



Total number of measures with a RAG (shown in chart above):
Measures where data currently unavailable:

3
1

Key areas of good performance					
Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of new floorspace developed in our 3 Enterprise Zones.	100%	105.7%	Green	N/A	<p>There has been no further completed employment floorspace (B1/B2/B8) in the Enterprise Zone (EZ) for Q3 , which is in line with target forecasts.</p> <p>At Silverstone, a funding agreement was completed in December 2017 with site owners (MEPC) for the EZ to fund circa £5m of utilities infrastructure to support and accelerate future development phases. Funds will be recovered from future and existing business rates generated in the EZ. MEPC will commence work on the infrastructure in January 2018, with completion due 12-15 months from commencement.</p> <p>There is work onsite at Westcott - where a Rocket Testing Engine Facility is being built. This consists of 1,700 sqm of office space, plus further floor space for the test facility. This is due to be complete Q1 2018/19 (Apr/Jun). At Woodlands 100,000 sqm of employment floorspace is moving through the planning application process. Once the planning is secured (target by April 2018), a marketing strategy for EZ will be implemented. Furthermore, the Arla section of the Woodlands EZ Site already has Reserved Matters Planning Consent, which means the owner / developer (Db Symmetry Ltd) can start development rapidly on that part of the site subject to securing pre lets / pre sales, or speculatively should Db Symmetry choose to do so.</p>

<p>2 To improve availability of fixed fibre to residential and business premises.</p>	<p>Graduated target 2017/18 Q1: 91.0% Q2: 91.4% Q3: 91.8% Q4: 92.1%</p>	<p>92.6%</p>	<p>Green</p>	<p>Buckinghamshire 92.6% Central Bedfordshire 94.3% Hertfordshire 95.7% Milton Keynes 97.8% Northamptonshire 96.8% Oxfordshire 95.1% Windsor and Maidenhead 94.4%</p>	<p>Taken from 'Think Broadband' measures of access to superfast broadband (>30mbps), we have moved past our Q3 target of 91.8% superfast coverage (>30mbps) this quarter and have hit our Q4 target of 92.1% a quarter early. Buckinghamshire has demonstrated the biggest quarter-on-quarter improvement of 1.2 percentage points relative to our benchmark group, Northamptonshire have the second biggest improvement at 0.8 percentage points. Between Oct - Dec we had 17 brand new fibre enabled cabinets (side of road) installed, which will deliver superfast broadband to 1,595 premises (resi and non-resi) across Buckinghamshire.</p>
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- ▶ **There are no measures with lower than expected performance.**

Total number of measures with a RAG (shown in chart above):
Measures where data currently unavailable:

► **Key areas of good performance**

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of appointments offered within 48 hours to clients attending a sexual and reproductive health service.	98.0% Target is the same for both 2016/17 and 2017/18.	100.0%, 3,948/3,948 This result is for Q2 2017/18 because the data runs one quarter behind.	Green	Benchmarking information is not available.	This indicator measures the timeliness of appointments offered at sexual health services. Performance for quarter 2 is 100%, above the target of 98%. There is no benchmarking data available to compare.
2 % of births that receive a face-to-face New Birth Visit within 14 days by a health visitor.	90.0% Target is the same for both 2016/17 and 2017/18.	95.8%, 1,392/1,453 This result is for Q2 2017/18 because the data runs one quarter behind.	Green	82.9% (Q4 2016/17 South East) 88.3% (Q4 2016/17 England) 87.9% (Q4 2016/17 CIPFA peers).	This indicator measures the proportion of new birth visits undertaken within 14 days. Performance for quarter 2 is 95.8%, which is above target (90%), national (88.3%), regional (82.9%) and comparator group outturns (87.9%).

► All areas of lower than expected performance (Red or Amber)

