

# Leader's Portfolio Cllr Martin Tett



#### 8. Leaders Portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Buckinghamshire unemployment rate as a percentage of National unemployment rate	Aim to Minimise	68%	55%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	National claimant rate 3.8% (100%) Buckinghamshir e claimant rate 2.6% (68%)	This indicator measures the Buckinghamshire Claimant Rate as a percentage of the National Claimant Rate. The Claimant Rate measures the percentage of working age population claiming 'out-of-work' benefits from the total working age population. The target is for the percentage unemployed in Buckinghamshire to be less than 55% of the percentage unemployed nationally.  In March 2023, 8,840 Buckinghamshire residents were claiming 'out-of-work' related benefits (the Claimant Count). Buckinghamshire's Claimant Count rate (number of claimants as a proportion of working age residents) currently stands at 2.6%, lower than the national average of 3.8%. Buckinghamshire's Claimant Count rate is the 11th lowest of 38 Local Enterprise Partnerships (LEPs) but has the joint 8th highest change in Claimant Count rate since March 2020. Rates vary across the County, with the Wycombe Parliamentary Constituency area reporting a Claimant Count rate that exceeds the national average (4.0%). The number of claimants in Buckinghamshire rose by 175 between February and March 2023, suggesting the decline in claimants throughout 2021 and most of 2022 has levelled off with monthly fluctuations.  Improvement Actions:  • Ward-level monitoring by Bucks LEP to target improvement initiatives more effectively.  • Labour market and economic analysis by Bucks LEP to inform Local Skills Improvement Plan.  • Skills boot camp led by Flannery to alleviate recruitment challenges in the construction industry.  • Collaboration with key partners to better engage community groups in worst affected wards.  • Ensure local requirements are incorporated into recruiting business' employment processes.  • Investigate funding opportunities for targeted support for recruitment and onboarding processes.

#### 8. Leaders Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
New business registrations: Rank against other Local Enterprise Partnerships (LEPs)	Aim to Minimise	8	10	13 12 11 10 9 8 7 6 5 4 3 2 1  Quarters Target (Quarters)	(1) South East 114.6 (2) London 113.2 (3) Greater Manchester 47.2 (4) Greater Birmingham and Solihull 45.5 (5) Hertfordshire 41.1 (6) Black Country 38.6 (7) Coventry and Warwickshire 37.8 (8) Buckinghamshire 37.6 (9) Leicester and Leicester shire 36.7 (10) Thames Valley Berkshire 36.4	The indicator measures the number of new businesses registered across different Local Economic Partnerships (LEPs) and ranks them against each other.  1,675 new businesses registered in Buckinghamshire between January and March 2023. Buckinghamshire ranked 8th of 38 LEP areas in terms of the number of business registrations for every 10,000 residents aged 16 or over (a rate of 37.6).  The most common sectors in which these new businesses are operating are: (1) Management consultancy (excluding financial management), (2) Buying and selling of own real estate, (3) Retail sale via mail order houses or via internet, (4) IT consultancy activities, (5) Other letting and operating of own or leased real estate, (6) Activities of other holding companies.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Transport Infrastructure and Funding (TIF) projects: % profiled spend achieved	Aim to Maximise	282%	100%	250% 250% 150% 100% 50% 0%	None available	This indicator measures a single figure for the percentage of actual spend against profiled spend, for projects within the Capital Programme funded from the Capital Budget. Projects include Phases 1 and 2 of the South-East Aylesbury Link Road (SEALR). The target was to hit 100% by year end, which was equally profiled throughout the year, even though actual spend may be more variable. The spend reported includes creditor values.  Q4 performance is 282% which demonstrates that expenditure has exceeded the in-year budgets (greater than 100% is good). Whilst the in-year costs are above the target, the overall costs remain within the forecasts identified in the December 2022 Cabinet Report. Good progress has been made on the project which is reflected in the expenditure to date exceeding the in-year budget. We have worked closely with finance colleagues to ensure we set budgets at a level to achieve accelerated in-year spend. However, progress of the project as a whole continues to face significant challenges linked to global events and the subsequent inflationary impact on the national and local economy.



# Accessible Housing and Resources Portfolio Cllr John Chilver





## **5. Accessible Housing and Resources Portfolio RED**



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Average webchat response time	Aim to Minimise	0h 01m 13s	0h 00m 50s	0h 01m 34s 0h 01m 25s 0h 01m 15s 0h 01m 06s 0h 00m 56s 0h 00m 47s 0h 00m 37s 0h 00m 28s 0h 00m 18s 0h 00m 09s 0h 00m 00s	None available	This indicator measures the average time to respond to each interaction within a complete webchat journey.  Q4 performance is 1 minute and 13 seconds against a target of 50 seconds. This is a reduction in performance when compared with Q3 (59 seconds). There was no return for Q2 as the webchat service was temporarily suspended.  Following the suspension of webchat in Q2, webchat has been relaunched initially just as a contact channel on the contact us page, and it is now rolled out across the majority of pages on the website to provide an alternative contact channel. Performance in the period has been impacted by the Revenues and Benefits recovery action being restarted following the system closure, this has meant that Customer Service resource has been diverted to assist with spikes in telephone contact as well as ongoing work to train additional resources. Performance will improve as newly trained staff start to become more familiar with the webchat platform.  Improvement Actions:  • Exploring opportunities to deploy AI at the beginning of live chats, to handle FAQs without human intervention required.  • Contact volumes are regularly reviewed to determine sufficient resources available to manage chat within Key Performance Indicators (KPIs).  • Training and upskilling of staff is ongoing to increase Customer Service Assistant capacity to support the chat channel as required.  • Additional holding replies have been added for quick use.  • The flexible workforce has been developed and utilised, allowing colleagues from outside of the Customer Service Centre to support webchats as required.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Average Call Wait Time	Aim to Minimise	0h 04m 39s	0h 03m 00s	0h 16m 40s 0h 15m 00s 0h 13m 20s 0h 11m 40s 0h 10m 00s 0h 08m 20s 0h 06m 40s 0h 05m 00s 0h 03m 20s 0h 01m 40s 0h 00m 00s	None available	This indicator measures the average call wait time across all Customer Service lines.  Q4 performance is 4 minutes 39 seconds against a target of 3 minutes. This is a reduction in performance compared with Q3 (2 minutes 42 seconds). The work of the Customer Service Centre is cyclical in nature and Q4 2022/23 vs Q4 2021/22 shows a year on year improvement in wait time of 4 minutes and 21 seconds.  The reduction in performance compared with Q3 is due to a significant increase in the number of calls received in Q4, with two spikes in call wait times across the quarter. These spikes in demand were driven by cyclical activity:  • Council tax recovery action (22,000 letters issued)  • Annual billing cycle (270,000 bills issued).  These spikes in demand were known and planned for with letters being spread as far as possible; leave being embargoed and our 'rising tide' response plan deployed including messages on the lines; call backs; and referral to online resource. Despite the incredibly high volumes of work and the consequent call volumes and impact on average call wait time, the call answer rate was consistently above the 90% target throughout Q4. No complaints about call wait times were received during this period. The call back facility was used effectively during this period, with 4,198 call backs completed.  Improvement Actions:  • Continued use of call back queues for high volume lines, in particular Revenues and Benefits.  • Addition of tailored/nudge messaging on telephone lines to promote online options.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Percentage of total capital spend across Buckinghamshire Council (forecast) compared to Budget (performance measure)	Aim to Maximise	71%	90%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0 Quarters — Target (Quarters)		This indicator measures the forecast percentage of total capital spend across Buckinghamshire Council compared to budget.  The overall spend on Capital is £107.5m against a total budget of £151.9m. There is a 29% variance on the programme overall, with a 17% variance against released budgets. This is lower than the 89% forecast in Q3. Delays have been experienced on two projects in particular this year (Aylesbury Grid reinforcement and Future High Streets) which contributed to the lower spend against budget. However, the figures also include £10m underspend on completed Schools projects (which, if adjusted for, would take the variance against released budgets to the 90% target).  Improvement Actions:  Budget profiles for 23/24 are being reviewed on a project-by-project basis and will be checked and signed off by Directors and by Cabinet in the Q1 finance report.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Average time for processing new Housing Benefit claims (days)	Aim to Minimise	37.2	20	40 20 10 0 A ROBERT REAL PROPERTY OF THE PROPE	DWP Q3 2022 to 2023 Average new claims processing time: 20 days	This indicator measures the average time for processing new Housing Benefit claims (days).  Q1 performance was impacted by phase 1 of the single system project, council tax £150 energy rebate processing, and the annual uprating of benefit claims.  Q2 was affected by resources working on the phase 2 single system project. Taken together, this extended processing times.  Q3 continued to be impacted by the single system project. The system closed for 11 weeks from August to November.  In Q4 the team have been cleansing data ready for council tax billing and processing additional energy bill support payments. The overall rolling performance at the end of March after annual billing was 37.2 days against a target of 20 days.  As this indicator is an annual rolling target, it would take sustained better than target performance over many months to improve the reported position. With the 11-week closure of systems, it was not possible to achieve target performance. In addition to this, the number of Housing Benefit Claims has not decreased at the rate projected by central Government (in relation to migrating people onto Universal Credit), this has in turn created a higher than expected demand within the quarter.  Improvement Actions:  • Additional resources have been brought in to clear the outstanding backlog by the end of Q1 2023/24.

## **5. Accessible Housing and Resources Portfolio AMBER**



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of sickness absence days per FTE annually (rolling 12-month period)	Aim to Minimise	9.01	9	10 9 8 7 6 5 4 3 2 1 0  Change And	None available	This indicator measures the number of sickness absence days per full-time equivalent (FTE) employee in the Council.  Q4 performance is 9.01 days against a target of 9 days. This is an improvement in performance when compared with Q3 (9.28) but remains just over the target.  Targeted support has been provided to services and teams. Sickness absence levels continue to be monitored with targeted interventions for short and long-term absence. The organisational sickness absence performance has also been the subject of a review by the Finance and Resources Select Committee in March.  Improvement Actions:  Continue to monitor and understand sickness absence.  Continue to promote health and well-being support across the Council.  Continue to offer face-to-face physio appointments for depot and adult social care employees.  Working with a new Occupational Health/Employee Assistance Programme (EAP) provider. From 1st April 2023, Managers can access a telephone line to receive quick information on supporting employees with health conditions or EAP-type issues. They can also directly refer their staff to TP Health's user-friendly system.

