

# Leader's Portfolio Cllr Martin Tett



#### 8. Leaders Portfolio RED



| PI  | Aim to:         | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|---|-----------------|------------------|--------|--|----------------|--|
| Strategic Infrastructure projects: percentage profiled spend achieved | Aim to Maximise | 31%              | 50%    | 250% 200% 150% 100% 50% 0% ARAURA GRANARA ARAURA GRANARA GRANA | 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 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.  Expenditure in Q2 was 31% which is less than the pro-rata target of 50% expenditure for the financial year. Actual spend on SEALR Phase 1 to date is £1,370,763 against a budget for 2023/24 of £4m. Phase 2 spend to date is £28,636 against a budget of £500,000. This lower expenditure is partly due to slower than anticipated progress on construction and land acquisition while the Housing Infrastructure Fund reallocation was awaited. SEALR is a major and complex project and the team, along with our specialist consultants, are carrying out due diligence to ensure successful delivery of the project. Subject to forthcoming decisions, the expenditure is expected to get back on track by year end.  Improvement Actions:  • The team continues to progress Phase 2 on matters such as land acquisition and temporary licences, utility diversions, design progression, early works packages such as archaeology and vegetation clearance.  • The team are developing an up-to-date delivery programme, to ensure the delivering timelines are as robust as practically possible, while land acquisitions and other project delivery related matters are being progressed. |

#### 8. Leaders Portfolio GREEN



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|--|--|---|
| Percentage unemployed in Buckinghams hire compared to the percentage unemployed nationally | Aim to<br>Minimise | 68%              | 75%    | 100% 90% 80% 70% 60% 50% 10% 0% 10% Quarters Target (Quarters) | National (England) claimant rate: 3.8% (100%) South-East claimant rate: 2.8% (August 2023) | claimant rate. The claimant rate measures the percentage of working age population claiming 'out- |

| PI | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking  | Commentary  |
|----|--------------------|------------------|--------|--|---|---|
|    | Aim to<br>Minimise | 9                | 10     | 13 12 11 10 9 8 7 6 5 4 3 2 1 1 Quarters Target (Quarters) | (1) London 114.9 (2) Greater Manchester 48.5 (3) Greater Birmingham and Solihull 48.1 (4) Coventry and Warwickshire 42.1 (5) Hertfordshire 39.6 (6) South East Midlands 39.0 (7) Black Country 37.9 (8) Thames Valley Berkshire 36.9 (9) Buckinghamshire 34.7 (10) Dorset 34.3 (September 2023) | This indicator measures the number of new businesses registered across different Local Enterprise Partnerships (LEPs) and ranks them against each other.  There were 1,547 new businesses registered in Buckinghamshire during Q2. Buckinghamshire is ranked 9th of 38 LEP areas in terms of the number of business registrations for every 10,000 residents aged 16 or over (a rate of 34.7). This is better than the target to be in the top 10.  The most common sectors in which these new businesses are operating are: (1) Management consultancy (excluding financial management), (2) Retail sale via mail order houses or via internet, (3) IT consultancy activities, (4) Buying and selling of own real estate, (5) Other letting and operating of own or leased real estate, (6) Other human health activities. |



# Accessible Housing and Resources Portfolio Cllr John Chilver





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



| PI                        | Aim to:            | Current<br>Value | Target     | Trend Chart  | Benchmarking  | Commentary   |
|---------------------------|--------------------|------------------|------------|--|---|--|
| Average Call<br>Wait Time | Aim to<br>Minimise | Oh 04m 16s       | 0h 03m 00s | Oh 16m 40s Oh 15m 00s Oh 13m 20s Oh 11m 40s Oh 06m 40s Oh 05m 00s Oh 03m 20s Oh 01m 40s Oh 00m 00s  ARRIVARIAN RATIR ARRIVARIAN ARRI | Customer First<br>Local Authority<br>benchmarking<br>data: 2 min 55<br>(May 2023) | This indicator measures the average call wait time across all Customer Service lines.  Q2 performance is 4 minutes 16 seconds against a target of 3 minutes. This is an improvement in performance compared with Q1 (4 minutes 43 seconds) and is an improvement on a year on year basis - Q2 2022/23 was 7mins 15secs. Q2 is the busiest period within the Customer Service Centre (CSC) as it includes Home to School Transport arrangements for the start of the academic year (Q2 c.3,500 calls, Q1 c.1,200 calls) and Southern Waste green waste renewals (Q2 c.14,000 calls, Q1 8,800 calls) both of which drive substantial demand peaks into the CSC. However, even with very high demand 95% of calls were answered and 76.9% of calls were resolved at first point of contact.  Even with these very high call volumes the improvement in performance compared with Q1 is due to the continuing stabilisation of the CSC workforce, enabling us to manage the demand for spikes in Client Transport, Revenues and Benefits and Southern Waste – in particular Green waste renewals calls in the last quarter.  Improvement Actions:  Ongoing updates of tailored nudge messaging matching the high demand activities are added to telephone lines to promote online options.  Use of call-back queues for high volume lines, in particular Revenues and Benefits and Southern Waste  Deployment of a chat bot, covering four key areas (waste, roads, parking, school admissions), and directing customers to their answer on the website through pre-populated questions and automated responses.  Close working with service areas through Account Management meetings to understand upcoming demands and to plan for future events. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| Overall revenue (forecast) variance (%) across the council | Aim to<br>Minimise | 2%               | 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 forecast revenue outturn position for 2023/24 is an adverse variance of £8.6m, 2% of Portfolio budgets. This is primarily due to pressures in Health & Wellbeing and Education & Children's services from demand and market insufficiency issues, coupled with pressures in Homelessness & Regulatory services in Temporary Accommodation budgets and Transport budgets.  Improvement Action:  Following the Q1 position, detailed Portfolio Action Plans have been implemented to address pressures, with a view to urgently bringing budgets back into line. The Q2 position reflects positive variances across several portfolios linked to the delivery of the action plans, however, the financial position has deteriorated overall due to increasing pressures within Education & Children's services. |

| PI  | Aim to:            | Current<br>Value | Target      | Trend Chart  | Benchmarking   | Commentary  |
|---|--------------------|------------------|-------------|--|----------------|---|
| £ 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<br>Minimise | £14,135,557      | £10,000,000 | £15,000,000 £12,000,000 £9,000,000 £6,000,000 £4,500,000 £1,500,00 | 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).  Q2 performance is £14.1m against a target of £10m. The outstanding debt in this category has increased by £2.8m since Q1. This is mainly due to:  • Reclassification of £1.4m Adult Social Care debt from secured to unsecured as the legal proceedings to secure a charge against a property are not yet complete; and  • £1.4m is in respect of various debts with our partners such as the NHS, other Local Authorities and corporate clients covering Special Education Needs and commercial property. Officers are working with the debtors to resolve invoicing queries.  The Debt Collection team continues to focus on collecting the new debt to ensure it does not fall into the over 90 days category, however the year-on-year billing has increased by approximately £30m and the current challenging economic conditions are having an impact both on our residents and corporate businesses which is influencing the delays in settlement of debts by our customers.  Improvement Actions:  • Debt Task and Finish Group has been set up for Adult Social Care debt to ensure prompt resolution of client queries, improve debt collection and where possible secure the debt.  • Significant amount of work has been carried out to maintain the customer ledger which is facilitating effective process for resolving customer queries and referring debts for legal proceedings.  • Process automation is due to go live in November which will create capacity within the debt collection team to pursue challenging debts. |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking              | Commentary  |
|---|--------------------|------------------|--------|---|---------------------------|---|
| Average time<br>for processing<br>new Housing<br>Benefit claims<br>(days)       | Aim to<br>Minimise | 28.4             | 20     | 40 35 30 25 20 15 10 5 Quarters Target (Quarters)           | DWP: 20 Days<br>(2022/23) | This indicator measures the average time for processing new Housing Benefit claims (days).  The performance was impacted by the backlog of claims left over from the single system merger. Q2 shows performance is improving as the situation is returning to normal and this indicator will continue to improve.  As this indicator is an annual rolling target, it will take sustained better than target performance over many months to improve the reported position. 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 Action:  • Additional resources were brought in and have cleared the backlog. |
| Average time<br>for processing<br>Housing<br>Benefit<br>change claims<br>(days) | Minimise           | 10               | 8      | 11 10 9 8 7 7 6 5 4 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | DWP: 8 Days<br>(2022/23)  | This indicator measures the average time for processing changes to Housing Benefit claims in days.  The outturn for Q2 (as of the end of September was 10 days against a rolling target of 8 days).  Improvement Action:  • The performance was impacted by the backlog of claims left over from the single system merger, but this has now been cleared. The indicator is being closely monitored and is expected to return to being on target by the end of the year.   |

