



Leader's Portfolio – **Cllr Martin Tett**

Summary of Q3 2018/19 Performance Indicators

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Red Performance Indicators

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Amber Performance Indicators

3

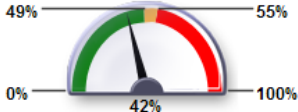
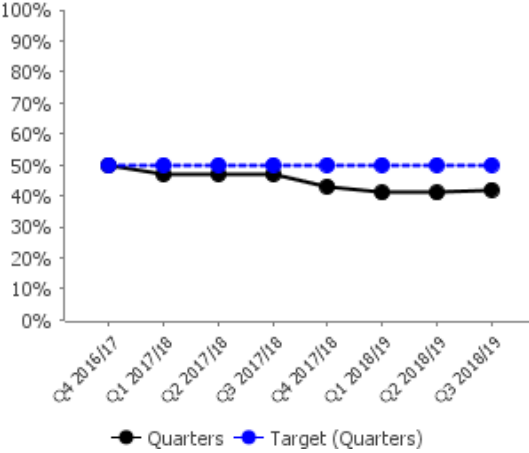

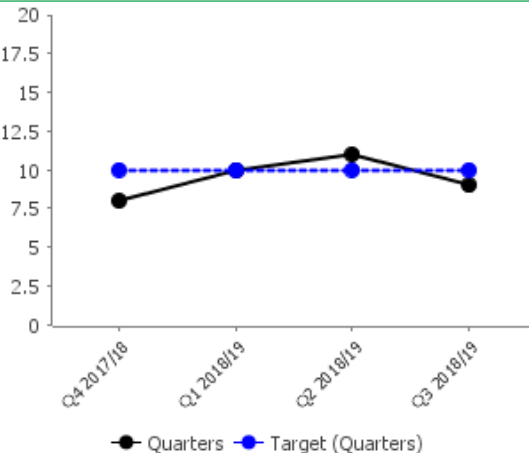
Green Performance Indicators

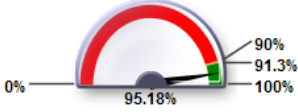
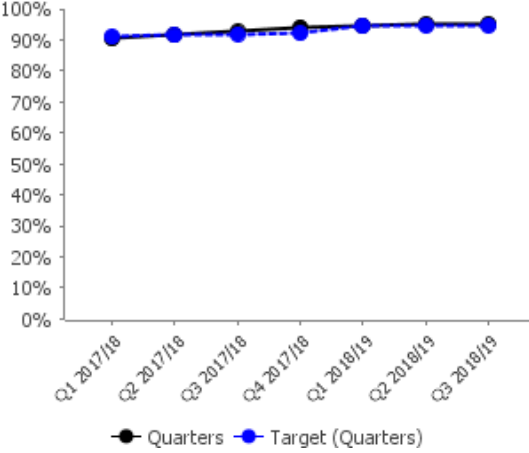
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PIs without a RAG status

Q3 Leader's GREEN Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
BCC claimant count rate as % of national claimant count rate	Aim to Minimise	42%	50%	<p>Q3 2018/19 result</p>  <p>42%</p> <p>Good to be Low</p>	 <p>Quarters Target (Quarters)</p>	<p>Claimant Count Rates (Dec 2018):</p> <p>Hertfordshire 1.4% Oxfordshire 1.2% TV Berkshire 1.4% Buckinghamshire 1.0% Aylesbury Vale 0.9% Chiltern 0.8% South Bucks 0.8% Wycombe 1.2%</p>	<p>At 1.0% of working age residents, Buckinghamshire's claimant count rate remains very close to its previous lowest level of 0.9% and well below the long term average and the national average (2.4%). Over the year, the claimant count has risen 11.7% (335 residents), just over half the national rate of increase (23%). In previous years Buckinghamshire's claimant count has shown rises of this scale after Christmas before improving over the year from the Spring. Upcoming data releases will give greater clarity as to whether December's rise is the start of a general weakening of the local labour market or whether retail and hospitality recruitment broke with previous norms this Christmas and staffing levels were reduced earlier than usual.</p>
Rank against other LEP's for number of new business registrations as defined by Companies House	Aim to Minimise	9	10	<p>Q3 2018/19 result</p>  <p>9</p> <p>Good to be Low</p>	 <p>Quarters Target (Quarters)</p>	<p>Rank in Top 10/38 LEPs</p>	<p>There were 1,304 businesses registered in Buckinghamshire in Q3 2018/19 (October to December), according to Companies House. This took the total new registrations in 2018 to 5,195, the highest rolling four quarter total since Q1 2017/18. Registrations in 2018 (calendar year) were 8.9 per cent higher than in 2017 (calendar year) but 0.3 per cent below the 5,215 registrations made in 2016 (calendar year).</p> <p>Only nine of the 38 Local Enterprise Partnerships bettered England's rate of new company registrations in the last quarter, with Buckinghamshire ranking 9th with 30.6 registrations for every 10,000 residents aged 16 or over. Buckinghamshire ranked 3rd among county council areas behind Worcestershire (53.7) and Hertfordshire (37.1).</p>

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
To improve availability of fixed fibre to residential and business premises.	Aim to Maximise	95.18%	94.66%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		<p>As at 31/01/2019: Buckinghamshire 95.31%, Central Beds 96.67%, Hertfordshire 97.25%, MK 98.47%, Northamptonshire 97.77%, Oxfordshire 96.92%, Windsor and Maidenhead 96.16%</p>	<p>Performance (end Dec) is 95.18% against the target of 94.66%, which is the third quarter in a row where we have been above target. It should be noted that at Q1 we changed the reporting mechanism to reflect the UK Superfast broadband, which is classified as 24mbps rather than the EU definition of 30mbps, as according to the Connected Counties Programme targets. 21 new live structural units were installed in Q3, providing either cabinet or full fibre connections and improving broadband provision to 970 premises across Buckinghamshire. The areas affected include Amersham, Beaconsfield, Buckingham, Chesham, Denham, Gerrard's Cross, Great Missenden, Iver, Little Chalfont, Marlow, Princes Risborough, Stone, Turville Heath, Wendover and Winslow.</p>

Q3 Leader's MONITOR Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary															
% of new floor space developed in enterprise zones relative to projected amount in plan (performance measure)	Aim to Maximise		<table border="1"> <caption>Trend Chart Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>105</td> <td>100</td> </tr> <tr> <td>Q2 2017/18</td> <td>105</td> <td>100</td> </tr> <tr> <td>Q3 2017/18</td> <td>108</td> <td>100</td> </tr> <tr> <td>Q4 2018/19</td> <td>100</td> <td>100</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2017/18	105	100	Q2 2017/18	105	100	Q3 2017/18	108	100	Q4 2018/19	100	100	Benchmark not currently available.	<p>Annual measure reported in quarter 2, commentary below is for 2018-19</p> <p>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.</p> <p>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.</p> <p>At Woodlands, development commenced in August 2018 on the 23,040 sqm of employment floorspace due for completion in Q2 2019/20.</p> <p>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.</p>
Quarter	Quarters (%)	Target (Quarters) (%)																		
Q1 2017/18	105	100																		
Q2 2017/18	105	100																		
Q3 2017/18	108	100																		
Q4 2018/19	100	100																		

Q3 Leader's MONITOR (no data) Performance Indicators

Generated on: 13 March 2019

PI	Commentary
Successful delivery of key infrastructure schemes (A355, A4 Taplow, ELR South, SE Aylesbury LR, High Wycombe Town Centre Masterplan, A40, A418 & Oxford to Cambridge Expressway)	The majority of projects are on track and on budget with the exception of two: Eastern Link Road South - owing to the finalisation of S106, land negotiations and funding, all of which are progressing well; and A4 Taplow – because further work as required to reduce the construction costs for the scheme. Advance utilities works have been programmed to commence in March 2019 and construction of the main cycle way will begin in April 2019.
Facilitating the delivery of Heathrow in an effective way (contextual)	The role of BCC is to ensure that mitigations to offset any potential impacts to our residents, and inversely potential opportunities, are secured from the expansion of Heathrow. These include: (1) Employment and Training opportunities are being sought by asking Heathrow to develop and provide aviation-related training through the colleges and universities in Buckinghamshire. (2) Mitigation and Environmental enhancement opportunities have been identified in Southern Bucks, including multiple national infrastructure schemes in and around the Ivers, which seek to reduce the traffic impacts, including the delivery of the Iver Relief Road. (3) Mitigation of Public Health impacts both mental and physical are being sought through reducing aircraft noise, particularly at night. This will be achieved by Heathrow holding community consultation events to inform the public and alleviate concerns.



Community Engagement & Public Health - **Cllr Noel Brown**

Summary of Q3 2018/19 Performance Indicators

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Red Performance Indicators

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Amber Performance Indicators

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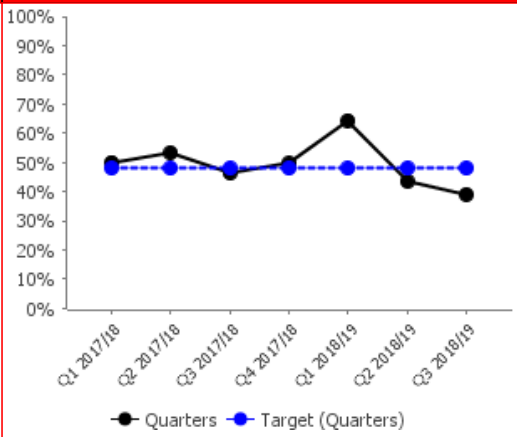
Green Performance Indicators

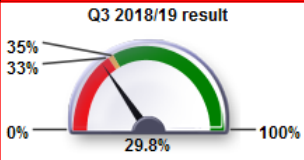
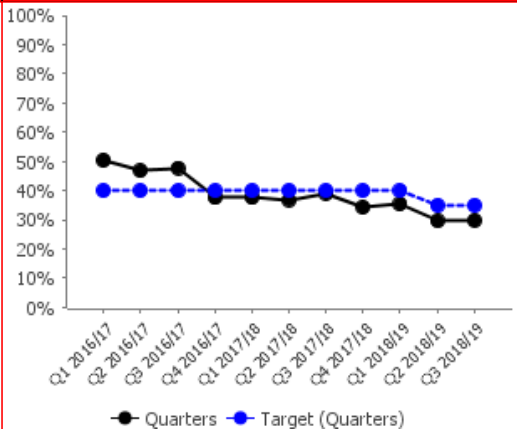
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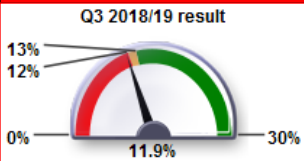
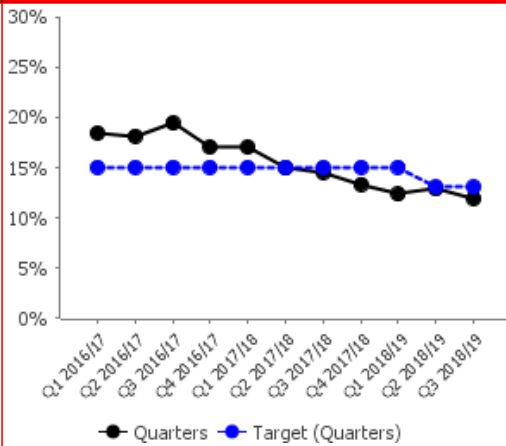
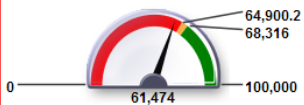
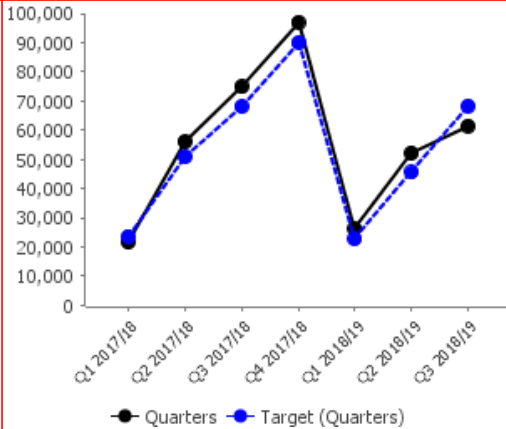
PIs without a RAG status

Q3 Community and Engagement RED Cabinet Performance Indicators

Generated on: 13 March 2019

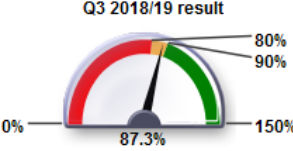
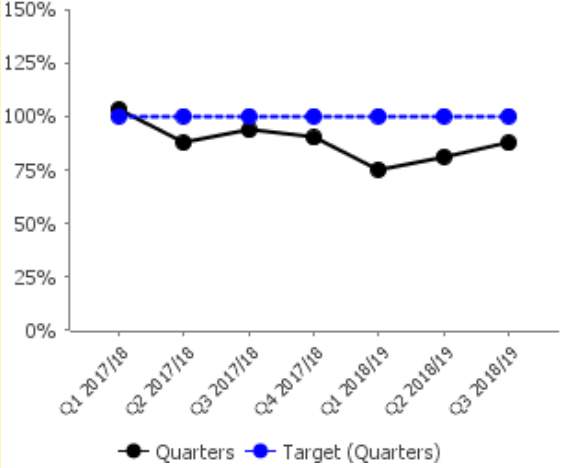
PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% receiving an NHS Health Check of those who were offered an NHS Health Check	Aim to Maximise	39%	48%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		<p>43.6% (Q2 2018/19 England)</p> <p>39.6% (Q2 2018/19 South East region)</p> <p>43.8% (Q2 2018/19 mean of CIPFA peers)</p>	<p>Performance is reported for Q2 because data are a quarter in arrears. For Health Checks undertaken in primary care, clinical pressures staff shortages are still affecting performance. There was an increase of 500 invitations for Q2 (7,059 invitations sent out compared to 6,544 in Q1). The number of checks delivered in Q2 was 2,754 which is 90 fewer than in Q1.</p> <p>Due to an additional 515 invitations being sent in Q2, the proportion of individuals receiving a health check of those offered is smaller for Q2 compared to Q1. This indicator only considers how many people who were invited in that quarter then went on to attend a Health Check in that quarter. Many people will attend their health check in another quarter.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Work is happening to support GP practices to deliver Health Checks and increase the quality of those delivered. However, staff shortages in primary care mean other clinical activity takes priority in some practices. • Training and sharing of best practice is happening for all practices but particularly for the practices with low performance. • BCC is working with practices to ensure their ICT systems are properly capturing the numbers of invitations sent and Health Checks delivered each quarter. Some practices have reported fewer checks than they delivered. • BCC is engaged in regional and national meetings and networks for Health Checks to ensure we are delivering best practice. • CCG locality leads have received Health Checks data for all practices to support BCC in promoting Health Checks and overcoming any barriers to delivery.

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% of successful alcohol treatment completions of those in treatment	Aim to Maximise	29.8%	35%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		<p>38.6% (Q2 2018/19 England)</p> <p>38.5% (Q2 2018/19 South East region)</p> <p>39.2% (Q2 2018/19 mean of CIPFA peers)</p>	<p>This performance data relates to Q2 because substance misuse data is always verified nationally a quarter in arrears. Data is cumulative performance over a 12 month rolling period; therefore performance in the previous quarter always has an impact on the next. Early unverified Q3 data suggests an improvement with alcohol successful completions at 32.7%. Although the introduction of a 'no wrong door' policy in October 2017 has resulted in an additional 100 people being referred into service, this has also resulted in an increase in complex patients, including those with chronic liver disease caused by decades of drinking and those with significant mental health needs. Currently 48.6% of all alcohol clients are 'complex'.</p> <p>Complex clients are less likely to successfully complete drug or alcohol treatment due to low levels of motivation and other health needs. In Q2 11% of people who completed treatment returned to treatment within 6 months. However the earlier someone is referred the greater the chance of success and Q3 estimates suggest that 48% of those referred for the first time successfully completed treatment.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Weekly motivation workshops to prepare people for treatment. These assess how committed patients are to quitting alcohol. • Next financial year work will start with GPs to make earlier referrals. Although this may initially result in more people with greater alcohol related illness coming into treatment, in the longer term people will be referred earlier resulting in an increase in successful completions.