## **5. Accessible Housing and Resources Portfolio GREEN**



PI	Aim to:	Current	Target	Trend Chart	Benchmarking	Commentary
		Value	Target		Benchmarking	Commentary
Council Access Point Plus customer satisfaction	Aim to Maximise	82%	75%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters)	None available	This indicator measures customer satisfaction for face-to-face visitors in the Council Access Point Plus locations.  Q4 performance is 82% against a target of 75%. This is an improvement in performance compared to Q3 and Q2 (80%).  The improvement in performance compared with Q3 is due to ongoing training of staff across multiple disciplines, thus leading to an overall improvement in customer satisfaction.
Percentage of phone calls answered in the Customer Service Centres	Aim to Maximise	94.5%	90%	100% 90% 80% 70% 60% 50% 40% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of phone calls answered in the Customer Service Centre.  Q4 performance is 94.5% against a target of 90%. This is a reduction in performance when compared with Q3 (97%), although it remains above target and is an improvement in performance when compared with Q2 (83.2%).  The reduction in performance compared with Q3 is due to an increase in call volume following the February half-term and due to recovery action for Council Tax. Despite the slight reduction in performance in Q4, there has been a significant improvement since Q1 (73.9%) and Q2 (83.2%), which can be attributed to the ongoing improvement actions, including prioritisation of call answering over all other contact channels, prioritisation of high-volume lines and continued use of behavioural science nudges to encourage online reporting.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Percentage of phone calls in Customer Service Centres resolved at first call (FCR)	Aim to Maximise	77.2%	51%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the average percentage of phone calls in the Customer Service Centre resolved at the first point of contact.  Q4 performance is 77.2% against a target of 51%. This is an improvement in performance compared with Q3 (76.7%) and Q2 (71.3%).  The improvement in performance compared with Q3 is due to continuous staff training, thus enabling them to resolve the customer enquiry at the first point of contact.
Call customer satisfaction	Aim to Maximise	72.3%	60%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures customer satisfaction based on responses to the Customer Services post-call survey question about the overall call experience.  Q4 performance is 72.3% against a target of 60%.  This is an improvement in performance compared with Q3 (69.4%) and Q2 (61.5%).  The improvement in performance compared with Q3 is due to ongoing staff training across additional queues. This allows more calls to be resolved at the first point of contact, thus leading to an overall improvement in customer satisfaction.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Overall revenue (forecast) variance (%) across the council	Aim to Minimise	0%	0%	2% 1% 0% -1% -2% -3% -4% -5% -6%  Quarters — Target (Quarters)	None available	This indicator measures the percentage of forecast revenue variance across Buckinghamshire Council.  The Revenue outturn is in line with the budget overall.  The Council has experienced significant financial pressures due to high levels of inflation and continued increases in demand and complexity in key services such as Adults and Children's Social care which has contributed to a £9.8m adverse variance in Portfolios. This has been mitigated by additional electricity income from the Council's Energy from Waste plant and favourable variances in corporate budgets.
£ value of unsecured debt > 90 days (excl Business Rate, Housing Benefit and Council Tax, and not secured against a property or asset) across the Council	Aim to Minimise	£9,160,999	£10,000,000	£15,000,000 £12,000,000 £10,500,000 £7,500,000 £6,000,000 £4,500,000 £3,000,000 £1,500,000 £0 Quarters — Target (Quarters)	None available	This indicator measures the value of unsecured debt greater than 90 days (excluding Business Rate, Housing Benefit and Council Tax, and not secured against a property or asset).  Q4 performance is £9,160,999 against a target of £10,000,000. This is a reduction in performance when compared with Q3 (£9,000,000) and remains under target.  Around 60% of our unsecured debt over 90 days falls within the Adults and Health directorate. A task and finish group has been formed to improve debt collection performance and lower the overall amount of unsecured debt associated with this directorate.  Alongside this, we continue improving our debt processes and reporting, focusing on enhancing automation. Automating our debt reminders will enable us to focus on our more complicated cases. Improved reporting will help us to obtain better visibility on our current debt position and highlight trends across our billing.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Percentage of invoices paid within 30 days	Aim to Maximise	96.2%	95%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0	None available	This indicator measures the percentage of invoices paid within 30 days of the quarter.  Q4 performance is 96.2% against a target of 95%, which is an improvement in performance by 1.7 percentage points compared to Q3 (94.5%).  We are continuing to review our payment processes as part of the AURA workstream and are looking to streamline our payment processes whilst engaging with our service users. In doing so, we aim to identify process efficiencies that will lead to faster rates of payments.
Percentage of Council Tax collected (cumulative)	Aim to Maximise	98.2%	98.2%	Quarters Target (Quarters)  100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Alabarana Ala	None available	This indicator measures the cumulative percentage of Council Tax collected. The target is adjusted for what is expected each quarter.  Despite the cost of living crisis causing a difficult last quarter, performance at the end of Q4 is 98.2% against a target of 98.2%.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Percentage of Business Rates collected (cumulative)	Aim to Maximise	98.4%	96.8%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of Business Rates collected.  Q4 performance is 98.4% against a target of 96.8% which continued to reflect a strong year. We have recovered to pre Covid-19 collection levels reaching 1.6 percentage points above target.
Average time for processing Housing Benefit change claims (days)	Aim to Minimise	7	7	11 10 9 8 7 6 5 4 3 2 1 0 Alagaria Rani Rani Rani Rani Rani Rani Rani Ra	DWP Q3 2022 to 2023 The average time taken to process a change: 8 days	This indicator measures the average time for processing changes to Housing Benefit claims in days.  The outturn for Q4 (as of the end of March) was 7 days against a rolling target of 7 days.  Q1 performance was negatively impacted by the Phase 1 system closure, council tax £150 energy rebate processing, and the annual uprating of benefit claims. The phase 2 system merger impacted Q2. Taken together, this impacted processing time. Q3 was affected by the system closure as part of the single system work.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Voluntary staff turnover percentage (rolling 12-month period)	Banding	12.7%	14%	16% 15% 14% 13% 12% 11% 10% 9% 8% 7% 6% 5% 4% 3% 2% 1% 0%  QLABURA QLABURA QLABURA QLABURA QLABURA QLABURA QLABURA QLABURA	None available	This indicator measures the workforce voluntary turnover percentage for the Council.  Q4 performance is 12.7% against a target of 14%. This is inside the banding of 12% to 16% and is a reduction of 0.3 percentage points compared to Q3 (13%). Turnover is monitored every month.
Percentage of staff who feel happy, valued & motivated at work	Aim to Maximise	74%	70%	Quarters Target (Quarters)  100% 90% 80% 70% 60% 50% 40% 10% 0% Quarters Target (Quarters)	None available	This indicator is measured twice yearly, no update due this quarter.  This indicator measures the employee engagement index score from the November 2022 Together Survey. Engagement is the combined measure of three questions looking at how motivated people feel to do their best for the Council, how happy they are working for the Council and how valued they feel for the work they do.  The latest result from the survey in November is 74% engagement against a target of 70%. This is an increase of 2 percentage points compared with the previous survey conducted in May 2022.  Surveys are being carried out half-yearly, so the next survey will run in May 2023, with the results being available in June 2023.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Service desk first time fix percentage	Aim to Maximise	75%	65%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	None available	This indicator measures the percentage of calls fixed first time on the IT Service Desk.  Q4 performance is 75% against a target of 65%. This is a reduction in performance by 3 percentage points when compared with Q3 (78%), although it remains above target.
Percentage of new website updated	Aim to Maximise	100%	100%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of the new website that has been updated.  As of Q4, 100% of the new website has been updated which is on target (100%). The migration of static content from legacy sites has now been completed, and closure activities for relevant sites are being undertaken. Some dynamic form elements remain (e.g. waste, licensing and building control); these are being addressed as part of the Customer Relationship Management (CRM) project or with different products.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of planned savings on track for delivery across Buckinghamshire Council as a result of the Better Buckinghamshire programme		100%	100%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters — Target (Quarters)	None available	This indicator measures the percentage of planned savings on track for delivery across Buckinghamshire Council as a result of the Better Buckinghamshire programme.  Performance at the end of Q4 shows that the Better Buckinghamshire programme achieved 100% of the expected savings (£5.1m). The programme is on track to deliver the full savings quota by 2025/26, which is monitored monthly.
Gross yield (%) from Investment portfolio	Aim to Maximise	8.3%	6.4%	9% 8% 7% 6% 5% 4% 3% 2% 1% 0%  Quarters  Target (Quarters)	None available	This indicator measures the gross yield from the Council's investment portfolio (where financed by debt).  Q4 performance was 8.3%, which is higher than (better) the 6.4% target. However, this reflects a worsening in the underlying investment value of the portfolio; the valuation of properties that generate rental income has reduced because of recessionary factors impacting the property market, while rent has remained constant relative to the previous quarter. It should be noted that financing of the Investment portfolio includes repayment of the underlying loan so over time the loan will be repaid.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Gross income (£) from Property	Aim to Maximise	£22,520,000	£22,144,000	£25,000,000 £15,000,000 £10,000,000 £5,000,000  £5,000,000	None available	This indicator measures the gross income against the budgeted annual forecast, exclusive of bad debt (which is loans or outstanding balances owed that are no longer deemed recoverable and must be written off) from property rent for Investment, Commercial, Corporate and Agricultural Portfolios. The target is for income to be greater than the annual budget (£22,144,000).  At the end of Q4 the gross income from property rent for investment, commercial, corporate and agricultural portfolios was £22.52m, which is higher than the £22.144m forecast.
% of empty properties across the Council Estate that are vacant for more than 2 years (excluding those in an approved Regeneration or Capital Programme, and schools)	Aim to Minimise	0.23%	0.4%	1% 0.9% 0.8% 0.7% 0.6% 0.5% 0.4% 0.3% 0.2% 0.1% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of empty properties across the Council estate that are vacant for more than 2 years. Vacant means continuously empty for 2 years and not within a Capital or Regeneration programme.  Performance in Q4 was 0.23% which is below 0.4% target (good) and is in line with previous quarters. The total portfolio to which this applies comprises some 1,750 individual assets. The number of properties that are reportable as vacant within the above definitions has reduced.



# Climate Change and Environment Portfolio Cllr Gareth Williams





## 1. Climate Change and Environment Portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of waste collected for recycling, reuse, composting or anaerobic digestion from household sources (household collection and Household Recycling Centres)	Aim to Maximise	47.96%	55%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  ARRIVAL OLIVER OLIVE	National Statistics: 2021/22 England (44.1%); South East (46.4%)	This indicator is reported one quarter in arrears.  This is a former National Indicator, which measures the percentage of total household waste collected that is either sent for reuse, recycling, composting, or anaerobic digestion, divided by the overall tonnage of all household waste. The latter figure will include waste sent for energy recovery or landfill.  Q3 performance was 47.96% against a target of 55% (good to be high). Performance is better than the same period last year (Q3 2021/22 - 44.12%). This improvement can be attributed to a more reliable food waste collection in the southern kerbside collection service. In Q1 and Q2 there have been known performance issues in the south of the county with missed bins. Q2 experienced extremely hot weather resulting in less green waste being received which lowered performance by approximately 4-6%.  We will not achieve the full year target of 55%. Q1 and Q2 are the peak recycling period and performance was lower than expected.  Improvement Action:  Improvement Action:  Improvement Action:  Improvement Action:  Improvement Action:

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of Missed Bin Collections	Aim to Minimise	0.21%	0.15%	1% 0.8% 0.6% 0.4% 0.2% 0%  Argan and argan and argan and argan argan and argan and argan a	None available	This indicator measures the number of missed domestic waste containers (not trade waste collections), as a percentage of total households. This service is delivered by two teams, an inhouse team to the North, and the contractor Veolia to the South. Instances where bins were 'not present', 'access was blocked', there had been 'contamination' or 'reports were raised too late' are not included in this measure, even though a resident may report this bin as missed.  In Q4 performance was 0.21% (0.09% North, 0.27% South), this is a significant improvement on Q1 0.68% (0.06% North, 0.77% South), and Q3 0.26% (0.05% North, 0.39% South), but is still above the 0.15% target. This overall improvement is present despite new waste collection rounds going live in the North on 20th February. This change saw a peak in missed bins for the North (as their performance decreased to 0.09%), however the service is back to business as usual. It is thought that without the service change the 0.21% performance would be closer to target.  Improvement Actions:  • Additional Veolia management structure deployed to improve monitoring and performance on the ground.  • The contractual Service Level Agreement (SLA) of fewer than 60 missed bins per 100,000 collections is now being regularly reached - for example during March the SLA was achieved for 2 out of 4 weeks.  • Continuing to hold weekly performance meeting with Veolia Regional Manager and Contract Manager.  • Continued close monitoring and management of Veolia through various meetings.  • Complaints and customer contract reduced to business as usual levels.

## 1. Climate Change and Environment Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Annual emissions: tonnes	Aim to Minimise	6,095	7,895	10,000 9,000 8,000 7,000 6,000 5,000 4,000 3,000 2,000 1,000 0  Page Page Page Page Page Page Page Page	None available	This measure is reported a year in arrears.  Next due in June 2023.  This indicator measures greenhouse gas emissions (tonnes) from Buckinghamshire council's operations including emissions from the buildings and vehicles we operate, those associated with the transmission and distribution of electricity that the Council uses, and business travel emissions where staff and Councillors have used their own vehicles and submitted a mileage expense. Emissions from the use of public transport for work travel haven't been captured as the data is not available. We have additionally excluded emissions from our operations where our staff do not directly provide the service, for example waste collection vehicles operated by Veolia in the South of the county.  In 2021/22 we emitted 6,095 tonnes of greenhouse gases, which is below the target of 7,895 tonnes of carbon dioxide equivalent (TCO2e) and equates to a 70% reduction since 1990 emissions (20,550 TCO2e). There have been significant emission savings across all aspects of our operations in 2021/22 compared to our emissions from 2018/19, including 52% and 50% reductions of TCO2e emissions from the council's fleet and building electricity consumption respectively, and bringing emissions from business travel down by 40%.  An Annual Update on the Climate Change & Air Quality Strategy was agreed at Cabinet in October, that detailed the activity and achievements so far in reducing emissions in Buckinghamshire and from the council's operations.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Annual emissions: % reduction	Aim to Maximise	70%	62%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Years Target (Years)	None available	This measure is reported a year in arrears.  Next due in June 2023.  This indicator measures greenhouse gas emissions (tonnes) from Buckinghamshire council's operations including emissions from the buildings and vehicles we operate, those associated with the transmission and distribution of electricity that the Council uses, and business travel emissions where staff and Councillors have used their own vehicles and submitted a mileage expense. Emissions from the use of public transport for work travel haven't been captured as the data is not available. We have additionally excluded emissions from our operations where our staff do not directly provide the service, for example waste collection vehicles operated by Veolia in the South of the county.  In 2021/22 we emitted 6,095 tonnes of greenhouse gases, which is below the target of 7,895 tonnes of carbon dioxide equivalent (TCO2e) and equates to a 70% reduction since 1990 emissions (20,550 TCO2e). There have been significant emission savings across all aspects of our operations in 2021/22 compared to our emissions from 2018/19, including 52% and 50% reductions of TCO2e emissions from the council's fleet and building electricity consumption respectively, and bringing emissions from business travel down by 40%.  An Annual Update on the Climate Change & Air Quality Strategy was agreed at Cabinet in October, that detailed the activity and achievements so far in reducing emissions in Buckinghamshire and from the council's operations.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Residual Household Waste per Household (kg)	Aim to Minimise	118.86	125	160 140 120 100 80 60 40 20 Quarters Target (Quarters)	None available	This indicator is reported one quarter in arrears.  This indicator measures the average weight of non-recyclable household refuse produced per dwelling within the county. Quarterly figures contribute to the overall annual figure. This is a national indicator.  In Q3 there were 118.86kg of residual household waste (black bin) per household, which is below (good) the target of 125kg per household.
Number of trees planted	Aim to Maximise	5,860	4,204	10,000 9,000 8,000 7,000 6,000 5,000 4,000 2,000 1,000 0  Years Target (Years)	None available	This is an annual indicator, previously reported in Q2. The next update due in Q2 2023/24.  This indicator measures the number of trees planted on Buckinghamshire council land within the year.  5,860 trees were planted on Buckinghamshire council land in the 2021/22 planting season against the target of 4,204 trees. This includes trees planted at Billet Field (on the Council's agricultural estate) (3,450 trees); next to Spade Oak Nature Reserve and the public highway (with funding from the Local Authority Treescapes Fund (LATF)) (586 trees); as part of Queen's Green Canopy (QGC) work in Buckinghamshire (168 trees); and by Chiltern Rangers (1,656 trees).  The Council's Climate Response Team secured an England Woodland Creation Offer grant of £28,380 for the Billet Field Wood project and has registered it with the UK Land Carbon Registry. It is calculated that the project will remove around 411 tonnes of carbon dioxide equivalent (TCO2e).  Invitations to tender have been issued for the provision of woodland creation and maintenance services at two sites: Bury Farm and Grange Farm. 29,000 trees (14,300 at Bury Farm and 14,700 at Grange Farm) are due to be planted by the end of the 2022/23 planting season against the 2022/23 annual target of 21,000 trees planted.

