referrals, by around 15%. This equates to approx. 60 additional assessments each month versus 2015/16. Similar to contacts and referrals, there has also been an increase in assessments during March 2017 (Q4) versus Q3.</p> | <p>Assessment numbers have continued to rise and thresholds for decision making are continually reviewed and challenged where appropriate. Management capacity has been increased to improve timely and robust decision making. The increase in housing estate and demographic changes are also impacting on this increase. Training with managers has been held to consider previous concerns around early closure. This area remains under review.</p> |
| 14 | | Month only (not quarterly data) | Monitor | 1756 | 1711 | 1695 | 1983 | 2334 | ↑ | ▫ Monitor | <p>The numbers of children in need have continued to increase in Q4 (March 2017). There are now 578 more children in need in comparison to March 2016.</p> | <p>The Safeguarding service has capacity for 1100 cases however the current caseload is 1350. The average caseload is 20+ for CIN (establish 14-15) and CP/Court is 21 (establishment 16-17).</p> <p>Action Business plan to go to SMT for additional resources</p> |

| | | | | | | | | | | | | |
|----|---|---------------------------------|---------|-------|-------|-------|-------|-------|---|-----------|--|--|
| 15 | Rate per 10,000 children in need (not including CP, CLA) | Month only (not quarterly data) | Monitor | 147.7 | 143.9 | 142.6 | 164.4 | 193.5 | ↑ | ▫ Monitor | The rate of children in need in Bucks has increased by 45.8 since March 2016 to 193.5 in March 2017 (Q4). | The Safeguarding service has capacity for 1100 cases however the current caseload is 1350. The average caseload is 20+ for CIN (establish 14-15) and CP/Court is 21 (establishment 16-17). Action Business plan to go to SMT for additional resources. |
| 16 | Number of children subject to a Child Protection Plan | Month only (not quarterly data) | Monitor | 446 | 502 | 535 | 509 | 564 | ↑ | ▫ Monitor | There were 118 more children on Child Protection Plans at the end of March 2017 (Q4) compared to March 2016 and 55 more in comparison to Q3. | The Safeguarding service has capacity for 1100 cases however the current caseload is 1350. The average caseload is 20+ for CIN (establish 14-15) and CP/Court is 21 (establishment 16-17). Action Business plan to go to SMT for additional resources. |
| 17 | Rate per 10,000 children subject to a Child Protection Plan | Month only (not quarterly data) | Monitor | 37.5 | 42.2 | 45.0 | 42.2 | 46.7 | ↑ | ▫ Monitor | The rate of children on a Child Protection Plan has increased by 9.2 since March 2016 to 46.7 in March 2017 (Q4) which is above the South East (42.1), England (43.1) and our Statistical Neighbours (36.6). | The Safeguarding service has capacity for 1100 cases however the current caseload is 1350. The average caseload is 20+ for CIN (establish 14-15) and CP/Court is 21 (establishment 16-17). Action Business plan to go to SMT for additional resources. |
| 18 | Total number of CLA | Month only (not quarterly data) | Monitor | 463 | 435 | 442 | 454 | 458 | ↑ | ▫ Monitor | There were 5 fewer children looked after at the end of March 2017 (Q4) compared to March 2016 and 4 more in comparison to Q3. | |
| 19 | Rate per 10,000 children looked after | Month only (not quarterly data) | Monitor | 38.9 | 36.6 | 37.2 | 37.6 | 38.0 | ↑ | ▫ Monitor | The rate of children looked after has remained fairly stable since March 2016 and is in line with our Statistical Neighbours (38.1). The rates in the South East (52.0) and England (60.0) are particularly high in comparison to Bucks. | |
| 20 | Number of Care Proceedings | Month only (not quarterly data) | Monitor | | 89 | 82 | 96 | 109 | ↑ | ▫ Monitor | There is an upward trend in relation to the number of care proceedings in progress. There have been over a 100 in progress for the last 3 months (January, February and March). | Managers from service and our legal department meet regularly to monitor all children subject to care proceedings. Increase partly due to case law where children come into our care under voluntary agreements. Parents and the local authority need to be in the court arena to agree permanent plans for the children. Action Monthly meetings with legal to track progress of children in care proceedings Legal Workspace going live in May 2017 which will allow tighter monitoring of timescales. |
| 21 | Number of new Care Proceedings | Month only (not quarterly data) | Monitor | | 7 | 7 | 15 | 8 | ↓ | ▫ Monitor | There was a reduction in the number of new care proceedings during March 2017 (Q4), however in total there were 36 new care proceedings between January- March versus 29 between October-December. | Managers from service and our legal department meet regularly to monitor all children subject to care proceedings. Increase partly due to case law where children come into our care under a voluntary agreement. Parents and the local authority need to be in the court arena to agree permanent plans for the children. Action Monthly meetings with legal to track progress of children in care proceedings Legal Workspace going live in May 2017 which will allow tighter monitoring of timescales. |