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% of successful drug treatment completions of those in treatment	Aim to Maximise	11.9%	13%	 <p>Q3 2018/19 result</p> <p>13%</p> <p>12%</p> <p>0%</p> <p>11.9%</p> <p>30%</p> <p>Good to be High</p>	 <p>30%</p> <p>25%</p> <p>20%</p> <p>15%</p> <p>10%</p> <p>5%</p> <p>0%</p> <p>Q1 2016/17 Q2 2016/17 Q3 2016/17 Q4 2016/17 Q1 2017/18 Q2 2017/18 Q3 2017/18 Q4 2017/18 Q1 2018/19 Q2 2018/19 Q3 2018/19</p> <p>● Quarters ● Target (Quarters)</p>	<p>14.2% (Q2 2018/19 England)</p> <p>16.1% (Q2 2018/19 South East region)</p> <p>16.2% (Q2 2018/19 mean of CIPFA peers)</p>	<p>This performance data relates to Q2 because substance misuse data is always verified nationally a quarter in arrears. Data is cumulative performance over a 12 month rolling period; therefore performance in the previous quarter always has an impact on the next. Early unverified Q3 data suggest drugs successful completions will be 13%.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • The medication for all drug users in treatment has been reviewed to ensure that their dosage gives them the best chance of leading a normal/drug-free life. • The motivation workshops for people with alcohol issues are also delivered to drug users, which is having a positive impact on completion rates. • Two additional staff have been recruited to work with people who have successfully completed treatment to help prevent them from starting using drugs or drinking again in the future, which should lead to improved long term outcomes as the staff will help users find suitable accommodation, work, and access to health services.
Total number of visitors to Bucks County Museum	Aim to Maximise	61,474	68,316	 <p>Q3 2018/19 result</p> <p>64,900.2</p> <p>68,316</p> <p>0</p> <p>61,474</p> <p>100,000</p> <p>Good to be High</p>	 <p>100,000</p> <p>90,000</p> <p>80,000</p> <p>70,000</p> <p>60,000</p> <p>50,000</p> <p>40,000</p> <p>30,000</p> <p>20,000</p> <p>10,000</p> <p>0</p> <p>Q1 2017/18 Q2 2017/18 Q3 2017/18 Q4 2017/18 Q1 2018/19 Q2 2018/19 Q3 2018/19</p> <p>● Quarters ● Target (Quarters)</p>	None available	<p>Visitor numbers are down on the same period last year - museum reports this is because of good weather in October half term (50% fewer visitors that week).</p> <p>The Museum has been successful in its application to the Arts Council for National Portfolio Organisation Status (NPO) and will receive funding of £100,000 pa for the period 2018 – 2022. This additional funding will be used to invest in workforce development, community engagement and marketing and will help drive up performance</p> <p>Improvement Action:</p> <ul style="list-style-type: none"> • The museum is stepping up its marketing activity for events and activities and will have a greater presence in town in the future.

Q3 Community and Engagement AMBER Cabinet Performance Indicators


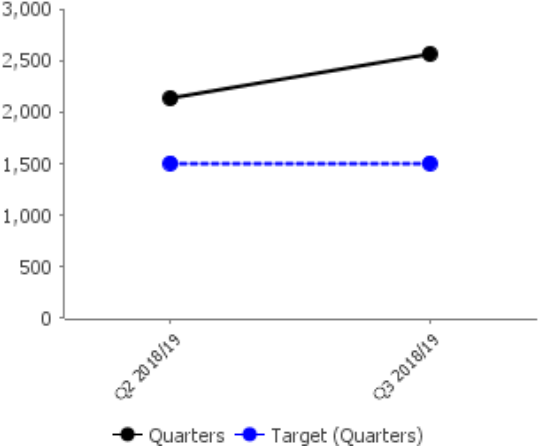
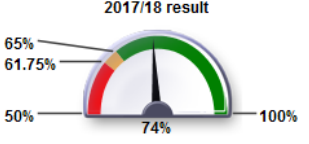
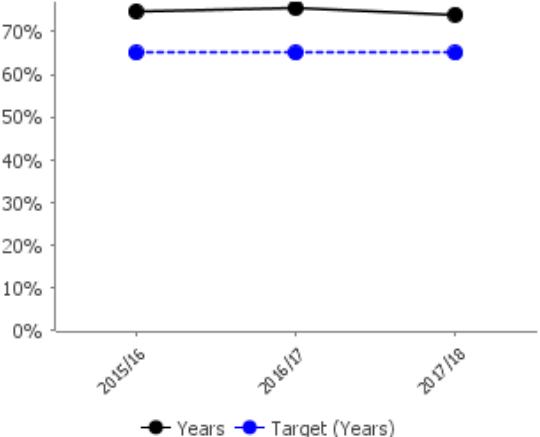
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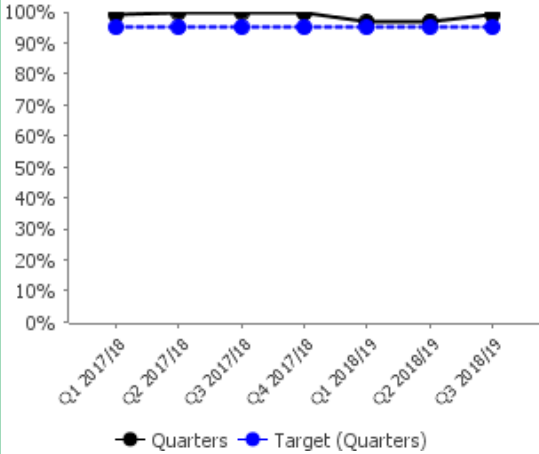
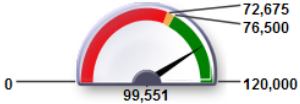
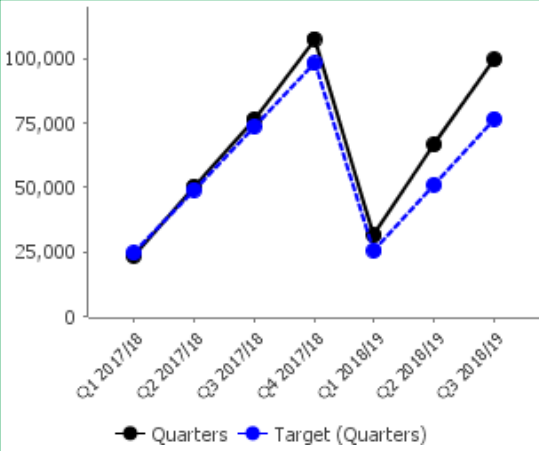
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of the eligible population invited to an NHS Health Check	Aim to Maximise	87.3%	100%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		<p>87.1% (Q2 2018/19 England)</p> <p>90.1% (Q2 2018/19 South East region)</p> <p>85.1% (Q2 2018/19 mean of CIPFA peers)</p>	<p>Performance is reported for Q2 because data are a quarter in arrears. Invitations are issued by individual GP practices. In Q1 there were 15 practices that were unable to invite all eligible patients, and these have started to invite those previously missed.</p> <p>In Q2, practices invited 7,059 people for a Health Check compared to the 6,544 they invited in Q1, which is an 8% (515) increase in the number of invitations sent this quarter. Clinical pressures in primary care continue to affect practices' ability to deliver health checks so some are not inviting additional people.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Work is being initiated with GP localities to explore with GP's how to improve Health Check delivery and quality. • BCC is also looking at ways to share clinical resource between practices to facilitate more people being invited for a Health Check.

Q3 Community and Engagement GREEN Cabinet Performance Indicators

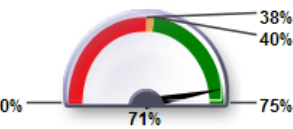
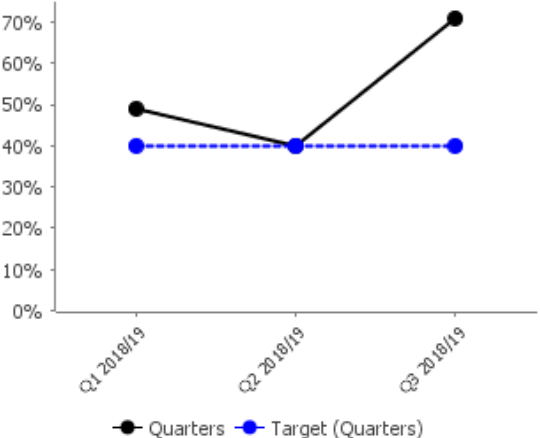
Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Appointment offered within 48 hours to clients attending GUM clinics	Aim to Maximise	99.8%	98%	<p>Q3 2018/19 result</p> <p>Good to be High</p>		There is no national benchmarking available for this indicator but this is a clinical standard which has to be achieved by all sexual health services.	Performance is reported for Q2 because data are a quarter in arrears. The bSHaW (Bucks Sexual Health and Wellbeing) Buckinghamshire Healthcare NHS Trust service continues to consistently perform well against this indicator and is achieving above the 98% target for offering an appointment to service users within 48 hours.
% of births that receive a face-to-face New Birth Visit within 14 days by a health visitor in the quarter	Aim to Maximise	96.2%	90%	<p>Q3 2018/19 result</p> <p>Good to be High</p>		<p>88.3% (Q1 2018/19 England)</p> <p>88.0% (Q1 2018/19 South East region)</p> <p>90.1% (Q1 2018/19 mean of CIPFA peers)</p>	Performance is reported for Q2 because data are a quarter in arrears. Performance (96.2%) has exceeded the target (90%). Performance continues to compare well with England and the South East region for Q1 benchmarks. Q2 benchmarking is not yet available.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Number of clients screened by Live Well Stay Well	Aim to Maximise	2,562	1,500	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <p>—● Quarters —● Target (Quarters)</p>	None available	<p>Performance is reported for Q2 because data are a quarter in arrears.</p> <p>The new Live Well Stay Well service (which provides advice to encourage healthy lifestyles) completed 2,562 screenings in Q2, 23% of the screens have been completed online, with follow up as appropriate. Since this is the second quarter for this new service it is encouraging to see that screenings have increased from Q1 and the service is performing well.</p>
Improvement in risk category for those clients working with an Independent Domestic Violence Advocate (IDVA)	Aim to Maximise	74%	65%	<p>2017/18 result</p>  <p>Good to be High</p>	 <p>—● Years —● Target (Years)</p>	None available	<p>Annual measure due to be reported in quarter 4, commentary below is for 2017-18</p> <p>This indicator measures the impact of the Independent Domestic Violence Advocate (IDVA) service.</p> <p>A reduction in risk was reported for 74% of people who engaged with the service in Quarter 3, which is above target (65%).</p>

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of customers who rate the registration service as good or excellent	Aim to Maximise	99%	95%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		None available	Customer Survey done for the month of November 2018 for birth, death and marriage registration appointments and attending ceremonies. Results consist of 116 responses of which 110 were excellent, 5 good and 1 other.
Number of downloads per annum in Libraries	Aim to Maximise	99,551	76,500	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		None available	Performance (99,551) up to Q3 2018/19 has exceeded the target of 76,500. While the winter/Christmas period is a quieter time for many of our libraries, the eLibrary has still seen growth in issues and users, and we continue to add fresh content that keeps our customers engaged with the service.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Number of individuals in voluntary organisations supported through training (VCS infrastructure) (contextual)	Aim to Maximise	291	180	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		None available	This is an annual target and the target was achieved in the first quarter.
CSC Calls abandoned - % of phone calls in Customer Service Centre abandoned before being answered	Aim to Minimise	4%	10%	<p>Q3 2018/19 result</p>  <p>Good to be Low</p>		<p>Nottinghamshire <5%, Oxfordshire <5%, Cambridgeshire 15%, Staffordshire 10%, Warwickshire <5%</p>	<p>Performance improved from Q2 with a reduction from 14% to 4%; below the 10% target. This improvement was influenced by reduced call volume over Q3 compared to Q2, with the promotion of "Fix my Street" continuing to encourage customers to self-serve.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Work is continuing with the digital team to identify opportunities to move customer services online. • Development of voice recognition technology to remove "switchboard" calls.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary												
CSC Calls Answered in 29 seconds or less	Aim to Maximise	71%	40%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <table border="1"> <caption>Trend Chart Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2018/19</td> <td>49</td> <td>40</td> </tr> <tr> <td>Q2 2018/19</td> <td>40</td> <td>40</td> </tr> <tr> <td>Q3 2018/19</td> <td>70</td> <td>40</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2018/19	49	40	Q2 2018/19	40	40	Q3 2018/19	70	40	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. A large improvement has been made from Q2, with an increase from 40% to 71%; above the 40% target.</p> <p>December was a particularly quiet month, which increased the timeliness of response. High volumes of Client Transport calls reduced timeliness in Q2, however as bus passes have been issued the call volume has reduced in Q3.</p>
Quarter	Quarters (%)	Target (Quarters) (%)																	
Q1 2018/19	49	40																	
Q2 2018/19	40	40																	
Q3 2018/19	70	40																	



Health & Wellbeing – Cllr Lin Hazell

Summary of Q3 2018/19 Performance Indicators

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Red Performance Indicators

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Amber Performance Indicators

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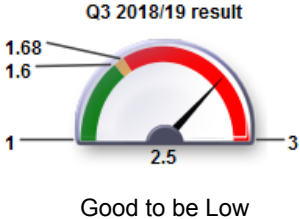
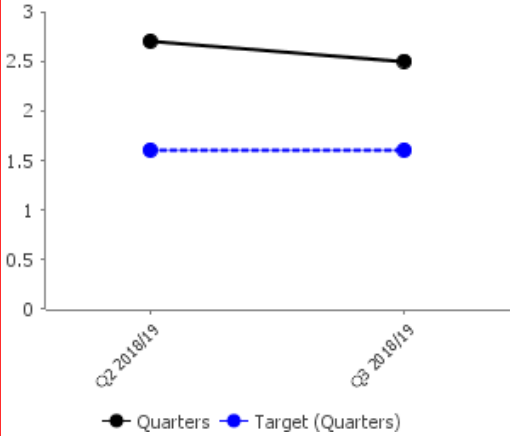
Green Performance Indicators

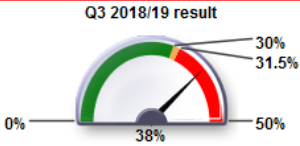
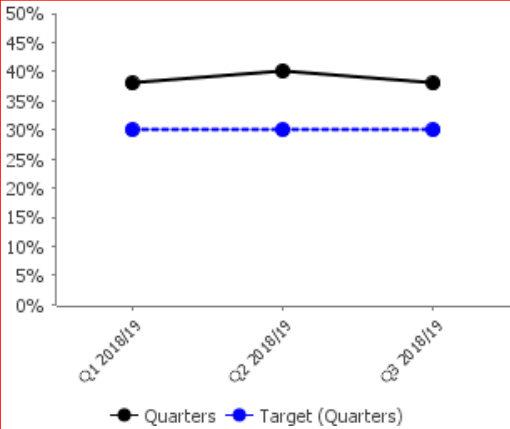
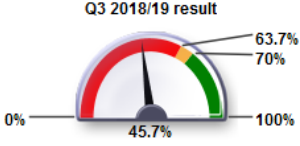
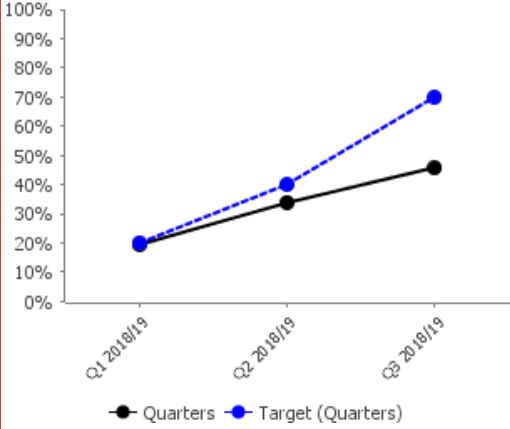
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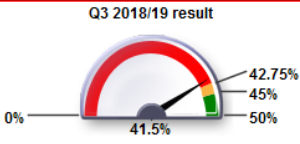
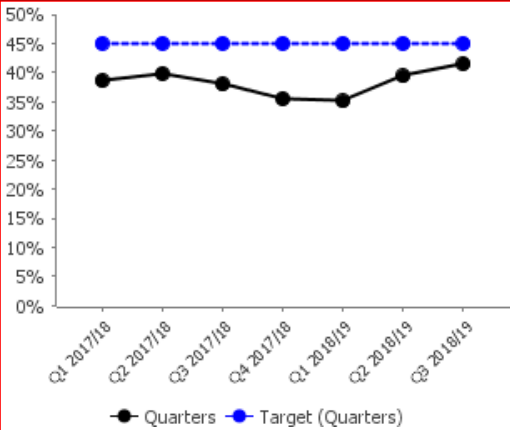

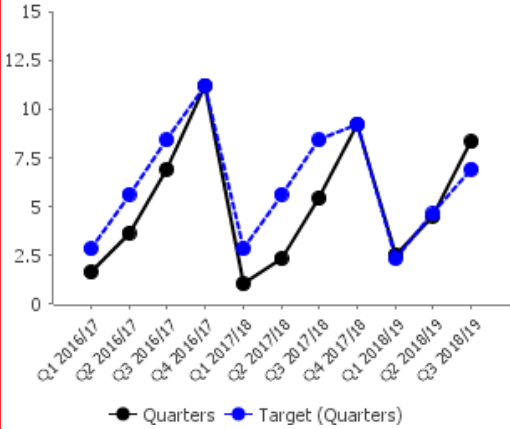
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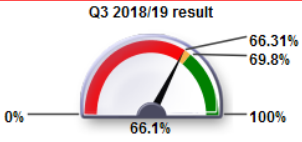
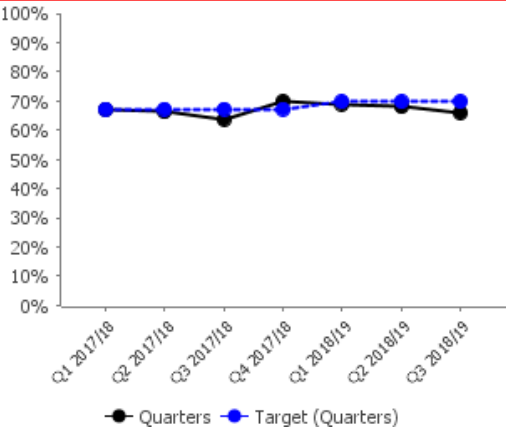
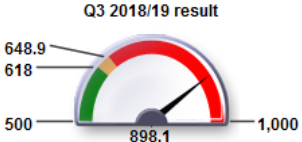
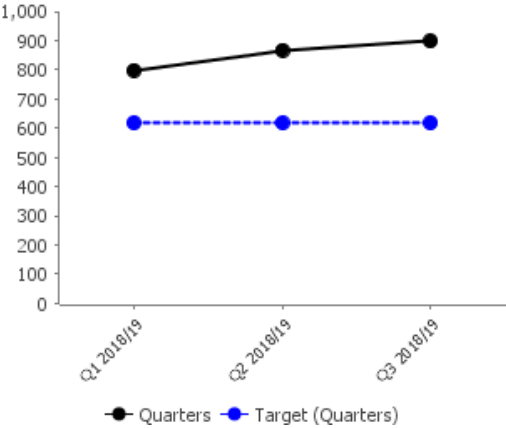
Q3 Health and Wellbeing RED Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
Delayed transfers of care from hospital per 100,000 population (attributable to Social Care)	Aim to Minimise	2.5	1.6	<p>Q3 2018/19 result</p>  <p>Good to be Low</p>		2017/18 National: 4.3 Comparators: 5.2	<p>Performance for Q3 (quarter in arrears) is 2.5 per 100,000 population (lower = better). Although this is above (worse than) our stretching local target, we have seen a reduction since Q2 (2.7), and we remain significantly lower (better) than the national figure, and our comparator areas.</p> <p>These figures are for social care's performance but the last (unverified) data for the Buckinghamshire system was that delays in December were 964 days in the month compared to 1,241 in November. For the first time in this financial year the Better Care Fund targets for DTOC in December for All delays, Health and for ASC are below the targets set for the month.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Integration of health and social care discharge teams to reduce hand offs and delays • Discharge to assess plan in place to support timely discharge to an appropriate setting • Refresh and implementation of the Choice policy to assist flow and ensure patients understand discharge process on admission • Pilot for 6 day working at Frimley Health Foundation Trust