## 1. Climate Change and Environment Portfolio NO RAG



PI	Aim To	Current Value	Trend Chart	Commentary
Number of fly tipping clearances where an action has been taken	Monitor	31	40 35 30 25 20 15 10 5 0 2820112 @ MARLIN	This indicator measures the number of fly-tipping clearances where an action has been taken.  In Q4 there were 31 clearances where action had been taken resulting in a positive outcome. Action taken is wholly dependent on available evidence relating to the dumping (eye witness accounts, evidence found and surveillance work where appropriate), the strength of available evidence varies as does the complexity of subsequent investigation. The number of investigations resulting in positive disposal is higher in Q4 than previous quarters this year.



# Communities Portfolio Cllr Arif Hussain



#### 2. Communities Portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of female victims supported by IDVAs who have their risk level reduced	Aim to Maximise	70.9%	75%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% ARRIVARIAN	None available	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of Women's Aid female clients who receive support from an Independent Domestic Violence Advisor (IDVA) and as a result, see their domestic abuse risk-level reduce.  Independent domestic violence advisors (IDVAs) are professionally qualified, specialist domestic abuse workers, who support high-risk victims of domestic abuse. This is a commissioned service provided to address the needs of domestic violence and abuse (DVA) victims.  Q3 performance at 70.9% is below the 75% target, and has reduced since the previous quarter which was 75.4%. Fluctuations of risk occur due to mitigating factors including changes to contact between the victim and perpetrator, and challenges with monitoring progress if victims stop engaging with the service.  Improvement Actions:  • There is a continued focus on individual cases where there is a challenge in reducing the risk, however there are complicating factors including the current cost of living crisis and housing shortage which affect this measure.  • There are two new Triage Workers who are supplementing the work of the frontline services and providing additional capacity to deal with complex cases within Adults and Childrens Services.  • Work is also being done with Housing Providers to support them in safeguarding domestic abuse victims.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of assets devolved to Town and Parish Councils, and Community Organisations		1	10	10 8 6 4 2 0 Aranna Quarters Target (Quarters)	None available	This indicator measures the number of assets devolved to Town & Parish Councils and Community organisations in 2022/23.  Q4 performance is 1 against a cumulative target of 10. Although performance remains at the same level as Q2 and Q3, the increasing target throughout the year means that performance has decreased over the last 2 quarters. The main reason is complex and lengthy lease negotiations with several pilot projects. Prestwood Recreation Ground is now expected to be devolved by the end of April 2023. Further projects identified for devolution in 2022/23 were Green Street Pilot and Aylesbury Special Expenses, both of which are at lease negotiation stage.  Improvement Actions:  Projects have a dedicated project group which meets regularly to ensure progress.  Regular meetings with the organisations to which the assets will be devolved.  Devolution Programme progress is monitored frequently by a dedicated officer group and Members' Board.

#### 2. Communities Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Household Support Fund (Helping Hand): Percentage of profiled spend achieved	Aim to Maximise	100%	100%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Target (Quarters)	None available	This indicator measures the percentage spent of the allocated Household Support Fund.  Spend in Q4 has achieved the target of 100%.  Household Support Fund 3: (£2,399,190.54) covered the period from 1st October 2022 - 31st March 2023. The fund has been utilised on several initiatives and specifically in Q4, this included Easter Holiday Food vouchers for eligible children/young people.  These funds have been disbursed in line with the October plan, which Cabinet approved.  A Management Information report for the full grant period has been compiled and was submitted to Government.  Grant determination letters have been received for Household Support Fund 4. Buckinghamshire has received £4,798,381 for the whole Fund period - 1st April 2023 to 31st March 2024. A high-level delivery plan was submitted to Cabinet.
Amount of contributory funding secured for every £1 of council funds invested in a Community Board project.	Aim to Maximise	£1.03	£0.55	£5.00 £4.00 £3.00 £1.00 £0.00  Quarters Target (Quarters)	None available	This indicator measures the amount of contributory funding secured for every £1 of council funds invested in a Community Board project.  At the end of Q4, each £1 of Community Board funding has secured £1.03 in contributory funding, which is above the target of £0.55. The total amount in contributory financing received is £1,538,569; this excludes 10 projects where the Community Board funding was a contributory factor, e.g. projects costing more than £100k.

#### 2. Communities Portfolio NO RAG



PI	Aim To	Current Value	Trend Chart	Commentary
Number of Community Resilience Plans in place	Aim to Maximise	1	2 1 Quarters Target (Quarters)	The Resilience Service works with communities across the County to put in place local Resilience Plans. This work is led and agreed by the Community and the Resilience Service supports them in this process. This indicator measures the number of local Resilience Plans that have been adopted by Community areas. This is a cumulative target.  In Q3 and Q4 there was 1 local Resilience Plan in place. However there is significant work with Community areas to help them develop and adopt their own Resilience plan, these activities include: community workshops, community meetings, activities to develop community emergency plans (including flooding), provision of community training, and developing exercise programmes to support community resilience plan testing.  A new indicator will be developed which shows how the Resilience Service undertakes a range of activities to support wider community resilience. These activities will include community workshops, community meetings, activity to develop community emergency plans (including flooding), provision of community training, and developing exercise programmes to support community testing. Due to the change in activities and approach, the current Q4 indicator has been assigned monitor status, meaning it no longer has a RAG rating.



# **Culture and Leisure Portfolio Cllr Clive Harriss**



## 3. Culture and Leisure portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of library information enquiries (signposting and referral)	Aim to Maximise	14,749	17,000	20,000 16,000 14,000 10,000 8,000 4,000 2,000 0  ARRIVATOR OF COLOR OF COLO	None available	This indicator measures the number of information requests received cumulatively in libraries relating to council and government services. The purpose of this measure is to establish the extent to which our libraries allow people to access other council services. There are 15 Council Access Points (CAPs) situated around the county, 11 of which are libraries.  There were 3,648 enquiries in Q4, bringing the cumulative total to 14,749 which is below the 2022/23 target of 17,000. There was an increase in enquiries in Q4 in comparison to Q3, with a noticeable increase in IT and e-Library enquiries indicating that IT issues experienced during the One Network migration in Q3 impacted the access to those services; libraries also experienced lower than usual footfall in Q3 due to the adverse weather experienced in December. The highest number of enquiries during Q4 were recorded in the most recent month of March (1,378), which correlated with annual Council Tax changes.  Improvement Actions:  Continue to monitor enquiries levels closely.  Work with staff members to ensure all enquiries are recorded accurately.  Work with the Customer Experience team to improve the recording and monitoring process.  Development of the marketing strategy for Libraries.

## 3. Culture and Leisure portfolio AMBER



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of visitors to Country Parks	Aim to Maximise	1,161,602	1,200,000	2,500,000 2,000,000 1,750,000 1,250,000 1,000,000 250,000 250,000 250,000  A Part of Part of Carlot Art of Carlot	None available	This indicator measures the number of visitors to country parks. It is compiled from an automated count of cars entering car parks at Black Park, Langley Park and Denham. A multiplier of 2.5 is applied (assuming 2.5 visitors per vehicle).  In Q4 there were 239,289 visits, bringing the cumulative figure for 2022/23 to 1,161,602 visitors, which is just below the target of 1,200,000. There has been a reduction in visitor numbers over the last two years following the record highs seen during the pandemic; this is due to a combination of factors including the return of overseas holidays and other activities; cooler/wetter weather; and participation in some activities such as ParkRun no longer reaching previous levels. Visitor numbers for 2022/23 are 27% higher than 2019/20 (917,899 visitors).  New facilities being developed in the coming year may help boost visitor numbers but all outdoor sites are impacted by poor weather and visitor numbers will vary from year to year. As cost of living impacts are ongoing, it will be necessary to carefully monitor visitor numbers to ensure that inflationary increases in car park charges do not further impact visitor numbers.  Improvement Action:  We will continue to actively promote and monitor country parks to better understand visitor trends, and potentially re-profile targets to reflect current market conditions.

## 3. Culture and Leisure portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of visits to main cultural venues	Aim to Maximise	497,766	480,000	600,000 550,000 450,000 400,000 350,000 250,000 150,000 100,000 50,000  Quarters - Target (Quarters)	None Available	This indicator measures the number of visitors to Aylesbury Waterside Theatre, Wycombe Swan Theatre, Discover Bucks Museum and Wycombe Museum. This is a cumulative measure.  In Q4 these venues had 119,064 visits, which was the second highest quarterly figure, with theatres showing a particularly strong performance. The cumulative figure for 2022/23 was 497,766 which is above the target of 480,000.
Country and Town Park Satisfaction Ratings (Trip Advisor & Google)	Aim to Maximise	4.43	4.4	1 Otagan and an	None available	This indicator measures public satisfaction ratings for our Country and Town Parks on Trip Advisor and Google.  Q4 performance is 4.43 out of 5 (90.80% positive, 2.82% negative) and above the target of 4.4.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Hours contributed by archive volunteers	Aim to Maximise	1,583	840	2,000 1,800 1,600 1,400 1,200 1,000 800 600 400 200 0  Q. M. M. M. A.	None available	This indicator measures the number of hours contributed by archive volunteers.  In Q4 volunteers provided 721 hours (Q3 - 326 hours, Q2 - 272 hours, Q1 - 264 hours) bringing the cumulative total for 2022/23 to 1,583 hours. The target of 840 hours has been exceeded due to very successful volunteer recruitment campaigns.
Number of visitors to leisure centres and pools	Aim to Maximise	3,526,602	2,900,000	4,000,000 3,500,000 2,500,000 1,500,000 1,500,000 500,000  1,000,000 500,000  Analyzan Analyz	None available	This indicator measures the number of visitors to Council-owned leisure centres and pools. This is a cumulative measure.  In Q4 there were 863,057 visitors at leisure centres across Buckinghamshire. The cumulative total for the year is 3,526,602, which is above the annual target of 2,900,000.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of downloads (e- audiobooks, e- magazines and e-news)	Aim to Maximise	704,489	700,000	750,000 675,000 600,000 525,000 450,000 375,000 300,000 225,000 150,000 75,000 0  Quarters — Target (Quarters)	None available	This indicator measures the number of electronic downloads in libraries, including e-magazines, e-books, e-audiobooks and e-news. The purpose of this indicator is to understand the usage of online services.  The annual 2022/23 target of 700,000 e-resources downloads was exceeded, with a cumulative total of 704,489 downloads. In Q4, libraries extensively used social media to campaign and signpost customers to the e-library services, which contributed to the increase in downloads in Q4.
Engagement with Archives through social media and in- person visits	Aim to Maximise	268,195	45,000	400,000 350,000 250,000 150,000 100,000 50,000 Quarters Target (Quarters)	None available	This indicator measures the engagement with the Archives team through social media and in-person visits.  Performance in Q4 was 68,067 engagements (cumulative total 268,195; Q1 was 40,267, Q2 was 61,124, Q3 was 98,737) which has exceeded the annual target of 45,000 engagements. Exceeding performance is attributed to the new Community Engagement post which has been managing the Service's social media. In addition, in December 2022 Twitter changed several metrics with how views are calculated on a tweet, resulting in higher viewing figures.