Measure	Target	Current position	RAG	Benchmarking	Commentary
¹ % of the eligible population invited to an NHS Health Check.	100.0% Target is the same for both 2016/17 and 2017/18.	93.3%, 7,482/8,023 This result is for Q2 2017/18 because the data runs one quarter behind.	Red	92.4% (Q2 2017/18 South East) 88.9% (Q2 2017/18 England) 90.2% (Q2 2017/18 CIPFA peers).	This indicator measures the proportion of people identified as eligible for an NHS Health Check who were invited to attend. 93.3% of eligible people in Buckinghamshire were invited for an NHS Health Check in Quarter 2, which is below target (100%) but above national (88.9%), regional (92.4%) and comparator performance (90.2%) We are targeting practices inviting a lower proportion of their eligible population to support improvement.
² % receiving an NHS Health Check of those who were offered an NHS Health Check.	48.0% This is the target for 2017/18 Target for 2016/17 was 50.0%.	46.3%, 3,467/7,482 This result is for Q2 2017/18 because the data runs one quarter behind.	Amber	44.1% (Q2 2017/18 South East) 45.7% (Q2 2017/18 England) 44.9% (Q2 2017/18 CIPFA peers).	This indicator measures the proportion of people invited for an NHS Health Check who attend. 46.3% of eligible people in Buckinghamshire were invited for an NHS Health Check in Quarter 2, which is slightly below target (48%) but above national (45.7%), regional (44.1%) and comparator performance (44.9%) We are supporting practices to improve delivery of the NHS Health Checks, including strengthening their oversight of performance, and will be delivering a campaign to raise awareness of the service amongst high risk groups.

<p>3</p> <p>Number of current smokers achieving a 4 week quit.</p>	<p>Target for 2017/18 is 1,088 or 272 per quarter.</p> <p>Target for 2016/17 was 1,520 or 380 per quarter.</p>	<p>241</p> <p>This result is for Q2 2017/18 because the data runs one quarter behind.</p>	<p>Red</p>	<p>Benchmarking information is not available.</p>	<p>This indicator measures the number of smokers who achieve a 4 week quit.</p> <p>241 people in Buckinghamshire achieved a 4 week quit in Quarter 2, which is slightly below the quarterly target (272). No benchmarking information is available.</p> <p>We have delivered a social media campaign during Q3 to raise awareness and increase referrals to the service. Smoking cessation services will be delivered through an integrated lifestyle service from April 2018 onwards.</p>
<p>4</p> <p>% of successful alcohol treatment completions of those in treatment.</p>	<p>40.0%</p> <p>This is the target for 2017/18.</p> <p>Target for 2016/17 was 45.0%.</p>	<p>39.1% (117/299)</p> <p>This result is for Q2 2017/18 because the data runs one quarter behind.</p>	<p>Amber</p>	<p>37.3% (Q2 2017/18 South East)</p> <p>39.5% (Q2 2017/18 England)</p> <p>36.0% (Q2 2017/18 CIPFA peers).</p>	<p>This indicator measures the proportion of people receiving treatment for alcohol-related issues who successfully complete treatment.</p> <p>Our performance in quarter 2 was 39.1%, which is slightly below target (40%) and national (39.5%), but above regional (37.3%) and comparator performance (36%).</p> <p>We have recently launched a new adult substance misuse service and are monitoring this regularly to ensure this continues to develop.</p>

<p>% of successful drug treatment completions of those in treatment.</p>	<p>15.0%</p> <p>Target is the same for both 2016/17 and 2017/18.</p>	<p>14.5% (111/768)</p> <p>This result is for Q2 2017/18 because the data runs one quarter behind.</p>	<p>Amber</p>	<p>15.6% (Q2 2017/18 South East)</p> <p>14.9% (Q2 2017/18 England)</p> <p>15.2% (Q2 2017/18 CIPFA peers).</p>	<p>This indicator measures the proportion of people receiving treatment for drug-related issues who successfully complete treatment.</p> <p>Our performance in quarter 2 was 14.5%, which is slightly below target (15%), as well as below national (14.9%), regional (15.6%) and comparator performance (15.2%).</p> <p>We have recently launched a new adult substance misuse service and are monitoring this regularly to ensure this continues to develop.</p>
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Total number of measures with a RAG (shown in chart above):
Measures where data currently unavailable:

8
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► **Key areas of good performance**

Measure	Target	Current position	RAG	Benchmarking	Commentary
% of clients using social care who receive direct payments.	37.0%	41.2%	Green	<p>Our Q3 outturn of 41.2% is above the target of 37.0% and is in line with our position this time last year 41.0%.</p> <p>We are also performing better than the 2016/17 national average of 28.3% and the 2016/17 comparator average of 31.8%.</p>	<p>This indicator measures the proportion of people who receive a direct payment to arrange and purchase their own care.</p> <p>Performance for quarter 3 is 41.2%, which is above target (37%) and above national (28.3%) and comparator performance (31.8%).</p>

