

Leader Portfolio - Cllr. Martin Tett

Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 BCC claimant count rate as % of national claimant count rate (contextual indicator)	50%	41%	GREEN	Claimant Count Rates: Hertfordshire 1.3% Oxfordshire 1.1% TV Berkshire 1.2% Buckinghamshire 0.9% Aylesbury Vale 0.8% Chiltern 0.8% South Bucks 0.7% Wycombe 1.2%	Buckinghamshire's claimant count rate has stood at 0.9% since January 2017, which is 41% of the average rate nationally. In that time Buckinghamshire's comparative performance has strengthened, improving from 6th lowest to third lowest among the 27 County Council areas and from 3rd to 2nd among the 38 Local Enterprise Partnerships. In September, Buckinghamshire saw the 4th slowest rate of rise among county council areas and the 2nd slowest among LEPs, rising more slowly than the national rate for a 9th successive month. Despite falling month on month in September, Buckinghamshire's annual change was positive for a third successive month and for the 23rd time in the last two years - increasing 17.6% or 450 claimants since October 2015.
2 % of new floor space developed in enterprise zones relative to projected amount in plan (performance measure)	100% at Q2 (no further delivery Q3/Q4)	100%	GREEN	Benchmark not currently available.	100% of the 2018/19 projected floorspace has now (Q2) been delivered, which is what was set out in the Revised Implementation Plan (IP). As such 4.6% of the Cumulative Implementation Plan has been delivered meaning the scheme is on track to deliver all floorspace by 2040/41. At Westcott Venture Park, practical completion of the Reaction Engines production building occurred in July 2018 with fit-out of the rest of the facility expected in early 2020. In addition, the Westcott Incubation Centre, operated by the Satellite Applications Catapult, opened for business in July 2018. At Woodlands, development commenced in August 2018 on the 23,040 sqm of employment floorspace due for completion in Q2 2019/20. At Silverstone, the purchase of the 2,338 sqm Sports Engineering Hub Building completed in August 2018, which is to be operated as an Innovation Centre by TotalSim Ltd. Fit out is due to complete by December 2019 and the facility will be operational in January 2019.
3 To improve availability of fixed fibre (superfast broadband) to residential and business premises (contextual indicator)	Graduated Target: Q1: 94.49% Q2: 94.57% Q3: 94.66% Q4: 94.74%	95.1%	GREEN	Buckinghamshire 95.08% Central Bedfordshire 96.2% Hertfordshire 97% Milton Keynes 98% Northamptonshire 97.3% Oxfordshire 96.7% Windsor and Maidenhead 96%	As at 30th June, our coverage was at 94.71% (>24mbps) and is now at 95.1% which is significantly above our quarterly target of 94.57%, and does mean that we have already hit the Connected Counties programme target (95% coverage by December 2019). 13 new structural units to provide fixed fibre broadband have gone live in and around Amersham, Aylesbury, Buckingham, Chesham, Gerrards Cross, Great Missenden, Iver, Mursley, Stoke Mandeville, Stone, Wendover and Whitchurch. Additionally, 3 new live structures are providing fibre to the premises in and around Princes Risborough.

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

	Measure	Target	Current position	RAG	Benchmarking	Commentary
1	Rank of number of New Business Registrations as defined by Companies House (contextual indicator)	Rank in Top 10/38 LEPs	11	AMBER	Local Enterprise Partnerships Ranking out of 38	<p>There were 1,247 businesses registered in Buckinghamshire in the second quarter of 2018 (July to September), according to Companies House.</p> <p>The recent trend, across this and a number of other indicators, has been for Buckinghamshire to grow more slowly than the country as a whole, but to retain a strong ranking.</p> <p>Buckinghamshire currently ranks 11th among LEPs (against a target of top 10), having ranked 11th in 2017 and 12th in 2016. Q2's number of new business registrations was below the two previous quarters but above the two before that (including Q2 2017). Q2's total was only slightly below the average number of quarterly registrations since we started collecting this data (Q4 2015/16).</p> <p>The gap in new business formation rates between Buckinghamshire and Great Britain overall has narrowed in recent years. However, Buckinghamshire's employment rate is among the very highest in the country and job density is rising, even if economic growth is comparatively slow, so indicators remain positive, certainly for snapshots but also in terms of trends.</p> <p>Enterprise Zones, enterprise education, BBF start up support, broadband roll out and the development of commercial space are all areas of activity that support this indicator.</p> <p>The Industrial Strategy is the latest policy document to emphasise the growth of existing business stock rather than promoting enterprise / start-ups in general.</p> <p>We will be able to provide a greater understanding of the bigger picture as more data comes in over the coming quarters e.g. ONS.</p>