## Education and Children's Services Portfolio Cllr Anita Cranmer



#### 4. Education and Childrens Services Portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Education Health and Care Plan (EHCP) Annual Reviews - % of CYP with an EHCP who have had an annual review within the last 12 months	Aim to Maximise	58%	75%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Qranti	None available	This indicator measures the proportion of children and young people who have had an annual review within the last 12 months. The Annual Review of an Education Health and Care plan (EHCP) is a process by which the outcomes set out in the EHCP, and the effectiveness of provision are reviewed alongside all other sections of the EHCP. EHCPs must be reviewed, and the process completed by the local authority (LA) as a minimum within every 12 months. For under 5's with EHCPs, this review must be within 6 months.  At the end of Q4, 58% of children and young people with an EHCP had an annual review in the past 12 months. This is below the agreed target of 75%.  The service has introduced a consistent reporting mechanism for the Annual Review Strategy during the last year, which has focused on the most vulnerable children and young people by Area Team.  Improvement Actions:  • Continue to liaise with schools to ensure that all Annual Reviews are undertaken and that completed reviews are submitted to the integrated Special Educational Needs and Disabilities service (iSEND) on time.  • Process redesign work in May 2023, to improve customer experience and efficiency.  • Within the agreed growth funding to the iSEND Service from April 2023, we will be recruiting additional posts to support this target: 3 full-time equivalent (FTE) specialist EHC practitioners that will hold smaller caseload of the most vulnerable children and young people, 2.4 FTE Education Health and Care Coordinators and 1.8 FTE Assistant Education, Health and Care Coordinators be posts will be bring capacity to process 800 to 1000 annual reviews per year which will enable sustained improvement in performance.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of re-referrals within 12 months	Aim to Minimise	37%	28%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	England 20%, South East 24%, Statistical Neighbours 20% (CIN Census 2021/22)	This indicator measures the percentage of children who have been referred to Children's Social Care in each quarter, that had a previous referral in the last 12 months (good to be low). Referrals are received by the Multi-Agency Safeguarding Hub (MASH).  Re-referrals increased during the Covid-19 pandemic, from 26% in 2019/20 to 33% in 2021/22. They continued to increase this year to 43% in Q3 (October to December 2022). For Q4 (January to March 2023) the percentage of rereferrals has decreased to 37%, although this is still above the target of 28%.  During Q4, nearly 4 in 10 of all re-referrals related to concerns about domestic violence, neglect or physical abuse.  In over half of cases, the previous referral was closed by the MASH team which means that the child did not progress to a statutory intervention before being closed and they were subsequently re-referred at a later date. There were a number of contacts which previously progressed to referral so that contact information could be completed (where there was a lack of information from the referrer) as opposed to the threshold being met for a referral to children's social care. This increased the number of referrals closed without progressing to a statutory intervention and some of these were re-referrals.  Improvement Actions:  Contacts to children's social care will only progress to a referral where the threshold is met for statutory intervention and then further information is gathered which reduces the risk to the child or need for social care intervention, the MASH will consider community and voluntary resources or early help as alternatives to ensure that families receive support to reduce the likelihood of a further referral in the future.  Dip sample of all children referred in May 2023 for themes and further actions to be implemented.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of children with Initial Child Protection Conferences completed within 15 working days of the strategy discussion	Aim to Maximise	67%	82%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10%	England 79%, South East 79%, Statistical Neighbours 82% (CIN Census 2021/22)	This indicator measures the percentage of Initial Child Protection Conferences (ICPCs) held within 15 working days of a child's Strategy Discussion.  During Q4 (January – March 2023) 182 children were subject to an ICPC, of which 67% (122 children) were completed within time.  Of the 60 ICPCs that were over 15 days, 6 (10%) of these were delayed to ensure that the family could attend, and a further 16 (27%) were delayed so that the relevant reports could be shared with the family. The availability of partner agencies was a factor in 5 (8%) of the delays. Social worker vacancies are impacting the availability of staff within the service, as well as changes to management. Both were factors in progressing the remaining ICPCs within timescale.  ICPCs continue to be closely monitored, but have been impacted due to a combination of two vacant posts within the service, increase in requests for ICPC and late ICPC referral forms being received. Although both posts have been filled, due to notice periods staff will not be with us until the end of June, in the interim the conference manager continues to cover conferences and additional slots are being made available where possible.  Improvement Actions:  • The Child Protection Team Manager (CP TM) will ensure any conferences due are reviewed to check whether the Children & Family (C&F) Assessment has been started / authorised. If not this will be raised with managers to ensure the report is ready and shared with parents 48 hours before the ICPC.  • Allocated Child Protection Advisors (CPA) will also build in checks to ensure C&F reports have been shared / commenced.  • To ensure delay in conference is not contributing to increased risks, CPAs will ensure safety planning is recorded on file and they have assured themselves of this.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% children who became the subject of a Child Protection Plan for a second or subsequent time within 2 years	Aim to Minimise	15%	10%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% ARAURL ARAURL ARAUR AR	None available	This indicator measures the percentage of children becoming subject to a Child Protection (CP) Plan during the quarter who had previously been on a CP plan within the last 2 years.  During Q4 (January – March 2023), of the 131 children starting on a CP plan, 15% (20 children across 10 families) had previously been subject to a CP plan within the last 2 years, which is above the target of 10%. Performance was below target in Q3 but was above target in both Q1 and Q2. We have seen more children coming back onto plans where there are concerns of Neglect and Domestic Violence.  Child Protection Advisors and managers continue to work together with schools, police and health organisations, to ensure that children are supported on a CP plan until there is sufficient evidence that they are no longer at risk of significant harm.  Improvement Action:  • Children subject to repeat plans will be dip sampled to review reasons and assess what if anything could be done differently to support sustained changes. Findings of which will be reviewed and reported with any learning actioned.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of Children in Need seen within 4 weeks	Aim to Maximise	82%	90%	100% 90% 80% 70% 60% 50% 40% 30%	None available	This indicator measures the percentage of children subject to a Child in Need (CIN) plan who have been seen in person in the last 4 weeks. The purpose of visits to children and their families is to check on a child's physical and emotional wellbeing, to ensure that all their needs are being met.  At the end of March, 82% of children were seen within 4 weeks. This is an increase of 7 percentage points compared to the position at the end of December.  The number of children visited every 4 weeks in Q4 was impacted by staffing pressures including a significant number of leavers. Workloads for staff in the teams also remained high, despite the number of children with CIN plans decreasing during the second half of 2022/23, from 1,170 at the end of September 2022 to 990 at the end of March 2023. There has also been an increase in the complexity of CIN cases, including children with complex mental health needs and autism which has led to increased pressure in the service. There continues to be regular oversight of children on CIN plans. Managers review visits that are out of timescale, and where it has not been possible to visit children, measures are put in place to ensure that they remain safe. When considering if children are seen within 6 weeks, performance remains high at 91%.  Improvement Actions:  Head of Service has written to all Help and Protection (HAP) team managers and assistant team managers ensuring plans are put in place urgently to address out of time CIN visiting.  Each team to identify barriers to undertaking these visits and ensure contingencies are in place via robust duty systems and forward planning to cover leavers and staff sickness.  Heads of Service to assume weekly oversight of performance of this indicator throughout May/June.  Additional support identified via Child and Family Workers supporting with other non-statutory tasks, allowing social workers more time to focus on visiting their children.  Newly qualified social workers more time to focus on visiting their children.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Key Stage 4 average Attainment 8 score for disadvantaged pupils	Aim to Maximise	37.4	37.6	100 90 80 70 60 50 40 30 20 10 0 Years Target (Years)	Statistical Neighbours 2022 = 35.2 England 2022 = 37.7	This indicator is reported annually.  This indicator measures the achievement of a pupil across 8 qualifications including English, mathematics, 3 qualifications that count in the English Baccalaureate measure (science, computer science, history, geography and languages) and 3 further qualifications. Results are for all eligible pupils attending state funded schools in Buckinghamshire.  The Attainment 8 result for Buckinghamshire disadvantaged pupils in 2022 is 37.4, which is above the statistical neighbour average of 35.2 but slightly below target (37.6) and the national average of 37.7. There were 775 disadvantaged pupils in Buckinghamshire eligible for Key Stage 4 exams in 2022.  The summer exam series returned in 2022, with some adaptations compared to previous exams these included changes to grade boundaries and providing some information in advance of the exam. This follows the two previous year's results (2020 and 2021), which were based on centre / teacher assessed grades during the pandemic. This means that results are not directly comparable over time, as they may not reflect changes in pupil performance alone.  Improvement Actions:  Through the 'Opportunity Bucks' programme, we are providing targeted support to improve school readiness for children and to support families and young people to improve education opportunities. The Growth Board (which oversees the programme) will link with the councils Side-by-Side project to support schools to continue to ensure that their pupils have the opportunity to achieve a good standard of attainment and skills.  Continue to deliver the Buckinghamshire Challenge project which aims to raise the attainment of disadvantaged pupils across Buckinghamshire. The project is being delivered by Unity Research Schools, a research school partner of the Education Endowment Foundation (EEF), together with 135 Buckinghamshire

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of assessments completed in 45 working days	Aim to Maximise	77%	80%	100% 90% 80% 70% 60% 50% 40% 10% 0% 10% 0% 10% 0 Angel part of the	England 84%, South East 86%, Statistical Neighbours 87% (CIN Census 2021/22)	This indicator measures the percentage of children's social care assessments completed within 45 working days. Assessments are conducted to determine which services to provide to children and their families.  During Q4 (January to March 2023) the percentage of children's assessments completed within 45 working days was 77%. This is decline from the Q3 position of 90% and below this year's target of 80%.  Demand in the assessment teams has decreased since Q3, during which 1,043 children required an assessment after being referred to the service, increasing to 1,099 in Q4.  A strategy of flexible resourcing between the teams to support with regional pressures, alongside a decrease in overall demand during Q3, led to improved performance at that point. Management capacity within the teams was robust meaning there was greater oversight across the service, ensuring decisions were made in a timely manner so that families got the right support when it was needed.  The above continues but increased demand and increased staff turnover has led to some delays in ensuring all assessments are completed within timescales.  Improvement Actions:  To ensure tracking of out of time assessments and assessment timeliness with a weekly report to Heads of Service (HoS) on overall completion rates.  Targeted response to teams where timeliness is an issue to ensure that drift is addressed with specific actions that need to be undertaken.  All assessments will be reviewed after the initial home visit and time scales will be agreed for the completion of the assessment. This should support a return to improved timeliness.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of children looked after visited within timescales	Aim to Maximise	86%	90%	90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Again a again again a again agai	None available	This indicator measures the percentage of looked after children who were visited in person within timescales.  The aim of the visit is to check on a child's physical and emotional wellbeing to ensure that all their needs are being met, alongside exploring their wishes and feelings, and the environment in which they live. This will help to inform the type of support they need both now and in the future.  The frequency of visits is determined by the child's needs and care plan, in accordance with statutory requirements. At the end of March 2023, 86% of children had been visited within timescales, which is a reduction from 88% at the end of Q3 in December.  There is a shortage of appropriate placements, which has led to an increase in the number of children placed in unregistered accommodation or out of county. In the latter case, practical considerations such as lengthy travel time can make it more challenging for social workers to carry out physical visits on time. Visits to looked after children placed in unregistered accommodation are also made more frequently, putting pressure on this indicator.  Improvement Actions:  Performance reports are reviewed regularly, to ensure that all looked after children are visited on a timely basis. Each social worker is sent a weekly list of children for whom they are responsible, showing when the next visit is due.  Managers regularly review risks for children and families who cannot be physically visited to ensure that children are safeguarded.  Managers monitor social workers' workloads to ensure that looked after children's records are updated as soon as possible after a visit has taken place.