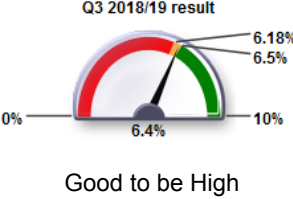
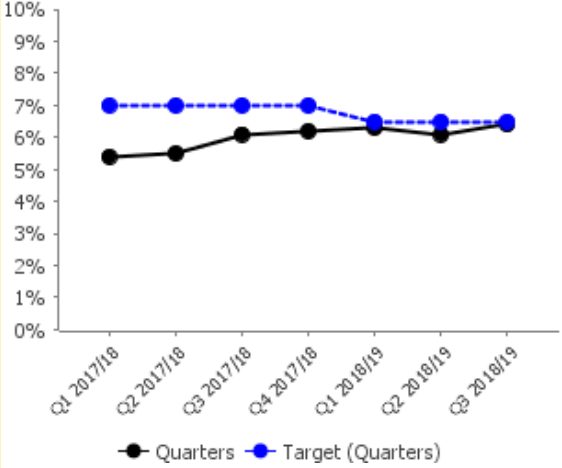
PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% contacts progressed to assessment	Aim to Minimise	38%	30%	<p>Q3 2018/19 result</p>  <p>Good to be Low</p>		Local Measure. Benchmarking not available.	<p>Performance for quarter 3 is 38% which is above target (30%) however an improvement on quarter 2 (40.1%). As this is a local measure there is no national or comparator benchmarking. A review of the Customer Service Centre process has resulted in more contacts being recorded than would have been before.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Continue to embed the new Better Lives quality assessment based upon the Strengths Based Approach model. • Consultation for re-design of front door services in February 2019. • Further Strengths Based Approach training planned Jan/Feb 2019
% Adult Social Care clients receiving an annual review	Aim to Maximise	45.7%	70%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		Local Measure. Benchmarking not available.	<p>Performance for quarter 3 is 45.7% which is below the quarterly target (70.0%) The performance improvement plan has been impeded by high levels of sickness across the workforce which has resulted in teams necessarily diverting resources in order to keep services safe. As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Re-evaluate the analysis of the outstanding reviews for 2018/19 to forward plan effective targeting of review activity up to the 31st March 2019 • Implementation of revised plan to maximise performance at year end • Continue to embed the new Better Lives review documentation to improve the quality and efficiency of recording reviews and outcomes

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% of people re-abled with an outcome of Independence	Aim to Maximise	41.5%	45%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		Local Measure. Benchmarking not available.	<p>Performance for quarter 3 is 41.5%, which is below the quarterly target (45.0%), however there has been an improvement each quarter since the beginning of 2018/19 (35.1%) as a result of Strengths Based working. As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Continue to broaden utilisation of Assistive Technology. Designing closer alignment of the Assistive Technology provider and services with new integrated BCC and BHT reablement teams • Continued programme of Strength-Based approach training and ethos to enable cultural change across BCC and BHT. Communications and cultural change action plan recently agreed and implementation commenced. • Focus on integration (not just alignment) of the BCC and BHT reablement teams under a single management structure, being considered by BCC and BHT in March/April. • Insight work to better understand performance is underway in April/May
Admissions of adults (under 65 yrs) into residential and nursing care. Rate per 100,000 of population.	Aim to Minimise	8.3	6.9	<p>Q3 2018/19 result</p>  <p>Good to be Low</p>		2017/18 National: 14.0 Comparators: 12.8	<p>Performance for quarter 3 is 8.3, which is above the target (6.9) for this quarter. This has been impacted by reviews resulting in a number of CHC clients being found to be no longer eligible for CHC funding and coming back to BCC. The national and comparator group averages are based on the year end performance for this measure so cannot be compared until Q4.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Continued high level of scrutiny of placements in forum to ensure appropriate care is put in place to meet the needs of the adult • Further Strengths Based Approach training planned Jan/Feb 2019

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% of adults with learning disabilities who live in their own home or with their family	Aim to Maximise	66.1%	69.8%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		2017/18 National: 77.2% Comparators: 73.9%	<p>Performance for quarter 3 is 66.1%, which is below target (69.8%) and below both national (77.2%) and comparator performance (73.9%) however is an improvement on Q3 last year (63.8%).</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Continued high level of scrutiny of placements in forum to ensure appropriate care is put in place to meet the needs of the adult Further Strengths Based Approach training planned Jan/Feb 2019 Discussions are ongoing with a provider partner to broker tenancies for service users Feedback has been given to District Councils in Bucks HomeChoice Allocation Policy to help increase accessibility to general needs housing
Average length of stay in Residential/Nursing care	Aim to Minimise	898.1	618	<p>Q3 2018/19 result</p>  <p>Good to be Low</p>		Peopletoo benchmark: 22 months (670 days) - 24 months (730 days)	<p>Performance for quarter 3 is 898.1 days which is above target (618 days) and an increase since quarter 2 (approx. 30 days). Fewer people ending placements this year including a high number of people with long stays (10yrs+) is impacting on this measure. New placements are reducing however the impact of this won't be seen until the placements end. As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Continued high level of scrutiny of placements in forum to ensure appropriate care is put in place to meet the needs of the adult Further Strengths Based Approach training planned Jan/Feb 2019 Insight work to better understand performance is underway

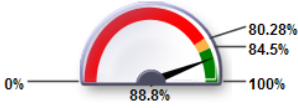
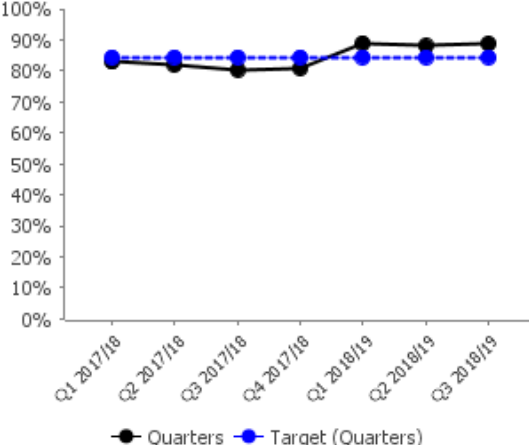
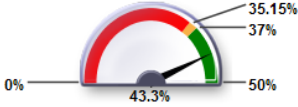
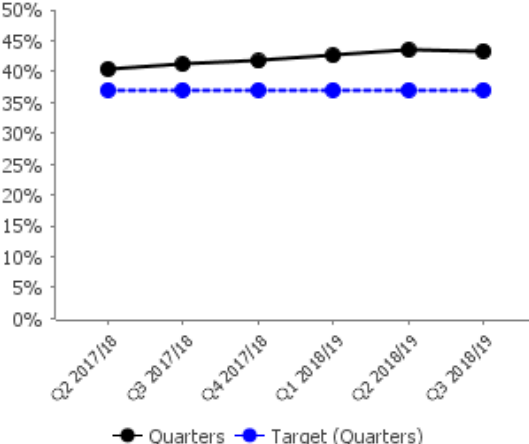
Q3 Health and Wellbeing AMBER Cabinet Performance Indicators


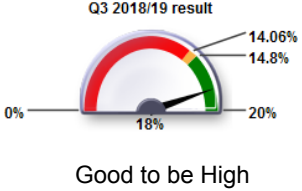
Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of adults with a learning difficulty in paid employment	Aim to Maximise	6.4%	6.5%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		2017/18 National: 6.0% Comparators: 7.6%	<p>Performance for quarter 3 is 6.4% which is just below target (6.5%) and improvement on the same period last year (6.1%) and the previous quarter (6.1%). Performance is above the national average (6.0%) but below comparator (7.6%) performance.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • The integration of the Supported Employment service in to day services is underway • Communications and briefing events are ongoing to ensure opportunities for clients are promoted across the service • Continue to work with adults in Supported Employment to move them across to open employment where appropriate

Q3 Health and Wellbeing GREEN Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of adults in contact with secondary mental health services who live independently	Aim to Maximise	88.8%	84.5%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		No benchmarking due to national data quality issues.	<p>Performance for quarter 3 is 88.8% which is an improvement on last quarter (88.0%) and above target (84.5%). This high level of performance has been sustained throughout the year and is expected to continue. There is no benchmarking data available due to national issues with data accuracy.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Regular review of performance with Service Managers to address emerging issues • Maintain improvements made around data quality compliance for service user information • Key focus on service user housing in reviews ensuring it meets their needs
% of clients using social care who receive direct payments	Aim to Maximise	43.3%	37%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		2017/18 National: 28.5% Comparators: 31.8%.	<p>Performance for quarter 3 was 43.3%, which is above the target of 37.0% and above both the national (28.5%) and comparator performance (31.8%). Performance continues to look positive for this indicator. As Better Lives is embedded into practice, we expect more people will utilise Direct Payments for arranging personalised support next year.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Roll out and expansion of Better Lives training across all service areas • MTP business case is being developed for 2019/20 to effective use of Direct Payments • Review of Direct Payment pathway and how this is managed internally

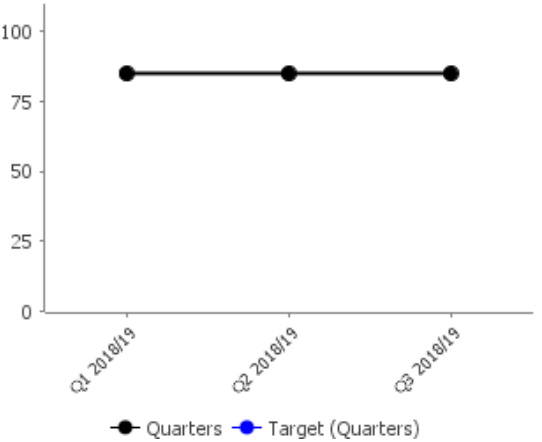
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Admissions of older people (65+) into residential and nursing care. Rate per 100,000 of population.	Aim to Minimise	249.8	300.6	 <p>Q3 2018/19 result</p> <p>Good to be Low</p>	 <p>Quarters Target (Quarters)</p>	2017/18 National: 585.6 Comparators: 544.9	<p>Performance for quarter 3 is 249.8, which is below the target (300.6) 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 in line with the same period in 2017/18.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Continued high level of scrutiny of placements in forum to ensure appropriate care is put in place to meet the needs of the adult Further Strengths Based Approach training planned Jan/Feb 2019 Winter discharge to assess (D2A) plan focusing on avoiding placements direct from hospital
% of adults with secondary MH services in paid employment	Aim to Maximise	18%	14.8%	 <p>Q3 2018/19 result</p> <p>Good to be High</p>	 <p>Quarters Target (Quarters)</p>	No benchmarking due to national data quality issues.	<p>Performance for quarter 3 is 18.0% which is an improvement on last quarter (16.0%) and above target (14.8%). This high level of performance has been sustained throughout the year and is expected to continue until year end. There is no benchmarking data available due to national issues with data accuracy.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Bid submitted for Individual Placement Support funding from the Department of Health to provide further support for people with mental health needs Regular review of performance with Service Managers to address emerging issues Maintain improvements made around data quality compliance for service user information Key focus on employment support in service user reviews

Q3 Health and Wellbeing MONITOR Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary
% repeat contacts in Adult Social Care	Aim to Minimise	45.1%	<p>Legend: ● Quarters ● Target (Quarters)</p>	Local Measure. Benchmarking not available.	<p>Performance for quarter 3 is 45.1% which is an increase in comparison to quarter 2 (38.9%). As this is a local measure there is no national or comparator benchmarking. This is a new indicator this year and we are currently establishing a baseline to inform a future target. A review of the Customer Service Centre process has resulted in more contacts being recorded than would have been before.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Consultation for re-design of front door services in February 2019 • Further Strengths Based Approach training planned Jan/Feb 2019
% of assessments resulting in a service in Adult Social Care	Aim to Maximise	65.4%	<p>Legend: ● Quarters ● Target (Quarters)</p>	Local Measure. Benchmarking not available.	<p>Performance for quarter 3 (65.4%), which is the same as quarter 2 (65.4%). As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Continue to embed the new Better Lives quality assessment based upon the Strengths Based Approach Model. • Continued high level of scrutiny of placements in forum to ensure appropriate care is put in place to meet the needs of the adult • Further Strengths Based Approach training planned Jan/Feb 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary																		
% of service users who have as much social contact as they would like	Aim to Maximise		<table border="1"> <caption>Trend Chart Data: % of service users with social contact</caption> <thead> <tr> <th>Year</th> <th>Years</th> <th>Target (Years)</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>38.5%</td> <td>46.2%</td> </tr> <tr> <td>2014/15</td> <td>45%</td> <td>46.2%</td> </tr> <tr> <td>2015/16</td> <td>41.5%</td> <td>46.2%</td> </tr> <tr> <td>2016/17</td> <td>44.5%</td> <td>46.2%</td> </tr> <tr> <td>2017/18</td> <td>44.5%</td> <td>46.2%</td> </tr> </tbody> </table>	Year	Years	Target (Years)	2013/14	38.5%	46.2%	2014/15	45%	46.2%	2015/16	41.5%	46.2%	2016/17	44.5%	46.2%	2017/18	44.5%	46.2%	2017/18 National: 46.0% Comparators: 46.2%	No update for this quarter. Next update due in Q4.
Year	Years	Target (Years)																					
2013/14	38.5%	46.2%																					
2014/15	45%	46.2%																					
2015/16	41.5%	46.2%																					
2016/17	44.5%	46.2%																					
2017/18	44.5%	46.2%																					
% of carers who have as much social contact as they would like	Aim to Maximise		<table border="1"> <caption>Trend Chart Data: % of carers with social contact</caption> <thead> <tr> <th>Year</th> <th>Years</th> <th>Target (Years)</th> </tr> </thead> <tbody> <tr> <td>2014/15</td> <td>38.5%</td> <td>33.1%</td> </tr> <tr> <td>2016/17</td> <td>31%</td> <td>33.1%</td> </tr> </tbody> </table>	Year	Years	Target (Years)	2014/15	38.5%	33.1%	2016/17	31%	33.1%	2016/17 National: 35.5% Comparators: 33.1%	No update for this quarter. Next update due in Q4.									
Year	Years	Target (Years)																					
2014/15	38.5%	33.1%																					
2016/17	31%	33.1%																					

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary								
Median age of entry in to Residential/Nursing care	Aim to Maximise	85	 <p>The trend chart displays the median age of entry in to residential/nursing care over three quarters. The y-axis represents age in years, ranging from 0 to 100 in increments of 25. The x-axis lists the quarters: Q1 2018/19, Q2 2018/19, and Q3 2018/19. A horizontal line at the 85-year mark indicates the current value for each quarter. A blue dot at the 85-year mark on the x-axis represents the target value for each quarter.</p> <table border="1"> <thead> <tr> <th>Quarter</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2018/19</td> <td>85</td> </tr> <tr> <td>Q2 2018/19</td> <td>85</td> </tr> <tr> <td>Q3 2018/19</td> <td>85</td> </tr> </tbody> </table>	Quarter	Value	Q1 2018/19	85	Q2 2018/19	85	Q3 2018/19	85	Local Measure. Benchmarking not available.	<p>Performance for quarter 3 is 85yrs and there has been no change since quarter 1. As this is a local measure there is no national or comparator benchmarking.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Continued high level of scrutiny of placements in forum to ensure appropriate care is put in place to meet the needs of the adult e.g. consideration of Extra Care first • Further Strengths Based Approach training planned Jan/Feb 2019
Quarter	Value												
Q1 2018/19	85												
Q2 2018/19	85												
Q3 2018/19	85												

Q3 Health and Wellbeing MONITOR (no data) Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Commentary
% of young people at age 15/16yrs (Year 11) who have a transitions plan	Improvement Actions: <ul style="list-style-type: none">• An options paper has been prepared covering; the breadth of the service, the inclusion criteria e.g.. ASC Transition only or end to end service, and the age range of the service (14-25, 0-25 or whole life).• Monitoring of this measure following agreement and implementation of the business process and relevant recording