Community Engagement & Public Health Portfolio - Cllr. Noel Brown

Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of births that receive a face-to-face New Birth Visit within 14 days by a health visitor	90%	94.5% (1,346/1,424) This result is for Q1 2018/19 because the data runs a quarter in arrears.	GREEN	86.2% (Q4 2017/18 South East) 88.5% (Q4 2017/18 England) 90.8% (Q4 2017/18 CIPFA peers)	Performance (94.5%) has exceeded the target of 90% in Q1 2018/19 (the data runs a quarter in arrears). There is currently no benchmarking data for Q1 but it is expected that the performance will continue to be better than national and South East regional averages.
2 Number of clients screened by Live Well Stay Well	6,000 annually (1,500 per quarter)	2,131 This result is for Q1 2018/19 because the data runs a quarter in arrears.	GREEN	Benchmarking information is not available.	<p>The number of clients screened by the new Live Well Stay Well service (2,131) is above the target (1,500) for Q1 2018/19.</p> <p>The new Live Well Stay Well service commenced on the 1st April 2018, providing a single point of access for lifestyles and long term conditions, accessible by telephone or online. Promotional work with stakeholders and residents has been successful in linking clients with the service. The new service offers an online registration and screening option which is available to residents 24/7, helping to increase the number of initial screenings completed. In Q1, 24% of the screens have been completed online, with follow up as appropriate.</p>
3 % of Customer Service Centre calls that are answered in 29 seconds or less	40%	40%	GREEN	Benchmarking information is not available.	<p>This indicator measures phone calls that people make to the Customer Service Centre that are answered within 29 seconds. 40% of all phone calls were answered within 29 seconds, which is aligned with the 40% target.</p> <p>Improvement Actions A 9% reduction from Q1 was due to resourcing difficulties with long term absences over the holiday period, meaning fewer staff were available to answer the volumes of calls. There was also an increase in calls regarding Client Transport during Q2.</p>

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

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of Customer Service Centre calls that are abandoned	10%	14%	RED	Cambridgeshire 15%, Staffordshire 10%, Warwickshire <5%, Nottinghamshire <5%, Oxfordshire <5%	<p>This measures phone calls that people make to the Customer Service Centre that are abandoned before being answered. 14% of calls were abandoned by the caller which exceeds the target of 10% of calls (or below).</p> <p>There has been a 4% increase in the number of abandoned calls since last quarter. We are continuing to work with the digital team, and service areas across the council, to bring more options for contacting the council online. New digital ways of contacting the council are being developed for Adult Social Care queries, which should reduce the volume of calls and therefore call abandonment in the Customer Service Centre. Reporting on Fix My Street has improved, with further marketing expected to move more contacts online. A reduction in staffing numbers this quarter by one full time equivalent employee has also impacted on performance.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. To reduce the number of abandoned contacts, we are planning to make more customer services available online, so that they are easier to access without having to telephone the Customer Services Centre. 2. A Business case is being taken to Technology Board for automated voice recognition, which will lower call volumes into the Customer Service Centre and call abandonment. 3. Business Intelligence work on profiling callers to investigate opportunities for transferring more calls online.
2 % of the eligible population invited to an NHS Health Check	100% There is a target tolerance for this indicators of 10%. Green= 90% and over, Amber= 80% and over, Red= less than 80%	80.9% (6,544/8,085) This result is for Q1 2018/19 because the data runs a quarter in arrears.	AMBER	78.2% (Q1 2018/19 South East) 86.0% (Q1 2018/19 England) 83.8% (Q1 2018/19 CIPFA peers)	<p>Performance in Q1 2018/19 (80.9%) has improved from Q4 2017/18 (74.8%), but is below target (100%).</p> <p>Invitations are issued by individual GP practices. Clinical pressures in primary care continue to affect performance. 15 practices were unable to invite all eligible patients and this has reduced overall performance. Staff changes are also reducing performance. Following the presentation of an update on NHS Health Checks to the Health and Wellbeing Board, the CCG have requested performance data.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. Practices with low numbers of invitations have been identified and Public Health are engaging with these practices.