#### 4. Education and Childrens Services Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Key Stage 4 average Attainment 8 score	Aim to Maximise	57.4	55.1	100 90 80 70 60 50 40 30 20 10 0 Years Target (Years)	Statistical Neighbours 2022 = 51.7 England 2022 = 48.9	This indicator is reported annually.  This indicator measures the achievement of a pupil across 8 qualifications including English, mathematics, 3 qualifications that count in the English Baccalaureate measure (science, computer science, history, geography and languages) and 3 further qualifications. Results are for all eligible pupils attending state funded schools in Buckinghamshire.  The Attainment 8 result for Buckinghamshire in 2022 is 57.4, which is above both the statistical neighbour average of 51.7 and the national average of 48.9.  The summer exam series returned in 2022, with some adaptations compared to previous exams these included changes to grade boundaries and providing some information in advance of the exam. This follows the two previous year's results (2020 and 2021), which were based on centre / teacher assessed grades during the pandemic. This means that results are not directly comparable over time, as they may not reflect changes in pupil performance alone.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of eligible two- year-olds registered to receive funded early education entitlements	Aim to Maximise	86%	75%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Months — Target (Months)	England (Autumn term 2022) = 72%	This indicator measures the number of 2-year-olds, for whom we have received official confirmation that they are attending an early years provider, as a percentage of the number of children who were on the list of potentially eligible 2-year-olds received from the Department for Education (DfE).  Eligible two-year-olds are entitled to 570 hours of funded early education and childcare per year if their parents choose to apply for and take up a place, which also helps to prepare children for school.  At the end of the spring term (March 2023), 86% of eligible 2-year-olds were attending an early years provider. This is above target and above the latest published national average.  The Early Years Service has increased publicity around the 2-year-old take up to families and professionals, and delivered additional training to colleagues across a range of internal council services, and external partners who are working with eligible families.  The Early Years Service have also contacted all early years setting and all eligible parents on the Department for Work and Pensions (DWP) list to offer focused bespoke support to work through barriers to ensure parents take up their entitlement. This has increased engagement and there has been a significant increase in take up and ability to monitor places for sufficiency and planning.  Support and initiatives will also be focused on areas within the Opportunity Bucks programme to further improve take up in these wards. This includes a new campaign including street posters, billboards and information on the back of buses to encourage parents in Opportunity Bucks areas to take up the free entitlement.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% new Education, Health and Care Plans (EHCPs) issued within 20 weeks (excluding exceptions)	Aim to Maximise	82.2%	75%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  A ROBIN R	2021 calendar year: South East = 49.3% England = 59.9% Buckinghamshir e = 82.0%	This indicator measures the percentage of Education, Health, and Care Plans (EHCPs) that are issued to families within 20 weeks and is cumulative for the calendar year.  From January to March 2023 82.2% of EHCPs were issued within 20 weeks, which is above target and above the latest published national and regional averages (National 59.9% and South East 49.3% for 2021).  This measure has improved from 65.3% at Q3, with performance maintained above 80% for each month since January. This has been achieved through improved management oversight ensuring assessment deadlines are met, alongside a focus on how appendices are requested and received from partners.  Given the continued pressure from demand increase, weekly tracking, and oversight by the Integrated Special Educational Needs and Disability Service (iSEND) Management team will continue to minimise the risk of a decline in performance.  Within the agreed growth funding to the iSEND Service, we will be recruiting additional resource to improve capacity to reach this target, which will include permanent and temporary resource.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of pupils attending schools rated good and outstanding by Ofsted	Aim to Maximise	90.6%	89%	90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  —————————————————————————————	State-funded schools in England (31/03/2022) = 88.0% State-funded schools in the South East region (31/03/2023) = 90.7%	This indicator measures the percentage of Buckinghamshire pupils who are attending schools judged by Ofsted to be good or outstanding.  At the end of March 2023, 90.6% of Buckinghamshire pupils were attending a good or outstanding school, which is above target and also above the national average.  Schools that were previously judged 'outstanding' (including converter academies whose predecessor school was outstanding) between May 2012 and November 2020 were 'exempt' from routine inspections. Following a change in regulations all outstanding schools are now subject to routine inspection. Many of these schools have not been inspected for over ten years, during which time the Ofsted inspection framework has been tightened with significant changes in 2019 and 2021.  Focused intensive work is carried out for schools in the Requires Improvement or Inadequate Ofsted categories through the Side by Side intervention programme. All schools have been risk assessed for academic year 2022/23, and additional support is put in place for schools in need through the Side by Side programme prior to inspection. In addition, a rigorous programme of Headline Visits to schools nearing their Ofsted inspection window is being undertaken this academic year and a traded school service is providing additional, non-statutory support for schools.  Support is also focused on areas where we know that the percentage of children attending good or outstanding schools is currently a little lower than the overall average, for example in Opportunity Bucks wards. Work is underway to develop a programme of activities to support the closing the gap agenda through the Challenge Programme specifically targeting schools in the 10 Opportunity Bucks Wards to support raising attainment.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of initial Family Support Plans completed within 31 working days		92%	85%	100% 90% 80% 70% 60% 50% 40% 10% 0%  10% Quarters Target (Quarters)	None available	This indicator measures the percentage of Initial Plans completed within 31 working days of the start of Family Support Service involvement, which provides one to one support for families and individuals (Level 3 support).  Between January and March 2023, 92% of Initial Plans had been completed within 31 working days of the start of Family Support Service involvement (220 of 239 Initial Plans). This is 2 percentage points lower than Q3, but still above target.  Despite increased demand into the service, performance in this area has been maintained at 7% points above target. The service strives to provide timely support and positive engagement with families, to support positive progress and prevent escalation of need. Support plans being co-produced with families promptly has a direct impact on enabling positive outcomes for children.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of 19-21 year olds who have left care that are in education, employment or training	Aim to Maximise	71%	65%	100% 80% 70% 60% 50% 40% 30% 20% 10% 0% 10% OPART OF CARRENT AND THE	England 55%, South East 57%, Statistical Neighbours 57% (Children Looked After Return - SSDA903, 2021/22)	This indicator measures the percentage of care leavers aged between 19 and 21 who are in education, employment, or training (EET).  The figure at the end of March 2023 was 71%, which remains above the target of 65% and well above the benchmark figures for England, the South East and our statistical neighbours.  Of the 175 care leavers aged 19-21, 125 are in EET. The 50 care leavers who are not in EET represent 30% of the total number. Of those, 9% are unable to work or attend college because of severe disability or mental health concerns, 5% are currently unable to access EET opportunities because of parenting or pregnancy and 5% are former unaccompanied asylum seeking young people, who have Home Office limitations on their access to work. The Leaving Care team is actively working with the remaining 11% to help them overcome their barriers to EET opportunities.  Regular panel meetings are held about the care leavers who are not in EET, to discuss the opportunities available to them and how best to support them, both now and in the future. The team are exploring employment opportunities for care leavers with local and national employers.  Work experience placements and voluntary work options are also being explored for young people for whom confidence or health concerns are a barrier to full time employment.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of children subject to a Child Protection Plan seen within 4 weeks	Aim to Maximise	95%	95%	100% 90% 80% 70% 60% 50% 40% 10% 0% 10% Quarters Target (Quarters)		This indicator measures the percentage of children subject to a Child Protection (CP) Plan who have been seen in person within the last 4 weeks.  At the end of March 2023, 95% of children subject to a CP plan were seen within 4 weeks.  The team has had difficulties with recruitment of social work staff for key front-line child protection teams, with up to 30% of posts vacant during Q4. To mitigate for this the service put in measures to ensure that managers were supported to focus on risk, and that children not seen on time had management oversight. Social workers were supported to ensure the most at-risk children got the support they needed.



# Health and Wellbeing Portfolio Cllr Angela Macpherson



### 6. Health and Wellbeing Portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of births that receive a face-to-face New Birth Visit within 14 days by a health visitor in the quarter	Aim to Maximise	83%	90%	100% 80% 70% 60% 50% 40% 30% 20% 10% On A REAL REAL REAL REAL REAL REAL REAL RE	79.3% England (Q4 2021/22) 77.1% (Q4 2021/22 South East region) 73.8% (Q4 2021/22 mean of CIPFA peers)	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of New Birth Visits (NBV) undertaken within 14 days.  Performance in Q3 2022/23 (83%) is below the contractually targeted level (90%). This equates to 1,156 visits undertaken within 14 days out of a possible 1,394. This is a slight increase from the previous quarter (80%), and it remains an improvement in trend over the previous year.  The children with no recorded visit have remained at less than 2%. Of the 30 children missing a reported visit, only 3 have not been seen for a NBV at any time (as it was declined), the rest had been seen at later dates, transferred out of Buckinghamshire, or were seen but data was not captured. This data represents visits from health visitors and does not include the visits from a midwife, which mothers will also receive post birth.  Data is also captured for more deprived areas in Buckinghamshire, where the need for a visit to be conducted within 14 days can be greater. Within the Aylesbury area, 89% of NBVs were completed in 14 days and in High Wycombe, 93% of NBVs were completed in 14 days.  Improvement Actions:  • There is a focus on ensuring all visits that took place are correctly reported.  • There has been a review of the current action plan which introduced next stage actions to take effect in Q4 data in 2022/23, including tracking late completions and prioritising based on need.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of service users due an annual review that receive their review	Aim to Maximise	79.2%	90%	90% 80% 70% 60% 50% 40% 30% 20% 10% O  Quarters Target (Quarters)	Performance for 2021/22 was: • 52% South East. • 55% Bucks.	This indicator measures the percentage of Adult Social Care service users due an annual review who have received their review. It is good to be high. This is a cumulative measure, so performance increases during the year along with the target.  Between 1st April 2022 to 31st March 2023, 79.2% (2,970 people) of annual reviews have been completed which is 8.7 percentage points (405 people) below the stretching graduated target of 90%.  Reviews are being completed by two teams. Permanent social work teams have completed three quarters of the reviews and a short-term project team, formed to support the pressures that resulted from the Covid-19 Pandemic, completed the additional quarter of reviews.  Performance this year has improved with double the number of reviews completed compared to the previous year due to the additional resource. This is also expected to be above our benchmarked areas for 2022/23.  Both teams remain affected by staff capacity and vacancies. Social worker vacancies continue in the long-term.  Improvement Actions:  • Management Team to continue to closely monitor annual review targets.  • Continuing support and training to staff carrying out annual reviews, particularly to social worker assistants, to support quality and productivity.  • Ongoing recruitment to fill vacancies to support staff capacity to carry out reviews.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of older people (65+) admitted to permanent residential or nursing care homes per 100,000 population	Aim to Minimise	516	489	495 440 385 330 275 220 165 110 55 0  Quarters Target (Quarters)	Performance for 2021/22 was: • 524.3 South East. • 522.5 Bucks.	This indicator measures the number of older adults whose long-term support needs are best met by admission to a residential or nursing care home, relative to the population size. It is expressed as a rate per 100,000 population and is good to be low. This is a cumulative measure, so performance increases during the year along with the target.  Between 1 April 2022 and 31st March 2023, 537 older adults (516 per 100,000 population) were permanently admitted to care homes. This is 28 people above the target of 509 people (489 per 100,000 population) which is set at the previous (2020/21) South East benchmark level. Validation checks continue to be carried out on this data as part of the annual Short and Long Term Data Return.  The rate of permanent admissions amongst older adults is higher than previous years because of the Hospital Discharge to Assess pathway that was put in place during the pandemic, which is now resulting in increased admissions and these account for one third of all permanent residential and nursing admissions.  Social workers are continuing to ensure that practice is based on the Better Lives independence, and short-term and strength-based interventions, thereby minimising long-term care placements.  Improvement Actions:  • The Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ICS) are in the process of developing a Transfer of Care Hub, which once implemented will help to reduce admissions to care homes from hospital settings.  • Continue to ensure that there is strong management oversight of the authorisation process relating to placement decisions when finding services for individuals' care plans.  • A deep dive is being produced to further understand the reasons for the increase in admissions and the cohorts this is affecting in more detail.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of carers who report that they have been included or consulted in discussions about the person that they care for.	Aim to Maximise	61.2%	70%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Years Target (Years)	64.1% South East (2021/22)	Previously Reported at Q2.  This indicator measures the percentage of carers who reported they always or usually felt included or consulted in discussions about the person they care for (in the previous 12 months). The outturn is calculated from the biennial statutory carers survey and is good to be high.  In the 2021/22 survey, 101 of 165 carers responded very positively to this question (61.2%), which although being below the 70% target, is a 4.2% improvement since the previous survey in 2018/19.  A further 47 Carers (28.5%) reported that they sometimes felt included or consulted in discussions, and 17 carers (10.3%) reported that they never felt involved or consulted in discussions about the person they care for.  In total 9 out of 10 carers who responded to the survey felt they were consulted.  Improvement Action:  The Carers Project activities have been realigned and the primary focus will be on refreshing the Carers Strategy, developing a Carers Charter to support the re-commissioning of carers support services from 2024. In addition, a 12-month improvement plan is in development to improve outcomes for Carers.