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



| PI   | Aim to: | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|--|---------|------------------|--------|---|----------------|---|
| Number of sickness absence days per FTE annually (rolling 12-month period) |         | 8.75             | 8.5    | 10 9 8 7 6 5 4 3 2 1 0 ARRIVA DELIVA | None available | This indicator measures the number of sickness absence days per full-time equivalent (FTE) employee in the Council.  The target has been reduced from 9 to 8.5 days recognising that sickness absence has reduced across the Council – this is a notable achievable and is opposite to the national trend.  Q2 performance is 8.75 days against a target of 8.5 days. This is a slight dip in performance compared with Q1 (8.73) 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.  Promoting the 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. |

| PI                         | Aim to:            | Current<br>Value | Target      | Trend Chart   | Benchmarking   | Commentary  |
|----------------------------|--------------------|------------------|-------------|---|----------------|---|
| Gross income from Property | Aim to<br>Maximise | £23,083,357      | £23,445,549 | £25,000,000 £15,000,000 £10,000,000  £5,000,000  ARAPARA ARAPARAP | 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 (£23,445,549).  At the end of Q2 the gross income from property rent for investment, commercial, corporate and agricultural portfolios is projected at £23,083,357.  Improvement Action:  • A newly formed Strategic Property Board commissioned an investment strategy on 12th October 2023 with the aim of optimising revenues/return on property investments. Work on this strategy will be reviewed on 9th January 2024 and thereon monthly at Strategic Property Board. |

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



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|--|--|--|
| Percentage of phone calls answere d in the Customer Service Centres | Aim to<br>Maximise | 95%              | 90%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters) | Customer First<br>Local Authority<br>benchmarking<br>data: 87%<br>(May 2023) | This indicator measures the percentage of phone calls answered in the Customer Service Centre.  Q2 performance is 95% against a target of 90%. This is an improvement in performance when compared with Q1 (93.1%).  The improvement in performance compared with Q1 is due to the training of additional resource to manage high volume lines, including Revenues and Benefits. In addition, following the refreshed recruitment process, the Customer Services workforce has stabilised. |
| Council<br>Access Point<br>Plus customer<br>satisfaction            | Aim to<br>Maximise | 76.3%            | 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.  Q2 performance is 76.3% against a target of 75%. This is a reduction in performance when compared with Q1 (78%) but still remains above the target.  We will continue to monitor Council Access Point Plus customer feedback and look to identify any trends and potential areas for improvement.   |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|--|----------------|---|
| Percentage of phone calls in Customer Service Centres resolved at first call (FCR) | Maximise           | 76.9%            | 60%    | 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.  Q2 performance is 76.9% against a target of 60%. This is an improvement in performance compared with Q1 (75.7%).  The improvement in performance compared with Q1 is due to the training of additional resource to manage high volume lines, including Revenues and Benefits. This includes new starters who have gained a higher level of confidence and competency following an extensive training programme. |
| Webchat<br>service<br>customer<br>satisfaction                                     | Aim to<br>Maximise | 82.4%            | 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 web chats handled by a live agent.  Q2 performance is 82.4% against a target of 60%. This is an improvement in performance compared with Q1 (81%).  The improvement in performance compared with Q1 is due to additional resource being trained to manage the web chat channel, and a detailed analysis of chat requests enabling us to improve our predefined web chat responses.  |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|---|--------------------|------------------|--------|--|----------------|---|
| Call customer satisfaction  | Aim to<br>Maximise | 75.7%            | 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 telephone call experience.  Q2 performance is 75.7% against a target of 60%. This is a reduction in performance compared with Q1 (76.3%).  We will continue to monitor the post call survey feedback and look to identify any trends and potential areas for improvement. |
| Percentage of total capital spend across Buckinghams hire Council (forecast) compared to Budget (performance measure) | Aim to<br>Maximise | 99.5%            | 90%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters  Target (Quarters) | None available | This indicator measures the forecast percentage of total capital spend across Buckinghamshire Council compared to budget.  The forecast is £123m of spend against £124m budget, with a 0.6% variance. Budgets have been reprofiled in September in readiness for the budget-setting process (Medium Term Financial Plan).   |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking  | Commentary   |
|---|--------------------|------------------|--------|--|---|--|
| Percentage of invoices paid within 30 days                | Maximise           | 97.2%            | 95%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% QARANTO QA | None available  | This indicator measures the percentage of invoices that have been paid within 30 days, of the quarter.  Q2 performance is 97.2% against a target of 95%, which is an improvement in performance by 0.6 percentage points compared with Q1 (96.6%). |
| Percentage of<br>Council Tax<br>collected<br>(cumulative) | Aim to<br>Maximise | 56.9%            | 56.5%  | Quarters Target (Quarters)  100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0 Quarters Target (Quarters)  | CIPFA NN:<br>97.49%<br>South East:<br>96.18%<br>All English single<br>tier and county<br>councils: 95.13%<br>(All values latest<br>available 2021/22) | This indicator measures the cumulative percentage of Council Tax collected. The target is adjusted for what is expected each quarter.  Performance at the end of Q2 is 0.4 percentage points above target.   |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking  | Commentary   |
|--|--------------------|------------------|--------|---|---|--|
| Percentage of<br>Business<br>Rates<br>collected<br>(cumulative)            | Aim to<br>Maximise | 59.7%            | 58.1%  | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters — Target (Quarters)                       | CIPFA NN:<br>97.25%<br>South East:<br>98.06%<br>All English single<br>tier and county<br>councils: 97.55%<br>(All values latest<br>available 2021/22) | This indicator measures the percentage of Business Rates collected.  Q2 performance is 1.6 percentage points above target reflecting strong performance.   |
| Voluntary staff<br>turnover<br>percentage<br>(rolling 12-<br>month period) | Banding            | 10.9%            | 12%    | 16% 15% 14% 13% 12% 11% 10% 10% 9% 8% 7% 6% 6% 6% 6% 6% 6% 6% 1% 0%  Quarters Target (Quarters) | None available  | This indicator measures the workforce voluntary turnover percentage for the Council.  Q2 performance is 10.9% against a target of 12%. This is inside the banding of 10% to 14% and is a reduction compared to Q1 (11.4%). Turnover is monitored on a monthly basis. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| Percentage of<br>staff who feel<br>happy, valued<br>& motivated at<br>work | Maximise           | 76%              | 70%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  ALRARR ARRAR AR | None available | This indicator measures the employee engagement index score from the Spring 2023 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 is 76% engagement against a target of 70%. This is an increase of 2 percentage points compared with the previous survey.  Surveys are being carried out half-yearly, so the next survey will be in January 2024. |
| Service desk<br>first time fix<br>percentage                               | Aim to<br>Maximise | 80%              | 68%    | 100% 90% 80% 70% 60% 50% 40% 30% 10% 0% 10% 0% Target (Quarters)   | None available | This indicator measures the percentage of calls fixed first time on the IT Service Desk.  Q2 performance is 80% against a target of 68%. This is an improvement in performance by 4 percentage points when compared with Q1 (76%).  The two new apprentices in the team have completed their induction training and are performing at an excellent standard, taking on more complex calls and resolving first time.  |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking  | Commentary   |
|---|--------------------|------------------|--------|---|---|--|
| Website<br>Accessibility<br>(%) of<br>Buckinghams<br>hire Council<br>website  | Aim to<br>Maximise | 93%              | 80%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters - Target (Quarters)               | The industry benchmark, as measured by SiteImprove for government websites, is 80%. | This indicator measures the accessibility of the pages on the new Buckinghamshire Council website.  Accessibility at the end of Q2 2023/24 remains at 93%. There are three outstanding issues which are published in the Council's website accessibility statement and will require development time from the website supplier to be resolved. These issues are:  • Some online maps and mapping services cannot be easily navigated  • Some online tools may be difficult to use for assistive technologies  • Some videos do not have captions |
| % of planned savings on track for delivery across Buckinghams hire Council as a result of the Better Buckinghams hire programme | Aim to<br>Maximise | 100%             | 100%   | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Alanda and and and and and and and and and | 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.  Savings from the Better Buckinghamshire programme to be achieved by the end of 2023/24 are expected to be £3.668m. Performance at the end of Q2 shows that 100% savings are on track for delivery.  |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| Gross yield<br>from<br>Investment<br>portfolio           | Aim to<br>Maximise | 7.71%            | 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).  Q2 performance was 7.71% which is higher (better) than the 6.4% target. Underlying investment values fell 3.4% between Q1 and Q2 due to ongoing market conditions. Gross rental income has remained constant over Q1 and Q2. It should be noted that financing of the Investment portfolio includes repayment of the underlying loan so over time the loan will be repaid.  |
| Percentage of empty properties across the Council Estate | 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 Q2 was 0.23% which is below (better) than the 0.4% target and consistent with Q1 performance (0.23%). 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 not changed. |