3 % receiving an NHS Health Check of those who were offered an NHS Health Check	48%	43.5% (2,844/6,544) This result is for Q1 2018/19 because the data runs a quarter in arrears.	RED	39.8% (Q1 2018/19 South East) 42.6% (Q1 2018/19 England) 47.3% (Q1 2018/19 CIPFA peers)	<p>Performance in Q1 (43.5%) is below target (48%) and lower than in Q4 2017/18 (64.3%).</p> <p>The NHS Outreach service has now been recommissioned as part of the Integrated Lifestyle Service and the impact of transition from the old to the new service has affected performance. For Health Checks undertaken in Primary Care, clinical pressures in primary care are still affecting performance. Staff changes are also reducing performance.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. A communications campaign to improve awareness of Health Checks and how to book a Health Check is underway. 2. A report was presented to the Health and Wellbeing Board in September 2018 to raise strategic challenges with NHS Health Checks. 3. We are maintaining a programme of feedback and support to practices with reduced performance.
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4	% of successful drug treatment completions of those in treatment	13%	12.8% (107/834)	AMBER	16.5% (Q1 2018/19 South East)	<p>This indicator is slightly below target (12.8% against a target of 13%) but has improved since Q4 2017/18 (12.3%). Successful completions cover opiate and non-opiate use.</p> <p>The performance for opiate users is in the top quartile compared to other Local Authorities. However, successful completions for non-opiate users are not in the top quartile (no other quartiles are reported to us), this is reducing the overall average for successful completions for drugs.</p> <p>Currently the service has a number of users with particularly complex issues and this, combined with the service being less than a year in operation, has reduced performance. However, the service that users receive is of good quality with high user satisfaction.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. An action plan is being implemented that includes increasing engagement in treatment and strengthening the recovery network to improve successful completions and reduce representations for the alcohol client cohort. 2. Completed actions include an audit of the clinical caseload to ensure that all clients are on the right treatment pathway, and a new case management system to provide a better overview of all stages of treatment 		
5	% of successful alcohol treatment completions of those in treatment	35%	29.6% (95/321)	RED	39.1% (Q1 2018/19 South East)	<p>Since Q4 2017/18 Buckinghamshire's successful alcohol completions has decreased from 35.4% in Q4 2017/18 to 29.6% in Q1 2018/19. The target is 35%.</p> <p>The number of alcohol users in the service with significantly complex needs has increased steadily since the start of 2017/18 (72 clients in 2017/18 vs 52 clients 2016/17 drank 600 or more units in the 28 days prior to entering treatment . As a result, it is taking longer for these users to complete treatment because their needs are complex. Work is required to identify people with alcohol problems and ensure referral into specialist services much earlier and the planned actions address this issue.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. Work has begun to develop a shared care approach with primary care to support people with alcohol dependence. This will both improve quality of care and ensure clients are referred into specialist services earlier. This will be completed and implemented by March 2019 with a protected learning session open to all GPs in the spring. 		
			14.5% (Q1 2018/19 England)				16.4% (Q1 2018/19 CIPFA peers)	

Health and Wellbeing Portfolio - Cllr. Lin Hazell

▶	Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1	% of adults in contact with secondary mental health services who live independently	84.5%	88.0%	GREEN	Local Measure. Benchmarking not available.	<p>This indicator measures the proportion of people in contact with secondary mental health services who live independently.</p> <p>Performance for quarter 2 is 88.0% which is above target (84.5%). We expect to sustain this high level of performance ongoing. There is no benchmarking data available due to national issues with data accuracy.</p> <p>Improvement Actions We are implementing a Market Position Statement on housing and accommodation to plan access to housing options for people with needs.</p>
2	% of clients using social care who receive direct payments	37.0%	43.5%	GREEN	Benchmarking 2016/17 National - 28.3% Comparator - 31.8%.	<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 2 was 43.5%, which is above the target of 37.0% and above both the national (28.3%) and comparator performance (31.8%), and a slight increase of 0.9% on the previous quarter. Performance continues to look positive for this indicator.</p> <p>Improvement Actions We continue to ensure that our service offer improves outcomes and is delivered efficiently.</p>
3	Admissions of adults (under 65 yrs.) into residential and nursing care. Rate per 100,000 of population	Graduated target: Q1: 2.3 Q2: 4.6 Q3: 6.9 Q4: 9.2	4.5	GREEN	Benchmarking 2016/17 National - 12.8 Comparator -11.4.	<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 and is good to be low.</p> <p>Performance for quarter 2 is 4.5, which is below the target (4.6) for this quarter.</p> <p>The national and comparator group averages are based on the year end performance for this measure so cannot be compared until Q4. However, in 2017/18 our rate of admission at year end was 28% lower than statistical neighbours. Performance for 2018/19 to date is better than the same period in 2017/18 and on track to outperform benchmark levels.</p> <p>Improvement Actions We continue to build on the strengths-based approach to promote outcomes for clients and only consider placements if needs cannot be met in the community.</p>

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

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 Admissions of older people (65+) into residential and nursing care. Rate per 100,000 of population	Graduated target: Q1: 100.2 Q2: 200.4 Q3: 300.6 Q4: 400.8	200.9	AMBER	Benchmarking 2016/17 National - 610.7 Comparator - 560.4	<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 and is good to be low.</p> <p>Performance for quarter 2 is 200.9, which is very close to the target (200.4) for this quarter. The national and comparator group averages are based on the year end performance for this measure so cannot be compared until Q4. Performance for 2018/19 to date is better than the same period in 2017/18.</p> <p>Improvement Actions We continue to build on the strengths-based approach to promote outcomes for clients and only consider placements if needs cannot be met in the community.</p>
2 Average length of stay in Residential/Nursing care	618 days	867 days	RED	Local Measure. Benchmarking not available.	<p>This indicator measures the average length of time service users are placed in residential or nursing placements (permanent). Our aim, through the Transformation Programme is to reduce this time and delay long term placements as it is proven to be better for people to remain independent as long as possible.</p> <p>Performance for quarter 2 is 867 days which is above target (618 days) and an increase since quarter 1 (798 days). As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions We continue to build on the strengths-based approach to promote outcomes for clients and only consider placements if needs cannot be met in the community.</p>