### 6. Health and Wellbeing Portfolio AMBER



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of successful alcohol treatment completions of those in treatment	Aim to Maximise	36.5%	37%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0 Quarters Target (Quarters)	36.2% (Q3 2022/23 England) 36.5% (Q3 2022/23 South East region)	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of adults who have successfully completed alcohol treatment of all those receiving treatment.  Performance for Q3 is at 36.5% (201 out of 550 clients), 0.5 percentage points off target. While this is a decrease from 37.6% in Q2, it is the same as the South East (36.5%) and above National (36.2%) averages, both of which have also decreased this quarter.  Improvement Action:  • The quarter's successful completions are likely to have been affected by the Christmas period when people are reluctant to be discharged from treatment. This is consistent with seasonality in national averages. Data will be monitored closely during Q4 to ensure that performance returns to 37% or above.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of successful drug treatment completions of those in treatment	Aim to Maximise	14.7%	15.2%	17% 16% 15% 14% 13% 12% 11% 10% 9% 8% 7% 6% 5% 4% 3% 2% 1% 0% 1% OW  Quarters Target (Quarters)	13.7% (Q3 2022/23 England) 15.8% (Q3 2022/23 South East region)	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of adults who have successfully completed drug treatment of all those receiving treatment. It covers all drugs.  Performance for Q3 is at 14.7% (132 out of 897 clients) and therefore below target. It is below the South East (15.8%) but above the National (13.7%) averages. Both these averages have also decreased this quarter.  Improvement Actions:  The service has recruited a non-opiate lead to support these clients, as the greatest fall in successful completions compared to Q2 was in this cohort.  The service is switching a medication used for heroin users to enable closer titration which is expected to facilitate some clients to successfully complete in the future.  The service is supporting more clients to access tier 4 residential treatment which should help some of the more complex clients to achieve long term successful completion in the future.  A rise in early unplanned exits from the service has been detected so will be investigated to understand how this rise can be reversed, and therefore more clients supported to successfully complete treatment.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Percentage of all clients attending GUM clinics seen or assessed by a healthcare professional within 48 hours (2 working days) of first contacting the service	Aim to Maximise	78.4%	80%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0\text{20} \text{20} \tex	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 and links to the requirement for the provision of open access services.	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of Genitourinary Medicine Level 3 Sexual Health Service (GUM) clinic clients who have been seen or assessed within 48 hours of contacting the service.  78.4% of patients (2,268 out of 2894) were seen or assessed within 48 hours against a target of 80%. This represents a 5.4 percentage point increase from the last quarter.  The service has enhanced its online booking system to improve access to services. Patients can now book appointments up to two weeks in advance. This has resulted in a successful decrease in the Did Not Attend (DNA) rate to just 4% (from 6%), indicating patients are accessing services appropriately, at a time suitable and convenient to them. Patient choice is a key feature of a high quality sexual health service.  Improvement Action:  Two additional walk-in clinics have started on Fridays, this will have a positive impact because walk-in patients get seen and assessed on the same day.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% people that live independently after receiving reablement	Aim to Maximise	72%	74.1%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Anarth arget (Quarters)	Performance in 2021/22 was: • 78.2% South East • 77.4% Bucks	This indicator measures the percentage of people in receipt of Home Independence Team services (re-ablement) who did not require any long-term Adult Social Care provision once the re-ablement service was completed. It is good to be high.  From 1 April 2022 to 31st March 2023, 72% (285 out of 396) of people accessing the service were successfully re-abled, which is below the target of 74.1%. Performance during Q3 (68%) and Q4 (67%) was lower than during Q1 (76%) and Q2 (78%) which has resulted in the cumulative outturn for the year being below target.  The reablement service support patients to be discharged from hospital alongside short-term domiciliary and care home provisions (Discharge to Assess services).  During Q3 and Q4 staffing capacity constraints have resulted in the Home Independence service being able to accept less referrals than usual and therefore concentrating on higher need clients who are less likely to be fully re-abled as per the definition of this measure.  Improvement Actions:  • Recruitment to vacant roles is underway and new staff are starting in post during Q1 2023/24. This will give the Home Independence Team (HIT) the ability to increase client numbers accessing the service.  • The Buckinghamshire, Oxfordshire, Berkshire Integrated Care System (BOB ICS) is currently developing a transfer of care hub which will improve and streamline how people access reablement support. This should lead to improved outcomes.

### 6. Health and Wellbeing Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of those who have set a quit smoking date who have successfully quit at 4 weeks	Aim to Maximise	54%	50%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters  Target (Quarters)	England 54.8% (April to March 2022) South East 54.3% (April to March 2022)	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of people who have set a quit date with the service and who have successfully quit smoking at 4 weeks.  In Q3, 85 smokers successfully quit smoking out of the 156 people who set a quit date (54%). The indicator remains green at 4 percentage points above the target of 50%.
% of those in most deprived quintiles (DQ 4/5) who have set a quit smoking date who have successfully quit at 4 weeks	Aim to Maximise	58%	50%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0ABARLADARADARADARADARADARADARADARADARADARA	None available	This indicator is reported one quarter in arrears. Current performance is for Q3.  This indicator measures the percentage of people who have set a quit date and successfully quit at 4 weeks who live in the more deprived areas of Buckinghamshire (quintiles 4 and 5). This is important as smoking and the harm it causes are not evenly distributed across the population. Smoking is increasingly concentrated in more disadvantaged groups and is the main contributor to health inequalities.  In Q3 there were 71 people from the more deprived areas that set a quit date and 41 successfully quit at 4 weeks (58%). Q3 performance remains above target. The quit rate for those living in deprived areas remains higher than the total quit rate for Buckinghamshire.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of people who use services who have control over their daily life		80.1%	78%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Resire Aregin Arapit (Years)	78% South East (2021/22)	This is an annual indicator. Previously reported in Q3.  This indicator measures the percentage of service users who report they have at least adequate control of their daily lives. The outturn is calculated annually from the statutory service user survey and is good to be high.  In the 2021/22 survey 391 of 485 people (80.1%) responded positively to the question about how much control they have over their daily life which is above the target.  Adult Social Care continues to assess and support vulnerable people via the Better Lives Independence model which advocates choice and control. This is also supporting comparatively high performance in other national Adult Social Care Outcomes Framework (ASCOF) measures that report choice and control, such as Direct Payments take up and Learning Disability clients in paid employment for which Buckinghamshire Council performance was top quartile nationally for each during 2021/22.
Number of younger people (aged 18-64) admitted to permanent residential or nursing care homes per head of 100,000 population	Aim to Minimise	8.9	13.7	16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 0  Quarters Target (Quarters)	South East 14.1 (2021/22)	This indicator measures the number of younger adults whose long-term support needs are best met by admission to a residential or nursing care home. The number of admissions is expressed as a rate per 100,000 population and is good to be low. This is a cumulative measure, so performance increases during the year along with the target.  Between 1 April 2022 and 31 March 2023, 28 younger adults (8.9 per 100,000 population) were permanently admitted to care homes. This is 15 people below the target of 43 people (13.7 per 100,000 population) which is set at the 2020/21 South East benchmark level.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of younger adults (aged 18-64) with a learning disability living in their own home or with friends/family		78.8%	75.6%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  QLANTR ANTR ANTR ANTR ANTR ANTR ANTR ANTR	76.2% South East (2021/22)	This indicator measures the percentage of younger adults, with a primary support reason of 'learning disability support', who are receiving Adult Social Care Services and living in their own home or with friends/family. It is good to be high.  At the end of March 2023, there were 1,108 younger adults with a learning disability accessing adult social care services, of which 873 (78.8%) were living in their own home or with friends/family. This is above the target 75.6% (838 people), which is set at the 2020/21 regional benchmark. This is also a 0.4 percentage point increase over the Q3 outturn of 78.4%.
% of adults in contact with secondary Mental Health Services (aged 18-69) living in their own home or with friends/family	Aim to Maximise	62%	61%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	61% South East (2020/21)	Previously reported at Q2.  This indicator measures the proportion of adults (below the age of 70) receiving secondary mental health services who were living in settled accommodation at the time of their most recent assessment, formal review or other multidisciplinary care planning meeting. It is based on all NHS and Adult Social Care patients open to the Oxford Health Foundation Trust (OHFT) that live in the Buckinghamshire area.  At the end of July 2022 (latest available data), there were 1,064 adults in receipt of secondary mental health services, of which 661 (62%) were living in settled accommodation. This is above the target 61% (649 people).  Settled accommodation includes people that are living in their own homes, with family or friends or in supported accommodation, rather than living in a care home or a communal establishment including a long-term hospital ward.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of safeguarding enquiries where personal outcomes were fully or partially achieved (where expressed).	Aim to Maximise	97%	96%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters — Target (Quarters)	97% South East (2021/22)	This indicator measures the percentage of safeguarding enquiries that had outcomes expressed by either the individual or an advocate where the outcomes were either fully or partially achieved when the safeguarding enquiry closed. It is good to be high.  From 1 April 2022 to 31 March 2023, 1,404 safeguarding enquiries concluded where desired outcomes were expressed and in 1,356 of these enquiries (97%) outcomes were fully or partially achieved. Performance is above the target (96%) and is consistent with the performance of South East benchmark authorities.
% of young people whose Adult Social Care Assessment was completed before they turned 18 years old (cumulative).	Aim to Maximise	85%	65%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters)	None available	This indicator measures the percentage of clients that turned 18 in the period, that had an Adult Social Care assessment prior to their 18th birthday. It is good to be high.  Between 1 April 2022 and 31 March 2023, 85% (22 of 26) of young people that moved into adult services, were assessed by the 18-25 service before they turned 18. This is higher than Buckinghamshire's position for the same period last year (63%).

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of safeguarding eligibility decisions made within 2 working days of the concern being received.	Aim to Maximise	75%	70%	100% 90% 80% 70% 60% 50% 40% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of safeguarding concerns that have been completed within 2 working days, to decide on whether the issue needs to progress to be a Safeguarding Enquiry. It is good to be high.  From 1 January 2023 to 31 March 2023, 3,152 eligibility decisions were completed of which 2,371 were completed in 2 working days (75%). This is above the target (70%). Over the course of this year, improvements have been made to how safeguarding concerns are allocated to workers, to ensure that there is sufficient time for the concern to be triaged within the 2 working day target.



## Homelessness and Regulatory Services Portfolio Cllr Mark Winn





#### 7. Homelessness and Regulatory Services Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
	Aim to Minimise	4	10	11 10 9 8 7 6 5 4 3 2 1 0  Qranta Qra	None available	This indicator measures the average number of working days to issue a taxi vehicle licence and plate from the date a valid application is received. This excludes an application that needs to be passed on to an officer for investigation and a decision as applications are only deemed valid once all aspects are deemed satisfactory.  Q4 performance was 4 working days which is better than the service level agreement (SLA) of 10 working days and is consistent with previous performance across the year.
Number of applicants with/expecting children who have been in non-self-contained Bed & Breakfast accommodation for longer than 6 weeks	Aim to Minimise	0	0	Quarters Target (Quarters)  5 4 3 2 1 0 ARRIVARIA ARRIVA	None available	This is a snapshot at the end of the quarter to show the number of applicants for housing with or expecting children who were in non-self-contained Bed & Breakfast (B&B) accommodation for longer than 6 weeks.  Throughout the year there were no families in non self-contained B&B accommodation for longer than 6 weeks. The service will continue to monitor this area closely.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Financial impact on residents as a result of scams intervention	Aim to Maximise	£978,709.00	£600,000.00	£1,000,000.00 £900,000.00 £800,000.00 £700,000.00 £500,000.00 £300,000.00 £300,000.00 £100,000.00 £0.00  ARTHR ARRA ARRA ARRA ARRA ARRA ARRA ARRA	None available	This indicator measures the financial impact on residents as a result of scams and fraud interventions (direct and future savings).  Performance at the end of Q4 is £978,709, which has exceeded this year's target of £600,000, and last year's performance (£710,884). The quality of interventions has been high this year, giving greater impact from each intervention.  Examples of interventions include provision of call blockers in the homes of people vulnerable to phone fraud and the installation of door cameras in the homes of people vulnerable to doorstep fraud.
Number of businesses registered as primary authorities	Aim to Maximise	162	127	200 175 150 125 100 75 50 25 0 Quarters Target (Quarters)	None available	This indicator measures the number of businesses registered as Primary Authority partners to receive tailored advice on meeting environmental health, trading standards or fire safety regulations through a single point of contact at a local authority.  Primary Authority is a national, statutory scheme that enables businesses to access tailored regulatory advice from one authority on a cost recovery basis. Buckinghamshire and Surrey's award-winning Primary Authority service currently supports 162 businesses making it the largest provider in the UK. This is better than the target of 127.  The advice ensures start-ups get it right at the outset and enables all businesses to invest with confidence in products, practices and procedures, knowing that the resources they devote to compliance are well spent.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Customers rating the Registration Service as good or excellent	Aim to Maximise	100%	95%	100% 90% 80% 70% 60% 50% 40% 10% 0%  Quarters Target (Quarters)	None available	This indicator is reported on a half-yearly basis, in Q2 and Q4.  This indicator measures the number of customers rating the service as Excellent or Good.  For Q4 2022/23 100% of customers rated the service as Good or Excellent. 64 customers responded via customer survey cards covering birth and death registrations, notice of marriage or civil partnership and attendance at ceremonies. 1 rated the service as Good and 63 rated the service as Excellent. This was an increase from 97% reported in Q2 and above the 95% target.