► Reviewing children's Plans
Green

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------------|--------|----------|----------|----------|----------|----------|-----------------------|--------------------------|---|--|
| 22 % of children in need reviewed in last 3 months (not including Child Protection, Children Looked After) | High | Month only (not quarterly data) | 85% | 64% | 60% | 55% | 76% | 86% | ↑ | ★ Green | This measure shows the % of review meetings held during the month that were held on time. The due date for reviews on LCS (Childrens Social Care system) has now been changed to reflect the 3 month review cycle rather than 6 weeks. The predicted improvement in March 2017 (Q4) as new reviews (with 3 month due dates) filter through can be seen (86%). | Despite the increase in children in the Safeguarding Service, the performance in terms of timeliness of reviews has improved. Nearly all CIN cases are now within the CIN part of the Safeguarding Service following the restructure. Action Continue to monitor |
| 23 % of Child Protection Plans reviewed in timescales | High | Month only (not quarterly data) | 95% | 94% | 97% | 97% | 91% | 96% | ↑ | ★ Green | Positive performance can be seen across 2016/17 in relation to the timeliness of child protection reviews, with on average 96% being held on time. This is consistent with the performance during 2015/16. In March 2017 (Q4) there was an improvement to 96% versus Q3 (91%) and it is now above the target of 95%. | The service performance in this area is high with good systems in place to avoid cancellations and unnecessary re-bookings where possible. |
| 24 % of CLA (Children Looked After) have their reviews completed on time | High | Month only (not quarterly data) | 95% | 95% | 94% | 97% | 100% | 95% | ↓ | ★ Green | On average 97% of looked after children's reviews were held on time during 2016/17 compared to 91% in 2015/16. In March 2017 (Q4), performance is on target at 95%. | The permanent team established in 2016 continues to deliver good performance with consistency being achieved in standards and timeliness. |

► Timeliness of the journey of the child

Red

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------------|------------------------------------|----------|----------|----------|----------|----------|-----------------------|--------------------------|--|---|
| 25 % of contacts received actioned within 24 hours (1 working day) | High | Month only (not quarterly data) | 90% | 71% | 76% | 62% | 79% | 79% | → | ■ Red | Performance around the timeliness of contacts has remained high since December 2016 (Q3) in comparison to previous months in the year, peaking at 84% in January 2017. In March 2017 (Q4), the performance is consistent with that of Q3 (79%) however it continues to fall below target. | Review and analysis of this work continues as does system review with IT colleagues to assist in process improvements. On site IT support weekly is also aiding practice improvements. Increase in stability and availability of work force has also improved. Training of staff around systems and HR management has complimented the stability of the work force. Managers have liaised with Bucks CC Contact Centre to share good practice to continue to improve performance. |
| 26 % referrals completed within 3 working days | High | Month only (not quarterly data) | 100% | 74% | 74% | 85% | 92% | 72% | ↓ | ■ Red | After high performance at 92% for December, this has led to an increase in MASH enquiries however delay in return of information by partners has led to a downturn in timescales of referrals being completed in 3 days. Managers have been challenged to ensure decisions are made in a timely way and partners challenged about delays. | There is now a full complement of Social Workers and this has led to an increase in MASH enquiries however delay in return of information by partners has led to a downturn in timescales of referrals being completed in 3 days. Managers have been challenged to ensure decisions are made in a timely way and partners challenged about delays. |
| 27 % assessments completed in 45 working days | High | Month only (not quarterly data) | 100% (5% tolerance against target) | 92% | 93% | 93% | 96% | 89% | ↓ | ■ Red | Although our performance in relation to the timeliness of assessments has dipped in March 2017 (Q4), we generally perform well in this area with on average 93% of assessments completed within 45 days during 2016/17. This is well above the performance of our Statistical Neighbours (86%), the South East (77%) and England (83%). Note: There is a 5% tolerance against the target of 100% to allow for exceptions for this indicator (95-100% = Green, less than 95% = Amber, less than 90% = Red). | On the whole timescales have remained steady with a first dip in 6 months occurring in March 2017. This has been as a result of the increase in the number of new assessments. There has now been a temporary increase in staff to allow capacity for the increase in work. |
| 28 % ICPC (Initial Child Protection Conference) held within 15 working days of the strategy discussion | High | Month only (not quarterly data) | 100% (5% tolerance against target) | 56% | 79% | 80% | 77% | 55% | ↓ | ■ Red | There has been a notable improvement in the timeliness of ICPCs across the year in comparison to March 2016. As at December 2016 (Q3) we were in line with the national average (77%), performing above the South East (72%) but were below our Statistical Neighbours (82%). Since then, performance has taken a significant fall to 55%. Note: There is a 5% tolerance against the target of 100% to allow for exceptions for this indicator (95-100% = Green, less than 95% = Amber, less than 90% = Red). | PIMS (Practice Improvement Managers) and CP Conference Managers are working together to address these issues. There is a 3 month forward facing plan in place to consider and address the issues. There has been a shortage of available Managers to monitor and drive this practice forward. An increase in available managers and the targeted piece of work should improve this timescale. |