3	Delayed transfers of care from hospital per 100,000 population (attributable to Social Care)	1.6	2.7 This result is for Q1 2018/19 because the data runs a quarter in arrears.	RED	Benchmarking Q1 2018/19 National - 3.9 Comparator - 5.2	<p>This indicator measures the average daily delay per 100,000 population attributable to Social Care (including joint delays). The measure is good to be low.</p> <p>Performance for Quarter 1 is 2.7 which is above target (1.6) and an increase in comparison to Q4 2017/18 (2.4). However performance is significantly below the comparator average of 5.2 and the national average of 3.9.</p> <p>Improvement Actions We are implementing the High Impact Change model and Discharge to Assess approach which will enable more joined up planning and develop capacity across the system.</p>
4	% contacts progressed to assessment in Adult Social Care	30%	40%	RED	Local Measure. Benchmarking not available.	<p>This indicator measures the proportion of contacts to Adult Social Care which progress to an assessment. This will enable us to monitor if we are helping people with the right support and signposting at their first point of contact, and only progressing people to assessment if they have eligible needs.</p> <p>Performance for quarter 2 is 40% which is above target (30%) and there has been a positive two percentage point change since quarter 1 (38%). As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions This is a new measure for 2018-19. We are conducting further analysis to understand reasons for this performance and training Customer Service Centre staff to ensure contacts received are handled effectively.</p>

5	% Adult Social Care clients receiving an annual review	<p>Graduated Target:</p> <p>Q1: 20% Q2: 40% Q3: 70% Q4: 100%</p> <p>(9% points tolerance at year end)</p>	33.9%	RED	Local Measure. Benchmarking not available.	<p>This indicator measures the proportion of people receiving a review of their care package at least once during the year.</p> <p>Performance for quarter 2 is 33.9%, which is below the quarterly target (40.0%). In comparison to the same period last year, fewer reviews have been completed this year. The launch of the Better Lives documentation/system changes alongside a Review Plan in November 2018 is anticipated to have a positive impact on this performance going forward.</p> <p>As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions A robust Review Plan has been developed and implemented to ensure we achieve our review target by the end of the year.</p>
6	% of people re-abled with an outcome of Independence	45.0%	39.4%	RED	Local Measure. Benchmarking not available.	<p>This indicator measures the proportion of service users who were independent following a period of re-ablement.</p> <p>Performance for quarter 2 is 39.4%, which is below the quarterly target (45.0%). However there has been an improvement on quarter 1 (35.1%). As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions To improve this performance we have broadened access to Assistive Technology, increased capacity in the Occupational Therapy service and are rolling out strength-based approach training to our BHT partners.</p>
7	% of adults with learning disabilities who live in their own home or with their family	69.8%	68.0%	AMBER	Benchmarking 2016/17 National - 76.2% Comparator - 75.1%	<p>This indicator measures the proportion of adults with learning disabilities who live independently or with their family.</p> <p>Performance for quarter 2 is 68.0%, which is below target (69.8%) and below both national (76.2%) and comparator performance (75.1%). Performance is consistent for this indicator and has remained just below target since the beginning of 2018/19.</p> <p>Improvement Actions We continue to build on the strengths-based approach to promote outcomes for clients and only consider placements if needs cannot be met in the community. A specialist housing group has been created that includes partners from District Councils to identify and address barriers.</p>

8 % of adults with a Learning Disability in paid employment	7.0%	6.1%	RED	Benchmarking 2016/17 National - 5.7% Comparator - 5.3%	<p>This indicator measures the proportion of adults with a learning disability who are in paid employment. Supported employment services are provided by our in-house direct care services who support these adults to prepare for work, find work and will continue to support them ongoing.</p> <p>Performance for quarter 2 is 6.1% which is slightly below target (7.0%). However it is above national (5.7%) and comparator (5.3%) performance. Performance has remained just below target since the beginning of 2018/19.</p> <p>Improvement Actions Further communications and briefing events are planned to ensure opportunities for clients are promoted across the service, and clients are supported to move from Supported to Open employment where appropriate.</p>
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Children's Services Portfolio - Cllr. Warren Whyte

▶ Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of Children who became the subject of a Child Protection Plan for a second or subsequent time	19%	13.7%	GREEN	Statistical Neighbours 23%, South East 22%, England 19%	<p>This indicator measures the proportion of children who have become subject to a child protection plan for a second or subsequent time.</p> <p>Of the children who became subject to a child protection plan between 1 April 2018 and 30 September 2018, 13.7% were subject to a second or subsequent child protection plan. Buckinghamshire's performance is lower than England, South East and statistical neighbour averages.</p> <p>Improvement Actions Child Protection Advisors and Social Work teams to meet regularly to ensure that child protection plans achieve sustainable and positive change.</p>