Children's Services - **Cllr Warren Whyte**

Summary of Q3 2018/19 Performance Indicators

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Red Performance Indicators

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Amber Performance Indicators

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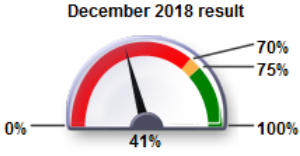
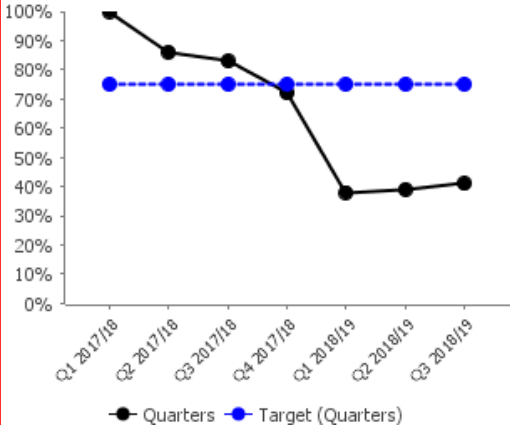
Green Performance Indicators

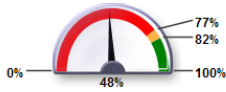
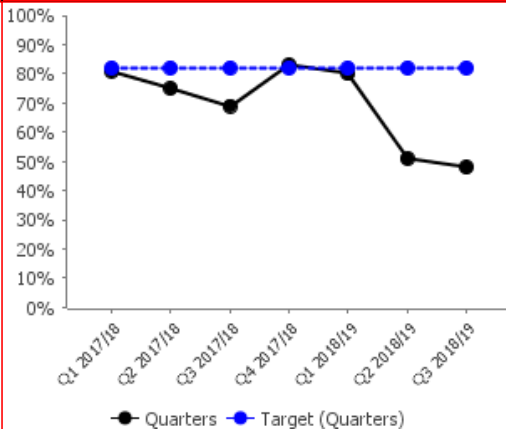
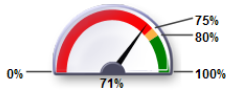
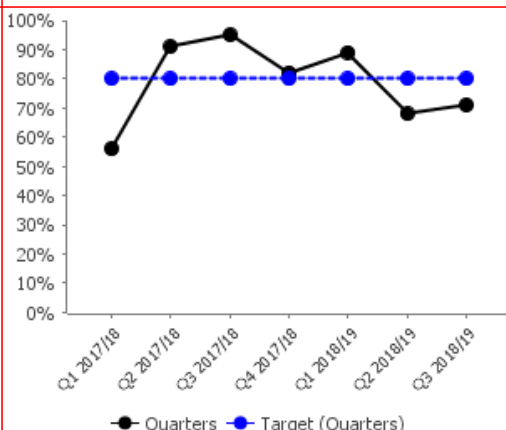
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PIs without a RAG Status

Q3 Children's Services RED Cabinet Performance Indicators


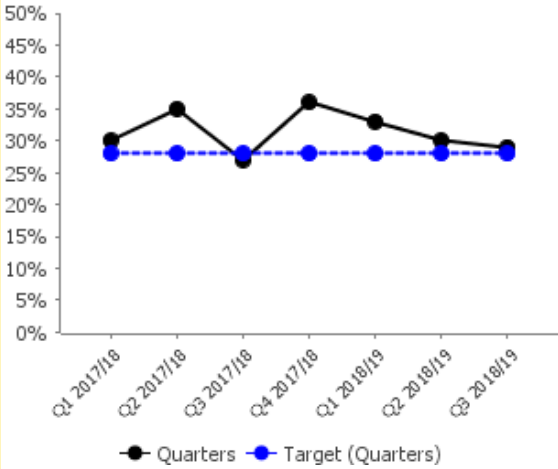
Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% of children waiting less than 14 months between entering care and moving in with their adoptive family	Aim to Maximise	41%	75%	<p>December 2018 result</p>  <p>Good to be High</p>		<p>England 53%, South East 54%, Statistical Neighbours 51% (SSDA903 2016/17)</p>	<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>Nationally there has been a reduction in numbers of available adopters and similar locally for children who have more complex needs and are part of sibling groups.</p> <p>This figure covers a total of 39 children over the 12 month period (since December 2017), 16 of whom were within the target timescale. However, for Q3 there has been recent improvement in our performance in this area. The figure for this quarter is 56%, which covers five of nine children who were within timescales.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • We have increased the use of Activity days for harder to place children. • We have increased use of Social Media in this quarter as part of recruitment strategy for adopters. We have also begun scoping out a new digital strategy to improve our online visibility. • We have ensured there are robust and creative support plans to consider children being placed with siblings already adopted

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary																								
% assessments completed in 45 working days	Aim to Maximise	48%	82%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be High</p>	 <table border="1"> <caption>Quarterly Performance Data (Q1 2017/18 to Q3 2019/19)</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>82</td> <td>82</td> </tr> <tr> <td>Q2 2017/18</td> <td>75</td> <td>82</td> </tr> <tr> <td>Q3 2017/18</td> <td>68</td> <td>82</td> </tr> <tr> <td>Q4 2017/18</td> <td>82</td> <td>82</td> </tr> <tr> <td>Q1 2018/19</td> <td>80</td> <td>82</td> </tr> <tr> <td>Q2 2018/19</td> <td>50</td> <td>82</td> </tr> <tr> <td>Q3 2019/19</td> <td>48</td> <td>82</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (%)	Q1 2017/18	82	82	Q2 2017/18	75	82	Q3 2017/18	68	82	Q4 2017/18	82	82	Q1 2018/19	80	82	Q2 2018/19	50	82	Q3 2019/19	48	82	<p>England 82.7%, South East 83.8%, Statistical Neighbours 81.8% (CIN Census 2017/18)</p>	<p>At the end of December 2018, 48% of assessments had been completed within the 45 working days. This is below England, South East and statistical neighbour averages.</p> <p>The performance in relation to completing assessments in 45 days has decreased. This is partly because of the service demanding better quality work and also because of the re-organisation of the social work teams involved. We are aware that performance will improve from this point and can confirm that performance for February increased to 67%.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • We are conducting an improvement review to identify a clear action plan to improve performance by the end of 2018-19. • Performance is monitored weekly and systems are now in place that indicate improvements in performance will be achieved from March 2019.
Quarter	Quarters (%)	Target (%)																													
Q1 2017/18	82	82																													
Q2 2017/18	75	82																													
Q3 2017/18	68	82																													
Q4 2017/18	82	82																													
Q1 2018/19	80	82																													
Q2 2018/19	50	82																													
Q3 2019/19	48	82																													
% ICPC (Initial Child Protection Conference) held within 15 working days of the strategy discussion	Aim to Maximise	71%	80%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be High</p>	 <table border="1"> <caption>Quarterly Performance Data (Q1 2017/18 to Q3 2019/19)</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>55</td> <td>80</td> </tr> <tr> <td>Q2 2017/18</td> <td>90</td> <td>80</td> </tr> <tr> <td>Q3 2017/18</td> <td>95</td> <td>80</td> </tr> <tr> <td>Q4 2017/18</td> <td>80</td> <td>80</td> </tr> <tr> <td>Q1 2018/19</td> <td>88</td> <td>80</td> </tr> <tr> <td>Q2 2018/19</td> <td>68</td> <td>80</td> </tr> <tr> <td>Q3 2019/19</td> <td>71</td> <td>80</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (%)	Q1 2017/18	55	80	Q2 2017/18	90	80	Q3 2017/18	95	80	Q4 2017/18	80	80	Q1 2018/19	88	80	Q2 2018/19	68	80	Q3 2019/19	71	80	<p>England 73.9%, South East 75.0%, Statistical Neighbours 78.7% (CIN Census 2017/18)</p>	<p>Quarter 3 is starting to show an improving picture for the percentage of Initial Child Protection Conferences held within 15 working days from the strategy discussion and is currently at 71%. This improvement can be attributed in part to the drive from the new manager of the Child Protection Advisors to working collaboratively with the Team Managers and Social Workers. This has led to improvements in the quality of the ICPC requests which is reducing the potential for delays in requests being processed. The main reason for conferences being held out of time in December, was due to delays in Social Workers submitting their reports.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • The Child Protection Advisors will continue to challenge and support Social Workers and Team Managers to submit timely requests and reports. In addition, they will ensure safety plans are in place where ICPCs are not held within 15 days of the strategy meeting.
Quarter	Quarters (%)	Target (%)																													
Q1 2017/18	55	80																													
Q2 2017/18	90	80																													
Q3 2017/18	95	80																													
Q4 2017/18	80	80																													
Q1 2018/19	88	80																													
Q2 2018/19	68	80																													
Q3 2019/19	71	80																													

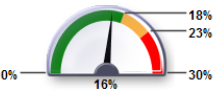
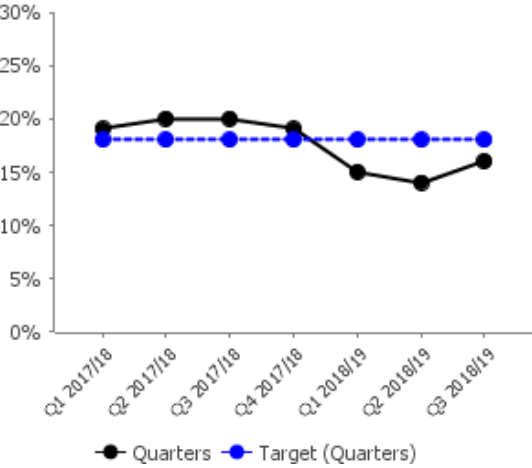
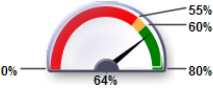
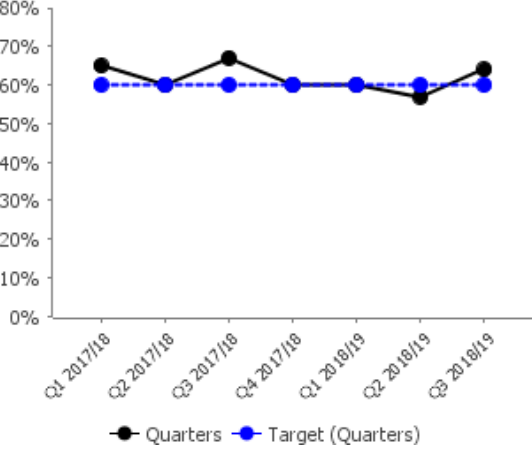
Q3 Children's Services AMBER Cabinet Performance Indicators

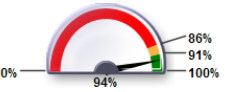
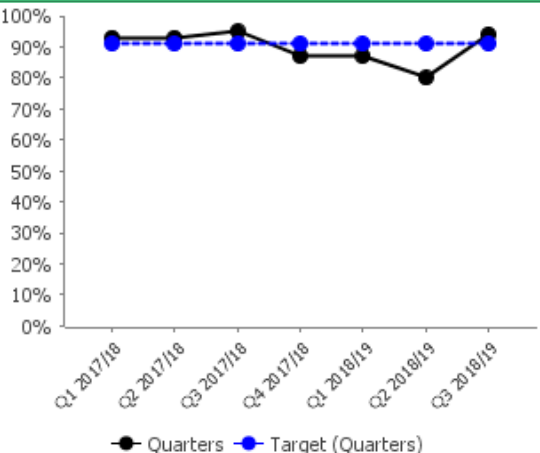

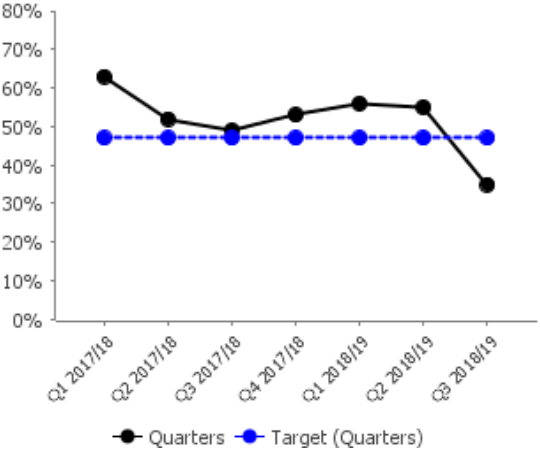
Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary																								
% repeat referrals within 12 months	Aim to Minimise	29%	28%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be Low</p>	 <table border="1"> <caption>Trend Chart Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>30</td> <td>28</td> </tr> <tr> <td>Q2 2017/18</td> <td>35</td> <td>28</td> </tr> <tr> <td>Q3 2017/18</td> <td>27</td> <td>28</td> </tr> <tr> <td>Q4 2017/18</td> <td>36</td> <td>28</td> </tr> <tr> <td>Q1 2018/19</td> <td>33</td> <td>28</td> </tr> <tr> <td>Q2 2018/19</td> <td>29</td> <td>28</td> </tr> <tr> <td>Q3 2018/19</td> <td>29</td> <td>28</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2017/18	30	28	Q2 2017/18	35	28	Q3 2017/18	27	28	Q4 2017/18	36	28	Q1 2018/19	33	28	Q2 2018/19	29	28	Q3 2018/19	29	28	<p>England 21.9%, South East 25.2%, Statistical Neighbours 20.3% (CIN Census 2017/18)</p>	<p>A repeat referral is a referral where a child has been referred before within 12 months.</p> <p>At the end of December 2018 our performance was 29%. This is higher than England, South East and statistical neighbour averages.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> The factors that can lead to repeat referrals are wide ranging and not all of these are within the direct control of the service. Significant work is on-going to analyse the reasons behind re-referrals by social work team, by geography and by referrer. This will allow the full extent of the drivers to be understood and addressed. In the short-term the MASH have taken to steps to ensure the application of thresholds are applied consistently and this has led to a fall in referral rates to below 30%.
Quarter	Quarters (%)	Target (Quarters) (%)																													
Q1 2017/18	30	28																													
Q2 2017/18	35	28																													
Q3 2017/18	27	28																													
Q4 2017/18	36	28																													
Q1 2018/19	33	28																													
Q2 2018/19	29	28																													
Q3 2018/19	29	28																													

Q3 Children's Services GREEN Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of children who became the subject of a Child Protection Plan for a second or subsequent time	Aim to Minimise	16%	18%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be Low</p>		<p>England 20.2%, South East 22.6%, Statistical Neighbours 21.7% (CIN Census 2017/18)</p>	<p>The percentage of children who became subject to a child protection plan for a second or subsequent time remains below the target of 18% as well as below benchmarking comparators.</p> <p>Of the 521 children who became subject to a child protection plan between 1 April 2018 and 31 December 2018, 84 were subject to a Child Protection Plan for a second or subsequent time.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Child Protection Advisors are carrying out audits of children's care plans prior to review conferences. Feedback is provided to Social Workers and Team Managers where there are signs of drift; and issues immediately escalated to the Head of Service where appropriate.
% of care leavers in employment, education, or training (EET)	Aim to Maximise	64%	60%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be High</p>		<p>England 51%, South East 52%, Statistical Neighbours 54% (SSDA903 2017/18)</p>	<p>This indicator measures the proportion of care leavers who are in employment, education and/or training (EET).</p> <p>At the end of December 2018, 64% of care leavers were in EET. Buckinghamshire's performance is higher than the England, South East and statistical neighbour averages.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> We are completing a review to develop our offer to Care Leavers in Q4 in order to improve support to young people to increase opportunities available to them.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary																								
% of Children Looked After seen in the last 6 weeks	Aim to Maximise	94%	91%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be High</p>	 <table border="1"> <caption>Quarterly Performance Data (Q1 2017/18 to Q3 2018/19)</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>92</td> <td>91</td> </tr> <tr> <td>Q2 2017/18</td> <td>92</td> <td>91</td> </tr> <tr> <td>Q3 2017/18</td> <td>95</td> <td>91</td> </tr> <tr> <td>Q4 2017/18</td> <td>88</td> <td>91</td> </tr> <tr> <td>Q1 2018/19</td> <td>88</td> <td>91</td> </tr> <tr> <td>Q2 2018/19</td> <td>80</td> <td>91</td> </tr> <tr> <td>Q3 2018/19</td> <td>94</td> <td>91</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2017/18	92	91	Q2 2017/18	92	91	Q3 2017/18	95	91	Q4 2017/18	88	91	Q1 2018/19	88	91	Q2 2018/19	80	91	Q3 2018/19	94	91	No benchmarking information available.	<p>This indicator measures the proportion of children looked after who are seen at least once every 6 weeks.</p> <p>Performance has seen improvement and at the end of December 2018, 94% of children looked after had been seen within required timescales. No benchmarking information is available for this indicator.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> We are tightening up data quality and recording processes to strengthen management oversight of when children have been seen.
Quarter	Quarters (%)	Target (Quarters) (%)																													
Q1 2017/18	92	91																													
Q2 2017/18	92	91																													
Q3 2017/18	95	91																													
Q4 2017/18	88	91																													
Q1 2018/19	88	91																													
Q2 2018/19	80	91																													
Q3 2018/19	94	91																													
% of Children Looked After placed more than 20 miles from their homes	Aim to Minimise	35%	47%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be Low</p>	 <table border="1"> <caption>Quarterly Performance Data (Q1 2017/18 to Q3 2018/19)</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>63</td> <td>47</td> </tr> <tr> <td>Q2 2017/18</td> <td>52</td> <td>47</td> </tr> <tr> <td>Q3 2017/18</td> <td>49</td> <td>47</td> </tr> <tr> <td>Q4 2017/18</td> <td>54</td> <td>47</td> </tr> <tr> <td>Q1 2018/19</td> <td>56</td> <td>47</td> </tr> <tr> <td>Q2 2018/19</td> <td>55</td> <td>47</td> </tr> <tr> <td>Q3 2018/19</td> <td>35</td> <td>47</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2017/18	63	47	Q2 2017/18	52	47	Q3 2017/18	49	47	Q4 2017/18	54	47	Q1 2018/19	56	47	Q2 2018/19	55	47	Q3 2018/19	35	47	<p>England 15%, South East 18%, Statistical Neighbours 25% (SSDA903 2017/18)</p>	<p>At the end of December 2018, 35% of looked after children were placed more than 20 miles from their home. This performance is higher than the England, South East and statistical neighbour averages.</p> <p>It should be noted that in some cases placement distances within the geographical boundary of Buckinghamshire may exceed 20 miles. Whereas, in other areas of the country placements within 20 miles are less accessible.</p> <p>Over the last year we have seen an improvement across this measure. These improvements have also been made through increasing our in-house capacity, and significantly increased use of in-house fostering placements.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> To continue to recruit foster carers and place as many children and young people as appropriate in our 'in-house' provision
Quarter	Quarters (%)	Target (Quarters) (%)																													
Q1 2017/18	63	47																													
Q2 2017/18	52	47																													
Q3 2017/18	49	47																													
Q4 2017/18	54	47																													
Q1 2018/19	56	47																													
Q2 2018/19	55	47																													
Q3 2018/19	35	47																													