► Sufficiency of children's placements
Amber

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|---------------------------------|--------|----------|----------|----------|----------|----------|-----------------------|--------------------------|---|---|
| 29 % of CLA (Children Looked After) placed in county | High | Month only (not quarterly data) | 55% | 48% | 47% | 49% | 52% | 51% | ↓ | ● Amber | There has been an improvement in the % of our children who are placed in-county since Q1 (47%) and therefore we are now more in line with our Statistical Neighbours (54%), however remain below the South East (63%) and England (74%). | <p>This is an area of concern and requires an increase in the amount of carers accessible to children in Buckinghamshire. There has been greater utilisation of inhouse provision and targeted use of IFA (Independent Fostering Agency) fostering placements.</p> <p>There are a number of children's records within LCS which are not reflecting their location. When these children's records are amended to reflect their locality the performance rises to 60%. New entrants to care during 2016-17 show a better performance level of 65% placed within Buckinghamshire.</p> <p>Action: To create a strategic partnership with local IFAs to utilise their Bucks carers more effectively.</p> |
| 30 % of CLA are placed no more than 20 miles away from home | High | Month only (not quarterly data) | 50% | 43% | 39% | 41% | 39% | 38% | ↓ | ■ Red | The % of children placed within 20 miles from their home address has declined since March 2016 (where it was 43%). Our performance around this is significantly below our Statistical Neighbours (62%), the South East (63%) and England (74%). | <p>The increase in the use of Bucks based carers has meant that children have been placed in Bucks localities which are further than 20 miles from their home. The strategic partnership with IFAs (Independent Fostering Agencies) will improve this target in the next periods.</p> <p>There are a number of children's records within LCS which are not reflecting their location. When these children's records are amended to reflect their locality the performance rises to 57%.</p> <p>Action: To monitor the effectiveness of the strategic partnership with Independent Foster Agencies.</p> |
| 31 % of children in foster care placed with a BCC carer | High | Month only (not quarterly data) | 24% | 30% | 30% | 29% | 29% | 29% | → | ★ Green | The % of children in foster care placed with in-house carers has remained level at around 30% throughout the year. | <p>There has been an increase use of in-house foster carers in line with the increase in the CLA population. There has been a number of children in connected persons placements who have reached 18 years old in the past months which has reduced the number of available Bucks placements.</p> <p>From 1st January to 31st March 2017 23 children entered care and were placed with foster carers. 61% were placed with BCC foster carers.</p> <p>Action: To maximise the full capacity of available foster carers.</p> |

| | | | | | | | | | | | | |
|----|--|-----|---------------------------------|---------|-----|-----|-----|-----|-----|---|-----------|--|
| 32 | Number of children in residential placements | Low | Month only (not quarterly data) | Monitor | 83 | 73 | 52 | 55 | 49 | ↓ | ▫ Monitor | There were 34 less children in residential care at the end of March 2017 (Q4) compared to March 2016. Children continue to move away from residential children's homes, usually into supported living post-16. Action: To continue to monitor the use of children's homes and report to the service directors any upward trends. |
| 33 | % of children in residential placements | Low | Month only (not quarterly data) | Monitor | 18% | 17% | 12% | 12% | 11% | ↓ | ▫ Monitor | 11% of all looked after children were placed in residential care at the end of March 2017 (Q4) in comparison to March 2016 (18%). We are aiming to have a maximum of 10% of children living in residential care. This requires good gatekeeping and discharge planning Action: To continue to monitor. |

► Permanency for children
Red

| Measure | Good to be | Data period | Target | Mar 2016 | Jun 2016 | Sep 2016 | Dec 2016 | Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action | |
|---------|---|-------------|---------------------------|----------|----------|----------|----------|----------|-----------------------|--------------------------|-------------------------|---|--|
| 34 | Average time (in days) between Placement Order and matching to an adoptive family | Low | Average, rolling year | 122 | 192 | 181 | 145 | 226 | 208 | ↓ | ■ Red | As at March 2017 (Q4), we are performing better than the average for England (226 days 2013-2016) and the South East (219 days), but not as well as our Statistical Neighbours (172.8 days). Nationally performance is below the recommended national target of 122 days. | Although there will always be a number of 'hard to place' children who take longer to secure placements, Bucks recent performance figures have been negatively impacted upon by the successful placement over the last year of 3 children - 2 siblings, male(4) and female (7), and single female (6) all of whom had experienced adoption disruptions prior to adoption order. The distance in days between entering care to placement with their current adoptive families is 1517, 1526 and 1625 days. The figures below give an indication of how those exception cases have had an adverse effect on the timescales but we can evidence the reasons for the delay and why adoption was still considered to be the right plan. If we remove the 3 exception cases the figures improve significantly with performance lower than the national target: Bucks National scorecard average 2013-16: 353 Bucks performance 2016/17: 87 England average 2013-16: 226 |
| 35 | Number of adoptions (financial year) | High | Cumulative (year to date) | Monitor | 38 | 13 | 20 | 34 | 38 | ↑ | ▫ Monitor | 38 children have been adopted during 2016/17 which is the same as 2015/16 (38). This is above the Statistical Neighbour average (36). | Nationally there has been a reduced number of children who have become subject to Placement Orders, with SGO's increasing. This year's figure reflects the improvement drive not only to progress adoption orders of those children placed this year, but also to progress AO's of those children previously placed where there has been delayed permanence. |

- Vulnerable children are supported to fulfil their potential

Amber

- Improving Education Standards for Disadvantaged Pupils

Red

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | 2013 | 2014 | 2015 | 2016 | Trend on latest result | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------|---------|------------------------------|------|------|------|------|------------------------|--------------------------|--|---|
| 1 Early Years Foundation Stage Profile - % of disadvantaged pupils achieving a good level of development | High | Annual outturn only | Monitor | 49% | 32% | 42% | 49% | 53% | ↑ | ▫ Monitor | DfE does not publish national or regional results for this measure. | Benchmarking data is not yet available from the Department for Education. Buckinghamshire results have increased by 4%, and the gap in performance between disadvantaged pupils and others has improved by 3%. Action: The BLT (Buckinghamshire Learning Trust) has devised a package of support and challenge to schools which have been identified with lower achievement for disadvantaged pupils compared to others. The BLT also works to challenge and support leaders and governors of all schools to best utilise their pupil premium funding to raise the educational attainment of their disadvantaged pupils. |
| 2 Year 1 Phonics - % of disadvantaged pupils reaching the expected standard | High | Annual outturn only | Monitor | 61% | 48% | 51% | 61% | 66% | ↑ | ▫ Monitor | DfE/Ofsted measure performance of disadvantaged children compared to non disadvantaged children nationally (83%) and the gaps in performance (see below). We continue to monitor the outcomes for our disadvantaged children to ensure that their outcomes are improving to be in line with similar pupils nationally. Nationally 70% of disadvantaged children achieved this measure. | Results for disadvantaged pupils in the Year 1 phonics screening check have improved, but their results are still below the national level. Action: The Bucks Learning Trust (BLT) has devised a package of support and challenge to schools which have been identified with lower achievement for disadvantaged pupils compared to others. The BLT also works to challenge and support leaders and governors of all schools to best utilise their pupil premium funding to raise the educational attainment of their disadvantaged pupils. |