#### 7. Homelessness and Regulatory Services Portfolio NO RAG



PI	Aim To	Current Value	Trend Chart	Commentary
Total homelessness approaches into service	Monitor	1,492	1,900 1,710 1,520 1,330 1,140 950 760 570 380 190 0  Quarters  Quarters	This indicator measures the total number of homelessness approaches into the service.  In Q4 there were 1,492 approaches, an increase from Q3 (1,202). This includes the provision of extra support for winter warmth and Ukrainian approaches. The largest increase has come from those approaching for affordability issues and referrals for debt advice.
Homelessness cases closed because homelessness has been prevented	Monitor	436	500 450 400 350 300 250 200 150 100 50 0 Quarters	This indicator measures the number of homeless cases closed because homelessness has been prevented.  In Q4 436 cases were closed because homelessness had been prevented this is an increase of 1 from Q3 (Q3, 435, Q2, 249 and Q1, 266). There has been an increase in the number of cases received by 290 from last quarter which resulted in officers being diverted to relief duties which means the percentage of preventions will decrease with more new demand. The increase in caseload is coming from an increase in Ukrainian cases via the Homes for Ukraine scheme and those approaching who have affordability issues and cannot afford to pay their housing costs.  Lack of affordable accommodation across Buckinghamshire and other options are still an issue. The service continues to work hard to meet demand and prevent homelessness wherever possible.

PI	Aim To	Current Value	Trend Chart	Commentary
Bucks Home Choice Lets	Monitor	233	1,000 900 800 700 600 500 400 300 200 100 Quarters	This indicator measures the number of Bucks Home Choice Lets via the Council's housing register in the quarter.  In Q4 there were 233 lets which is a reduction from 276 in Q3, 299 in Q2 and 643 in Q1. The number of Bucks Home Choice lets naturally fluctuates from quarter-to-quarter and is often higher in Q1 as providers try to complete properties towards the end of the financial year, resulting in more being advertised at the start of the financial year. Liaison with our registered providers ensures up to date information regarding nominations for new and re-let properties.
Number of unrated premises which are awaiting an inspection and are trading	Monitor	228	810 720 630 540 450 360 270 180 90 0 Arabitabla and	This indicator measures the number of unrated premises which are awaiting inspection and are trading.  There continues to be a downward trend in the number of unrated premises awaiting inspection. At the end of Q4, there were 228 premises trading whilst still awaiting inspections, down from 417 in Q3. All new food business registrations continue to be triaged to determine whether they are potentially a high-risk business, which then becomes a priority to inspect over those lower risk businesses. Of the 228 premises, 64 are considered high risk and the remaining 164 are low risk food businesses such as home bakers. Increased resource has been brought in to help with this demand, but caseloads remain high. During Q4, 175 new food businesses were inspected but 207 new businesses were received. 79 premises had closed prior to inspection.  Officers continue to inspect, not only those new premises which have not been inspected as part of an inspection programme. The service has been following the Food Standards Agency's recovery roadmap and has undertaken 770 inspections on top of those detailed above, leaving 21 outstanding as of 31 March 2023.



# Planning and Regeneration Portfolio Cllr Peter Strachan





# 9. Planning and Regeneration Portfolio RED



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of homes built against housing requirements	Aim to Maximise	2,616	2,763	3,600 3,240 2,880 2,520 2,160 1,800 1,440 1,080 720 360 0 Years Target (Years)	None available	This indicator is measured one year in arrears.  This indicator measures the number of homes built against housing requirements as set out in the local plan.  The number of homes built against housing requirements in 2021/22 was 2,616 against a target of 2,763. This represents a 32% increase on the number of homes completed during the previous municipal year (1,982).  Local authorities do not have direct influence over new housebuilding rates. A high number of planning approvals doesn't always result in housing schemes being built quickly. External factors such as the Covid pandemic, ability of home buyers to obtain mortgages, economic recession and labour supply shortages are significant determinants. Nationally Q1 2023 saw the fewest home completions in England since Q1 2018.  Improvement Action:  • The preparation of the Local Plan for Buckinghamshire, which is a key corporate priority, will reset the annual housebuilding target and is likely to result in higher housing completion figures over the course of the next five years.

# 9. Planning and Regeneration Portfolio AMBER



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of Building Control applications checked within 21 days	Aim to Maximise	86%	90%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of Building Control applications that are checked within 15 working days (21 days).  Q4 performance is 86% against a target of 90%. This is a slight decrease in performance when compared with Q3 (91%). The number of applications received has been steadily increasing to above average volumes since December. The average was 164 per month, however the numbers received were January 181, February 171, March 194. This increase could be due to the growing confidence in the market and the end of the financial year. This together with annual leave and the need for more surveyors may have impacted Q4 performance.  Improvement Actions:  Additional resource has been put in place to support the processing of applications.  A recruitment campaign for Surveyors has been launched.

### 9. Planning and Regeneration Portfolio GREEN



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of major planning applications determined in 13 weeks, or with agreed extension of time	Aim to Maximise	93%	80%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  A ANDRIA OF CA	None available	This indicator measures the percentage of 'major' planning applications determined within 13 weeks, or within an agreed extension of time. 'Major' development is defined as involving the provision of 10 or more houses, or outline housing proposals on an area of 0.5 hectares or more, or the provision of any other building(s) of 1,000 square metres or more, or development carried out on a site having an area of one hectare or more.  Q4 performance was 93%, which is considerably higher than previous quarters this year and above the 80% target for the year. The determination of 'major' planning applications in accordance with agreed timescales has remained above target throughout the year.
% of minor planning applications determined in 8 weeks, or with agreed extension of time	Aim to Maximise	83%	75%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Target (Quarters)	None available	This indicator measures the percentage of 'minor' planning applications determined within 8 weeks, or within an agreed extension of time. Minor development is defined as where the number of dwelling/houses to be provided is between one and nine inclusive on a site having an area of less than one hectare. Where the number of dwelling/houses to be provided is not known, a site area of less than 0.5 hectares and for all other uses, a minor development is one where the floor space to be created is less than 1,000 square metres or where the site area is less than one hectare.  Q4 performance is 83% which is above the target of 75%.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of other applications determined in 8 weeks, or within the agreed extension of time	Aim to Maximise	93%	80%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters — Target (Quarters)		This indicator measures the percentage of 'other' (e.g., house extensions, advert consent, listed building consent, changes of use, etc.,) planning applications determined within 8 weeks, or within an agreed extension of time.  Q4 performance is 93% which is above the target of 80%.

# 9. Planning and Regeneration Portfolio NO RAG



PI	Aim To	Current Value	Trend Chart	Commentary
Town centre occupancy rate	Monitor	92.2%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters	This indicator measures the percentage of 'door on the high street' premises that are occupied across key towns in Buckinghamshire (Aylesbury; Amersham (Onthe-Hill and Old Town); Beaconsfield (Old and New); Buckingham; Chesham; Gerrards Cross; Great Missenden; High Wycombe; Marlow; Princes Risborough; Wendover and Winslow).  The pre-Covid baseline for these towns was 93.2% (2,126 premises), falling to 89.4% (2,039 premises) during Covid and currently stands at 92.2% (2,103 premises). This is an improvement on the peak Covid figures (89.4%) and just 1 percentage point away from the pre-Covid baseline for Bucks (93.2%).  Of the current 177 empty shop units, 39 are subject to planning / being fitted out. The top four highest occupation rates are for Wendover (97.1%); Amersham-on-the-Hill (96.8%); Winslow (96.8%) and Princes Risborough (95.9%).
Town Centre footfall	Monitor	11,368,184	14,000,000 10,000,000 8,000,000 4,000,000 2,000,000 0  Quarters	This indicator measures data provided from Town & Place Artificial Intelligence (AI). Footfall is derived and modelled using anonymised mobile device data. 2019 data has now been populated providing a pre-Covid baseline for comparison. Since the last report the company have secured a wider data set and figures have been remodelled. Data is available for: Aylesbury; Amersham (On-the-Hill and Old Town); Beaconsfield (Old and New); Buckingham; Chesham; Gerrards Cross; Great Missenden; High Wycombe; Marlow; Princes Risborough; Wendover and Winslow. This gives a good spread of 'high street' locations by market town size and a rural / urban split.  In Q4 the forecast footfall is 11,368,184 (based on actual 7,578,789 for January and February and modelled data for March because there is a month's lag for verified data). For January and February there is a 3% increase against 2021 (300k more counts) and 12% increase on 2020 (1.4m more counts).  The cumulative position recorded 49,591,909 visits which is an 18.4% increase on last year, with only Winslow showing a small reduction (-1.8%).

PI	Aim To	Current Value	Trend Chart	Commentary
Number of other formal enforcement actions taken	Monitor	13	15 10 20 15 10 21 20 20 21 20 20 20 20 20 20 20 20 20 20 20 20 20	This indicator measures the total number of other formal actions taken by the Planning Compliance and Enforcement Team.  There were 13 'other' formal actions taken in Q4, which is slightly higher than previous quarters Q3 (9), Q2 (11) and Q1 (7). The Buckinghamshire Council team are currently the most active Council in taking 'other actions' across the country. The type and number of 'other' actions will fluctuate due to the type of cases received within the team, however the team remain consistently pro-active in taking action. A total of 40 'other' notices have been served in 2022/23.
Number of enforcement cases logged	Monitor	378	468 416 364 312 260 208 156 104 52 0  ARRIVARIAN ARRIVA	This indicator records the number of new planning enforcement cases received and logged on the Council database. This reflects the cases where an alleged breach of planning control is received and where some form of investigation is required. It excludes any non-planning matters received.  In Q4 378 cases were received and logged, which is less than all previous quarters Q3 (433), Q2 (427), and Q1 (487). These figures indicate that the number of enforcement cases logged is remaining generally steady. Often over the winter period fewer cases are received, mainly due to less building work taking place because of the weather. A reduction in new cases has allowed the team to concentrate on case closures. A total of 1,725 investigations were opened in 2022/23.

PI	Aim To	Current Value	Trend Chart	Commentary
Number of enforcement cases closed	Monitor	542	1,250 1,000 750 250 250 250 Quarters	This indicator measures the number of enforcement cases that were closed in the period.  In Q4 542 cases were closed, which is much higher than previous quarters, Q3 (365), Q2 (395) and Q1 (405). Where possible, the team are consistently aiming to close as many cases as opened to ensure the caseload remains consistent. A significant increase in closures in Q4 means that over the year the team closed 1,707 cases, resulting in only 18 more cases being received than closed during 2022/23.
Number of enforcement notices issued	Monitor	20	40 30 20 10 0 10 0 10 Quarters	This indicator measures the total number of formal Enforcement Notices issued (including Minerals and Waste notices, and Listed Building Enforcement Notices).  In Q4, 20 notices were issued, which is fewer than Q3 (45), but comparable to Q2 (28) and Q1 (22). This has resulted in the team being the 4th most active Council in serving enforcement notices in the country, equating to being the most active outside of London (the team were 5th last quarter). A total of 115 Enforcement Notices have been served in 2022/23.

PI	Aim To	Current Value	Trend Chart	Commentary
Number of valid Planning Appeals received	Monitor	68	130 120 110 100 90 80 70 60 50 40 30 20 10 0 QLARIBR Q	This indicator measures the number of valid planning appeals received (excluding appeals against planning enforcement notices). Applicants have the right to appeal if they disagree with the planning decision reached. The number submitted to the Council is entirely dependent on the Planning Inspectorate (PINs).  In Q4 the council received 68 appeals.



# Transport Portfolio Cllr Steve Broadbent



### **10. Transport Portfolio RED**



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of gullies cleaned against the cyclical gully programme	Aim to Maximise	89%	98%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Target (Quarters)	None available	This indicator measures the percentage of gullies cleaned against the cyclical gully programme (to clean all gullies within 1 year) with an annual target of 98%. This target has been pro-rata'd equally across each quarter to help show progress, although delivery may not actually be evenly distributed.  The final out-turn for gullies cleaned was 89%, which is below the 98% target. The crews worked through a period of extremely cold and wet weather which impacted performance against the work programme with gully cleaning not undertaken during continually frozen weather and crews being moved onto emergency pothole repairs in part of January. Performance was also impacted by vehicles parked over gullies (4,214), meaning these could not be cleaned first time. Efforts to suspend parking were hampered by programme changes due to adverse weather conditions.  75,761 gullies were cleaned and working. On top of the cyclical programme, investigative and reactive works were undertaken as well as revisits to gullies not accessible first time. We have seen a 16% reduction in average silt levels this year because of the enhanced programme in 2021/22. Those gullies not completed by the end of March 2023 will be visited early on in the programme next year.  Improvement Action:  Programme will be closely monitored (new contractor in place from 01 April 2023).