### Climate Change and Environment Portfolio Cllr Gareth Williams





### 1. Climate Change and Environment Portfolio AMBER



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart                              | Benchmarking             | Commentary  |
|--|--------------------|------------------|--------|--|--------------------------|---|
| Percentage of waste collected for recycling, reuse, composting or anaerobic digestion from household sources | Aim to<br>Maximise | 54.14%           | 55%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% | England: 44.1% (2021/22) | This indicator is reported one quarter in arrears. Current performance is for Q1.  This Indicator 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.  Performance in Q1 was 54.14% which is lower (worse) than the 55% target but higher than Q4 (2022/23) (46.83%). Performance improved compared to previous three years, which is due to an increase in green waste this year (ideal growing season weather with wet and dry spells). Dry recycling and food waste is lower than last year, and residual waste tonnage is higher for Q1.  Full year target of 55% might not be achieved, as Q1 and Q2 sees peak recycling performance in the year, so with Q1 already falling slightly below this target we are not on track for full year recycling performance target.  Improvement Action:  • Food waste and recycling communications campaign due in Q3 and Q4 to promote positive behaviour change. |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|---|--------------------|------------------|--------|---|----------------|---|
| Residual<br>Household<br>Waste<br>per Household<br>(kg) | Aim to<br>Minimise | 128.22           | 125    | 160 140 120 100 80 60 40 20 0 ARALIRA GRANIRA | None available | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the average weight of non-recyclable household refuse produced per dwelling within the county.  In Q1 performance was 128.22 kg of residual household waste (black bin) per household, which is above (worse) the target of 125 kg per household and higher (worse) than Q4 2022/23 (120.13 kg). Greater tonnages in the system this year and lower dry recycling and food waste have resulted in more residual waste per household.  Improvement Action:  Food waste and recycling communications campaign due in Q3 and Q4 to promote positive behaviour change. |

### 1. Climate Change and Environment Portfolio GREEN



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|--|----------------|--|
| Annual<br>Greenhouse<br>Gas<br>emissions:<br>tonnes | Aim to<br>Minimise | 5,401            | 6,953  | 10,000 9,000 8,000 7,000 6,000 5,000 4,000 3,000 2,000 1,000 0  Years Target (Years) | None available | This is an annual indicator reported two quarters in arrears. Current performance is for 2022/23.  This indicator measures greenhouse gas emissions (tonnes) from Buckinghamshire Council's operations.  In 2022/23 the Council emitted 5,401 tonnes of greenhouse gases (net), which is below the target (allocation) of 6,953 tonnes of carbon dioxide equivalent (tCO2e) and equates to a 73.4% reduction since 1990 (20,550 tCO2e). The largest emission saving activity has been the purchase of electricity with a 100% renewable tariff, fully backed by Renewable Electricity Guarantees of Origin (REGO) certificates, which started on 1st October 2022 under a two-year contract. |

| PI                        | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|---------------------------|--------------------|------------------|--------|--|----------------|---|
| Number of trees planted   | Aim to<br>Maximise | 39,568           | 25,204 | 300,000<br>250,000<br>150,000<br>50,000<br>TSLITE SADIES  Years - Target (Years)   | None available | This is an annual indicator reported two quarters in arrears. Current performance is for 2022/23.  This indicator measures the number of trees planted on Buckinghamshire Council's land against the Tree Planting Mission to plant 543,000 trees by 2031. This is a cumulative measure.  39,568 trees have been planted on Council land across the 2021/22 and 2022/23 planting seasons which is above the cumulative target of 25,204.  33,708 trees were planted in 2022/23 against a target of 21,000. This includes trees planted at Bury Farm, Grange Farm, Platinum Park Way and one of Buckinghamshire's first Miyawaki forests at Princess Risborough School. Two grant awards (£110,186 for Grange Farm; and £105,693 for Bury Farm) were secured to support the establishment and maintenance of trees following applications to the England Woodland Creation Offer (EWCO) scheme.  The Council established a partnership with Forestry England to create Wing Woods, a brand-new woodland just outside Wing. 132,000 trees will be planted across a 51-hectare plot of council-owned land (previously used as farmland) by the end of the 2023/24 planting season. |
| Missed Bin<br>Collections | Aim to<br>Minimise | 0.14%            | 0.2%   | 0.8%  0.6%  0.4%  0.2%  One of the control of the c | 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 in-house team to the North, and the contractor Veolia to the South. Non-genuine misses e.g., contamination is not included in this measure, even though a resident may report this bin as missed.  In Q2 performance was 0.14% (0.08% North, 0.18% South) which is lower than the target of 0.20% and better than the Q1 performance of 0.15% (0.08% North, 0.19% South). This is a notable improvement on Q4 0.21% (0.09% North, 0.27% South).  Staffing shortages linked to high absence rates is a challenge in both areas. This has led to an increase in missed bins in the North, which is now stabilising as round contingency plans bed in. The South introduced new contract management measures with an emphasis on missed bins, which has brought performance within target for the first time since the round reorganisation in Spring 2022.  |

### 1. Climate Change and Environment Portfolio NO RAG



| PI  | Aim To  | Current<br>Value | Trend Chart                    | Commentary   |
|---|---------|------------------|--------------------------------|--|
| Number of fly-<br>tipping clearances<br>where an action<br>has been taken | Monitor | 20               | 40 30 20 10 Quarters  Quarters | This indicator measures the number of fly-tipping clearances where an action has been taken.  In Q2 there were 20 clearances where action had been taken resulting in a positive outcome. Fly-tipping investigations are ongoing for a range of cases in rural and town centre locations. Action taken is dependent on available evidence relating to the dumping (eyewitness accounts, evidence found and surveillance work where appropriate), the strength of available evidence varies as does the complexity of subsequent investigation. |



# Communities Portfolio Cllr Arif Hussain



#### 2. Communities Portfolio GREEN



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|---|----------------|--|
| Household<br>Support Fund<br>(Helping<br>Hand):<br>Percentage of<br>profiled spend<br>achieved<br>(cumulative)   |                    | 50%              | 50%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters) | None available | This indicator measures the percentage spend of the allocated Household Support Fund.  Spend at Q2 is on target at 50% and forecast to be 100% by year end.  At the end of Q2 £2,402,123 of the total funds (£4,798,381), had been disbursed.  High level expenditure summary:  • Helping Hand Direct Support – through application (£403,345)  • Holiday Vouchers - Free School Meal and Early Years Support (£1,188,295)  • Heart of Bucks Crisis Fund (£225,000)  • Partners/Community Projects (£195,483)  • Targeted Cohort – Warm referral pilot with Citizens' Advice Buckinghamshire (£50,000)  • Other (£340,000) |
| On exit from/planned closure of Independent Domestic Violence Advisor (IDVA) support, Percentage of victims/surviv ors who say that they have had at least 2 positive outcomes | Aim to<br>Maximise | 85.7%            | 80%    | 100% 90% 80% 70% 60% 40% 30% 20% 10% 0% Target (Quarters)               | None available | This indicator measures the percentage of victims/survivors who report at least two positive outcomes following exit from or closure of Independent Domestic Violence Advisor (IDVA) support, for example: increase in safety, decrease in risk, reduction / cessation of abuse.  Performance at Q2 is 85.7% against a target of 80%. This has remained similar to Q1's performance of 86.3%.  As a new indicator, more time and data will be required to identify and analyse any emerging patterns and trends.   |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|---|----------------|--|
| Amount of contributory funding secured for every £1 of council funds invested in a Community Board project. | Aim to<br>Maximise | £1.50            | £1.00  | £5.00 £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.  Performance at Q2 is £1.50 against a target of £1. Whilst this quarter's performance is 22p less than Q1, the contributory funding remains 50p above the target of £1.  Applicants continue to be encouraged to contribute up to 50% of the total project cost when working with the Boards, to deliver projects which provide good value for money and benefit to the community. |
| Number of community engagement (resilience planning) activities (cumulative)                                | Aim to<br>Maximise | 5                | 5      | 10  8  6  4  2  OLADARA  QUARTERS Target (Quarters) | None available | This indicator measures the number of community events and activities that support community resilience across Buckinghamshire. The events will be evening workshops, community meetings, development of community emergency plans (including flooding), provision of community training, development exercise programmes to support community plans.  Three community events took place in Q2 and two in Q1, therefore the cumulative Q2 position is five against a target of five.                                       |