<p>2 Admissions of adults (under 65 yrs.) into residential and nursing care. Rate per 100,000 of population.</p>	<p>Graduated target Q1: 2.8 Q2: 5.6 Q3: 8.4 Q4: 11.2</p>	<p>5.4</p>	<p>Green</p>	<p>Our Q3 outturn of 5.4 is well below the Q3 target of 8.4 for this measure. It is good to be below the target. This puts us on track to be below target for year end of 11.2. We are also performing slightly better than we were at Q3 last year, where the outturn was 6.9.</p> <p>The national and comparator group averages are based on the year end performance for this measure so can not be compared until Q4.</p>	<p>This indicator measures the number of younger adults admitted to long term residential or nursing care, expressed as a rate per 100,000 population.</p> <p>Performance for quarter 3 is 5.4, which is better than our target at this point in the year (8.4) and better than our performance in quarter 3 2016/17 (6.9).</p>
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<p>3 Admissions of older people (65+) into residential and nursing care. Rate per 100,000 of population.</p>	<p>Graduated target Q1: 130.0 Q2: 260.0 Q3: 390.0 Q4: 520.0</p>	<p>250.9</p>	<p>Green</p>	<p>Our Q3 outturn of 250.9 is well below the Q3 target of 390.0 for this measure. It is good to be below the target. This puts us on track to be below target for year end of 520.0.</p> <p>We are also performing better than we were at Q3 last year where the outturn was 287.5. The national and comparator group averages are based on the year end performance for this measure so can not be compared until Q4.</p>	<p>This indicator measures the number of older people admitted to long term residential or nursing care, expressed as a rate per 100,000 population.</p> <p>Performance for quarter 3 is 250.9, which is better than our target at this point in the year (390) and better than our performance in quarter 3 2016/17 (287.5).</p>
<p>4 % of CBS clients receiving an annual review (community based services).</p>	<p>Graduated target Q1: 25.0% Q2: 50.0% Q3: 75.0% Q4: 100.0% (20% target tolerance at end of year)</p>	<p>60.2%</p>	<p>Green</p>	<p>The target is graduated through the year to add up to the final year end target of 100.0%. As this is a local measure there is no national or comparator benchmarking.</p>	<p>This indicator measures the proportion of people receiving community-based services who are reviewed at least once per year.</p> <p>Performance for quarter 3 is 60.2%, which is below the target for this point in the year (75%) but within the 20% target tolerance.</p> <p>An action plan is in place to improve performance including frequent analysis, performance monitoring and recruitment campaigns.</p>

► All areas of lower than expected performance (Red or Amber)
 Measure Target Current position RAG

Benchmarking

Commentary

¹ % timely CYP transitions (children and young people).	Graduated target Q1: 12.5% Q2: 25.0% Q3: 37.5% Q4: 50.0%	7.1%	Red	The target is graduated through the year to add up to the final year end target of 50.0%. As this is a local measure there is no national or comparator benchmarking.	This indicator measures the proportion of children and young people who transition from Children's Services to Adult Social Care in a timely manner. Performance for quarter 3 is 7.1%, which is below the target for this point in the year (37.5%). An action plan, strategic forum and Improvement Review are in place to drive improvement. We have reviewed processes to ensure that children and young people who need to transition are identified at an early age.
² % of placement clients receiving an annual review.	Graduated target Q1: 25.0% Q2: 50.0% Q3: 75.0% Q4: 100.0% (20% target tolerance at end of year)	48.7%	Red	The target is graduated through the year to add up to the final year end target of 100.0%. As this is a local measure there is no national or comparator benchmarking.	This indicator measures the proportion of people in residential or nursing care who are reviewed at least once per year. Performance for quarter 3 is 48.7%, which is below the target for this point in the year (75%) and not within the 20% target tolerance. Weekly forums have been established to drive improvement. Through these we are reviewing risk ratings of Nursing and Residential homes to conduct reviews to ensure safeguarding is prioritised.