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

Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % assessments completed in 45 working days	82%	51%	RED	Statistical Neighbours 81%, South East 84%, England 83%	<p>This indicator measures the proportion of assessments that are completed within 45 working days.</p> <p>At the end of September 2018, 51% of assessments had been completed within the 45 working day timescale, which is below England, South East and statistical neighbour averages.</p> <p>Improvement Actions Robust action plans are in place with management oversight to improve this performance and ensure that assessments are completed within timeframes.</p>
2 % ICPC (Initial Child Protection Conference) held within 15 working days of the strategy discussion	80%	68%	RED	Statistical Neighbours 82%, South East 75%, England 77%	<p>This indicator measures the proportion of Initial Child Protection Conferences (ICPC's) that are held within 15 working days from the Strategy Discussion.</p> <p>At the end of September 2018, 68% of ICPC's were held within required timescales. This performance is currently below the 80% target and below the England, South East and statistical neighbour averages.</p> <p>Improvement Actions To address this we are developing Safety Plans for all instances where Initial Child Protection Conferences are delayed and working closely with schools to ensure there are no delays during holiday periods.</p>
3 % repeat referrals within 12 months	28%	30%	RED	Statistical Neighbours 21%, South East 26%, England 22%	<p>This indicator measures the proportion of repeat referrals we receive within 12 months.</p> <p>At the end of September 2018 our performance is 30%. This is higher than England, South East and statistical neighbour averages.</p> <p>Improvement Actions We have conducted an improvement review and are working closely with partners to develop a joint action plan to improve this performance. The action plan will be completed in December 2018.</p>

4 % Children Looked After (CLA) seen in the last 6 weeks	91%	80%	RED	Benchmarking information not currently available.	<p>This indicator measures the proportion of children looked after who are seen at least once every 6 weeks.</p> <p>At the end of September 2018, 80% of children looked after had been seen within required timescales. No benchmarking information is available for this indicator.</p> <p>Improvement Actions: We are tightening up data quality and recording processes to strengthen management oversight of when children have been seen.</p>
5 % of CLA living more than 20 miles from home	47%	55%	RED	Statistical Neighbours 24%, South East 16%, England 14%	<p>This indicator measures the proportion of children looked after who are placed more than 20 miles from their home.</p> <p>At the end of September 2018, 55% of children looked after were placed more than 20 miles from their home. This performance is higher than England, South East and statistical neighbour averages.</p> <p>It is important to note that placements within the geographical boundary of Buckinghamshire may exceed 20 miles in some cases. However, this is still accessible compared to other areas of the country where placements are within 20 miles but less accessible.</p> <p>Improvement Actions To improve performance we have opened Buckinghamshire County Council's first new children's home and will be opening another local in-house provision in March 2019.</p>

6 % of children waiting less than 14 months between entering care and moving in with their adoptive family	75%	39%	RED	Statistical Neighbours 43%, South East 46%, England 47%	<p>This indicator measures the proportion of children who wait for less than 14 months between entering care and moving in with their adoptive family.</p> <p>At the end of September 2018, 39% of children had moved in with their adoptive family within required timescales. This performance is lower than the England, South East and statistical neighbour averages.</p> <p>Improvement Actions The adoption team continue to robustly implement planned recruitment for those children with complex needs for whom adoption is in their best interests. We have delivered a targeted campaign for National Adoption Week alongside further development of the relevant pages on the BCC website to encourage interest from prospective adopters.</p>
7 % of care leavers in employment, education, or training (EET)	60%	57%	AMBER	Statistical Neighbours 52%, South East 50%, England 50%	<p>This indicator measures the proportion of care leavers who are in employment, education and/or training (EET).</p> <p>At the end of September 2018, 57% of care leavers were in EET. Buckinghamshire's performance is higher than the England, South East and statistical neighbour averages.</p> <p>Improvement Actions We are developing a skills database to match care leavers with local opportunities and working closely with the University to deliver taster days in partnership with the Virtual School.</p>

▶ Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 Key Stage 1 - % of pupils reaching the expected standard in reading	79%	79%	GREEN	England (state-funded schools) = 75% South East = 78% (2018 figures)	<p>This indicator measures the proportion of pupils who have reached an expected academic standard.</p> <p>In 2018, 79% of Buckinghamshire pupils achieved at least the expected standard in Key Stage 1 Reading. Results have remained the same as in 2016, but remain above both regional and national averages.</p> <p>These results have been released as provisional figures by the Department for Education, the validated results will be available in early 2019.</p> <p>Improvement Actions Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.</p>
2 Key Stage 1 - % of pupils reaching the expected standard in writing	69%	72%	GREEN	England (state-funded schools) = 70% South East = 71% (2018 figures)	<p>This indicator measures the proportion of pupils who have reached an expected academic standard.</p> <p>In 2018, 72% of Buckinghamshire pupils achieved at least the expected standard in Key Stage 1 Writing. This is a 3 percentage point increase from 2017. Buckinghamshire results are above both regional and national averages.</p> <p>These results have been released as provisional figures by the Department for Education, the validated results will be available in early 2019.</p> <p>Improvement Actions Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.</p>