| | | | | | | | | | | | | | |
|---|--|-----|---------------------|---------|-----|-----|-----|-----|------|---|-----------|--|--|
| 3 | Early Years Foundation Stage Profile - 'good level of development' gap between disadvantaged pupils % and others % | Low | Annual outturn only | Monitor | 21% | 25% | 24% | 21% | 18% | ↓ | □ Monitor | DfE does not publish national or regional results for this measure. | Please see other sections on the performance of disadvantaged pupils at the Early Years Foundation Stage. |
| 4 | Year 1 Phonics - expected standard gap between disadvantaged pupils % and others % | Low | Annual outturn only | 13% | 18% | 20% | 23% | 18% | 16% | ↓ | ■ Red | The national gap in 2016 is 13%, and our target is to be at or below national gap. Buckinghamshire results have been improving at a faster rate than national over the last 3 years - the Buckinghamshire gap has improved by 7 percentage points compared to a national improvement of 2 percentage points. | Please see earlier section on the performance of disadvantaged pupils at the Year 1 phonics screening check. |
| 5 | Key Stage 2 - expected standard (reading, writing & maths) gap between disadvantaged pupils % and others % | Low | Annual outturn only | 22% | N/A | N/A | N/A | N/A | 23% | ↑ | ● Amber | New assessments were introduced in 2016, so previous results are not comparable. The National gap in 2016 is 22%, and our target is to be at or below national gap. | Please see earlier section on the performance of disadvantaged pupils. |
| 6 | Key Stage 4 - Attainment 8 gap between disadvantaged pupils % and others % | Low | Annual outturn only | 12.3 | N/A | N/A | N/A | N/A | 18.4 | ↑ | ■ Red | New accountability measures were introduced in 2016, so previous results are not comparable. The National gap in 2016 is 12.3, and our target is to be at or below national gap. | Action: The Bucks Learning Trust (BLT) provides a package of support and challenge to schools which have been identified with lower achievement for disadvantaged pupils compared to others. The BLT also works to challenge and support leaders and governors of all schools to best utilise their pupil premium funding to raise the educational attainment of their disadvantaged pupils. |

► Improving Education Standards for SEND Pupils
Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | 2013 | 2014 | 2015 | 2016 | Trend on latest result | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|---------------------|--------|------------------------------------|------|------|------|----------|------------------------------|--------------------------------|--|---|
| 7 Early Years Foundation Stage Profile - % of pupils with a statement of SEN or EHCP achieving a good level of development | High | Annual outturn only | 4% | 4% | 2% | 4% | 4% | see note | | □ None | Our target is to be in line with or above the national average, which is 4% in 2016. The DfE will not publish Buckinghamshire results this year to protect confidentiality as the cohort involved is so small. | The DfE have not released results on Early Years' Foundation Stage Profile for SEN pupils as numbers are so small. |
| 8 Year 1 Phonics - % of pupils with a statement of SEN or EHCP reaching the expected standard | High | Annual outturn only | 18% | 21% | 14% | 21% | 21% | 18% | ↓ | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be in line with or above the national average, which is 18% in 2016. | Results are positive compared to target. Cohorts are small and needs are individual. Action: EHCPs (Education Health Care Plans) detail the individual targets and progress against these. EHCPs are regularly reviewed. |
| 9 Key Stage 1 - % of pupils with a statement of SEN or EHCP reaching the expected standard in reading | High | Annual outturn only | 14% | N/A | N/A | N/A | N/A | 14% | → | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be in line with or above the national average, which is 14% in 2016. | Results are positive compared to target. Cohorts are small and needs are individual. Action: EHCPs (Education Health Care Plans) detail the individual targets and progress against these. EHCPs are regularly reviewed. |
| 10 Key Stage 1 - % of pupils with a statement of SEN or EHCP reaching the expected standard in writing | High | Annual outturn only | 9% | N/A | N/A | N/A | N/A | 12% | ↑ | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be in line with or above the national average, which is 9% in 2016. | Results are positive compared to target. Cohorts are small and needs are individual. Action: EHCPs (Education Health Care Plans) detail the individual targets and progress against these. EHCPs are regularly reviewed. |
| 11 Key Stage 1 - % of pupils with a statement of SEN or EHCP reaching the expected standard in mathematics | High | Annual outturn only | 14% | N/A | N/A | N/A | N/A | 15% | ↑ | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be in line with or above the national average, which is 14% in 2016. | Results are positive compared to target. Cohorts are small and needs are individual. Action: EHCPs (Education Health Care Plans) detail the individual targets and progress against these. EHCPs are regularly reviewed. |
| 12 Key Stage 2 - % of pupils with a statement of SEN or EHCP reaching the expected standard in reading, writing and mathematics | High | Annual outturn only | 7% | N/A | N/A | N/A | N/A | 9% | ↑ | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be in line with or above the national average, which is 7% in 2016. | Results are positive compared to target. Cohorts are small and needs are individual. Action: EHCPs (Education Health Care Plans) detail the individual targets and progress against these. EHCPs are regularly reviewed. |
| 13 Key Stage 4 - average Attainment 8 score for pupils with a statement of SEN or EHCP | High | Annual outturn only | 17.0 | N/A | N/A | N/A | N/A | 19.9 | ↑ | ★ Green | New accountability measures were introduced in 2016, so previous results are not comparable. Our target is to be in line with or above the national average, which is 17.0 in 2016. | Results are positive compared to target. Cohorts are small and needs are individual. Action: EHCPs (Education Health Care Plans) detail the individual targets and progress against these. EHCPs are regularly reviewed. |