<p>4 % of adults in contact with secondary mental health services who live independently .</p>	<p>84.5%</p>	<p>80.4%</p>	<p>Amber</p>	<p>The outturn for Q3 is 80.4% which falls short of the annual target of 84.5% and is down versus Q2 and our Q3 position last year, where the outturn was 83.5%.</p> <p>We also perform better than the National average for 2015/16 of 58.6% and our comparator group average for 2015/16 of 51.5%.</p>	<p>This indicator measures the proportion of people in contact with secondary mental health services who live independently.</p> <p>Performance for quarter 3 is 80.4%, which is below target (84.5%) but above national (58.6%) and comparator performance (51.5%). Our target for 2017/18 is stretching and is higher than national and comparitor averages.</p> <p>We are addressing data quality issues and expect performance to improve.</p>
<p>5 % of adults with learning disabilities who live in their own home or with their family</p>	<p>67.3%</p>	<p>63.8%</p>	<p>Red</p>	<p>The Q3 outturn for this measure of 63.8% is below the target of 67.3% however is a slight improvement on last year's Q3 outturn of 62.3%.</p> <p>The national average for 2016/17 for this measure is 76.2% and our comparator group average for 2016/17 is 75.1%.</p>	<p>This indicator measures the proportion of adults with learning disabilities who live independently or with their family</p> <p>Performance for quarter 3 is 63.8%, which is below target (67.3%)and below national (76.2%) and comparator performance (75.1%)</p> <p>We are working with providers to revise service models and develop capacity for independent living including the new Hughenden Gardens village, this process will take 6-12 months and is a key focus of our transformation work.</p>

► **Key areas of good performance**

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % ICPC (Initial Child Protection Conference) held within 15 working days of the strategy discussion	100% (18% tolerance)	95%	Green	Statistical Neighbours (82%), South East (72%) and England (77%). Note: There is a 18% tolerance against the target of 100% to align with Statistical Neighbour performance (82%-100% = Green, less than 82% = Amber, less than 73.8% = Red).	<p>When a child protection investigation starts, an initial child protection conference is required to be held within 15 days of the start of this investigation if the threshold is met. 95% of ICPCs were held within 15 days in Q3, meaning we are currently performing well against our tolerance target and Statistical Neighbours. Performance has been consistently better than the tolerance target since July '17.</p> <p>Process changes and management actions introduced in July have improved performance in this area. The main reasons for conferences not being held in time relate to availability of interpreters, the availability of other agencies to attend and parents asking for a different date so that they are able to attend. When it is known that conferences will take place later than 15 days, the Social Work team put in place an interim safety plan where appropriate.</p>
2 % Children Looked After (CLA) seen in the last 6 weeks	% Children Looked After (CLA) seen in the last 6 weeks	95%	Green	<p>Benchmarking information is not available.</p> <p>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 85.5% = Red).</p>	<p>This indicator relates to the requirement for children in care to be seen by a Social Worker every 6 weeks (unless they are in a long term and matched foster placement in which case they are seen every 12 weeks).</p> <p>The % of looked after children seen in the last 6 weeks has improved from 92% in Q2 to 95% in Q3 (exactly in line with the tolerance target). This improvement has been achieved despite an overall increase in the number of looked after children during this period (from 452 to 471). This good performance is due to regular management oversight, and proactive monitoring of timescales.</p>

<p>3 % of children subject to a Child Protection (CP) Plan seen in the last 4 weeks</p>	<p>100% (5% tolerance)</p>	<p>96%</p>	<p>Green</p>	<p>The % of children on a CP plan seen in the last 4 weeks is above the tolerance target of 95%. Benchmarking information is not available. 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 85.5% = Red).</p>	<p>Children who are at risk of harm are made subject to a Child Protection Plan and current local practice standards require them to be seen by a Social Worker every 10 days. The percentage of children on a CP plan seen in the last 4 weeks is 96% and above the tolerance target of 95%. Performance by the Social Work teams has remained at or above the tolerance target since April 2017.</p> <p>Team Managers receive twice weekly reports on visits that are due for children on Child Protection Plans. Heads of Service check performance weekly with the Team Managers. When it is identified that individual workers may struggle to visit children on time, contingencies are put in place with support being provided by other teams from across Children’s Social Care. This effective and timely management oversight will continue to ensure performance is maintained.</p>
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► All areas of lower than expected performance (Red or Amber)