3	Key Stage 1 - % of pupils reaching the expected standard in mathematics	76%	78%	GREEN	England (state-funded schools) = 76% South East = 78% (2018 figures)	<p>This indicator measures the proportion of pupils who have reached an expected academic standard.</p> <p>In 2018, Buckinghamshire results for pupils achieving at least the expected standard in KS1 maths increased by 2 percentage points to 78%. Buckinghamshire results are above the national average, and in line with the regional average.</p> <p>These results have been released as provisional figures by the Department for Education, the validated results will be available in early 2019.</p> <p>Improvement Action Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.</p>
4	Key Stage 2 - % of pupils reaching the expected standard in reading, writing and mathematics	64%	66%	GREEN	England (state-funded) = 64% South East= 65% (2018 figures)	<p>This indicator measures the proportion of pupils who have reached an expected academic standard.</p> <p>In Buckinghamshire 66% of pupils achieved at least the expected standard in all of reading, writing and maths at Key Stage 2. Buckinghamshire results have increased by 2 percentage points since last year, and are above both regional and national averages.</p> <p>These results have been released as provisional figures by the Department for Education, the validated results will be available in early 2019.</p> <p>Improvement Action Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.</p>

All areas of lower than expected performance (Red or Amber)					
Measure	Target	Current position	RAG	Benchmarking	Commentary
1 Permanent exclusion rate - primary	0.03%	0.04% This result is for the academic year 2016/17 because the data runs one year behind.	RED	England = 0.03 South East = 0.02 (2016/17 figures)	<p>This measure shows the proportion of permanent exclusions in primary schools and is reported in arrears due to national data collection and publication.</p> <p>In the 2016-17 academic year the permanent exclusions rate for primary schools in Buckinghamshire was 0.04%, which was above both national and regional averages. This is an improvement from 2015-16, with exclusions in primary schools falling from a rate of 0.05% in 2015-16.</p> <p>Improvement Actions We are implementing recommendations from the Education Select Committee report in July, including conducting a targeted Side by Side project to reduce exclusions, improving websites and promoting uptake of Educational Psychology services.</p>
2 Permanent exclusion rate - secondary	0.17%	0.25% This result is for the academic year 2016/17 because the data runs one year behind.	RED	England = 0.20 South East = 0.13 (2016/17 figures)	<p>This measure shows the proportion of permanent exclusions in secondary schools and is reported in arrears due to national data collection and publication.</p> <p>In the 2016-17 academic year the permanent exclusions rate for secondary schools in Buckinghamshire was 0.25%, which was above both national and regional averages. The rate is slightly higher than in 2015-16, but the rate of increase has slowed significantly.</p> <p>Improvement Actions: We are implementing recommendations from the Education Select Committee report in July, including conducting a targeted Side by Side project to reduce exclusions, improving websites and promoting uptake of Educational Psychology services.</p>

Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of empty properties across the County Council estate that are void (excluding schools)	5% (less than)	1.8%	GREEN	Benchmark not currently available	<p>This indicator measures the number of empty properties that are part of the council’s property estate. Across the whole of the council’s property estate (excluding schools) 1.8% of properties are empty, which is meeting the 5% target (it is good to be low).</p> <p>There were a total of 11 vacant properties at the end of Q2, where plans are either being developed to change how the properties are being used or for the properties to be sold where they are no longer needed. These 11 properties were also vacant at the end of Q1, they include both corporate and investment properties (both smaller and larger properties e.g. Old County Offices).</p>
2 Value of all unsecured debt that is over 90 days	£3.5m (to be below)	£3.2m	GREEN	Benchmark not currently available	<p>This indicator measures outstanding debt that is not secured against a property or other asset. Unsecured debt has reduced £0.4m since Q1 to £3.2m in Q2, below the target of £3.5m. We have introduced new process to improve how debt is collected, which has reduced the amount of outstanding debt overall, but older debt still remains more difficult to collect.</p> <p>Actions:</p> <ol style="list-style-type: none"> 1. All outstanding unsecured debt is being reviewed, focusing on the largest and oldest debts within each Business Unit. 2. Continuing to tackle ‘high risk’ unsecured debt in Adult Social Care. 3. New processes are being introduced to address unsecured debt between services and the debt management teams, including improved reporting of debt across the council.
3 % total capital spend across BCC (forecast) compared to Budget	100% (to remain between 90-110% of capital budget)	91.4% (forecast EOY underspend)	GREEN	Benchmark not currently available	<p>As reported in the Q2 2018/19 Finance Monitoring Report November 2018, the council is forecasting an underspend of 8.6% (£10.74m) for the financial year 2018/19. The target for this indicator is for capital spending (forecast) to remain between 90% and 110% of the capital budget.</p> <p>Improvement Actions</p> <p>The main reasons for the capital variance and the associated actions are:</p> <ol style="list-style-type: none"> 1. Health & Wellbeing (respite service) with a -£2.8m variance - a review of capital requirements is being undertaken. 2. Growth & Strategy schemes funded by the Local Enterprise Partnership, which experienced a £891k slippage on gross expenditure. 3. Delays in the Waterside North project totalling £1.97m 4. There is a £280k slippage within the freight strategy capital budget, due to delays in implementation. 5. Slippage in the delivery of the Aylesbury Study Centre project totalling £1.16m 6. £2.4m slippage on Transportation projects