► Buckinghamshire LAC pupils including those out of the authority

Amber

| | Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | 2013 | 2014 | 2015 | 2016 | Trend on latest result | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|----|--|------------|---------------------|--------|------------------------------|------|------|------|------|------------------------|--------------------------|---|---|
| 14 | Key stage 2 % Looked After Children (LAC) reaching the expected standard in reading, writing and maths (Buckinghamshire LAC pupils including those out of the authority) | High | Annual outturn only | 56% | N/A | N/A | N/A | N/A | 35% | ↓ | ● Amber | 35% of the group reach the expected standard. The LAC cohort is a small group of 24 pupils who attend schools in several counties. 10 pupils were in Bucks schools. The National benchmark for LAC is 25.7%, Bucks CLA exceed this value. | This result is lower than we had hoped due to lower performance in the Maths element. Action: The Virtual School is working hard with schools and tutors to support pupils with the harder maths paper. |
| 15 | KS2: % meeting expected standard in Reading (Buckinghamshire Looked After Children pupils including those out of the authority) | High | Annual outturn only | 72% | N/A | N/A | N/A | N/A | 75% | ↑ | ★ Green | Annual measure, no new data to report. The rate is aligned with the Bucks pupil average (72%). The National CLA rare is 41%, Bucks is significantly above this value. | Termly education review meetings ensure progress is closely monitored and supported. |
| 16 | KS2: % meeting expected standard in Writing | High | Annual outturn only | 71% | N/A | N/A | N/A | N/A | 64% | ↓ | ★ Green | This rate is close to the all Bucks pupils' rate (71%). The National CLA rate is 45.9%, Bucks is significantly above this value. | Termly education review meetings ensure progress is closely monitored and supported. |
| 17 | KS2 :% meeting expected standards in Maths (Buckinghamshire Looked After Children (LAC) pupils including those out of the authority) | High | Annual outturn only | 72% | N/A | N/A | N/A | N/A | 50% | ↓ | ● Amber | Rate is below the level of all Bucks pupils (72%). The national CLA rate is 42%,Bucks has a higher value. | The maths paper was seen to be particularly hard this year. Action: The Virtual School is putting in extra support to help LAC pupils. |

• Buckinghamshire young people achieve excellent results throughout their education

Amber

► School Ofsted Inspections

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|----------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|---|---|
| 18 % of pupils attending schools rated good and outstanding | High | Current quarter only | 90% | 83% | 87% | 87% | 88% | 88% | → | ● Amber | Bucks performs slightly better than the latest available national rate (31/08/2016) = 86% | The percentage of pupils attending good and outstanding schools in Buckinghamshire continues to rise and is above the national level. Action: The Bucks Learning Trust (BLT) are commissioned to provide challenge and support for any school deemed as Requires Improvement or Inadequate by Ofsted. There is also targeted support for any school identified as 'at risk' of dropping into these Ofsted categories. |
| 19 % of schools rated good and outstanding | High | Current quarter only | 90% | 88% | 90% | 90% | 93% | 92% | ↓ | ★ Green | Latest available national rate (31/03/2017) = 89%. Buckinghamshire currently has 18 schools that have been inspected and judged as less than good - 12 require improvements and 6 are judged as inadequate. | The percentage of good and outstanding schools in Buckinghamshire continues to be above targets and above the national level. Results have decreased slightly this quarter. Action: The Bucks Learning Trust (BLT) are commissioned to provide challenge and support for any school deemed as "Requires Improvement" or inadequate by Ofsted. There is also targeted support for any school identified as 'at risk' of dropping into an Ofsted category. |

► Improving Education Standards for All Pupils - Attainment

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | 2013 | 2014 | 2015 | 2016 | Trend on latest result | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|---------------------|--------|------------------------------|------|------|------|------|------------------------|--------------------------|---|--|
| 20 Early Years Foundation Stage Profile - % of pupils achieving a good level of development | High | Annual outturn only | 69% | 68% | 55% | 64% | 68% | 71% | ↑ | ★ Green | Target is to be at or above national average. In 2016 Buckinghamshire results increased at the same rate as national results. England = 69% South East = 73% | Results of pupils in the Early Years Foundation Stage in Buckinghamshire are above national results Action: The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |
| 21 Year 1 Phonics - % of pupils reaching the expected standard | High | Annual outturn only | 81% | 77% | 66% | 72% | 77% | 81% | ↑ | ★ Green | Buckinghamshire results were in line with national averages for the first time in 2015, and results have since increased at the same rate as national. England (state funded schools) = 81% South East (state funded schools) = 81% | Results of pupils in the year 1 phonics screening check in Buckinghamshire have increased year on year and are in line with national results Action: The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |

| | | | | | | | | | | | | | |
|----|--|------|---------------------|------------------------------|-----|-----|-----|-----|------|---|---------|--|--|
| 22 | Key Stage 1 - % of pupils reaching the expected standard in reading | High | Annual outturn only | 74% | N/A | N/A | N/A | N/A | 77% | ↑ | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be at or above national averages - which is currently being achieved. England (state funded schools) = 74% South East (state funded schools) = 76% | Results of pupils in KS1 reading in Buckinghamshire are above national results. Action: The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |
| 23 | Key Stage 1 - % of pupils reaching the expected standard in writing | High | Annual outturn only | 65% | N/A | N/A | N/A | N/A | 65% | → | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be at or above national averages. Bucks is currently aligned with national rates. England (state funded schools) = 65% South East (state funded schools) = 67% | Results of pupils in KS1 writing in Buckinghamshire are in line with national results. Action: The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |
| 24 | Key Stage 1 - % of pupils reaching the expected standard in mathematics | High | Annual outturn only | 73% | N/A | N/A | N/A | N/A | 72% | ↓ | ● Amber | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be at or above national averages. England (state funded schools) = 73% South East (state funded schools) = 74% | Results of pupils in KS1 mathematics in Buckinghamshire are slightly below national results. Action: KS1 assessment was based on teacher assessment, informed by tests. This was the first year of the new system and there has been little national guidance. The Bucks Learning Trust (BLT) will continue to support teacher assessment through training events for moderators and standardisation meetings to ensure that the interim assessment framework has been applied consistently across moderated schools. The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |
| 25 | Key Stage 2 - % of pupils reaching the expected standard in reading, writing and mathematics | High | Annual outturn only | 53% | N/A | N/A | N/A | N/A | 56% | ↑ | ★ Green | New assessments were introduced in 2016, so previous results are not comparable. Our target is to be at or above national averages, which is currently achieved. England (state funded schools) = 53% South East (state funded schools) = 54% | Results are above national level/average. Action: The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |
| 26 | Key Stage 4 - average Attainment 8 score | High | Annual outturn only | To be above national average | N/A | N/A | N/A | N/A | 55.4 | | ★ Green | New accountability measures were introduced in 2016, so previous results are not available or comparable. | Results are above national level/average. Action: The focus remains on improving standards for underachieving groups and disadvantaged pupils, which will also improve overall attainment. |



- Achieving best value for money and delivering services as efficiently as possible

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|---------------------------|------------------------|------------------------------|------------------|------------------|--------------------|--------------------|-----------------------|--------------------------|---|--|
| 1 Revenue expenditure keeps to budget (Best to have no under or overspends) | Breakeven | Year end forecast | Breakeven | £0.36m Overspend | £285k Underspend | £647k Underspend | £2.667m Underspend | £6.020m underspend | ↑ | ★ Green | Although the Portfolio budgets are overspent, our contingency budgets (held to mitigate the risk of uncertainties and overspends), and the change in Minimum Revenue Provision (MRP) policy have resulted in significant underspends in non-Portfolio budgets, which more than offset the Portfolio position. | |
| 2 Released capital expenditure keeps to budget (Best to spend allocated budget) | Breakeven | Year end forecast | Breakeven | £22.6m Slippage | £1.441m Slippage | £1.891m Slippage | £4.546m Slippage | £13.923m Slippage | ↑ | ★ Green | Slippage reported in the capital programme has significantly reduced, both in value and as a percentage of the programme in comparison to previous years due to the introduction of new monitoring and budget release processes. | |
| 3 Reduce revenue through service efficiencies (Higher efficiency savings are better) | High | Year end forecast | £17.015m | | £12.465m | £12.465m | £12.465m | £12.465m | → | ★ Green | Details of portfolio outturns and non- / over delivery of targets are contained within the body of the report. | All savings targets have been delivered. |
| 4 Increase revenue through additional income (Higher income is better) | High | Year end forecast | £1.862m | | £1.862m | £1.802m | £1.862m | £1.862m | → | ★ Green | Details of portfolio outturns and non- / over delivery of targets are contained within the body of the report. | |
| 5 Reduce the total cost of the workforce (Lower costs are better) | Low | Cumulative (year to date) | Monitor | £81.734m | £20.459m | £41.528m | £61.864m | £82.099m | ↑ | □ Monitor | Agency costs have continued to fall (a further 3% from Q3), overall spend has reduced by over £500k since Q1. Salary costs typically increase in Q2 due to CBP adjustments, followed by a slight decrease over the following quarters, unless there is a major change in headcount. | Note Q3 figure is different to that published on the Q3 report which did not include Adult Learning and Deputy Registrar salaries. The Q3 figure shown on this report is updated to reflect this omission. Continue to monitor. |
| 6 Remain in the bottom 50% of County Councils for level of council tax | Low | Current position | Bottom 50% of Counties | 12th of 27 | 12th of 27 | 12th of 27 | 12th of 27 | 12th of 27 | → | ★ Green | Council Tax levels were set in February 2016, and we remain in the lower 50% of all County Councils. | |

- Protecting our high quality natural environment

NB: This RAG is made up of measures from the 'protecting our high quality natural environment' sections found in the leader, planning & environment and transportation portfolios