Q3 Children's Services MONITOR Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary																
Rate per 10,000 of children on Child Protection Plans	Aim to Minimise	46.6	<table border="1"> <caption>Rate per 10,000 of children on Child Protection Plans</caption> <thead> <tr> <th>Quarter</th> <th>Rate</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>48</td> </tr> <tr> <td>Q2 2017/18</td> <td>47</td> </tr> <tr> <td>Q3 2017/18</td> <td>53</td> </tr> <tr> <td>Q4 2017/18</td> <td>52</td> </tr> <tr> <td>Q1 2018/19</td> <td>51</td> </tr> <tr> <td>Q2 2018/19</td> <td>49</td> </tr> <tr> <td>Q3 2018/19</td> <td>46.6</td> </tr> </tbody> </table>	Quarter	Rate	Q1 2017/18	48	Q2 2017/18	47	Q3 2017/18	53	Q4 2017/18	52	Q1 2018/19	51	Q2 2018/19	49	Q3 2018/19	46.6	England 43.1, South East 42.1, Statistical Neighbours 36.6 (CIN Census - 2017/18)	<p>The reduction of rate per 100,000 on CP is due to increased scrutiny by the service of CP cases which have been on plan for beyond 12 months.</p> <p>Team Managers are being advised to ensure that there is greater communication and dialogue with Child Protection Advisors by making use of case consultations and challenging whether children are best supported by a child protection plan.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Further action includes utilising the Beyond Auditing Team to continue working alongside all Help & Protection Team Managers to identify children where there is evidence of drift and delay and help develop solutions to progress plans.
Quarter	Rate																				
Q1 2017/18	48																				
Q2 2017/18	47																				
Q3 2017/18	53																				
Q4 2017/18	52																				
Q1 2018/19	51																				
Q2 2018/19	49																				
Q3 2018/19	46.6																				
Rate per 10,000 of Children in Need	Aim to Minimise	219.6	<table border="1"> <caption>Rate per 10,000 of Children in Need</caption> <thead> <tr> <th>Quarter</th> <th>Rate</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>190</td> </tr> <tr> <td>Q2 2017/18</td> <td>195</td> </tr> <tr> <td>Q3 2017/18</td> <td>215</td> </tr> <tr> <td>Q4 2017/18</td> <td>210</td> </tr> <tr> <td>Q1 2018/19</td> <td>220</td> </tr> <tr> <td>Q2 2018/19</td> <td>225</td> </tr> <tr> <td>Q3 2018/19</td> <td>219.6</td> </tr> </tbody> </table>	Quarter	Rate	Q1 2017/18	190	Q2 2017/18	195	Q3 2017/18	215	Q4 2017/18	210	Q1 2018/19	220	Q2 2018/19	225	Q3 2018/19	219.6	England 314.0, South East 317.5, Statistical Neighbours 263.7 (CIN Census - 2017/18)	<p>Staff turnover and high caseloads continue to impact on the CIN rate and case closures. From the completed review of data and discussion with SW staff it is clear there remains a significant number of cases which can be closed but delays have meant that these are not actioned in a timely way.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Support has been identified to assist Team Managers and social workers in moving children forward to closure or Early Help services. This is a time limited project starting with Aylesbury in January 2019. • As part of the Improvement Plan, the Business Improvement Team are due to begin work around reviewing pathways and processes for stepping CIN children down where children no longer meet the threshold for CIN.
Quarter	Rate																				
Q1 2017/18	190																				
Q2 2017/18	195																				
Q3 2017/18	215																				
Q4 2017/18	210																				
Q1 2018/19	220																				
Q2 2018/19	225																				
Q3 2018/19	219.6																				

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary																		
Rate per 10,000 of Children Looked After	Aim to Minimise	41.3	<table border="1"> <caption>Quarterly Data for Rate per 10,000 of Children Looked After</caption> <thead> <tr> <th>Quarter</th> <th>Rate</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>37.5</td> </tr> <tr> <td>Q2 2017/18</td> <td>37.0</td> </tr> <tr> <td>Q3 2017/18</td> <td>38.5</td> </tr> <tr> <td>Q4 2017/18</td> <td>39.5</td> </tr> <tr> <td>Q1 2018/19</td> <td>39.5</td> </tr> <tr> <td>Q2 2018/19</td> <td>41.5</td> </tr> <tr> <td>Q3 2018/19</td> <td>41.3</td> </tr> <tr> <td>Target (Quarters)</td> <td>42.4</td> </tr> </tbody> </table>	Quarter	Rate	Q1 2017/18	37.5	Q2 2017/18	37.0	Q3 2017/18	38.5	Q4 2017/18	39.5	Q1 2018/19	39.5	Q2 2018/19	41.5	Q3 2018/19	41.3	Target (Quarters)	42.4	England 64.0, South East 51.0, Statistical Neighbours 42.4 (SSDA903 2017/18)	<p>This indicator measures the number of children looked after, expressed as a rate per 10,000 of the 0-18 population.</p> <p>At the end of December 2018, the rate was 41.3. Buckinghamshire's rate is lower than the average rate for the South East and statistical neighbours and England.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • We are conducting a thematic review of children accommodated under voluntary care and those placed at home to identify and reinforce best practice principles.
Quarter	Rate																						
Q1 2017/18	37.5																						
Q2 2017/18	37.0																						
Q3 2017/18	38.5																						
Q4 2017/18	39.5																						
Q1 2018/19	39.5																						
Q2 2018/19	41.5																						
Q3 2018/19	41.3																						
Target (Quarters)	42.4																						



Education and Skills Portfolio - **Cllr Mike Appleyard**

Summary of Q3 2018/19 Performance Indicators

2

Red Performance Indicators

2

Amber Performance Indicators

11

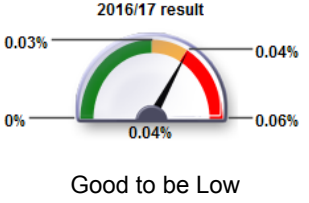
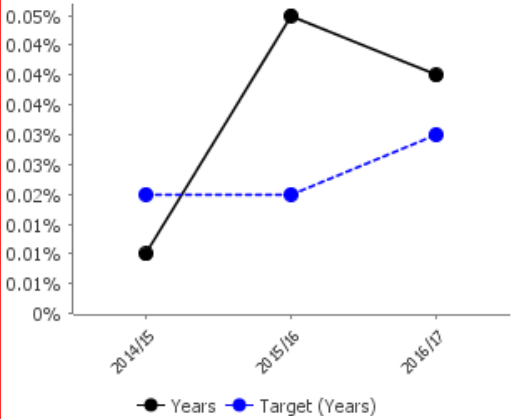
Green Performance Indicators

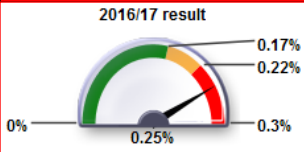
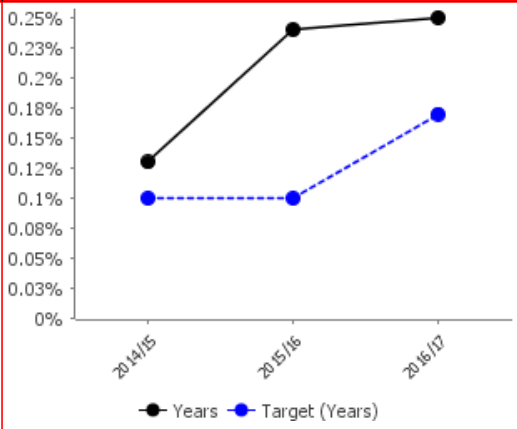
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Performance Indicators no RAG status

Q3 Education and Skills RED Cabinet Performance Indicators

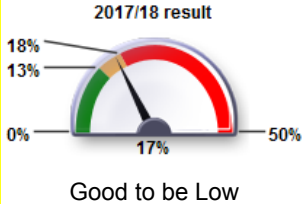
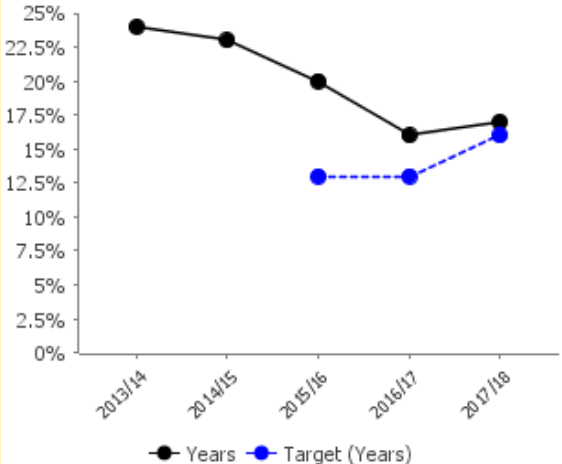
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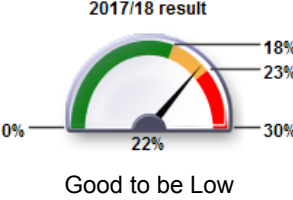
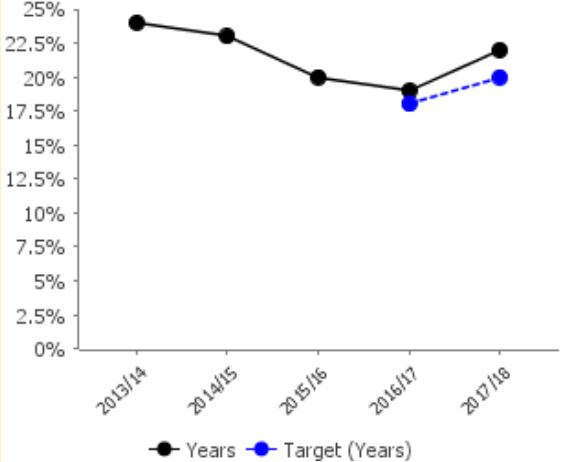
PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
Permanent exclusion rate - primary	Aim to Minimise	0.04%	0.03%	 <p>2016/17 result</p> <p>0.03% 0.04% 0.06%</p> <p>0%</p> <p>0.04%</p> <p>Good to be Low</p>	 <p>0.05% 0.04% 0.04% 0.03% 0.03% 0.02% 0.02% 0.01% 0.01% 0%</p> <p>2014/15 2015/16 2016/17</p> <p>● Years ● Target (Years)</p>	<p>State-funded schools in England 2016/17 = 0.03</p> <p>State-funded schools in South East region 2016/17 = 0.02</p>	<p>Annual measure reported in quarter 2 – commentary below is for the 2016-17 academic year as reported in Q2. Internal unvalidated data suggests that the 2017-18 exclusion rate in Buckinghamshire will be approximately 0.02%.</p> <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:</p> <ul style="list-style-type: none"> • 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.

PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
Permanent exclusion rate - secondary	Aim to Minimise	0.25%	0.17%	 <p>2016/17 result</p> <p>0.17% 0.22% 0.25% 0.3%</p> <p>Good to be Low</p>	 <p>0.25% 0.23% 0.2% 0.18% 0.15% 0.12% 0.1% 0.08% 0.05% 0.03% 0%</p> <p>2014/15 2015/16 2016/17</p> <p>● Years ● Target (Years)</p>	<p>State-funded schools in England 2016/17 = 0.20</p> <p>State-funded schools in South East region 2016/17 = 0.13</p>	<p>Annual measure reported in quarter 2 - commentary below is for the 2016-17 academic year as reported in Q2. Internal unvalidated data suggests that the 2017-18 exclusion rate in Buckinghamshire will be approximately 0.15%..</p> <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:</p> <ul style="list-style-type: none"> • 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.

Q3 Education and Skills AMBER Cabinet Performance Indicators

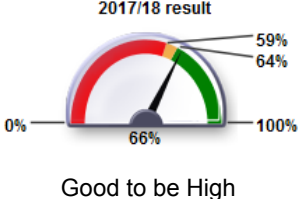
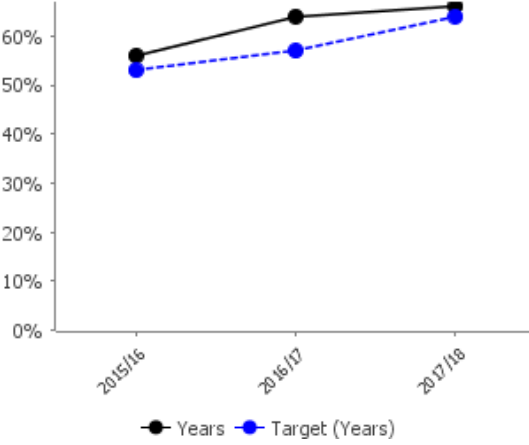
Generated on: 13 March 2019


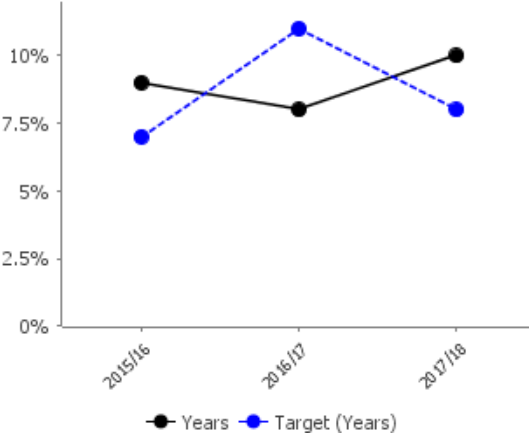
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Year 1 Phonics - expected standard gap between disadvantaged pupils % and others %	Aim to Minimise	17%	16%	<p>2017/18 result</p>  <p>Good to be Low</p>		National 2018 = 13%	<p>This measure looks at the difference in results between disadvantaged pupils in Buckinghamshire and other, non-disadvantaged, pupils nationally, in line with national reporting. The 2017/18 academic year results show that the gap between these groups is 17%, which is slightly higher (worse) than target and has increased slightly since the previous year. The national figure for this measure is 13%.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Schools with a Performance Gap against this indicator greater than National (16% - 2017/18) will be prioritised for Side by Side Intervention or Prevention Support. Support will be determined based on a target shortfall scale and will either be direct Side by Side deployment support or the sharing of best practice within the liaison group clusters.

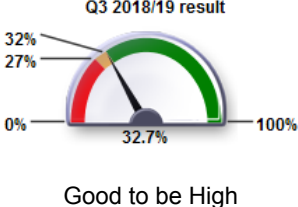
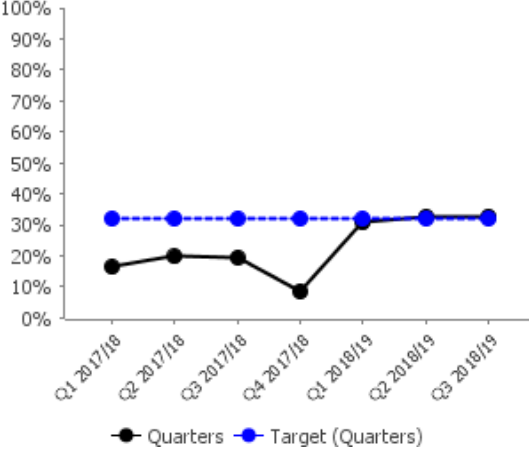
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Early Years Foundation Stage Profile - 'good level of development' gap between disadvantaged pupils % and others %	Aim to Minimise	22%	20%	<p>2017/18 result</p>  <p>Good to be Low</p>	 <p>● Years ● Target (Years)</p>	national data is not available for this measure.	<p>This measure looks at the difference in results between disadvantaged pupils in Buckinghamshire and other, non-disadvantaged, pupils in Buckinghamshire. There is no benchmarking data available for this measure. The 2017/18 academic year results show that the gap between these groups is 22%, which is slightly higher (worse) than target. The gap has increased since 2016/17.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Providers with a Performance Gap against this indicator greater than Target (20% - 2017/18) will be prioritised for support from the Early Years Support Team through the Providers in Partnership initiative. • The support will target schools within six geographical clusters to work in partnership with their main feeder settings to identify and challenge the barriers to improving outcomes.