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



### 3. Culture and Leisure portfolio AMBER



| PI  | Aim to:            | Current<br>Value | Target  | Trend Chart   | Benchmarking   | Commentary  |
|---|--------------------|------------------|---------|---|----------------|---|
| Number of visits to main cultural venues (cumulative) | Aim to<br>Maximise | 193,397          | 202,400 | 600,000 550,000 450,000 450,000 300,000 250,000 200,000 150,000 50,000 50,000  Quarters Target (Quarters) | None available | This indicator measures the number of visitors to Buckinghamshire Council owned theatres and museums. This is a cumulative measure.  At the end of Q2 attendance was at 193,397 which is lower than the target of 202,400 despite Q1 attendances being higher than target, resulting in an overall shortfall of 4% at the end of Q2. This was due to the Waterside theatre being 'dark' for a longer period during Q2 than last year because of fire alarm work conducted over the summer. There was also very different content to last year (e.g., fewer standing performances with higher capacities).  Improvement Action:  • Waterside operator has developed programming for Q3 to maximise attendance with high pantomime attendance expected. |

| PI  | Aim to:            | Current<br>Value | Target  | Trend Chart   | Benchmarking   | Commentary   |
|---|--------------------|------------------|---------|---|----------------|--|
| Number of<br>visitors to<br>Country Parks<br>(cumulative) | Aim to<br>Maximise | 654,643          | 675,865 | 2,500,000 2,250,000 1,750,000 1,500,000 1,000,000 750,000 250,000 250,000 | None available | This indicator measures the number of visitors to Buckinghamshire Council's country parks. This is a cumulative measure.  In Q2 there were 318,591 visits, bringing the cumulative figure for the year to date to 654,643 visitors, which is just below the target of 675,865. This is lower than the same period in both 2022/23 (697,255) and 2021/22 (852,758). Whilst there are fewer visitors when compared with the previous two years, current performance is 50,000 visitors above pre-pandemic levels.  The poor weather through the summer is likely to have had a bearing on visitor numbers being lower than anticipated.  Improvement Actions:  • Events are planned for Autumn half-term, Christmas and February half-term, noting that attendance levels are weather dependent (people plan their visits at short notice once the forecast is known).  • Improvements to facilities in Black Park are underway, including installation of a 'changing places' accessible toilet (expected to open in Spring 2024) and a new catering facility (expected in Summer 2024, subject to planning.) |

### 3. Culture and Leisure portfolio GREEN



| PI  | Aim to:            | Current<br>Value | Target    | Trend Chart  | Benchmarking   | Commentary  |
|---|--------------------|------------------|-----------|--|----------------|---|
| Country and<br>town park<br>satisfaction<br>ratings (Googl<br>e)            | Aim to<br>Maximise | 91.08%           | 90%       | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Target (Quarters)  | None available | This indicator measures public satisfaction ratings for our Country and Town Parks on Google.  In Q2 91.08% of the reviews were positive, which is above the target of 90%, while 2.66% of reviews were negative. Higginson Park's new play area prompted several 5* visitor ratings, while car parking charges continue to be the most noticeable reason for any lower ratings for Country Parks.  |
| Number of<br>visitors to<br>leisure<br>centres and<br>pools<br>(cumulative) | Aim to<br>Maximise | 1,927,326        | 1,750,000 | 4,000,000 3,500,000 2,500,000 1,500,000 1,000,000 500,000  Our Dan | None available | This indicator measures the number of visitors to Council owned leisure centres and pools in Buckinghamshire. This is a cumulative measure.  In Q2 attendance was 1,927,326, which is better than the target of 1,750,000. Attendance at leisure centres remain positive across all sites. Wycombe Leisure Centre underwent a gym refurbishment in August leading to slightly reduced attendance due to limitations on the gym while these works were completed; however, this had no impact on the overall numbers for Q2. This indicator is expected to reach target by the end of 2023/24. |

| PI  | Aim to:            | Current<br>Value | Target  | Trend Chart  | Benchmarking   | Commentary  |
|---|--------------------|------------------|---------|--|----------------|---|
| Number of library information enquiries (signposting and referral) (cumulative)         | Aim to<br>Maximise | 9,309            | 7,500   | 20,000 18,000 16,000 14,000 12,000 10,000 8,000 4,000 2,000 0 2,000 0 And De Land Land Land Land Land Land Land Land | None available | This indicator measures the number of information requests received 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. This is a cumulative measure.  There were 5,312 enquiries in Q2, bringing the cumulative total to 9,309 which is above the target of 7,500. There was a large increase in enquiries in Q2 compared to Q1 (3,997) due to a high level of activity in libraries relating to the Summer Reading Challenge which ran from 8 July to 16 September. Improvements were also made to the enquiries form in July, making the recording process more efficient. |
| Number of<br>downloads (e-<br>audiobooks,<br>e-magazines<br>and e-news)<br>(cumulative) | Aim to<br>Maximise | 368,565          | 350,000 | 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. This is a cumulative measure.  There were 190,218 enquiries in Q2, bringing the cumulative total to 368,565 which is above the target of 350,000. The high levels of downloads in Q2 are related to the online aspects of the Summer Reading Challenge which took place from 8 July to 16 September, which resulted in an increase in the number of digital readers between the ages of 4-11 years.  |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|--|----------------|--|
| Engagement<br>with Archives<br>through social<br>media and in-<br>person visits<br>(cumulative) | Aim to<br>Maximise | 14,004           | 12,000 | 18,200<br>16,380<br>14,560<br>12,740<br>10,920<br>9,100<br>7,280<br>5,460<br>3,640<br>1,820<br>0   | None available | This indicator measures the engagement with the Archives team through social media and in-person visits. The definition of 'engagement' through social media has been modified since last year to be more meaningful (now including active engagement rather than views). This is a cumulative measure.  Q2 performance was 14,004, which is better than the target of 12,000 and consistent with Q1 (6,278) which was also above target (6,000). Engagement remains positive with plans to increase traffic to the website through community engagement and outreach activity. Ongoing work to digitise and make more of the collection remotely available will facilitate an increase in remote enquiries. |
| Hours<br>contributed by<br>Archive<br>volunteers<br>(cumulative)                                | Aim to<br>Maximise | 1,165            | 750    | Quarters Target (Quarters)  2,000 1,800 1,600 1,400 1,200 1,000 800 600 400 200 Our Barra Arget (Quarters)  - Quarters Target (Quarters) | None available | This indicator measures the number of hours contributed by archive volunteers. This is a cumulative measure.  In Q2 performance was 1,165 hours, which is better than the target of 750. This is the result of successful volunteer recruitment campaigns and an increase in the number of volunteer projects (specifically around Paralympic heritage) which has resulted in much higher volunteer hours than anticipated.  |