<p>1 % repeat referrals</p>	<p>20%</p>	<p>28%</p>	<p>Red</p>	<p>Statistical Neighbours (21%) and England (22%), South East (26%).</p>	<p>This measure looks at the number of referrals that come into Children’s Social Care for a second or subsequent time after their previous involvement ended. There has been an improvement in the repeat referral rate from 35% in Q2 to 28% in Q3, which brings us closer to the SE average of 26%. This remains above the 20% target and is higher than the Council’s Statistical Neighbours (21%) and England (22%).</p> <p>The audit work being undertaken by the Assessment Teams has had a positive impact on the repeat referral rate. The audits identify actions to improve practice of Social Workers and management oversight in the teams. Action being taken to improve further focuses on additional auditing by Managers on repeat referrals, tackling domestic abuse (a key driver of repeat referrals) and ensuring support identified when closing assessments is delivered. As a result of this audit work, the quality of assessments and plans for children will improve which ensures children and families get the right support at the right time so problems do not escalate and result in subsequent referrals to social care. This will improve the percentage of repeat referrals and well as outcomes for children and families.</p>
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<p>² % assessments completed in 45 working days</p>	<p>100% (14% tolerance)</p>	<p>69%</p>	<p>Red</p>	<p>Statistical Neighbours (86%), South East (83%), England (83%). Note: There is a 14% tolerance against the target of 100% to align with Statistical Neighbour performance (86%-100% = Green, less than 86% = Amber, less than 77.4% = Red).</p>	<p>After a referral has been received by Children’s Social Care, a Child and Family Assessment is required to be completed ideally within 20 days and at the most within 45 days.</p> <p>The percentage of assessments completed within the 45 day statutory timescale was 69% in Q3, 17% below the tolerance target of 86%. Current performance is below our Statistical Neighbours (86%), the South East (83%) and England (83%).</p> <p>A key issue driving this performance has been an increase in demand for Child and Family Assessments beyond the capacity available in the service. Additional agency Social Worker positions have recently been filled. The recruitment of suitably skilled social workers has been challenging in some teams.</p> <p>Other improvement actions focus on strengthened performance management at team and individual level, and additional management oversight focused on quality and standards from January to March to ensure consistency of practice.</p>
<p>³ % of Children in Need (not including CP, CLA) seen in the last 6 weeks</p>	<p>100% (5% tolerance)</p>	<p>88%</p>	<p>Amber</p>	<p>Benchmarking information is not available.</p> <p>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 85.5% = Red).</p>	<p>This indicator relates to the requirement for children who are being supported through a Child in Need plan to be seen by a Social Worker every 6 weeks.</p> <p>88% of Children in Need were seen in the last 6 weeks, this is 7% below the tolerance target of 95% (and the same as performance in Q2). Benchmarking information is not available.</p> <p>The increasing number of children in need has led to Social Workers carrying higher caseloads, in some teams, which has affected their ability to see all children in time. The main action being taken at present is an audit programme of all children in need cases to ascertain the most appropriate way to meet their needs. In addition, the service is determined to improve management oversight so that when new cases come through the front door all alternative options are considered before a decision is made to progress to an assessment by Children’s Services.</p>

4	% of Children in Need (CIN) reviewed in time (not including Child Protection, Children Looked After)	100% (15% tolerance)	77%	Amber Benchmarking information is not currently available. Note: There is a 15% tolerance against the target of 100% to allow for exceptions (85-100% = Green, less than 85% = Amber, less than 76.5% = Red).	Children and their families who are subject to a Child In Need plan are required to have a first review of this plan one month after it has been agreed, and subsequently the plan should be reviewed every 3 months. In Q3 77% of Children in Need were reviewed within the timescale, this is 8% below the tolerance target of 85%. Actions being taken to improve performance focus around improved management oversight and strengthened performance management at team and individual level – supported by monthly trend and analysis reports.
5	% of children who became the subject of a child protection plan for a second or subsequent time	18%	33%	Red Statistical Neighbours (23%), the South East (22%) and England (19%).	<p>This indicator relates to children who are placed on a child protection plan again after previously being on a child protection plan. In Q3 33% of children became the subject of a child protection plan for a second or subsequent time, compared to 23% in Q2. This relates to 24 children in Q3 compared to 17 in Q2. This is over the target of 18% (good to be low), and higher than our Statistical Neighbours (23%), the South East (22%) and England (19%).</p> <p>The strategy put together to deal with neglect in the County sets out how the local authority will identify and engage families at the earliest opportunity with preventative services, including effective assessment and development of a clear action plan in order to prevent children becoming subject to a child protection plan for the second time. Other improvement actions focus on staff development and oversight to improve the management of risk, the quality and delivery of Child Protection Plans.</p>