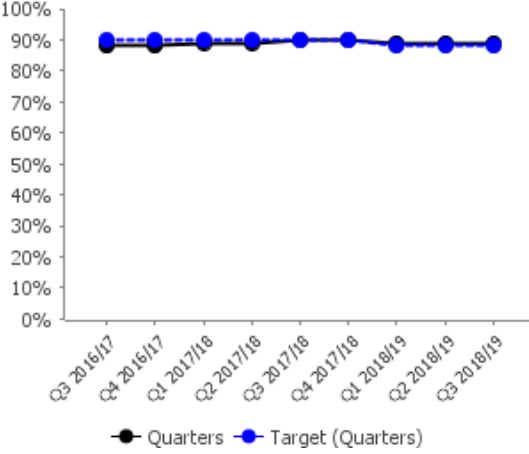
Q3 Education and Skills GREEN Cabinet Performance Indicators

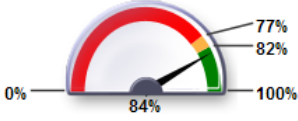
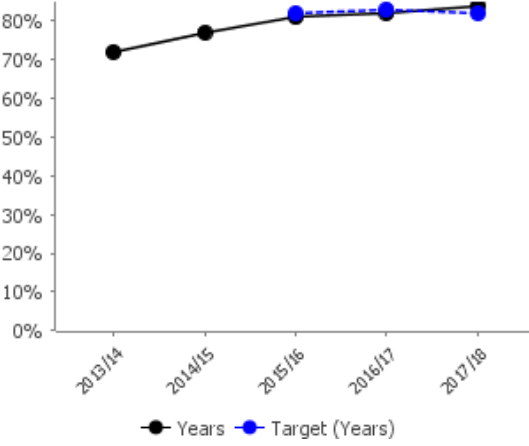
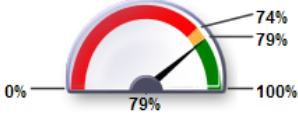
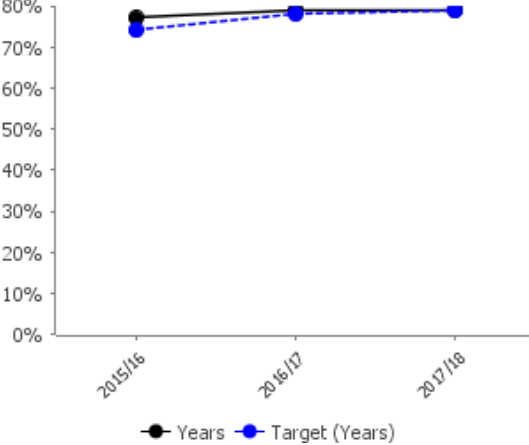
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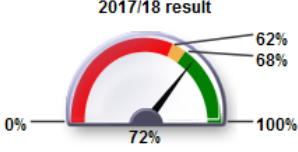
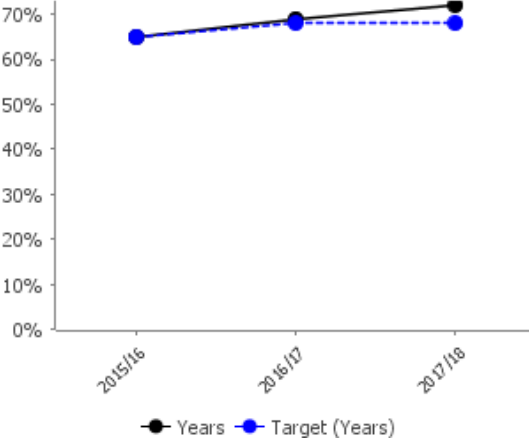
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Key Stage 2 - % of pupils reaching the expected standard in reading, writing and mathematics	Aim to Maximise	66%	64%	<p>2017/18 result</p>  <p>Good to be High</p>		<p>State-funded schools in England 2018 = 64%</p> <p>State-funded schools in South East region 2018 = 65%</p>	<p>Annual measure reported in quarter 2 - no further update.</p> <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 Actions:</p> <ul style="list-style-type: none"> • Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.

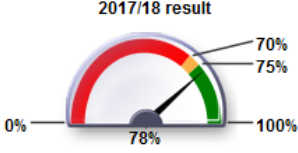
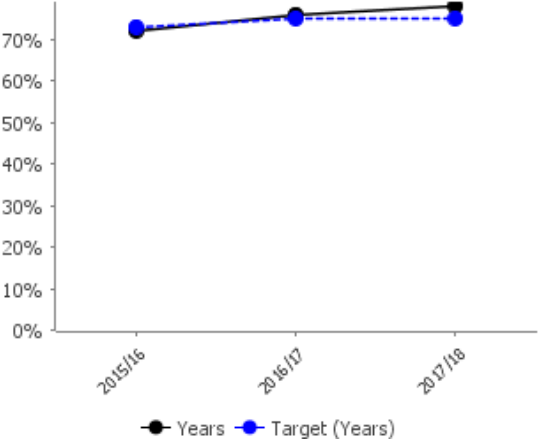
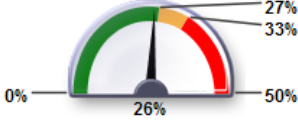
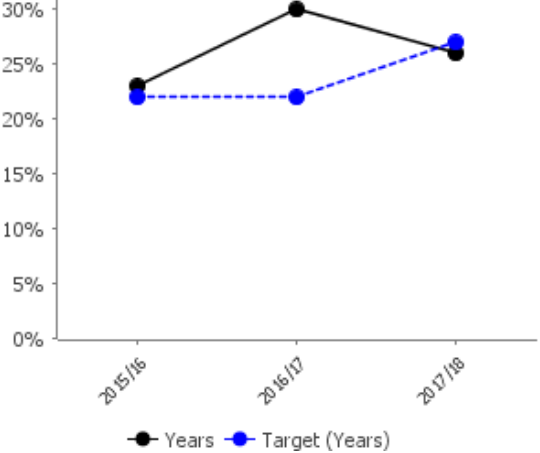
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Key Stage 2 - % of pupils with a statement of SEN or EHCP reaching the expected standard in reading, writing and mathematics	Aim to Maximise	10%	8%	<p>2017/18 result</p>  <p>Good to be High</p>		<p>England (state-funded schools) 2018 = 9%</p> <p>South East region (state-funded schools) 2018 = 9%</p>	<p>This measure looks at the percentage of children who have an Education, Health and Care Plan (EHCP) who achieve the expected standard in reading, writing and maths by the end of Key Stage 2. In the 2017/18 academic year 10% of Buckinghamshire pupils with an EHCP achieved the expected standard, which is above regional and national averages and above target.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Schools with a Performance Gap against this indicator less than Target (8% - 2017/18) will be prioritised for Side by Side Intervention or Prevention Support. • Support will be determined based on a target shortfall scale and will either be direct Side by Side deployment support or the sharing of best practice within the liaison group clusters.

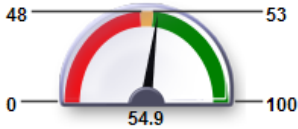
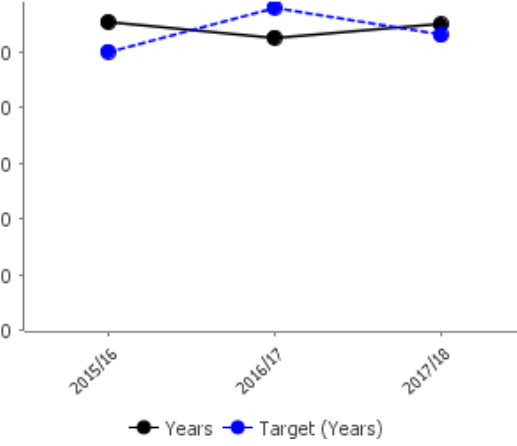
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary																								
% new EHC plans issued within 20 weeks (excluding exceptions)	Aim to Maximise	32.7%	32%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <table border="1"> <caption>Trend Chart Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2017/18</td> <td>17</td> <td>32</td> </tr> <tr> <td>Q2 2017/18</td> <td>21</td> <td>32</td> </tr> <tr> <td>Q3 2017/18</td> <td>20</td> <td>32</td> </tr> <tr> <td>Q4 2017/18</td> <td>10</td> <td>32</td> </tr> <tr> <td>Q1 2018/19</td> <td>32</td> <td>32</td> </tr> <tr> <td>Q2 2018/19</td> <td>33</td> <td>32</td> </tr> <tr> <td>Q3 2018/19</td> <td>33</td> <td>32</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2017/18	17	32	Q2 2017/18	21	32	Q3 2017/18	20	32	Q4 2017/18	10	32	Q1 2018/19	32	32	Q2 2018/19	33	32	Q3 2018/19	33	32	<p>England 2017 = 64.9%</p> <p>South East region 2017 = 52.8%</p> <p>Buckinghamshire 2017 = 19.1%</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 the calendar year to date. For the period 1/1/2018 - 31/12/2018, 32.7% of Education Health and Care Plans were issued within the 20 week timescale. This is an improvement from the previous year and slightly above target.</p> <p>The target of 32% was set based on past performance to support staged improvements in the number of plans completed in 20 weeks. Although performance has improved since Q1 of 2018/19, we recognise that performance should be much higher than current levels.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Regular reporting is being used to address any performance/capacity issues within the service and to set priorities. • Systems/processes are being reviewed to identify pressure points, re-direct capacity to where it is most needed and simplify processes where possible. • Weekly case discussions have been instigated to allow some decisions to be made more quickly.
Quarter	Quarters (%)	Target (Quarters) (%)																													
Q1 2017/18	17	32																													
Q2 2017/18	21	32																													
Q3 2017/18	20	32																													
Q4 2017/18	10	32																													
Q1 2018/19	32	32																													
Q2 2018/19	33	32																													
Q3 2018/19	33	32																													

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of pupils attending schools rated good and outstanding by Ofsted	Aim to Maximise	89%	88%	<p>Latest result for Q3 2018/19 as of December 2018</p>  <p>Good to be High</p>		<p>State-funded schools in England (31/08/2018) = 85%</p> <p>State-funded schools in the South East region (31/08/2018) = 88%</p>	<p>This measure reports the proportion of Buckinghamshire pupils who are attending schools judged to be good or outstanding. At the end of December 2018, 89% of Buckinghamshire pupils attended a school judged to be good or outstanding. This is above both regional and national averages and above target.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> All schools with a current OFSTED judgement of Requires Improvement or Inadequate (currently 9 Primary and 6 Secondary) have been allocated Intervention support. Intervention support provides direct deployment into those schools to meet KPIs against identified improvement strands.
Early Years Foundation Stage Profile - % of pupils achieving a good level of development	Aim to Maximise	74%	73%	<p>2017/18 result</p>  <p>Good to be High</p>		<p>England 2018 = 72%</p> <p>South East region 2018 = 75%</p>	<p>Children are assessed using the Early Years Foundation Stage Profile (EYFSP) at the end of their reception year in school, and this measure looks at the percentage of children who have achieved a good level of development standard by this point. In the 2017/18 academic year 74% of Buckinghamshire pupils achieved a good level of development, which was above the national average and above target.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Providers with a Performance Gap against this indicator greater than Target (73% - 2017/18) will be prioritised for support from the Early Years Support Team through the Providers in Partnership initiative. The support will target schools within six geographical clusters to work in partnership with their main feeder settings to identify and challenge the barriers to improving outcomes.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Year 1 Phonics - % of pupils reaching the expected standard	Aim to Maximise	84%	82%	<p>2017/18 result</p>  <p>Good to be High</p>		<p>State-funded schools in England 2018 = 82%</p> <p>State-funded schools in the South East region 2018 = 83%</p>	<p>Annual measure reported in quarter 2 - no further update.</p> <p>This indicator measures the proportion of pupils who have reached an expected academic standard.</p> <p>In 2018, 84% of Buckinghamshire pupils achieved the expected standard in the Year 1 Phonics Screening Check. This is an increase of 2 percentage points from 2017, and is 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:</p> <ul style="list-style-type: none"> • Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.
Key Stage 1 - % of pupils reaching the expected standard in reading	Aim to Maximise	79%	79%	<p>2017/18 result</p>  <p>Good to be High</p>		<p>State-funded schools in England 2018 = 75%</p> <p>State-funded schools in South East region 2018 = 78%</p>	<p>Annual measure reported in quarter 2 - no further update.</p> <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:</p> <ul style="list-style-type: none"> • Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Key Stage 1 - % of pupils reaching the expected standard in writing	Aim to Maximise	72%	68%	<p>2017/18 result</p>  <p>Good to be High</p>		<p>State-funded schools in England 2018 = 70%</p> <p>State-funded schools in South East region 2018 = 71%</p>	<p>Annual measure reported in quarter 2 - no further update.</p> <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:</p> <ul style="list-style-type: none"> • Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.

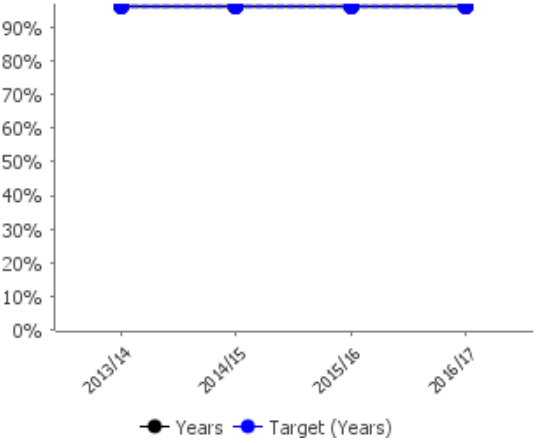
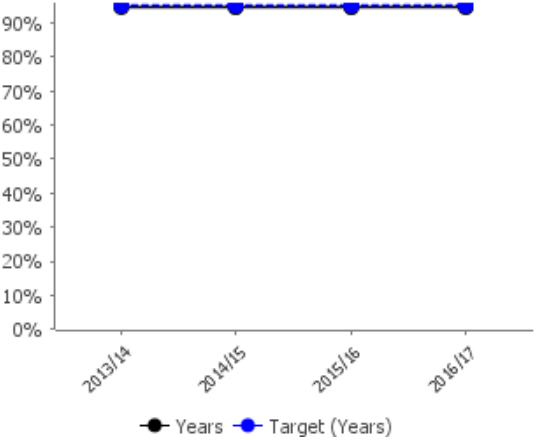
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Key Stage 1 - % of pupils reaching the expected standard in mathematics	Aim to Maximise	78%	75%	<p>2017/18 result</p>  <p>Good to be High</p>		State-funded schools in England 2018 = 76% State-funded schools in South East region 2018 = 78%	<p>Annual measure reported in quarter 2 - no further update.</p> <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 Actions:</p> <ul style="list-style-type: none"> • Within the Side by Side partnership model there is a focus on achieving more ambitious outcomes for all children and young people.
Key Stage 2 - expected standard (reading, writing & maths) gap between disadvantaged pupils % and others %	Aim to Minimise	26%	27%	<p>2017/18 result</p>  <p>Good to be Low</p>		National 2018 = 20%	<p>This measure looks at the difference in results between disadvantaged pupils in Buckinghamshire and other, non-disadvantaged, pupils nationally, in line with national reporting. The 2017/18 academic year results show that the gap between these groups is 26%, which is below (better than) the target. It shows an improvement from the 2016/17 figure of 30%, although it is still higher than the national figure of 20%.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Schools with a Performance Gap against this indicator greater than Target (27% - 2017/18) will be prioritised for Side by Side Intervention or Prevention Support. • Support will be determined based on a target shortfall scale and will either be direct Side by Side deployment support or the sharing of best practice within the liaison group clusters.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Key Stage 4 - average Attainment 8 score	Aim to Maximise	54.9	53	<p>2017/18 result</p>  <p>Good to be High</p>		<p>State-funded schools in England 2018 = 46.5 State-funded schools in south east region 2018 = 47.7</p>	<p>Attainment 8 measures the achievement of pupils across 8 qualifications, including English, maths, 3 “English Baccalaureate” subjects and 3 other approved qualifications. In the 2017/18 academic year the average Attainment 8 score in Buckinghamshire was 54.9, above both benchmarks and target. This data is currently provisional.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Schools with a Performance Gap against this indicator less than Target (53.0 - 2017/18) will be prioritised for Side by Side Intervention or Prevention Support. • All Intervention schools will have a half termly ‘Headline’ visit to determine evidence of impact and progress to target by the Side by Side Partnership Team. Termly ‘Challenge Meetings’ led by Governing Boards will also monitor progress.

Q3 Education and Skills MONITOR Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary
Key Stage 4 - Attainment 8 gap between disadvantaged pupils and others	Aim to Minimise			2017 England = 12.8 (disadvantaged = 37.1, other = 49.9)	Annual measure due to be reported in quarter 4.
Key Stage 4 - average Attainment 8 score for pupils with a statement of SEN or EHCP	Aim to Maximise			State-funded schools in England 2017 = 13.9 State-funded schools in South East region 2017 = 14.2	Annual measure due to be reported in quarter 4.