All areas of lower than expected performance (Red or Amber)					
Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % Overall revenue (forecast) variance across the council	£0 overspend (0%)	0.1% (forecast EOY overspend)	AMBER	Benchmark not currently available	<p>As reported in the Q2 2018/19 Finance Monitoring Report November 2018, the council is forecasting a 0.1% (£0.199m) overspend of its revenue budget for the end of 2018/19. This includes a £4.1m overspend in Children's Services, £2.25m overspend in Health & Wellbeing, £0.99m overspend in Education, and £1.54m overspend in Resources. These forecast overspends are largely offset by a forecasted underspend of £6.92m in Corporate Costs.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. The spending position will be monitored on a monthly basis. 2. All Portfolios forecasting an overspend are continuing to implement action plans to mitigate these pressures. 3. All Portfolios have carried out a detailed review of their budgets and are implementing actions to bring the overall Council spend to within the approved budget.
2 % of BCC Website pages that meet accessibility standards	Graduated Target Q1: 68% Q2: 69% Q3: 70% Q4: 75%	65%	RED	BCC: 65% Local Authority Average: 68%	<p>This indicator measures the percentage of pages on the BCC Website that meet equal access standards, which enables everyone to be equally able to use and access information on the BCC Website. At the end of Quarter 2, 65% of pages on the BCC Website met accessibility standards, which is below the 69% target for this quarter. Performance has stayed the same since Q1, however increases are expected in the latter stages of the year following the delivery of the improvement plan. Although below target, accessibility is part of the SOCITIM rating for the BCC Website, which has recently improved from a Two Star rating to a Three Star rating.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. The changes that need to be made to the BCC Website to improve accessibility standards have been identified and a plan is in place to deliver these improvements towards the end of 2018/19. 2. Investment available for new analytics software to assist in targeting pages on the main website and microsites for improved accessibility.

3	Number of Sickness days lost per Full Time Equivalent employees	8.5	9.5	<p>AMBER</p> <p>Mean for all single tier or county councils in England 9.3 days 2016/17.</p>	<p>This indicator measures the average number of day's lost due to sickness absence per full time equivalent (FTE) employee.</p> <p>Over the last year, the average sickness was 9.5 days per FTE, an increase of 0.2 days from the Q1 rolling year period. Performance remains above the 8.5 day target. This year shows a slight increase compared to Q2 in the previous year (17/18) where 9.2 days were lost per FTE across BCC. The current value is slightly above the latest county council average result of 9.3 sickness days lost per FTE (2016/17). A significant amount of detailed reporting is being undertaken in this area to give Business Unit Senior management teams the best possible data to act on.</p> <p>Following the promotion of Mental Health Day and signing the Time to Change pledge, we are actively encouraging people to take sickness absence where required, due to this we expect to see an increase in sickness through improved recording.</p> <p>Improvement Actions</p> <ol style="list-style-type: none"> 1. Promotion of Wellbeing both directly to employees and through line managers 2. Encouraging absence management conversations and interventions at the earliest possible point. 3. Managers are supported through the Health and Attendance process by HR to minimise length of absence and a reach a conclusion that is in the best interests of the business and employee (where appropriate) 4. The Health and Attendance policy is currently under revision to streamline processes where possible. 5. High risk cases are reported to the CEO and Executive Directors on a monthly basis with facilitated discussions by the Corporate Management Team.
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▶	Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1	% of Sustainable Drainage planning applications responded to within 21 days or agreed timeframes (performance measure)	100% (>85% locally) (15% points tolerance every quarter)	98%	GREEN	No benchmark currently available.	<p>The current position is 98% across all types of applications (Major >10 properties; Minor <10 properties; County).</p> <p>The number of major applications are steady in terms of the numbers 268 received and 256 responded to on time in 2018/19 compared with 261 received and 248 responded to in 2017/18.</p> <p>The overall number of applications in first two quarters have increased from 373 (17/18) to 589 (2018/19) - increase of 58% over 2017/18 numbers. This increase is due to responding to more minor applications from Districts. BCC are paid for these applications and the income in 2017/18 was £30k which will increase to £50k in 2018/19.</p> <p>Changes to the team have been implemented to meet increased demand from the District Councils for responses on minor applications.</p>
2	Country Parks: Visitor Numbers (performance measure)	Graduated Target: Q1: 293,000 Q2: 596,000 Q3: 798,000 Q4: 1,010,000	600,318	GREEN	Local Target (No benchmark available)	<p>The annual target for this measure is 1,010,386 visitors by year end, and the cumulative target for Q1 and Q2 is 596,000. Since April there have been 600,318 visitors to Country Parks (In Q2 this year we had 303,149 visitors which is higher than the same period last year of 295,040 visitors).</p> <p>This increase isn't as large as it could have been because the weather was too hot, however an increase was still seen. This could be due to new attractions at Black Park: Nets Kingdom - first in the country for Go Ape, and Dinosaur Trail. Trip Advisor Satisfaction ratings remain in line with last year around 95%.</p>