6 % of CLA living within 20 miles of home	56%	51%	Amber	Statistical Neighbours (62%), South East (63%), England (74%).	As a corporate parent it is our statutory duty to place children within the council boundary where possible and we aim to place as many children as possible within 20 miles of their home address. In Q3 51% of children were placed within 20 miles of their home address, 5% below our target of 56%. This is below our Statistical Neighbours (62%), the South East (63%) and England (74%). Note that this is based on uncleaned data at Q3. We are reviewing all services that identify and provide placements for Buckinghamshire children so children can be placed closer to home when we become their corporate parent. This includes focus on developing a robust evidence base to underpin our placement sufficiency strategy which will inform the increased provision of residential care home and foster care places across Buckinghamshire.
7 % of children in care placed with own provision (in-house foster care and Buckinghamshire Children's home)	24%	15%	Red	CIPFA neighbours (44%) - Source: Children Looked After CIPFA report 2016.	In Q3 15% of looked after children were placed with an in-house foster carer; 9% below the target of 24% and 29% below our comparative CIPFA neighbours (44%). We are seeking to increase the proportion of children placed with an in-house foster carer or in a Buckinghamshire Children's Home through a range of actions - including a review of Fostering and Adoption services. Other improvement actions focus on developing a robust evidence base to underpin our placement sufficiency strategy which will inform the increased provision of residential care home and foster care places across Buckinghamshire.
8 % of Children Looked After (CLA) in residential care	10%	13%	Red	Comparative CIPFA neighbours (9%) - Source: CLA CIPFA report 2016.	In Q3 13% of looked after children were placed in residential care; above our target of 10% and our comparative CIPFA neighbours (9%). The rise of 1% in Q3 (compared to Q2) related to 5 additional children in residential care. We are reviewing all services that identify and provide placements for Buckinghamshire children so children can be placed closer to home when we become their corporate parent. Other improvement actions focus on developing a robust evidence base to underpin our placement sufficiency strategy which will inform the increased provision of residential care home places across Buckinghamshire.

<p>9 % of children waiting <14 months between entering care and moving in with their adoptive family</p>	<p>100%</p>	<p>55%</p>	<p>Red</p>	<p>Statistical Neighbours (43%), England (47%).</p>	<p>This indicator measures the length of time children who are placed for adoption wait before they move into an adoptive family. In Q3 55% of children waited under 14 months between entering care and moving in with their adoptive family, and increase of 5% compared to Q2. Although below our local target of 100%, this measure is performing better than our Statistical Neighbours (43%) and England (47%).</p> <p>The adoption team continues to work with a significant number of children with complex needs who will often take longer to place. Actions being taken to improve performance focus on recruiting more adopters (particularly those able to care for children with more complex needs), and the 'Foster to Adopt' scheme aiming reduce delay and minimise placement moves for children in our care.</p>
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► **Key areas of good performance**

Measure	Target	Current position	RAG	Benchmarking	Commentary
¹ % of pupils attending schools rated good and outstanding by Ofsted	90.0%	90.1%	Green	England 31/8/2017 = 88% South East 31/8/2017 = 88%	This indicator measures the proportion of pupils in Buckinghamshire who attend a school rated as Good or Outstanding by Ofsted. 90.1% of pupils in Buckinghamshire currently attend a school within these rating categories which above both national and regional averages (both 88% as at 31/08/2017) and is just above target (90%). Our draft Education and Skills Strategy sets out the ambitions for ALL children and this is driving our approach to maintain and improve this performance.
² Early Years Foundation Stage Profile - % of pupils achieving a good level of development	72%	74%	Green	England 2017 = 71% SE 2017 = 74%	This indicator measures the proportion of pupils achieving a good level of development at Early Years Foundation Stage. 74% of pupils in Buckinghamshire achieved a good level of development at this stage Which is above target (72%), national average (71%) and an increase from 2016.
³ Key Stage 2 - % of pupils reaching the expected standard in reading, writing and mathematics	57%	64%	Green	England (state-funded) 2017 = 62% SE 2017 = 63%	This indicator measures the proportion of pupils at Key Stage 2 who reach the required standard for reading, writing and maths. 64% of pupils in Buckinghamshire achieved at least the expected standard which is above our target of 57%, national average (62%) and regional average (63%), and represents an increase from 2016.