# Education and Children's Services Portfolio Cllr Anita Cranmer



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



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart                                 | Benchmarking  | Commentary  |
|--|--------------------|------------------|--------|---|---|---|
| % of children's social care assessments completed in 45 working days | Aim to<br>Maximise | 67%              | 80%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% | Statistical Neighbours: 87% South East: 86% England: 84% (CIN Census 2021/22) | This indicator measures the percentage of children's social care assessments completed in each quarter within 45 working days. Assessments are conducted to determine which services to provide to children and their families.  During Q2 (July-September 2023) 67% of assessments were completed within 45 days. This is below target and below latest available published benchmarks. The Q2 position is an improvement compared to Q1 (62%).  Section 17 assessments are the lowest form of statutory intervention. Whilst performance has improved compared to Q1, challenges in recruiting to social work posts coupled with the need to prioritise risk has hindered our ability to make further improvements in the timeliness of assessments. Recent positive recruitment at the end of Q2 is likely to result in performance improvement across the next quarter.  Improvement Actions:  • Continue to provide strong management oversight to ensure our most vulnerable children receive the right level of support and teams always respond to ensure the immediate safety of children.  • Managers to continue to monitor those assessments out of timescale to ensure children do not suffer significant delays.  • The Head of Service will continue to work with the management group to ensure that managers are tracking assessments on a weekly basis.  • Performance improvement will depend on staff stability. Retention of staff and recruitment remains the highest priority. |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking  | Commentary   |
|---|--------------------|------------------|--------|---|---|--|
| % of children with Initial Child Protection Conferences completed within 15 working days of the strategy discussion | Aim to<br>Maximise | 61%              | 82%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% Quarters Target (Quarters) | Statistical Neighbours: 82% South East: 79% England: 79% (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 Q2 (July – September 2023) 123 children were subject to an ICPC, of which 61% (75 children) were completed within time. This is below the Q1 position (66%), but monthly performance is improving with 73% of ICPCs in time in September compared to 63% in August.  Improved performance during the later part of the quarter is a direct result of management intervention. This has included addressing administrative delays and ensuring requests for conference are received in a timely way. The actions taken to date will continue and senior managers will monitor performance on a weekly basis. Quality assurance activity demonstrates that any delay in ICPCs have not left children exposed to significant harm.  This indicator is subject to senior management intervention until improvement has been secured.  Improvement Actions:  In addition to the remedial action taken to date, the service will prioritise the monitoring of these actions and ensure continued impact.  ICPC timeliness continues to be reviewed both weekly by the Conference Service Manager and there is now monthly analysis provided to the relevant Head of Service to highlight which teams and managers are less compliant. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| % of Children<br>in Need seen<br>within 4<br>weeks | Aim to<br>Maximise | 81%              | 90%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0\text{20} \text{20} \tex | 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 Q2 (September 2023) 81% of children were seen within 4 weeks.  The challenges in recruiting staff to frontline teams has continued throughout this reporting period with a number of vacant posts in each team. The impact of this on the remaining staff is that they have higher caseloads than we would like. The focus has been on ensuring visits are completed to children on child protection plans and those at most risk of harm. Recent positive recruitment is likely to result in performance improvement across the next quarter.  Managers are aware of those children not seen within statutory timescale and record an oversight of the reason and actions taken to mitigate against the risk on the child's case file.  Improvement Actions:  • Key performance data is reviewed weekly at managers meetings ensuring oversight of the children at most risk of harm.  • Performance improvement will depend on staff stability. Retention of staff and recruitment remains the highest priority. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart                              | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|--|--|
| Percentage of new Education, Health and Care plans issued within 20 weeks (excluding exceptions) | Aim to<br>Maximise | 44.5%            | 75%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% | Buckinghamshire:<br>67.1%<br>South East:<br>45.8%<br>England: 49.1%<br>(2022 calendar<br>year) | This indicator measures the percentage of Education, Health, and Care Plans (EHCPs) that are issued to families within 20 weeks, excluding exceptions.  During Q2 (July - September 2023) 44.5% of EHCPs were issued within 20 weeks. This is below target and below latest available benchmarks for the 2022 calendar year when 67% of Buckinghamshire EHCPs were issued within 20 weeks.  The drop in performance is due to the sharp increase in requests for EHC Needs Assessments and vacancies within our Educational Psychology team. From January to July 2023, there was an increase of 193 assessments being started (+39%) compared with the same period in 2022. Educational Psychologist advice must be sought as part of any assessment, we currently have 5 vacancies in a team of 16.  Improvement Actions:  Continuing recruitment of both permanent and associate Educational Psychologists.  100 assessments being allocated through securing a specialist agency to solely support with assessments.  Focused work on Inclusion and Early Intervention to support demand management. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| % of initial Family Support Plans completed within 31 working days | Aim to<br>Maximise | 76%              | 85%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  ATRIPLE AND | None available | This indicator measures the percentage of Initial Plans completed within 31 working days of the start of Family Support Service (FSS) involvement, which provides one to one support for families and individuals (Level 3 support) via home visiting, school visits and Team Around the Family network meetings.  During Q2 (July - September 2023) 76% of Initial Plans had been completed within 31 working days of the start of Family Support Service involvement (174 of 228 Initial Plans). This is 2 percentage points less than Q1.  Some recent changes to working practices in order to improve the quality of the work has impacted on timeliness of assessments in Q2, leading to the decrease in performance. This was coupled with a reduced management structure for a period, as well as staff vacancies against high demand.  Improvement Actions:  Management structure capacity in the Family Support Service has been enhanced by the recent return of key staff.  Management oversight of casework is being strengthened.  Weekly monitoring and review by the Service Director is being implemented to monitor performance across the service.  Staff are being recruited to fill vacant posts. |

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



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| % of children looked after visited within timescales | Aim to<br>Maximise | 88%              | 90%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  At 20th 20th 20th 20th 20th 20th 20th 20t | None available | This indicator measures the percentage of looked after children who were visited in person within timescales.  The frequency of visits is determined by the child's needs and care plan, in accordance with statutory requirements. At the end of Q2 (September 2023) 88% of children had been visited within timescales, a slight increase from Q1 (87%).  Looked After Children statutory visits are an essential mechanism to ensure the social workers have a good insight into the child's lived experience of home life, it is just one opportunity to talk to the child and check their emotional and physical wellbeing. The children in care team have gone through a period of instability, with several vacancies and performance concerns about some agency staff resulting in a delay to recording. The increased visiting requirement of children placed in unregistered placements (currently 12 children) also creates a pressure for staff.  Improvement Actions:  Performance will be monitored through monthly management meetings with each responsible team.  The service is reviewing placement stability and availability of appropriate placements to address the challenges in this area. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|--|--|---|
| % of pupils attending schools rated good and outstanding by Ofsted | Aim to<br>Maximise | 88.5%            | 89%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Target (Quarters) | State-funded schools in the South East region: 90.7% State-funded schools in England: 88.0% (31/03/2023) | This indicator measures the percentage of Buckinghamshire pupils who are attending schools judged by Ofsted to be good or outstanding.  At the end of Q2 (September 2023) 88.5% of Buckinghamshire pupils were attending a good or outstanding school, which is above the national average but slightly below target (0.5 percentage points).  While the performance of this indicator is only slightly below target, the service continues to monitor school progress closely. The Council responds robustly in cases where we know that the Headteacher or Chair of Governors is not addressing school improvement effectively, especially in schools where Ofsted have indicated a return to the school within 12 – 18 months for an indepth inspection. This will, if required, lead to the directorate using statutory powers as identified in Department for Education's 'Schools Causing Concern' guidance.  Improvement Actions:  School Improvement Advisor (SIA) capacity has recently been increased from 2 to 4.5 officers, and further capacity (0.5FTE) has been funded from reserves until July 2024.  The number of Headline Visits (HLV) has been increased to ensure targeted support can be put in place faster. For 2023-2024 all schools will receive at least one HLV.  The frequency of RAG (red, amber, green) rating review assessments has moved from an annual to a termly basis to ensure that schools are offered support as soon as it is identified that they are struggling.  Sustained support to schools including the introduction of Friday Forums to maximise opportunities to update school leaders and share effective practice. |

| PI A | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary   |
|------|--------------------|------------------|--------|---|----------------|--|
|      | Aim to<br>Maximise | 72%              | 75%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Analta | None available | This indicator measures the proportion of children and young people who have had an annual review of their Education, Health and Care Plan (EHCP) within the last 12 months. The Annual Review of an 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 Q2 (September 2023) 72% 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%.  This had been recognised as an area where further resource is required and although this was agreed for the financial year 2023/24, the first additional staff did not join until July 2023 with some new colleagues still to start. There have also been other vacancies within the Education, Health and Care Coordinator Teams.  Improvement Actions:  • Continue recruitment and induction of new staff. • Re-design work to simplify processes. |

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



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|--|--|--|
| % of 19-21 year olds who have left care that are in education, employment or training | Aim to<br>Maximise | 65%              | 65%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  QL ROLLI CARLLI CARL | Statistical Neighbours: 57% South East: 57% England: 55% (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).  At the end of Q2 (September 2023) 65% of care leavers aged 19-21 were in education, employment of training. This is in line with the target and also above latest published national and regional benchmarks.  This is a reduction since Q4 of 6 percentage points and 65% represents 106/164 of our care leavers in employment, education or training. 12% of care leavers are in higher education, 15% in other full-time education, 21% in full-time training or employment, 6% in other part-time education and 11% in part-time training or employment.  There has been an increase in the number of Unaccompanied Asylum Seeking Children (UASC), which affects the overall performance of this indicator as they are unable to work due to implications on their asylum claim. Twelve of the not in education, employment or training (NEET) care leavers are UASC. A further 17 are NEET due to disability or illness, and 12 as they are parents or pregnant.  To address the number of care leavers NEET or unsure of their options a dedicated Personal Advisor (PA) has been assigned to support with all opportunities. The team continue to explore employment and training opportunities with employers and will research what other local authorities do to embed best practice. A dedicated UASC team has been created and will explore options supporting their access to EET. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking  | Commentary   |
|--|--------------------|------------------|--------|---|---|--|
| % of children subject to a Child Protection Plan seen within 4 weeks | Aim to<br>Maximise | 97%              | 95%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)     | None available  | 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 Q2 (September 2023) 97% of children subject to a CP plan were seen within 4 weeks.  Despite the challenges in recruiting staff to frontline teams continuing throughout this reporting period, measures are in place to ensure the children and young people at the most significant risk of harm are receiving necessary support from the service.  Key performance data is reviewed weekly at managers meetings ensuring oversight of the children at risk of significant harm. Managers are aware of those children not seen within statutory timescales and record an oversight of the reason and actions taken to mitigate against the risk on the child's case file.                             |
| % of re-<br>referrals<br>within 12<br>months                         | Aim to<br>Minimise | 21%              | 28%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  — Quarters — Target (Quarters) | Statistical Neighbours: 20% South East: 24% England: 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 a high of 43% in Q3 2022 (October to December 2022). For Q2 (July to September 2023) the percentage of rereferrals has decreased to 21%, and is now below (better than) target.  The improvement in performance compared with 2022/23 and Q1 2023/24 is due to the review of processes and pathways within the MASH to ensure that only children where threshold is met for children's social care are accepted as a referral. For those children where threshold is not met alternatives are explored, such as early help. |