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary															
Overall attendance rate at Primary Schools in Buckinghamshire.	Aim to Maximise		 <table border="1" data-bbox="629 181 1169 625"> <caption>Attendance Rate Data for Primary Schools</caption> <thead> <tr> <th>Academic Year</th> <th>Target (%)</th> <th>Actual (%)</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>96.0</td> <td>96.0</td> </tr> <tr> <td>2014/15</td> <td>96.0</td> <td>96.0</td> </tr> <tr> <td>2015/16</td> <td>96.0</td> <td>96.0</td> </tr> <tr> <td>2016/17</td> <td>96.0</td> <td>96.0</td> </tr> </tbody> </table>	Academic Year	Target (%)	Actual (%)	2013/14	96.0	96.0	2014/15	96.0	96.0	2015/16	96.0	96.0	2016/17	96.0	96.0	<p>Primary schools in England 2016-17 academic year = 96.0%</p> <p>Primary schools in South East region 2016-17 academic year = 96.1%</p>	<p>Annual measure due to be reported in quarter 4.</p>
Academic Year	Target (%)	Actual (%)																		
2013/14	96.0	96.0																		
2014/15	96.0	96.0																		
2015/16	96.0	96.0																		
2016/17	96.0	96.0																		
Overall attendance rate at Secondary Schools in Buckinghamshire.	Aim to Maximise		 <table border="1" data-bbox="629 635 1169 1077"> <caption>Attendance Rate Data for Secondary Schools</caption> <thead> <tr> <th>Academic Year</th> <th>Target (%)</th> <th>Actual (%)</th> </tr> </thead> <tbody> <tr> <td>2013/14</td> <td>94.6</td> <td>94.6</td> </tr> <tr> <td>2014/15</td> <td>94.6</td> <td>94.6</td> </tr> <tr> <td>2015/16</td> <td>94.6</td> <td>94.6</td> </tr> <tr> <td>2016/17</td> <td>94.6</td> <td>94.6</td> </tr> </tbody> </table>	Academic Year	Target (%)	Actual (%)	2013/14	94.6	94.6	2014/15	94.6	94.6	2015/16	94.6	94.6	2016/17	94.6	94.6	<p>Secondary schools in England 2016-17 academic year = 94.6%</p> <p>Secondary schools in South East region 2016-17 academic year = 94.6%</p>	<p>Annual measure due to be reported in quarter 4.</p>
Academic Year	Target (%)	Actual (%)																		
2013/14	94.6	94.6																		
2014/15	94.6	94.6																		
2015/16	94.6	94.6																		
2016/17	94.6	94.6																		



Resources - **Cllr John Chilver**

Summary of Q3 2018/19 Performance Indicators

2

Red Performance Indicators

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Amber Performance Indicators

4

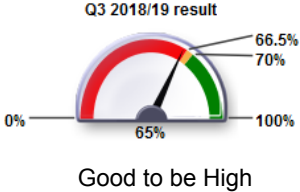
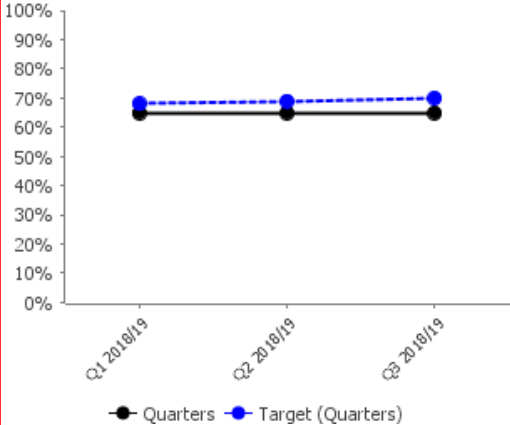
Green Performance Indicators

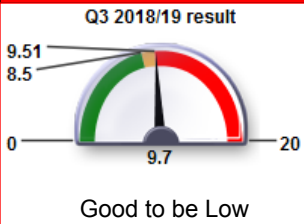
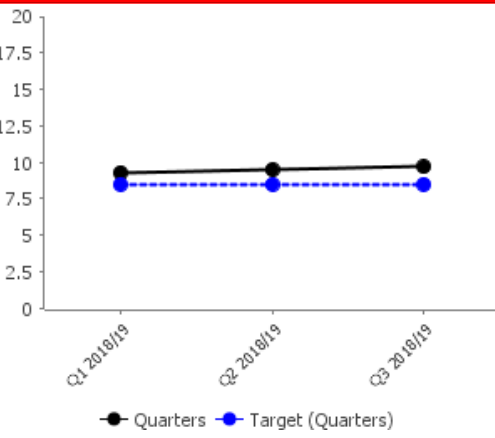
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PIs without a RAG status

Q3 Resources RED Cabinet Performance Indicators

Generated on: 13 March 2019

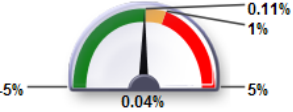
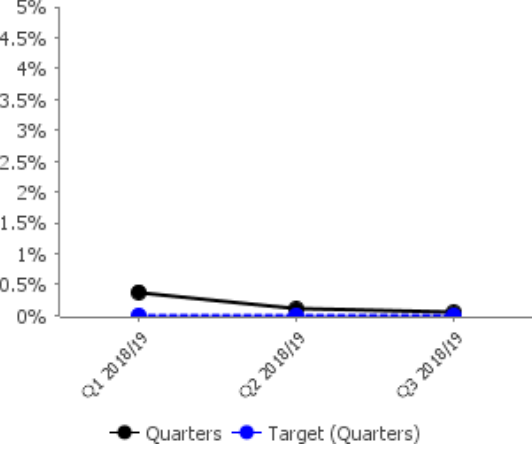
PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
% of BCC website pages that meet accessibility standards	Aim to Maximise	65%	70%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>		BCC: 65% Local Authority Average: 68%	<p>At the end of Q3, 65% of pages on the BCC Website met accessibility standards. Whilst this is below the 70% target for this quarter, changes are expected to be made to improve performance by the end of 2018-19.</p> <p>Performance has stayed the same since Q1 and work is continuing to develop webpage templates that meet the required standards with suppliers, to allow changes to be made by the end of 2018-19. Employees are also being trained on the standards to support ongoing updates to individual pages.</p> <p>There has been a steady increase on accessibility standards since starting in January 2018 moving from 4 to 8 out of 10 which is one aspect of the SOCITM rating.</p> <p>Following a review with the Society for IT Practitioners in Public Sector (SOCITM) in January 2019, there were no priority areas identified as requiring improvement.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Continuing to develop page templates that will enable content to be viewed within accessibility standards

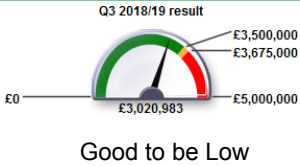
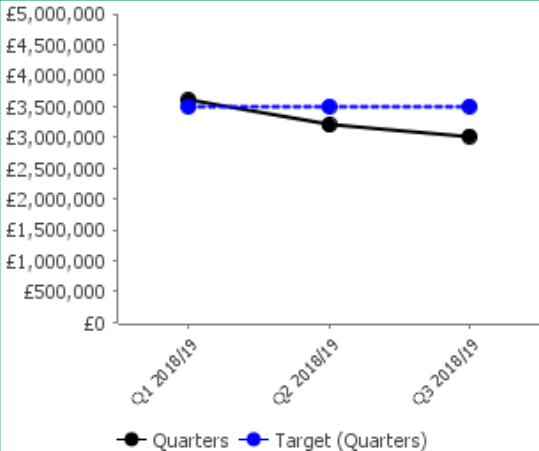
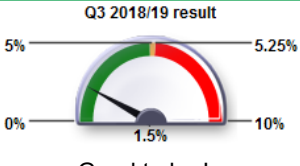
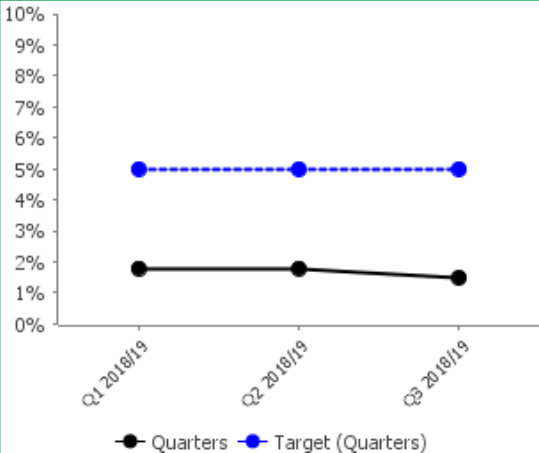
PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
Number of sickness absence days per FTE annually (BCC)	Aim to Minimise	9.7	8.5	<p>Q3 2018/19 result</p>  <p>Good to be Low</p>		County Council average result of 9.3 sickness days lost per FTE (2017/18).	<p>The current average sickness is 9.7 days per FTE, an increase of 0.2 days from the Q2, however, this is expected over the winter months. In recognition of this, to help minimise periods of absence, Flu Jabs were offered to employees.</p> <p>The continued promotion of Mental Health and the Time to Change pledge is encouraging people to take sickness absence where required, which is expected to address under reporting of sickness absence.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Promotion of wellbeing including a full week of events to promote mental health to correspond with the national 'time to talk' day • Managing sickness absence by encouraging absence management conversations and interventions at the earliest possible point • For employees that have longer term periods of sickness, managers are supported through the Health and Attendance process to minimise length of absence.

Q3 Resources GREEN Cabinet Performance Indicators

Generated on: 13 March 2019

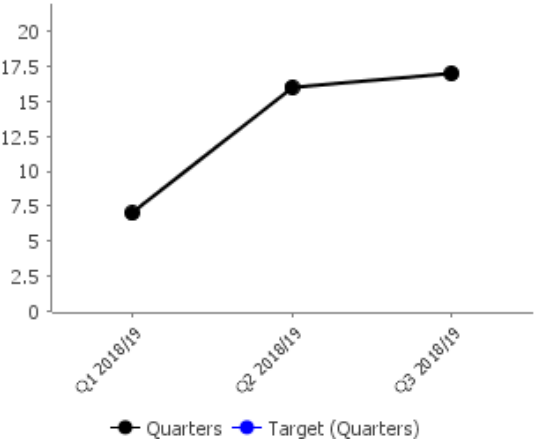
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% total capital spend across BCC (forecast) compared to Budget (performance measure)	Banding	92.2%	100%	<p>Q3 2018/19 result</p> <p>Good to be in Range</p>		Benchmarking information is not available.	<p>At the end of Q3 the forecast slippage is £15.9m.</p> <p>There are decisions where the Council holds spending due to service reconfiguration activity and there is currently forecast slippage of £7.3m. This is due to a review of capital requirements for respite care within the Health & Wellbeing Portfolio (£2.8m). A decision to delay the development of the Aylesbury Study Centre in light of the Unitary decision and Technology Projects as the Technology Strategy has developed within the Resources Portfolio (£4.5m).</p> <p>There is also increasing complexity as the Council works in partnership with other bodies to develop projects, such as the BTVLEP on infrastructure projects, districts on town centre regeneration, with national bodies on development of housing opportunities through the Housing Infrastructure Fund and on the development of East-West Rail. This means there is slippage in both the Leaders Portfolio and Transportation Portfolio of £10.2m.</p>

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
Overall revenue (forecast) variance across the council (performance measure)	Aim to Minimise	0.04%	0%	<p>Q3 2018/19 result</p>  <p>0.11% 1% 5% 0.04% -5%</p> <p>Good to be Low</p>	 <p>5% 4.5% 4% 3.5% 3% 2.5% 2% 1.5% 1% 0.5% 0%</p> <p>Q1 2018/19 Q2 2018/19 Q3 2018/19</p> <p>● Quarters ● Target (Quarters)</p>	Benchmarking information is not available.	<p>At the end of Q3 the Council is forecasting that there will be a £0.12m forecast overspend for the year ending March 2019.</p> <p>The key reasons for the overspends reported above are as follows</p> <ul style="list-style-type: none"> • Increases in the demand and complexity of Social Care cases • Increases in both the demand and cost of provision for SEND transport • Further pressures relate to challenges in meeting income targets due to wider economic conditions and delivery of planned savings <p>Improvement Actions:</p> <ul style="list-style-type: none"> • All Portfolios are reviewing their budgets and continuing to work on action plans to mitigate their own pressures to ensure spend remains within approved budgets. • Proposals for future years' budgets are being stress-tested to ensure ongoing pressures are addressed.

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
£ value of unsecured debt >90 days (not secured against a property or asset)	Aim to Minimise	£3,020,983	£3,500,000	 <p>Q3 2018/19 result</p> <p>Good to be Low</p>		Benchmarking information is not available.	<p>Unsecured debt has reduced £0.18m since Q2 to £3.02m in Q3, below the target of £3.5m.</p> <p>All debt is now being passed onto Finance at 35 days, rather than 90 days. This has reduced the amount of outstanding debt overall; but older debt still remains more difficult to collect. As we continue to embed these changes we expect to see further reductions within the debt over 90 days.</p> <p>The focus on Adult Social Care has resulted in a reduction of overdue Communities, Health & Adult Social Care invoices this quarter. All Business Units now have a dedicated recovery officer to reduce unsecured debt across the Council.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> All outstanding unsecured debt is being reviewed, focusing on the largest and oldest debts within each Business Unit.
% of empty properties across the County Council estate that are void (excluding schools)	Aim to Minimise	1.5%	5%	 <p>Q3 2018/19 result</p> <p>Good to be Low</p>		Benchmarking information is not available.	<p>Across the whole of the council's property estate (excluding schools) 1.5% of properties are empty, which is within the 5% target</p> <p>Since Q2, 21 West Wycombe Road and the former highways depot in Wing have been sold</p> <p>There are a total of 9 vacant properties at the end of Q3, 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 9 properties are corporate properties. They include a selection of both smaller and larger properties including Old County Office Annex B & Avenue Lodge.</p>

Q3 Resources MONITOR Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary												
Number of existing staff and new employees taking up apprenticeships (excluding schools) [HR influenced]	Aim to Maximise	17	 <table border="1"> <caption>Trend Chart Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (Actual)</th> <th>Target (Quarters)</th> </tr> </thead> <tbody> <tr> <td>Q1 2018/19</td> <td>7</td> <td>20</td> </tr> <tr> <td>Q2 2018/19</td> <td>16</td> <td>20</td> </tr> <tr> <td>Q3 2018/19</td> <td>17</td> <td>20</td> </tr> </tbody> </table>	Quarter	Quarters (Actual)	Target (Quarters)	Q1 2018/19	7	20	Q2 2018/19	16	20	Q3 2018/19	17	20	Provisional average proportion of take up compared to Local Authority target is 57% for 2017/18 (excluding schools) (based on a survey of 78 LAs)	Annual measure reported in quarter 4
Quarter	Quarters (Actual)	Target (Quarters)															
Q1 2018/19	7	20															
Q2 2018/19	16	20															
Q3 2018/19	17	20															



Planning & Environment - **Cllr Bill Chapple OBE**

Summary of Q3 2018/19 Performance Indicators

0

Red Performance Indicators

2

Amber Performance Indicators

2

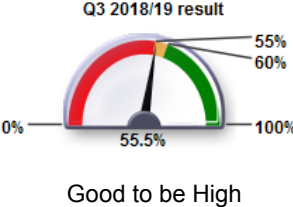
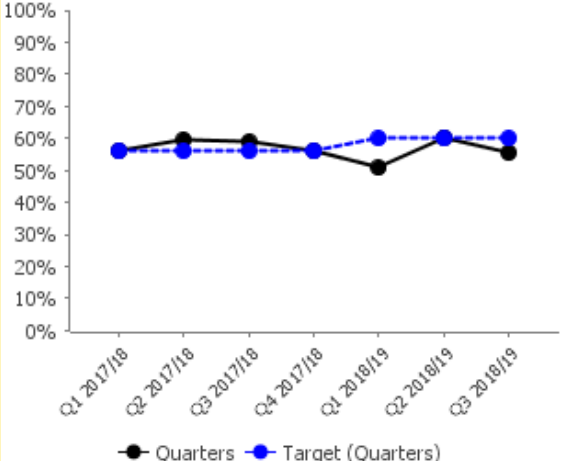
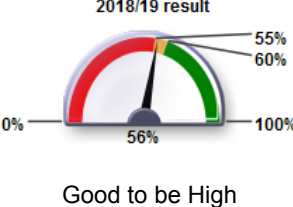
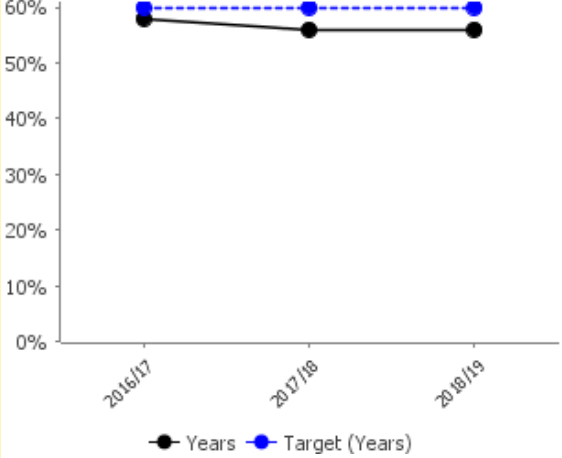
Green Performance Indicators

0

PIs without a RAG status

Q3 Planning and Environment AMBER Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
NI 192: % of waste collected for recycling, reuse, composting or anaerobic digestion) from household sources (household collection and Household Recycling Centres)	Aim to Maximise	55.5%	60%	 <p>Q3 2018/19 result</p> <p>Good to be High</p>	 <p>Q1 2017/18 Q2 2017/18 Q3 2017/18 Q4 2017/18 Q1 2018/19 Q2 2018/19 Q3 2018/19</p> <p>Quarters Target (Quarters)</p>	<p>2016.17: Ranked 33/350 for the total household waste recycling, composting and reuse rate for English local authorities.</p>	<p>Performance in Q3 is 55.5%, which is below the aspirational target of 60%, but still within the 5% tolerance threshold for this measure. This is the lowest this figure has been for this period since 2016-17.</p> <p>July to Sept 2018 was an extremely dry hot summer, as such we received 34% less green waste against initially forecasted tonnages. Levels of composting/ anaerobic digestion were also low (25.8%, compared to 29.6% Q3 2017/18), whilst other recycling measures have remained strong: % of Household Waste which has been sent for recycling 29.36% (compared to 28.9% Q3 2018/19).</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> No action is required because this performance figure fell due to a drop in green waste linked to weather rather than poor recycling performance rates.
NHT Public Satisfaction Survey: (KBI 15) % of customers satisfied with their local Rights of Way Network (performance measure)	Aim to Maximise	56%	60%	 <p>2018/19 result</p> <p>Good to be High</p>	 <p>2016/17 2017/18 2018/19</p> <p>Years Target (Years)</p>		<p>Q3 - This year's results are 2% lower than last year, which is slightly below target (60%), but within the tolerance of 5%. Satisfaction is likely to be influenced by poor surface conditions last winter and surface clearance work not being conducted during summer months.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> Need to ensure that the correct budget is allocated by TfB for 2 x 2 man work teams for the whole year, thus ensuring summer clearance activities are delivered according to programme.