► All areas of lower than expected performance (Red or Amber)

Measure	Target	Current position	RAG	Benchmarking	Commentary
¹ Early Years Foundation Stage Profile - 'good level of development' gap between disadvantaged pupils % and others %	18%	19%	Amber	National data is not available for this group of pupils	This indicator measures the development gap between disadvantaged pupils and all others at Early Years Foundation Stage. 56% of disadvantaged pupils in Buckinghamshire achieved a "Good Level of Development" compared to 75% of non-disadvantaged pupils. This gap of 19% is worse than the target (18%) and has remained static since 2016. The 'Improving Outcomes Diminishing Differences' Early Years project has successfully raised attainment in previous years and this project will continue in 2018 working with a new cohort of schools.
² Year 1 Phonics - expected standard gap between disadvantaged pupils % and others %	13.0%	16.0%	Red	2017 England = 14% (disadvantaged = 70%, other = 84%)	This indicator measures the gap in attainment between disadvantaged and non-disadvantaged pupils at the Year 1 Phonics check. 68% of disadvantaged pupils in Buckinghamshire met the expected standard compared to 84% of non-disadvantaged pupils nationally. This reported gap of 16% has improved from 2016 but is worse than the target (13%) and national average (14%). Local forums are in place to promote best practice and monitor improvement. A wider approach to tackle persistent issues of social mobility and under-achievement amongst disadvantaged pupils is also underway.

<p>3</p> <p>Key Stage 2 - expected standard (reading, writing & maths) gap between disadvantaged pupils % and others %</p>	<p>22.0%</p>	<p>30.0%</p>	<p>Red</p>	<p>2017 England = 20% (disadvantaged = 48%, other = 68%)</p>	<p>This indicator measures the gap in attainment between disadvantaged and non-disadvantaged pupils at Key Stage 2 for reading, writing and maths. 38% of disadvantaged pupils in Buckinghamshire achieved the expected standard compared to 68% of non-disadvantaged, pupils nationally. This reported gap of 30% has remained static since 2016 and is worse than the target (22%), and national average (20%)</p> <p>We have recently initiated a project to identify and share good practice throughout the Primary School community in Buckinghamshire, and have secured funds to target key schools. A wider approach to tackle persistent issues of social mobility and under-achievement amongst disadvantaged pupils is also underway.</p>
<p>4</p> <p>Key Stage 2 - % of pupils with a statement of SEN or EHCP reaching the expected standard in reading, writing and mathematics</p>	<p>11.0%</p>	<p>8.0%</p>	<p>Amber</p>	<p>England 2017 = 8% South East 2017 = 7%</p>	<p>This indicator measures attainment for pupils with a statement or EHCP at Key Stage 2 for reading, writing and maths. 8% of children in Buckinghamshire reached the expected standard, which is below target (11%), above the South East average (7%) and consistent with national and performance in 2016.</p> <p>Additional training and monitoring processes are being implemented to ensure that children are supported effectively, and a pilot is underway to ensure that needs are identified as early as possible.</p>

<p>5 % new Education, Health & Care plans issued within 20 weeks (excluding exceptions)</p>	<p>100.0%</p>	<p>19.0%</p>	<p>Red</p>	<p>2016 calendar year Buckinghamshire = 50.9 South East = 43.1 England = 58.6</p>	<p>This indicator measures the number of young people with Special Educational Needs and/or disability who receive a support plan in a timely manner. Figures reported are cumulative for this year to date.</p> <p>Performance in quarter 3 of 19.4% is below target (100%), regional (42.5%) and national averages (55.7%).</p> <p>We have developed a comprehensive recovery plan to improve performance against this indicator which will strengthen multi-agency working, we are conducting a recruitment campaign to ensure capacity is sufficient and we are consulting on a restructure of the SEND service to effect improvement.</p>
<p>6 Key Stage 4 - average Attainment 8 score</p>	<p>58</p>	<p>52.6</p>	<p>Amber</p>	<p>England (state-funded) 2017 = 46.1 SE 2017 = 47.2</p>	<p>This indicator measures pupil attainment at Key Stage 4 across 8 key subjects. Provisional results for Buckinghamshire show that the average score in 2017 was 52.6 which is below target (58.0), but above national (46.1) and regional averages (47.2).</p> <p>Due to changes in how this measure is calculated results nationally have decreased since 2016. Buckinghamshire results only decreased by 2.8 compared to a national decrease of 4.0.</p> <p>Work is underway to ensure that schools requiring improvement receive targeted support this academic year.</p>