#### 4. Education and Childrens Services Portfolio NO RAG



| PI  | Aim To             | Current<br>Value | Trend Chart  |   | Commentary  |
|---|--------------------|------------------|--|---|---|
| % of eligible two-<br>year-olds<br>registered to<br>receive funded<br>early education<br>entitlements | Aim to<br>Maximise |                  | 100% -<br>90% -<br>80% -<br>70% -<br>60% -<br>50% -<br>40% -<br>20% -<br>10% -<br>0% - | December 2022  Months → Target (Months) | Data for this indicator is reported termly The next update, for the summer 2023 term, will be available from the Department for Education in November 2023. |



# Health and Wellbeing Portfolio Cllr Angela Macpherson



### 6. Health and Wellbeing Portfolio RED



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking                            | Commentary   |
|---|--------------------|------------------|--------|--|---|--|
| Number of<br>younger<br>people (aged<br>18-64)<br>admitted to<br>permanent<br>residential or<br>nursing care<br>homes per<br>head of<br>100,000<br>population<br>(cumulative) | Aim to<br>Minimise | 9.2              | 7.1    | 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 0 Quarters Target (Quarters) | South East: 7.1<br>(2021/22 -<br>Q1&Q2) | 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.  Between 1 April 2023 and 30 September 2023, 30 younger adults (9.2 per 100,000 population) were permanently admitted to care homes. This is 7 people above the target of 23 people (7.1 per 100,000 population) at the end of Q2 which is set at the 2021/22 South East benchmark level.  Improvement Actions:  • Work with Supported Living to help find accommodation solutions for some younger adults.  • Work with commissioners to look into our Supported Living to see if they can support us in acquiring placements.  • A workshop is planned to explore gaps in the care market and will include this client group.  • Identify young people who need transition support earlier so that we can assess before they are 18. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|---|----------------|---|
| % of young people whose Adult Social Care Assessment was completed before they turned 18 years old (cumulative). | Aim to<br>Maximise | 65%              | 80%    | 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 and 30 September 2023, 65% (11 out of 17) of young people that moved into adult services, were assessed by the 18-25 service before they turned 18. This is lower than Buckinghamshire's position for the same period last year (85%) and the target of 80% (15 out of 17). Out of the six young people that were not assessed in time; one was due to a delay in receiving the right information from the education provider, one was delayed due to lack of engagement from the family, and four received a late referral into Adult Social Care.  Improvement Action:  Regular forums have been set up between Education, Health, and Adult Social Care to ensure we are identifying young people earlier. We are actively working on maintaining a robust tracker to plan and prepare for timely Care Act Assessments to take place. |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking  | Commentary  |
|--|--------------------|------------------|--------|---|---|---|
| % of successful drug treatment completions of those in treatment | Aim to<br>Maximise | 14.2%            | 15.2%  | 17% 16% 14% 13% 12% 10% 9% 8% 7% 6% 5% 4% 3% 2% 1% 0%  Quarters Target (Quarters) | South East: 16.0%<br>England: 13.8%<br>(Q1 2023/24) | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the percentage of adults who have successfully completed drug treatment of all those receiving treatment. It covers all drugs.  Q1 performance is at 14.2% (135 out of 952 clients) and therefore below target (15.2%). It is below the South East (16.0%) but above the national (13.8%) average. The percentage completing treatment successfully in Buckinghamshire in Q1 2023/24 has fallen compared to the previous Q4 2022/23 performance of 14.5% (134 out of 926 clients) because, while the number of patients completing treatment is relatively flat, the service has had a larger cohort of people accessing drug treatment. Increasing the number of people accessing drug treatment is a key priority for the service because it is a core ambition of the national drugs strategy and a significant amount of additional governmental funding for Buckinghamshire is contingent upon increased numbers receiving drugs treatment.  Improvement Action:  • The service has removed the mandatory requirement for clients to attend the 'Empower Workshop' prior to starting treatment to reduce early drop outs from treatment and facilitate more people remaining in treatment long enough to achieve successful completion. |

| PI  | Aim to:  | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|---|----------|------------------|--------|---|----------------|---|
| Percentage of service users with needs related to Sexually Transmitted Infections (STIs) seen or assessed within 2 working days of first contacting the service | Maximise | 73.4%            | 80%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Target (Quarters) | None available | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the percentage of service users with needs related to sexual transmitted infections (STIs) who are seen or assessed by the Buckinghamshire Sexual Health and Wellbeing clinical sexual health service with 2 working days of first contacting the service with 2 working days of first contacting the service were seen or assessed within 48 hours. The service has reported that there has been an error in their 'Lillie' clinical system which has affected the accuracy of this data for Q1. The service has reported that in July performance was at 80% and 83% in August, which if sustained in September will be above target in Q2.  This is a clinical standard set by the British Association for Sexual Health and HIV which needs to be considered alongside the service's "did not attend" (DNA) rate, since some service users may prefer for their own convenience to book an appointment which is more than 48 hours away. Currently the DNA rate is approximately 2% which shows good performance.  Improvement Action:  • Actively monitor the data, alongside the did not attend rate, to ensure that the Council remains confident that local residents are able to receive timely support from the sexual health service. |

### **6. Health and Wellbeing Portfolio AMBER**



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking              | Commentary  |
|---|--------------------|------------------|--------|---|---------------------------|---|
| % of safeguarding enquiries where personal outcomes were fully or partially achieved (where expressed) (cumulative) | Aim to<br>Maximise | 94%              | 97%    | 100% 90% 80% 70% 60% 50% 40% 10% 0%  Quarters Target (Quarters) | South East: 97% (2021/22) | This indicator measures the percentage of safeguarding enquiries which had outcomes that were either fully or partially achieved when the safeguarding enquiry closed. It is good to be high.  From 1 April 2023 to 30 September 2023, 500 safeguarding enquiries concluded where desired outcomes were expressed. In 473 of these enquiries (94%) outcomes were fully or partially achieved. Performance is below the target of 97%.  Improvement Actions:  Continue to monitor outcomes through monthly audits of practice and subsequent reviewing of audit reports with Quality, Standards & Performance colleagues  Making Safeguarding Personal improvement plan has been implemented to focus on areas such as this (i.e. highlighting the 6 principles which aim to ensure we embed a personalised approach)  Reviewing the safeguarding audit tool to ensure it captures the desired outcomes  Safeguarding training remains mandatory for all staff |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart                              | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|--|----------------|---|
| Number of<br>Carers<br>Assessments<br>(cumulative) | Aim to<br>Maximise | 295              | 309    | 600 400 200 0 Quarters Target (Quarters) | None available | This indicator measures the number of carers assessments undertaken in the year. It is good to be high.  Between 1 April and 30 September, 295 carers assessments have been completed. This is 14 below the target of 309 which is set as 5% increase on 2022/23 performance.  Improvement Actions:  Invite carers to Community Cafes for face-to-face assessments, and give them space to talk without the person they care for being there.  Attend the Community Engagement Hub at Buckinghamshire New University in Aylesbury initially where Carers Bucks will be holding their support groups. Two staff will be able to offer practical support to carers and also to offer a Carers Assessment there and then.  Workers to ensure that where they identify a carer when they assess new people coming into the service, they offer a Carers Assessment even if they are signposting people so that we are aware of their caring responsibilities and to offer advice and information. |