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------|-------------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|--|
| 1 % of HS2 applications responded to within deadline of 28 days | Green | Quarterly | 70.0% | n/a | n/a | n/a | n/a | n/a | | ★ Green | No benchmark data available as this is a specific project. | HS2 Ltd have not yet submitted any planning applications to our team since Royal Assent was granted to HS2 works in Feb 2017. |
| 2 Management of the FCCB EFW Contract for long term, cost effective waste disposal for Buckinghamshire's residual MSW | Green | Current month only | Green | n/a | Green | Green | Green | Green | → | ★ Green | No benchmark data available as this is a specific project. | The EFW plant came online in June 2016 and is performing better than expected in terms of tonnage throughput and energy output. |
| 3 Energy produced for export to National Grid by EFW facility. Measure is Mega Watt Hours (MWH) of electricity produced each month. | Green | Cumulative (year to date) | 134,620 mwh | n/a | 5,438 mwh | 44,064 mwh | 117,479 mwh | 174,947 mwh | ↑ | ★ Green | No benchmark data available as this is a specific project. | The Energy from Waste (EFW) plant came online in June 2016 and is performing better than expected in terms of energy output. Furthermore, our EFW plant continues to exceed anticipated performance in terms of waste processed and energy produced (approx. 200mwh) which equates to powering around 44,000 households. |
| 4 Increase re-use, recycling, composting and diversion from landfill for waste delivered at our Household Waste Recycling Centres (HWRCs) across Buckinghamshire | Green | Cumulative (year to date) | 71.0% | 73.5% | 78.5% | 76.7% | 76.0% | 74.2% | ↓ | ★ Green | See narrative column | The volume of recyclable waste is increasing at the Household Recycling Centres (HRCs). |
| 5 Country Park Visitor Numbers 2016/17 | Green | Cumulative (year to date) | 908,166 | 908,166 | 271,838 | 590,018 | 790,239 | 1,000,058 | ↑ | ★ Green | See narrative column | Visitor park numbers are consistently increasing by 5-10% pa with visitor numbers nearly 11% ahead of 2015/16 figures supported by the recent extension to the car parking facilities. By the end of the year visitor numbers reached over 1m. |

| | | | | | | | | | | | | | |
|----|---|-------|---------------------------|-------|--------------|--------|-------|-------|--------|---|---------|--|---|
| 6 | % of County Matter applications determined within the defined statutory period | Green | Quarterly average | 63.0% | 76.0% | 76.0% | 67.7% | 74.4% | 100.0% | ↑ | ★ Green | Statutory target 60% UK | Performance of the planning team has significantly improved over the last two quarters in response to a key focus on speed of decision making and as a result of vacant posts being filled. However, risk exists regarding a new 'quality' measure being introduced by Central Government that relates to % of planning refusals overturned at appeal |
| 7 | % of Strategic Access planning consultations response to within deadline | Green | Cumulative (year to date) | 90.0% | 82.0% | 67.7% | 81.9% | 84.5% | 88.0% | ↑ | ★ Green | No benchmark data available as this is a specific project. | Targets were achieved and the reason for the dip in Q1 was due to significant increase in number of planning consultations due to volume of development in the county. This increase in demand of has for time being returned to levels that can be managed by existing resource. |
| 8 | % of Environment (ecology) planning consultations responded to within 21 days | Green | Cumulative (year to date) | 95.0% | not provided | 84.0% | 66.7% | 80.2% | 83.0% | ↑ | ● Amber | No benchmark data available as this is a specific project. | Pressures continue to exist in this area in relation to responding to forthcoming HS2 consultations. |
| 9 | % of BMERC planning consultations responded to within 21 days | Green | Cumulative (year to date) | 95.0% | 100.0% | 100.0% | 98.3% | 98.1% | 100.0% | ↑ | ★ Green | No benchmark data available as this is a specific project. | Targets were achieved . |
| 10 | % of Archaeology planning consultations responded to within 21 days | Green | Cumulative (year to date) | 95.0% | not provided | 98.0% | 97.6% | 98.2% | 92.0% | ↓ | ● Amber | No benchmark data available as this is a specific project. | Although slight dip in Q4 performance we envisage performance to return to target by Q1 17/18. |
| 11 | % of Flood Management planning application responded to within 21 days of receipt | Green | Cumulative (year to date) | 70.0% | 100.0% | 92.1% | 91.8% | 90.3% | 92.5% | ↑ | ★ Green | No benchmark data available as this is a specific project. | The new Sustainable Drainage Team is now fully resourced and associated responses on planning advice on Majors planning applications consultations is all going to plan. |



- Improved condition of roads and footpaths

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|---|------------|---------------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|--|
| 1 The target for the delivery of the Capital Maintenance Programme is met | Green | Cumulative (year to date) | 90.0% | 96.0% | 100.0% | 97.0% | 92.0% | 94.0% | ↑ | ★ Green | No benchmark data available as this is a specific project. | The Capital Maintenance Program (CMP) involves resurfacing roads. Targets were met by the year end. |
| 2 The target for the delivery of Cyclic Maintenance Programme (gullies) is met | Green | Cumulative (year to date) | 97.0% | 100.0% | 100.0% | 100.0% | 100.0% | 94.0% | ↓ | ● Amber | No benchmark data available as this is a specific project. | Largely delivered but issues with aged plant. New machines ordered and expected delivery imminent (Q1). |
| 3 The target for making safe Category 1 pot hole defects, per published definition, by the next working day is met | Green | Cumulative (year to date) | 98.0% | 98.4% | 99.7% | 99.8% | 99.1% | 95.1% | ↓ | ● Amber | No benchmark data available as this is a specific project. | The results reflect an increase in number of repairs reported. |
| 4 The target for BCC Street Lights working order across the network is met | Green | Cumulative (year to date) | 95.0% | 97.9% | 97.9% | 97.0% | 97.4% | 96.7% | ↓ | ★ Green | No benchmark data available as this is a specific project. | Results reported are better than target for year in spite of an aged stock that requires significant investment. |
| 5 The compliance target for inspected transport repairs meeting agreed quality requirements is met | Green | Cumulative (year to date) | 95.0% | 94.2% | 86.3% | 93.3% | 92.0% | 90.1% | ↓ | ● Amber | No benchmark data available as this is a specific project. | Joint audit of performance continues and performance monitored at a senior level. |
| 6 The 28 day target for responding to customer requests, including freedom of information enquiries, is met (28 days) | Green | Cumulative (year to date) | 90.0% | 90.0% | 88.5% | 89.5% | 90.7% | 93.7% | ↑ | ★ Green | No benchmark data available as this is a specific project. | Continue to respond to customer enquiries within time and continue to improve. |