► Key areas of good performance

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 Forecast revenue expenditure keeps to budget	Breakeven (underspends are positive)	£0.338m underspend	Green	No benchmarking is available as this is an internal BCC specific financial PI.	Underspend of £2.954m in Q2 17/18 has reduced to £0.338m in Q3 17/18. There are both local plans to address this and sufficient contingency budgets to mitigate the risk of an overall budget overspend. Note that Scorecard figures relate to Portfolio finance only.
2 Forecast released capital expenditure keeps to budget	Breakeven (underspends and slippages are positive)	£13.3m slippage £6.8m underspend £20.1m Total	Green	No benchmarking is available as this is an internal BCC specific financial PI.	The significant slippage relates to Schools Construction projects and Strategic Transport projects. The underspend relates to the Orchard House/Southern Area Office Strategy & NCO 3rd lift projects which have been stopped/are under review.
3 Increase revenue through additional income	£6.613m	£6.808m	Green	No benchmarking is available as this is an internal BCC specific financial PI.	Income generation has been achieved in areas such as rental returns on property portfolio investment and the energy income from the Solar Photovoltaic panel programme.
4 Reduce revenue expenditure through service efficiencies	£16.532m	£15.624m	Red	No benchmarking is available as this is an internal BCC specific financial PI.	A number of efficiency initiatives within the Health & Wellbeing portfolio are not fully delivering against plans.

► All areas of lower than expected performance (Red or Amber)
Measure Target Current position RAG

Benchmarking

Commentary

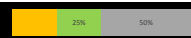
¹ There are no measures with lower than expected performance.

▶ Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of waste collected for recycling, reuse, composting or anaerobic digestion from household sources (household collection and Household Recycling Centres) [National Indicator 192]	56%	58.9% (this result is for Q2 2017/18 because the data runs one quarter behind)	Green	Ranked 32 of 352 for the total household waste recycling, composting and reuse rate for English local authorities from April 2014 to March 2015. South Oxfordshire ranked 1 (66.6%), Buckinghamshire ranked 32 (55.5%), Newham ranked 352 (14.7%) http://www.letsrecycle.com/councils/league-tables/	County Wide Recycling figures are always one quarter in arrears. Year to date performance is on track to meet BCC year-end target of 56% and to possibly exceed. There remains a longer term aspirational target of 60%, but this is unlikely to be met due to reduced recycling/composting volumes. The larger part of performance is from green waste composting, which is seasonal, HRC recycling volumes remained steady around 75%. During Q3 there has been countywide behaviour changes and communications to help improve performance. It is too early to understand/correlate if this is having a direct impact.

² % of re-use, recycling, composting and diversion from landfill for waste delivered at our Household Recycling Centres (HRCs) across Bucks	70%	75%	Green	Not Available	This measures the % of Household Waste that is sent for Recycling as a % of Total Waste i.e. includes Residual (black bin bag) waste. Household Recycling Centre year to date performance is on track to meet target - YTD figures, allowing for seasonal variation.
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► All areas of lower than expected performance (Red or Amber)

Measure	Target	Current position	RAG	Benchmarking	Commentary
¹ There are no measures with lower than expected performance.					



Total number of measures with a RAG (shown in chart above):
Measures where data currently unavailable:

2
2

► Key areas of good performance

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 Deliver congestion management for major infrastructure schemes	Green	Green	Green	Not Available	Five of the seven projects we are monitoring are progressing according to programme, these include the A355 Improvement Project, South-East Aylesbury Link Road, Stocklake Link Road, East West Rail and the Oxford-Cambridge Expressway. Those that are showing as amber include the A4 Sustainable Travel Scheme (Taplow), which is down to two reasons, firstly the extra detailed design work required to address residents' concerns, and secondly to funding issues. Further work is being undertaken to resolve these issues and the project remains on track to be delivered by March 2019, subject to funding. The second project showing as amber is the Eastern Link Road (South), which is owing to the uncertainty surrounding the scheme costs, which are expected to be addressed through the detailed design work over the coming months and via a bid to BCC for forward funding and it is the development scheme that will be required to make a 100% contribution.

► All areas of lower than expected performance (Red or Amber)

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 Public Satisfaction around our Public Rights of Way (KBI 15 - Rights of Way)	60.0%	58%	Amber	Ranked 69/112 authorities surveyed. We were exactly average across all authorities this year for public satisfaction.	This result comes from the NHT annual survey conducted in the summer, and the results come through in the Autumn (Oct/Nov). This year we scored 58%, which is slightly below our target of 60%. Historically we have scored 60% (2013), 59% (2014) and 58% (2015-2017), which is in line with the current National Average of 58%. From next year 2018.19 some Capital is due to be invested in this area. It should be noted that there are a number of factors that influence public satisfaction, one of them will be whether they have walked recently and whether the pathway they have walked was overgrown. In previous surveys, customers have shown that clear routes are more likely to be walked. The fact that this survey takes place across the summer when there is rainfall and sunshine leading to heavy overgrowth explains why it is difficult to hit higher than 60%.