All areas of lower than expected performance (Red or Amber)					
Measure	Target	Current position	RAG	Benchmarking	Commentary
1 NI192: % of waste collected for recycling, reuse, composting or anaerobic digestion from Household Sources (household collection and HRCs) (contextual indicator)	60%	60.3% This result is for Q1 2018/19 because the data runs a quarter in arrears	GREEN	2016/17 Ranked 33/350 for the total household waste recycling, composting and reuse rate for English local authorities.	<p>Performance in Q2 is 60.3% which is above the target of 60%. This is the first time recycling rates have ever gone above 60%. This is mirrored by a reduction in residual waste going to the EfW (33.5% against a target of 40%).</p> <p>This time of year (Apr-Jun) is always high because of increased composting rates and this year May was exceedingly high for green waste because of the rainfall and warm temperatures. This is confirmed by record highs in composting or anaerobic digestion which is currently 32.3% (27.4% in Q2:15/16, 30.1% in Q2 16/17, and 30.7% in Q2:17/18. Over the same period our HRC's recycling rates have remained consistently high around 74% against a target of 70%.</p> <p>The improvement could in part be due to greater public awareness around recycling due to Countywide recycling promotion campaigns (end of last year) and programmes like Blue Planet.</p>

▶ Key areas of good performance Measure	Target	Current position	RAG	Benchmarking	Commentary
1 % of overall Capital Carriageway Maintenance Programme delivered by year end (performance measure)	90%	99%	GREEN	Local Target (No benchmark available)	<p>Performance during Q2 has remained high at 99% against a target of 90%. This is slightly lower than Q1 where 100% was achieved, however the number of activities performed has increased significantly over the last quarter from 63 in Q1 to 180 in Q2.</p> <p>The reason for this increase in activity is due to the seasonably better weather (Jul-Aug-Sep) where specialist work items such as surface dressings and micro-surfacing are also programmed in (alongside routine items).</p> <p>Note: Quarters 1-3 will show % activities delivered against quarterly programme, Q4 will show year end result.</p>
2 % of Category 1 defects repaired in 2 working days (as per current Highways Safety Inspection Policy) (performance measure)	93%	97%	GREEN	Local Target (No benchmark available)	<p>Performance in Q2 has significantly improved since Q1 from 43% to 97% against a target of 93%, and is also higher than Q2 last year which was 94%.</p> <p>There were 2,527 defects in Q1 compared 660 in Q2 of this year, so as work volumes have returned to normal, so too have performance levels. It is also worth noting that despite similar work volumes with Q2 last year 664, we are performing better this year.</p>
3 % of Highways Development Management planning applications responded to within 21 days or agreed timeframes (performance measure)	100% (>72% Locally) (28% points tolerance every quarter)	86%	GREEN	No benchmark currently available.	<p>Performance at Q2 is 86% against a statutory target of 72%, which is the highest it has been this year and last, this is good given the number of applications is the highest (631) it has been in a quarter this year and last.</p> <p>The reason for this high-performance being maintained was due in part to a slight reduction in major applications during the period, which are more complex, in addition to the well-managed resourcing of local plan examinations and EWR Transport Works Act Order, which were successfully covered by other staff which sustained resource for the high volume of minor applications that came in.</p>

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

<p>1 % of overall Capital Footway Programme delivered by year end (performance measure)</p>	<p>90%</p>	<p>0% (Zero)</p>	<p>RED</p>	<p>Benchmark data not currently available.</p>	<p>Resources have had to focus on delivering the capital carriageway surfacing programme (as evidenced by a doubling of activity from 63 to 180 work items) during Q1 and Q2, the construction phase of the footway structural repair programme has been moved back to commence between November and March 2019 as the surfacing works are substantially complete and this work is not weather susceptible.</p> <p>Note: Quarters 1-3 will show % activities delivered against quarterly programme, Q4 will show year end result.</p> <p>Improvement Action We are anticipating full delivery by year end, however the delivery needs to be better profiled to ensure customer expectations are better managed. In future years, we will look to review the up-front resources available to ensure that it is (assuming no further significantly large schemes in year)</p>
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