### 6. Health and Wellbeing Portfolio GREEN



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking                           | Commentary  |
|--|--------------------|------------------|--------|--|--|---|
| % of service users due an annual review that receive their review (cumulative)   | Aim to<br>Maximise | 40.4%            | 38.5%  | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters) | South East: 26.0%<br>(2021/22 Q1&Q2)   | This indicator measures the percentage of Adult Social Care service users due an annual review in year who receive their review and is good to be high.  From 1 April 2023 to 30 September 2023, 40.4% of service users annual reviews were completed (1,795 people), which equates to 85 people above the stretching graduated target of 38.5% (1,710 reviews).  Performance is currently projected to exceed the target and South East benchmark by the end of March 2024.                          |
| Number of older people (65+) admitted to permanent residential or nursing care homes per 100,000 population (cumulative) | Aim to<br>Minimise | 217.9            | 262    | 550 495 440 385 330 275 220 165 110 55 0 Quarters Target (Quarters)    | South East: 262.2<br>(2021/22 - Q1&Q2) | 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.  Between 1 April 2023 and 30th September 2023, 226 older adults (217.9 per 100,000 population) were permanently admitted to care homes. This is 45 people below (good to be low) the Q2 target of 271 people (262 per 100,000 population). |

| PI  | Aim to:            | Current<br>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 | Aim to<br>Maximise | 78.7%            | 76.2%  | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters)          | South East: 76.2% (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 September 2023, there were 1,085 younger adults with a learning disability accessing Adult Social Care Services, of which 854 (78.7%) were living in their own home or with friends/family. This is above the target 76.2% (827 people), which is set at the 2021/22 South East benchmark. |
| % people that live independently after receiving reablement   | Maximise           | 84.1%            | 78%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Quarters Target (Quarters) | South East: 78.2% (2021/22) | This indicator measures the percentage of people in receipt of Home Independence Team services (reablement) 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 2023 to 30 September 2023, 84.1% of people accessing the service were successfully reabled (206 out of 245 clients). This is above the target of 78%, and above the overall 2022/23 figure of 72%.  |

| PI  | Aim to:         | Current<br>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 | 87%              | 85%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters) | CIPFA peers: 73.8%<br>South East: 77.1%<br>England: 79.3%<br>(Q4 2021/22) | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the percentage of New Birth Visits (NBV) undertaken within 14 days.  Performance in Q1 2023/24 (87%) is better than the target (85%). This equates to 1,223 visits undertaken within 14 days out of a possible 1,406. This is a slight increase from the previous quarter (84%), and it remains an improvement in trend over the previous year. The service continues to strive to achieve higher levels of delivery by day 14, and is now performing above the England average.  Data available to more locally understand delivery shows that in the High Wycombe area 90% of visits were conducted by day 14 and in Aylesbury, 83%. This is an improvement in both focus areas over the last quarter.  The service has delivered an additional 99 visits within 14 days of birth than the previous quarter. During Q1 the service reported higher levels of Band 6 Health Visitors in post than at any point in the last 3 years, following successful recruitment of newly qualified Health Visitors who have trained in the area. This has supported improvements in the compliance.  Fifteen babies in Q1 did not have a New Birth Visit recorded at any time. Of those children who did not receive a New Birth Visit most are due to the family declining the contact, even after advice of its importance, or the child transferring out of the area.  There is a robust process in place which involves writing to the GP to notify them that the Health Visitor service has been declined. If there are any safeguarding concerns, then a social care referral is completed. |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking  | Commentary  |
|---|--------------------|------------------|--------|--|---|---|
| % of successful alcohol treatment completions of those in treatment               | Aim to<br>Maximise | 37.1%            | 36.5%  | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters) | South East: 35.6%<br>England: 35.6%<br>(Q1 2023/24) | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the percentage of adults who have successfully completed alcohol treatment of all those receiving treatment.  Performance for Q1 is at 37.1% (216 out of 582 clients). This is above the target of 36.5% and both the South East (35.6%) and national (35.6%) averages. Compared with last year, the national average has gone down by 1 percentage point and the South East average has remained the same.  The service has improved performance on this indicator by implementing strategies to support retention in treatment. More clients have been supported to access inpatient detoxification, in line with national ambitions, which has contributed to improved successful alcohol completions.  |
| % of those who have set a quit smoking date who have successfully quit at 4 weeks | Aim to<br>Maximise | 57%              | 50%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters) | South East: 54.3%<br>England: 54.8%<br>(2022/23)    | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the proportion of people who have received support from the healthy lifestyle service to set a four-week quit date and went on to successfully quit smoking at 4 weeks.  In Q1, 23 people set a quit date and had the opportunity to achieve their four-week quit date. Of those, 13 smokers successfully quit smoking at their 4 week quit date (57%). The indicator is 7 percentage points above the target of 50%. The proportion of residents living in deprivation quintiles 4 & 5 (our most deprived areas) who successfully quit by their four-week set date is greater at 62% (8 out of 13 clients), evidencing that the service is confidently supporting higher risk communities.  This is the first quarter of reporting for the new Be Healthy Bucks service delivered by Maximus UK. Please note the service was only running for 12 weeks as of the end of Q1. This means not all residents who set a quit date had the opportunity to reach that date during Q1.  All historically reported data for this indicator relates to the former health lifestyle service (Live Well Stay Well). |



## Homelessness and Regulatory Services Portfolio Cllr Mark Winn





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



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|---|----------------|---|
| Number of<br>businesses<br>registered as<br>primary<br>authorities -<br>provision of<br>advice to<br>large<br>businesses | Aim to<br>Maximise | 160              | 163    | 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.  Performance in Q2 was 160, which is slightly below the target of 163. The economic environment is forcing businesses to re-evaluate finances evidenced by an increase in enterprises merging or leaving primary authorities causing our partnership numbers to drop at the start of the year. This has been accompanied by a lack of capacity within our Single Point of Contact network for Environmental Health and Fire. Despite this, partnership numbers are gradually increasing, and we expect to reach the target by the end of the year.  Improvement Action:  Seek additional new Partnerships with appropriate businesses, including by working closely with the Office for Product Safety and Standards so they are aware of our areas of expertise, as they suggest local authorities that may be suitable to partner with businesses who go to them seeking advice. |

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



| PI   | Aim to:            | Current<br>Value | Target      | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|-------------|--|----------------|--|
| Number of<br>applicants<br>with/expecting<br>children who<br>have been in<br>non-self-<br>contained<br>B&B accomm<br>odation for<br>longer than 6<br>weeks | Aim to<br>Minimise | 0                | 0           | The state of the s | None available | This indicator measures (snapshot at the end of the quarter) the number of applicants for housing with/expecting children who have been in non-self-contained Bed & Breakfast accommodation for longer than 6 weeks.  At the end of both Q2 and Q1 there were no applicants with/expecting children who have been in non-self-contained B&B accommodation for longer than 6 weeks which is in line with the target of zero applicants. The service will continue to monitor this area closely. |
| Financial impact on residents as a result of scams intervention (direct & future savings) (cumulative)   | Aim to<br>Maximise | £483,321.00      | £340,000.00 | £1,000,000.00 £900,000.00 £800,000.00 £700,000.00 £500,000.00 £300,000.00 £200,000.00 £100,000.00 £0.00  ARTIPLE REPORT OF TAIR OF TAI | None available | This indicator measures the financial impact on residents as a result of scams and fraud interventions (direct and future savings). It is a cumulative measure.  Performance in Q2 (forecast) is £483,321, which is better than the target of £340,000. 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.                                |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|--|----------------|---|
| Percentage of customers rating the registration service as good or excellent   | Aim to<br>Maximise | 100%             | 95%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Oxed to the control of | None available | This indicator measures the number of customers rating the service as Excellent or Good.  In Q2 100% of customers rated the service as Good or Excellent. 74 customers responded and all rated the service as excellent. Performance in Q1 was also 100% with 56 responses of which 53 were rated as excellent and 3 as good.   |
| Average<br>number of<br>days to issue<br>taxi vehicle<br>licence and<br>plate from<br>valid<br>application<br>received | Aim to<br>Minimise | 5.9              | 10     | Quarters Target (Quarters)  11 10 9 8 7 6 5 4 3 2 1 0 Quarters Target (Quarters)  And  | 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.  Performance in Q2 was 5.9 working days which is below the target of 10 working days. This was a slight increase from Q1 which was 5.5 working days. Q2 saw a 30% uplift in vehicle applications into the service compared to Q1 (August and September are peak months for vehicle applications in readiness for the start of the school year and home to school contracts), resulting in this increased processing time. Despite this, the service still remain 4 days under the target service-level agreement (SLA) period of 10 days. |

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



| PI  | Aim To  | Current<br>Value | Trend Chart   | Commentary  |
|---|---------|------------------|---|---|
| Homelessness cases closed because homelessness has been prevented | Monitor | 686              | 1,000 900 800 700 600 500 400 300 200 100 0  QARITIR ARRIVA QARITIR QARITIR QARITIR ARRIVA QARITIR ARRIVA | This indicator measures the number of homelessness cases that have been closed because homelessness has been prevented.  In Q2 686 cases were closed because homelessness had been prevented, this is a decrease of 6.7% from Q1 (735). This is still a large increase from 2022/23 (Q4 436; Q3 435; Q2 249; Q1 266). Higher numbers of preventions are linked to the higher volumes of cases presenting to the service e.g., as a result of domestic violence, friends and family evictions, and private sector landlord evictions. The ability for the service to assist is dependent on how early an applicant presents i.e., the earlier you present, the higher their chances of preventing homelessness.  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. |
| Total homelessness approaches into service                        | Monitor | 1,424            | Quarters  1,900 1,710 1,520 1,330 1,140 950 760 570 380 190 0  Quarters  Quarters  Quarters               | This indicator measures the number of approaches to the service for people presenting with a homeless or risk of homeless situation.  At the end of 2022/23, there were 1,424 approaches. There has been a progressive increase in the number of approaches since the pandemic. This is linked to the removal of measures taken by Government to manage the impact of the pandemic. For example, landlords were not allowed to evict tenants during the pandemic. Issues with cost-of-living are also contributing to this increase.  |

| PI   | Aim To  | Current<br>Value | Trend Chart  | Commentary  |
|--|---------|------------------|--|---|
| Number of<br>unrated premises<br>which are<br>awaiting an<br>inspection and<br>are trading | Monitor | 261              | 810 720 630 540 450 360 270 180 90 0 120222222222222222222222222222222 | This indicator measures the number of unrated premises which are awaiting inspection and are trading.  At the end of 2022/23, there were 228 known premises trading whilst still awaiting inspections. At the end of Q1, there were 389 new businesses which hadn't been inspected, 96 of which were triaged as potentially high risk but by the end of Q2, this has decreased to 261, 82 of which were triaged as potentially high risk. In the same reporting periods, 242 new food business registrations were received in Q1 and 152 in Q2.  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. Increased resource has been brought in temporarily to help with this demand. |