Q3 Planning and Environment GREEN Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of Sustainable Drainage planning applications responded to within 21 days or agreed timeframes (performance measure)	Aim to Maximise	97.56%	100%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <p>● Quarters ● Target (Quarters)</p>		<p>Performance is 97.56% against a target of 85% across all types of applications (major >10 properties, and minor <10 properties, plus County applications). This is an improvement against the same period last year Q3 2017-18 (94%), despite the number of Major and County applications remaining steady (around 400 and 30 respectively), and the number of minor applications, from the Districts, quadrupling (from around 100 to 400). Performance is being maintained by financing additional resource through income from applications.</p>
Country Parks: Visitor Numbers (contextual)	Aim to Maximise	805,316	798,000	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <p>● Quarters ● Target (Quarters)</p>		<p>Cumulative figures to date equal 805,316 visitors against a target of 798,000 visitors. Performance in Q3 is 204,998 visitors against a Q3 target of 202,000, which is good. However, this is lower than the same period last year where there were 208,843 visitors. In terms of overall percentages, this drop in visitor numbers only accounts for 2%, as such is not a concern. Visitor numbers in April, May and June of 2018 were all down 8% compared to the same time in 2017. External pressures, impacting many tourist sites, results in visitor numbers fluctuate for a number of reasons.</p>



Transportation - **Cllr Mark Shaw**

Summary of Q3 2018/19 Performance Indicators

1

Red Performance Indicators

0

Amber Performance Indicators

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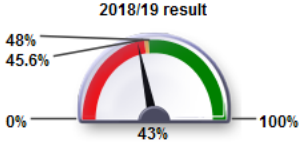
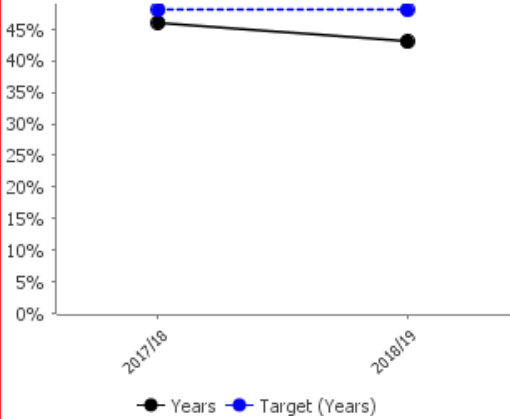
Green Performance Indicators

3

PIs without a RAG Status

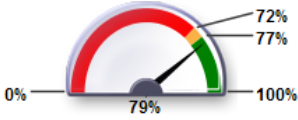
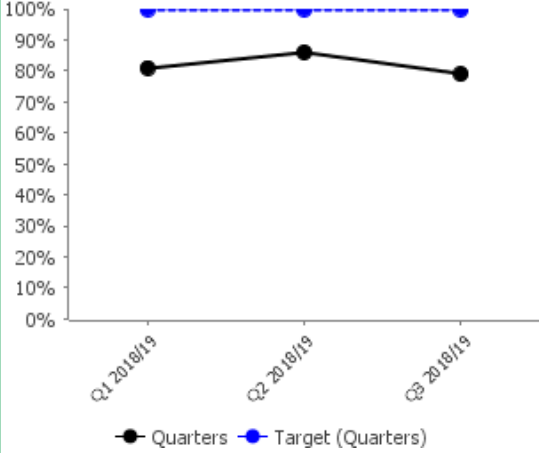

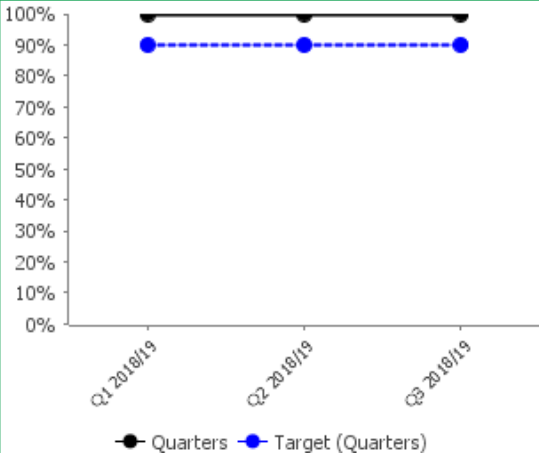
Q3 Transportation RED Cabinet Performance Indicators

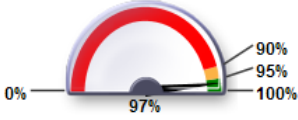
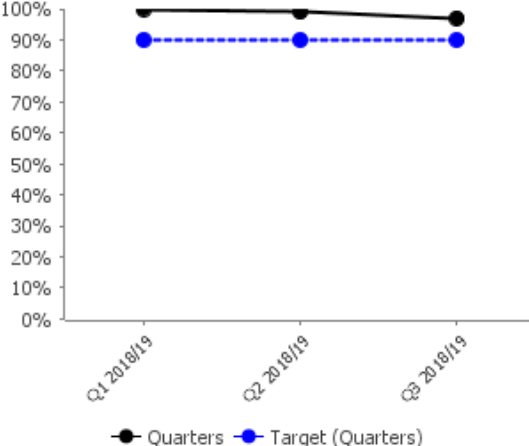

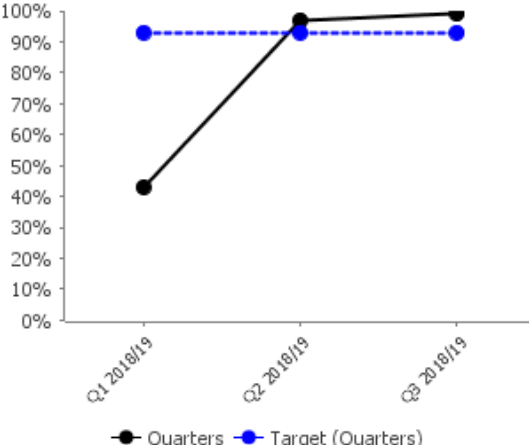
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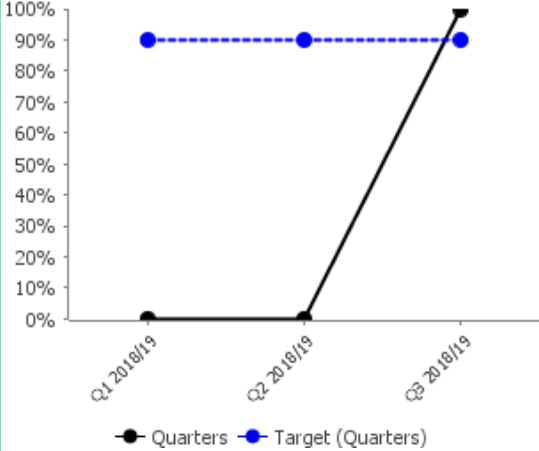
PI	Aim to:	Current Value	Target	RAG rating	Trend Chart	Benchmarking	Commentary
NHT Public Satisfaction Survey: Tackling Congestion	Aim to Maximise	43%	48%	<p>2018/19 result</p>  <p>Good to be High</p>	 <p>● Years ● Target (Years)</p>	<p>National Average: 47%</p> <p>Oxfordshire: 43%</p> <p>Northamptonshire: 46%</p> <p>Hertfordshire: 46%</p>	<p>Buckinghamshire scored a Public Satisfaction score for 'Tackling Congestion' (NHT Annual Survey) of 43% which is lower than the Cabinet Target (48%) and last year's score (46%). Lower than average performance was seen in: Traffic levels & congestion, Advanced warning of roadworks, Signposting of road diversions, Helplines to find out about roadworks, and Routes Taken by HGV's. We scored well on Time Taken to Complete Roadworks.</p> <p>Lower satisfaction scores have been influenced by the delivery of a large Capital Maintenance Programme and the Growth Agenda. Gas and water utility companies are implementing major infrastructure projects. Incidents on motorways diverting a disproportionate volume of traffic onto Buckinghamshire's peripheral roads.</p> <p>Improvement Actions:</p> <ul style="list-style-type: none"> • Expand Street works Permit Scheme & explore introduction of a Lane Rental scheme for key routes. • Invest in a project to improve the capacity and resilience of the most "critical" junctions in the County. • Develop Urban Traffic Control Strategy and systems to make best use of our linked signals and other Intelligent Transport Systems. • Work to strengthen links with Highways England to manage congestion from peripheral roads.

Q3 Transportation GREEN Cabinet Performance Indicators

Generated on: 13 March 2019

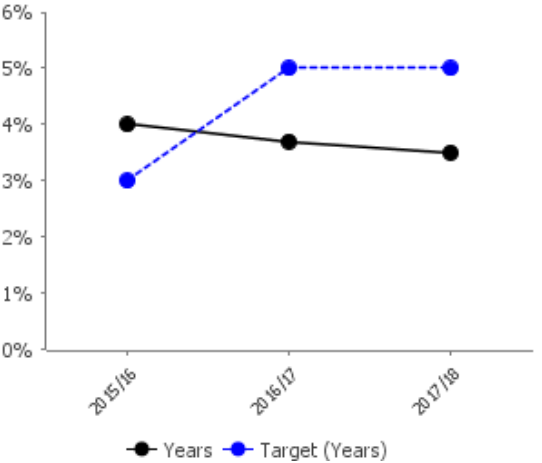
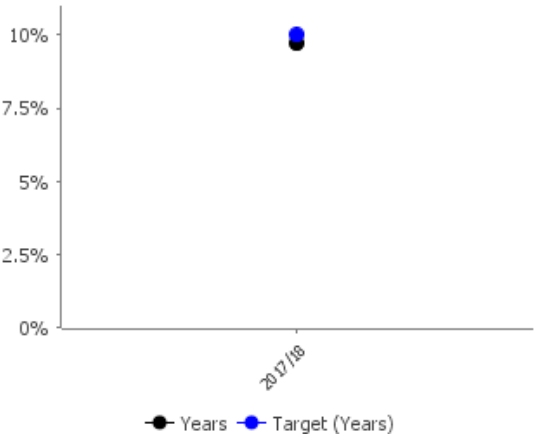
PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of HDM planning applications responded to within 21 days or agreed timeframes (performance measure)	Aim to Maximise	79%	100%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>			<p>Performance is at 79% against a statutory target of 72%, which is the lowest it has been in 2018/19: 81% (Q1), 86% (Q2), but higher than the same period last year (76%). Performance for Major Applications has improved this quarter, so the overall decline can be attributed to the reduced performance among Minor Applications from 87% (Q2) to 80% (Q3). It should be noted that the volume of minor applications received this quarter (623) increased by 11% since Q2 (560) and is 47% more than the same period last year (425). It is not clear why there is an increase in minor applications coming from Districts, but we will continue to monitor. It should be noted that we have received 3 East West Rail compound applications in this quarter, which take a significantly greater time to assess than other applications.</p>
% of individual Capital schemes (Network Safety, Safety Fencing and Drainage) completed by year end (performance measure)	Aim to Maximise	100%	90%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>			<p>Performance has remained very good at 100%, as it was in Q1 and Q2, with 2 safety fencing and 5 network safety schemes (casualty reduction) completed in Q3. This has been attributed to the strong working relationships between TfB staff and their supply chain partners, which has resulted in the effective delivery of the work programme. All 23 drainage schemes have been completed well within the year. Programmed work to be completed in Q4 includes 1 safety fencing and 2 casualty reduction schemes.</p>

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary												
% of overall Capital Carriageway Maintenance Programme delivered by year end (performance measure)	Aim to Maximise	97%	90%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <table border="1"> <caption>Q3 2018/19 Performance Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2018/19</td> <td>98.9</td> <td>90</td> </tr> <tr> <td>Q2 2018/19</td> <td>97</td> <td>90</td> </tr> <tr> <td>Q3 2018/19</td> <td>97</td> <td>90</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2018/19	98.9	90	Q2 2018/19	97	90	Q3 2018/19	97	90		Performance has remained high at 97% against a target of 90%. This is slightly lower than in Q2 where 98.9% was achieved, which is due to the number of activities completed during this period reducing (180 activities in Q2 to 67 activities in Q3).
Quarter	Quarters (%)	Target (Quarters) (%)																	
Q1 2018/19	98.9	90																	
Q2 2018/19	97	90																	
Q3 2018/19	97	90																	
% of Category 1 defects repaired in 2 working days (as per current Highways Safety Inspection Policy) (performance measure)	Aim to Maximise	99%	93%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <table border="1"> <caption>Q3 2018/19 Performance Data</caption> <thead> <tr> <th>Quarter</th> <th>Quarters (%)</th> <th>Target (Quarters) (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 2018/19</td> <td>43</td> <td>93</td> </tr> <tr> <td>Q2 2018/19</td> <td>97</td> <td>93</td> </tr> <tr> <td>Q3 2018/19</td> <td>99</td> <td>93</td> </tr> </tbody> </table>	Quarter	Quarters (%)	Target (Quarters) (%)	Q1 2018/19	43	93	Q2 2018/19	97	93	Q3 2018/19	99	93		Performance in Q3 has again improved to 99% since Q1 (43%) and Q2 (97%), against a target of 93%. There were 341 defects in Q3 compared to 660 defects in Q2 and 2,380 defects in Q1. Work volumes in Q3 this year are nearly half that of the same period last year (652 defects), which is partly due to the milder weather we are experiencing this year, as well as the prudent investment in our roads.
Quarter	Quarters (%)	Target (Quarters) (%)																	
Q1 2018/19	43	93																	
Q2 2018/19	97	93																	
Q3 2018/19	99	93																	

PI	Aim to:	Current Value	Target	RAG Rating	Trend Chart	Benchmarking	Commentary
% of overall Capital Footway Programme delivered by year end (performance measure)	Aim to Maximise	100%	90%	<p>Q3 2018/19 result</p>  <p>Good to be High</p>	 <p>Legend: ● Quarters ● Target (Quarters)</p>		<p>Performance in Q3 is 100% of the quarterly programme (10 schemes delivered). Focusing resources on design and preconstruction activities associated with the footway structural repair programme due in October, enabled construction work to commence in November, as proposed in Q2 2018-19. 25 schemes have been programmed to be delivered across the year (2018-19), as such delivery of 10 schemes means that 40% of the annual programme was delivered in Q3 and we are on track to deliver the remaining 15 schemes (subject to weather) in Q4.</p>

Q3 Transportation MONITOR Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Aim to:	Current Value	Trend Chart	Benchmarking	Commentary												
% of principal roads where structural maintenance should be considered (our 'A' roads) NI-168	Aim to Minimise		 <table border="1" data-bbox="629 341 1169 805"> <caption>NI-168 Trend Chart Data</caption> <thead> <tr> <th>Year</th> <th>Years (Actual)</th> <th>Target (Years)</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>4.0%</td> <td>3.0%</td> </tr> <tr> <td>2016/17</td> <td>3.7%</td> <td>5.0%</td> </tr> <tr> <td>2017/18</td> <td>3.5%</td> <td>5.0%</td> </tr> </tbody> </table>	Year	Years (Actual)	Target (Years)	2015/16	4.0%	3.0%	2016/17	3.7%	5.0%	2017/18	3.5%	5.0%		No update for this quarter. Next update due in Q4.
Year	Years (Actual)	Target (Years)															
2015/16	4.0%	3.0%															
2016/17	3.7%	5.0%															
2017/18	3.5%	5.0%															
% Footways requiring structural maintenance (AM04M)	Aim to Minimise		 <table border="1" data-bbox="629 815 1169 1252"> <caption>AM04M Trend Chart Data</caption> <thead> <tr> <th>Year</th> <th>Years (Actual)</th> <th>Target (Years)</th> </tr> </thead> <tbody> <tr> <td>2017/18</td> <td>9.5%</td> <td>10.0%</td> </tr> </tbody> </table>	Year	Years (Actual)	Target (Years)	2017/18	9.5%	10.0%		No update for this quarter. Next update due Q4.						
Year	Years (Actual)	Target (Years)															
2017/18	9.5%	10.0%															

Q3 Transportation MONITOR (no data) Cabinet Performance Indicators

Generated on: 13 March 2019

PI	Commentary
Successful delivery of congestion management schemes (A41 Bicester Road)	Project is on track, with the A41 Bicester Road expected to complete by 2021. A public consultation is taking place later this year (2019) to explore our proposals. (East West Rail is no longer included in this measure following a Cabinet decision in Q2 owing to our limited influence on the scheme, which is externally delivered)