- Improved road and rail connectivity

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|--------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|---|
| 7 | | | | | | | | | | | | |
| The production of focused transport strategies for specific areas based on proposed growth, identifying appropriate solutions and funding requirements | Green | Current month only | Green | Green | Green | Amber | Amber | Green | ↑ | ★ Green | No benchmark data available as this is a specific project. | All transport evidence to support Local Plans are on time. Aylesbury and Buckingham Transport Strategies have been adopted by BCC. Work testing the impact of Chiltern and South Bucks preferred housing locations and possible mitigation measures is nearing completion. |
| 8 | | | | | | | | | | | | |
| The delivery of the High Wycombe Town Centre Master Plan alternative route, gas work link and SEP projects which include Oxford Road, Cressex Junction, Cressex cycleway, Queen Alexandra Road / Easton Street | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | No benchmark data available as this is a specific project. | Alternative Route Phase 2 now on site and due to be completed early by end June 2017. Phase 3 start date delayed to October 2017. Phase 4 to commence in July 2017. QVR and Cressex schemes to commence on site in early 2018 as planned. |
| 9 | | | | | | | | | | | | |
| Delivery of Stocklake Link Road (urban) and Eastern Link Road (South) highway improvement projects to support strategic growth and development in the area east of Aylesbury | Green | Current month only | Green | Amber | Red | Red | Red | Red | → | ■ Red | No benchmark data available as this is a specific project. | Stocklake: The project is substantially complete and issues typical of this stage such as defects and snagging are being resolved by the project team. Eastern Link Road (South): In addition to the original planning application submitted in March 2016, the updated Transport Assessment (TA) was submitted in March 2017. BCC Development Management Team is reviewing the TA for standalone & cumulative modelling scenarios. Section 106 negotiations, including transport, are ongoing during April/ May 2017. AVDC's Strategic Planning Committee (June 2017) will determine the Aylesbury Woodlands planning application which includes the Eastern Link Road (south). |
| 10 | | | | | | | | | | | | |
| Delivery of the sustainable cycle schemes at Taplow, Iver and Buckingham/Winslow | Green | Current month only | Green | Amber | Amber | Green | Green | Green | → | ★ Green | No benchmark data available as this is a specific project. | Delivery of A4 Sustainable Travel Scheme at design stage. Delivery of Iver Sustainable Travel Scheme has been deferred. Delivery of A413 Sustainable Travel Scheme on target. |
| 11 | | | | | | | | | | | | |
| Providing reliable local bus services within budget available | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | Benchmarking data is being sought to enable comparisons in the future. | This measure relates to our contracted local bus services; contract performance is managed through regular engagement with suppliers and monitoring of KPIs. |

- Sufficient school places for Buckinghamshire pupils

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|--------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|---|
| 12 The delivery of SEN transport contracts which ensure students on transport receive a safe, appropriate and economic transport service | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | Benchmarking data is being sought to enable comparisons in the future. | Ongoing robust contract management and engagement with suppliers is being managed through monitoring of KPI's and any issues are managed. |
| 13 The delivery of Social Care transport contracts which ensure students on transport receive a safe, appropriate and economic transport service | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | | |
| 14 The delivery of main stream school bus contracts which ensure students on transport receive a safe, appropriate and economic transport service | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | | |
| 15 The delivery of main stream school taxi contracts which ensure students on transport receive a safe, appropriate and economic transport service | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | | |

- The creation of more jobs for local people

NB: This RAG is made up of measures from the 'the creation of more jobs for local people' sections found in the leader and transportation portfolios

Amber

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks | Narrative |
|--|------------|--------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|-----------|
| 16 Negotiate, secure and manage the implementation of highway and transportation improvements through S184/S278 and 38 Agreements to deliver our transport and infrastructure strategies and ensure the impact of development is appropriately mitigated | Green | Current month only | Green | Amber | Green | Green | Green | Green | → | ★ Green | No benchmark data available as this is a specific project. | |
| 17 Negotiate and secure planning obligations through Section 106 Agreements to deliver our transport and infrastructure strategies and mitigate the impact of development on Buckinghamshire County Council's highway and transportation network | Green | Current month only | Green | Green | Green | Green | Green | Green | → | ★ Green | No benchmark data available as this is a specific project. | |

- Protecting our high quality natural environment

NB: This RAG is made up of measures from the 'protecting our high quality natural environment' sections found in the leader, planning & environment and transportation portfolios

Green

| Measure | Good to be | Data period | Target | Last years outturn 2015/2016 | Q1 Jun 2016 | Q2 Sep 2016 | Q3 Dec 2016 | Q4 Mar 2017 | Trend on last quarter | Latest performance (RAG) | Benchmarks & Commentary | Narrative & Action |
|--|------------|---------------------------|--------|------------------------------|-------------|-------------|-------------|-------------|-----------------------|--------------------------|--|---|
| 18 % of Highways Development Management (DM) Planning Application consultation and strategic advice responded to within deadline | Green | Cumulative (year to date) | 70.0% | 51.0% | 60.0% | 55.0% | 64.0% | 80.0% | ↑ | * Green | No benchmark data available as this is a specific project. | Performance increased from 68% in April 2016 to 80% in March 2017. 2,246 applications and 1,537 pre-applications were received in 2016/17 |