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
NHT Public Satisfaction on the condition of road surfaces (HMBI 01)	Aim to Maximise	20	25	100 90 80 70 60 50 40 30 20 10 0 Years Target (Years)	NHT cohort regional average (22%)	This indicator is reported annually, previously reported in Q3.  The National Highways and Transport (NHT) survey is an annual survey of public satisfaction covering a range of topics. HMBI 01 measures public satisfaction on the condition of road services. The target is based on the average score of a cohort of comparable authorities (as per previous years).  In 2022, Buckinghamshire scored a satisfaction score of 20% against a target (comparable cohort) of 25% (good to be high). Overall, in the NHT Survey, Buckinghamshire has had small improvements in the NHT score in 6 out of 8 categories versus last year, with minor decreases in the other two categories. Improving the next annual NHT score is a key aim of the new contract model from April 2023 and a communications strategy to include this is being developed.  Improvement Action:  • A communications strategy is being developed and will be included in the new contract model from April 2023 to help improve public satisfaction scores.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Number of publicly accessible electric-vehicle charging bays on-and off-street in Buckinghamshire	Aim to Maximise	229	263	400 350 300 250 200 150 100 50 0 Years Target (Years)	None available	This indicator is reported annually.  This indicator measures the number of publicly accessible electric vehicle charging units both on street and off street across Buckinghamshire.  There were 229 electric vehicle charging units accessible to the public across Buckinghamshire at the end of 2022/23. This is lower than the target of 263. There are 64 bays on route through the On-Street Residential Chargepoint Scheme (ORCS), these have been delayed due to the Distribution Network Operator (DNOs - electrical infrastructure providers that install the cabling/meters) but are expected to be in place in Q1 2023/24.  Improvement Actions:  • Ensure delivery of ORCS-funded chargepoints within Q1 2023/24.  • Apply for further external funding opportunities for EV chargepoints from ORCS in 2023/24.  • Ensure robust Expression of Interest application to Local Electric Vehicle Infrastructure (LEVI).
% of Category 1 and 2H defects repaired in 2 and 5 working days respectively.	Aim to Maximise	83%	94%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)	None available	This indicator measures the percentage of category 1 and 2H (H=high priority) defects repaired in 2 and 5 working days respectively.  Performance in Q4 was 83% against a target of 94%. Performance was impacted by the freezing temperatures experienced in January and February, combined with the extremely high levels of rainfall experienced in March which has led to an unprecedented level of defects.  Improvement Actions:  Repair activities will be closely monitored (new contractor in place from 01 April 2023)  Weekend works have been introduced to respond to the increase in reports  Additional resource has been brought in to help address the number of defects received

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% Streetlights in light	Aim to Maximise	84%	95%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)		This indicator measures the percentage of streetlight columns that are working (in light) as well as illuminated signs and bollards.  Q4 performance is 84% against a target of 95% and is lower than Q1 to Q3 this year. A night scouting exercise has recently been completed, which gave an updated total figure of the number of working lights (in previous quarters the percentage given was calculated using the number of defects that had been reported against the street lighting asset).  Improvement Actions:  • Maintenance activities will be closely monitored (new contractor in place from 01 April 2023).  • Night scouting reports will be used to produce a targeted programme of works to address all defects.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Average daily cycling count per active cycle counter per day	Aim to Aim to Maximise	Value 67.3	Target 75	Trend Chart  80  60  40  20  Quarters Target (Quarters)	Benchmarking None available	This indicator measures the average daily cycling count per active cycle counter per day.  The Q4 forecast is 67.3 counts per day, which is below the target of 75 counts. Q1 and Q2 counts are generally higher than Q3 and Q4 due to favourable weather conditions in Spring and Summer. The average actuals for the year-to-date (Q1 to Q3) are 75.9 counts per day, which is higher than our target of 75. However, projecting forward for the whole of 2022/23, we are anticipating an average count of 73.7 per day. It should be noted that this is higher than the average count for 2021/22 (70.5 per day).  This projected dip in performance is due to typical observations of lower cycling counts during the winter months. Work is ongoing to improve our visibility of cycling across the County with a new cycle counter added for Churchill Road Aylesbury in September 2022. 5 additional Vivacity Al-based sensors have come online in February 2023, and will be included for 2023/24 once we are satisfied with compatibility of the data.  Improvement Actions:  Improvement Actions:  Improvement Actions:  Increasing coverage of cycling counters to improve data coverage and understanding of existing cycling routes, and collecting enhanced data on recently delivered schemes to evidence usage levels, and in proposed future scheme locations to understand the potential demand.  Plans to procure e-bikes to complement our existing e-scooter schemes in Aylesbury and High Wycombe, which is likely to increase counts in
						Plans to procure e-bikes to complement our existing e-scooter schemes in Aylesbury and High

### **10. Transport Portfolio AMBER**



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of strategic carriageway network in fair/good and very good condition	Aim to Maximise	92%	93%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Years Target (Years)	None available	This indicator is reported annually.  This indicator measures the condition of the strategic carriageway network (strategic roads: 2, 3A, 3B, 4A). It reports on the percentage of the network in very good, good, and fair condition. It is good to be high.  2022/23 performance is 92% which is just below the target of 93% and the 2021/22 figure of 94%. The marginal decrease in strategic road condition is balanced by the steady improvement in the condition of local roads. This is in line with expectations as the Strategic Highway Maintenance budget roughly maintains a steady state. The additional investment from plane and patch has been typically focussed on local roads over recent years. The impact of High Speed Rail 2 (HS2) and East West Railway (EWR) traffic is also a potential cause of increased deterioration on the main roads. Inflationary impacts can be expected to have a negative impact on road condition in the next year, although the additional £7.3M funding provided for 2023/24 is likely to more than offset this.  Improvement Actions:  • The majority of the additional £7.3M of funding announced at full council is being targeted on strategic roads and this, in combination with the original capital programme, is hoped to address this fall in condition.  • Deterioration due to HS2 and EWR traffic is being assessed and in 2023/24 it is hoped that HS2 will fund works on key strategic routes which have deteriorated due to construction haulage.  • Additional compensation will also be sought from HS2 for damage to main roads and specific haul roads.

#### **10. Transport Portfolio GREEN**



PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
NHT Public Satisfaction Survey: (KBI 15) % of customers satisfied with their local Rights of Way Network	Aim to Maximise	56%	55%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Years Target (Years)	NHT South east regional average (57%)	This indicator is reported annually, previously reported in Q3.  The National Highways and Transport survey is an annual survey of public satisfaction covering a range of topics. KBI 15 measures public satisfaction with their local rights of way e.g., footpaths.  In 2022, Buckinghamshire scored a satisfaction score of 56% against a South East 2022 average score of 55%. Satisfaction is up slightly from 2021 (where we scored 54%). However, it is likely that there is an impact on use of the network due to the Covid-19 lockdown periods, which saw an increase in footfall damaging footpaths.  Additionally, the amount of summer clearance carried out on the network is insufficient, and there is a shortfall on budget to increase the metreage cleared. Furthermore, path volunteers have a backlog of works as they were stood down during Covid-19, which meant some maintenance tasks could not be completed. Due to the High Speed Rail 2 (HS2) and East West Railway (EWR) project which has impacted a number of public paths across the project sites, it is likely that a significant number of path users are dissatisfied with the inability to access the network. Additional resources have been requested under medium term financial planning both capital and revenue 2022 to undertake repairs and path maintenance and there will be a small increase in spend on annual summer clearance for 2023 which will improve accessibility.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
% of invalid PCNs (on- and off-street)	Aim to Minimise	3%	4%	1%  1%  Quarters Target (Quarters)	None available	This indicator measures the percentage of total Penalty Charge Notices (PCNs) issued, which are invalid due to civil enforcement officer errors, equipment error and spoils (cancelled by officer on site). The reasons for invalid PCNs vary including equipment failures and errors by staff issuing notices.  Performance was 3% in Q1, Q2, Q3 and Q4 2022/23, which is lower (better) than the 4% target. The value was also 3% during Q4 in 2021/2022 at which time the Civil Enforcement Officers had begun to get used to new handheld equipment. Whilst the Officers have adjusted well to the equipment, further recruitment has been ongoing and whilst new staff are learning their roles, errors will naturally occur.
Major transport schemes: % of profiled spend achieved	Aim to Maximise	193%	100%	200% 175% 150% 125% 100% 25% 0% 25% Quarters Target (Quarters)	None available	This indicator measures a single figure for the percentage of actual spend against profiled spend, for projects within the Capital Programme funded from the Capital Budget. Projects include A41 Primary Public Transport Corridor (PPTC), Abbey Barn Lane Improvement Scheme (ABLIS), Eastern Link Road (ELR) Dual, Princes Risborough Southern Road Link (PRSRL), and Westhorpe. The target is to hit 100% by year end, which has been equally profiled throughout the year, even though actual spend may be more variable. The spend reported includes creditor values.  Q4 performance is 193% which demonstrates that expenditure has exceeded the in-year budgets (above 100% is good). Good progress has been made on all the projects which is reflected in the expenditure to date exceeding the in-year budgets. We have worked closely with finance colleagues to ensure that we set budgets at a level to achieve accelerated in-year spend.  The A41 project in Aylesbury is now complete. The Eastern Link Road is progressing well with successful access to the land to undertake investigations and surveys, and permit design and planning application work. Good progress has also been made on the PRSRL project, with the planning application being approved at the Strategic Sites Committee. The Westhorpe project and ABLIS projects have had Leader Decisions taken on them to close them down.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
HS2 highways approvals: % responded within time limit	Aim to Maximise	100%	95%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Alana ala	None available	This indicator measures the percentage of High Speed 2 (HS2) highways approval applications that were responded to within the time limit.  In Q4 100% of highways applications were determined within the timeframe or agreed extensions. Performance has been consistent throughout 2022-23.
HS2 planning approvals: % responded to within time limit	Aim to Maximise	100%	95%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  10% 0%  Quarters  Target (Quarters)	None available	This indicator measures the percentage of High Speed 2 (HS2) planning approvals which were responded to within the time limit.  In Q4 100% of planning applications were determined within the timeframe or agreed extensions against a target of 95%. This is a continuation of 100% performance since Q3 2021/22.

PI	Aim to:	Current Value	Target	Trend Chart	Benchmarking	Commentary
Highways capital programme % spend against forecast	Aim to Maximise	98%	95%	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters)	None available	This indicator measures the percentage of spend against forecast for the Highways Capital Programme at the beginning of the year.  Q4 performance is 98% against a target of 95%. A significant amount of work has been undertaken this year despite periods of extreme weather. The work delivered includes the following: 6 Network Safety Schemes, 35 conventional surfacing schemes, 33 plane and patch schemes, 18 footway schemes, 7 failed road sites, 10 drainage schemes, 10 safety fence renewals, 5 structures schemes, 7 surface dressing sites and 20 micro surfacing dressing sites.
% of Local Road network in fair/good and very good condition	Aim to Maximise	70%	68%	90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Years — Target (Years)	None available	This indicator is reported on a half-yearly basis, in Q2 and Q4.  This indicator measures the condition of the local road network. It reports on the percentage of the network in very good, good, and fair condition. It is good to be high.  2022/23 performance is 70% which is above the target and the 2021/22 figure of 68%. There has been a steady improvement in local roads. The additional investment from plane and patch has been typically focussed on local roads over recent years. Inflationary impacts can be expected to have a negative impact on road condition in the next year, although the additional £7.3M funding and continued plane and patch funding provided for 2023/24 is likely to more than offset this.

### **10. Transport Portfolio NO RAG**



PI	Aim To	Current Value	Trend Chart	Commentary
Number of car parking ticket sales managed by Buckinghamshire Council	Monitor	1,135,459	1,500,000 1,350,000 1,050,000 900,000 450,000 300,000 150,000 0 Quarters	This indicator measures the number of car park ticket sales managed by Buckinghamshire Council. These figures combine on-street ticket sales and car park ticket sales.  In Q4 2022/23 1,135,459 tickets were sold, which is an improvement on Q3 (1,127,806) and also an improvement Q4 2021/22 (1,044,543). The implementation of new ticket machines in Chiltern, South Bucks and Wycombe areas have improved sales, making purchases more reliable for our customers.  Ticket sales were impacted by anti-social behaviour in the Easton Street car park in High Wycombe and further technical issues within The Swan and Handy Cross car parks. The barrier systems have been removed as of April 2023 and a pay & display system implemented.
% eligible clients who are provided with transport before the required start date, or no later than 15 working days from the date the transport assessment was completed (SEND), or all information was received to provide transport (Mainstream)	Aim to Maximise		100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  ALEAR LA	This indicator measures the percentage of eligible clients who are provided with transport before the required start date, or no later than 15 working days from when the transport assessments were completed (SEND clients) or when all the information was provided (Mainstream clients).  Q4 - nil return.  Unfortunately due to some unforeseen data issues the service is unable to provide a return for this indicator. These issues are being investigated and we aim to provide a meaningful measure of service performance from Q1 2023-24.

PI	Aim To	Current Value	Trend Chart	Commentary
Number of public transport bus routes in Buckinghamshire	Monitor	95	100 90 80 70 60 50 40 30 20 10 0 ARRIVA OF	This indicator measures the number of public bus routes in Buckinghamshire.  There were 95 bus routes running in Q4.  The Service works with operators and utilises external grant funding to maintain current services where there is a likelihood that they may be withdrawn. This work has continued through Q4.