## Planning and Regeneration Portfolio Cllr Peter Strachan





## 9. Planning and Regeneration Portfolio RED



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|---|----------------|---|
| Percentage of Planning Enforcement Notice Appeals Upheld | Aim to<br>Minimise | 21%              | 20%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters) | None available | This indicator measures the percentage of planning enforcement notice appeals upheld by the planning inspectorate.  The Q2 outturn is 21% against a target of 20%. In Q2, 23 appeal decisions were made, of these only 5 appeals were upheld. One of these decisions followed retrospective refusal of planning permission that was made by Members at Planning Committee. The Q1 outturn shows 40% of appeals were upheld, this equates to 2 of the 5 appeal decisions received being found against the decision of the Council.  At Q1, the target was incorrectly displayed as 80%. This has been rectified and the correct figure (20%) is now displayed.  Improvement Action:  Appeal decisions are reviewed and discussed by the team so learning points can be taken away for use in future cases to ensure continual learning and development within the service. |

### 9. Planning and Regeneration Portfolio GREEN



| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|---|----------------|---|
| Percentage of major planning applications determined in 13 weeks, or with agreed extension of time | Aim to<br>Maximise | 95%              | 80%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%                         | None available | This indicator measures the percentage of "major" planning approvals determined in 13 weeks, or with agreed extension of time.  Q2 performance was 95% which is above the target of 80% and the highest performance yet recorded. Q1 performance (88%) was also strong and above the target of 80%. This demonstrates strong performance considering the complexity of the larger major applications. |
| Percentage of minor planning approvals determined in 8 weeks, or with agreed extension of time     | Aim to<br>Maximise | 86%              | 75%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% Quarters Target (Quarters) | None available | This indicator measures the percentage of "minor" planning applications determined within 8 weeks, or within agreed extension of time.  Q2 performance was 86% which is above the 75% target and consistent with Q1 performance which was also 86%.   |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|--|--------------------|------------------|--------|---|----------------|---|
| Percentage of other applications determined in 8 weeks, or with agreed extension of time | Aim to<br>Maximise | 94%              | 80%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters — Target (Quarters) | None available | This indicator measures the percentage of "other" planning applications determined within 8 weeks, or within agreed extension of time.  Q2 performance was 94% which is better than the target of 80% and above Q1 performance (93%). Performance for both quarters is well above the target of 80%, showing that the speed in determination of "other" planning applications has remained consistently high. |
| Percentage of building control applications checked within 21 days                       | Aim to<br>Maximise | 90%              | 90%    | 100% 90% 80% 70% 60% 50% 40% 10% 0% 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).  Q2 performance was 90% against a target of 90% and slightly lower than Q1 (91%) performance.  |

| PI   | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|--------------------|------------------|--------|--|----------------|--|
| Number of homes built against housing requirements | Aim to<br>Maximise | 3,718            | 2,806  | 4,800 4,320 3,840 3,360 2,880 2,400 1,920 1,440 960 480 0 Years Target (Years) | None available | This is an annual indicator reported two quarters in arrears. Current performance is for 2022/23.  This indicator measures the number of homes built in Buckinghamshire against the housing requirements set out in the up-to-date local plans which cover the North and Central, and West planning areas and the government's statistical formula for calculating the number of homes needed in the East and South planning areas.  The number of homes built against housing requirements in 2022/23 was 3,718 against a target of 2,806. This represents a 42% increase on the number of homes completed during the previous financial year (2,616).  Local authorities do not have direct influence over new house building rates. A high number of planning approvals doesn't always result in housing schemes being built quickly. External factors such as the ability of home buyers to obtain mortgages, economic recession and labour supply shortages are significant determinants. |

## 9. Planning and Regeneration Portfolio NO RAG



| PI  | Aim To  | Current<br>Value | Trend Chart  | Commentary   |
|---|---------|------------------|--|--|
| Number of valid planning appeals received | Monitor | 58               | 130 120 110 100 90 80 70 60 50 40 30 20 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | This indicator measures the number of valid planning appeals received. Applicants have the right to appeal if they disagree with the planning decision reached.  In Q2 we received 58 appeals, which is higher than Q1 (56). Although we are still receiving a high number of appeals month-on-month this is less that some of the peaks of workload experienced last year. The method of appeal has a big impact on the resources required to deal with them. Public Inquiries and Hearings are very resource intensive and impact our ability to deliver other services.  The number of appeals submitted to the Council is entirely dependent on the Planning Inspectorate (PINs). They are dealing with a national appeals backlog resulting in high volumes being submitted to the Council in peaks of workload.  |
| Town centre occupancy rate                | Monitor | 91.9%            | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%                                | This indicator measures the percentage of 'door on the high street' premises that are occupied across key towns in Buckinghamshire (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).  The pre-Covid baseline for these towns was 93.2% (2,126 premises), falling to 89.4% (2,039 premises) during the peak of Covid. The latest position at Q2 is 91.9% (2,094 premises). Of the current 184 empty shop units, 32 are subject to planning / being fitted out.  Over the first six months of this year we have seen 87 business closures (16 chain and 71 independents and 86 new openings (20 chains and 66 independents). Wendover currently has the highest occupancy rate of 98.7% with just one vacant premises. |

| PI                   | Aim To  | Current<br>Value | Trend Chart          | Commentary  |
|----------------------|---------|------------------|----------------------|---|
| Town Centre footfall | Monitor | 6,453,978        | 8,000,000            | This indicator measures footfall across the three 'Opportunity Bucks' (and regeneration focus) towns Aylesbury, Chesham and High Wycombe. This data is provided from Town &   |
|                      |         |                  | 6,000,000            | Place Artificial Intelligence (AI). Footfall is derived and modelled using anonymised mobile device data.   |
|                      |         |                  | 4,000,000            | The Q2 position is a forecast of 6,453,978 (based on actual 3,556,858 for July and August and modelled data for September due to a lag for verified data). In Q1 footfall in all three towns was 1% higher than the same period last year.  |
|                      |         |                  | 2,000,000            | Looking at the cumulative position to date we recorded 13,104,175 visits which is 3.29% down on the same period last year (413k fewer counts). This is likely a reflection of the very wet summer months. Cumulative footfall for the three |
|                      |         |                  | QA BERLES QL RECEIVA | towns is -13.7% below the pre-pandemic level in 2019 (15,176,269).  |
|                      |         |                  | -●- Quarters         |   |



# Transport Portfolio Cllr Steve Broadbent



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



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|---|----------------|--|
|   | Aim to<br>Maximise | 89%              | 95%    | 100% 90% 80% 70% 60% 50% 40% 10% 0%  Quarters Target (Quarters) | None available | This indicator measures the percentage of category 1 (2 working days) and 2H (high priority) (5 working days) defects repaired within the service level agreement (SLA).  Performance in Q2 is 89% which is lower (worse) than the target of 95% but is an improvement from Q1 (70%). There was a 300% increase in the number of reported defects towards the end of last year due to a significant period of sub-zero temperatures last December followed by repeated cycles of wet and freezing conditions into January. So whilst the target has not yet been achieved for Q2, the amount of work carried out by Alliance providers has meant a considerable improvement to this indicator since Q1 and we would expect to reach the target by the end of the year weather conditions permitting.  Improvement Action:  Progress against this indicator is being monitored and reported to the Cabinet Member weekly to ensure continuous improvement is sustained. |
| Percentage of reported Rights of Way issues dealt with in target time | Aim to<br>Maximise | 54%              | 70%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Target (Quarters)   | None available | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the percentage of Rights of Way issues dealt with within agreed timescales as published in the Rights of Way Improvement Plan.  Performance in Q1 was 54% which is lower (worse) than the target of 70%. Performance has been impacted by staff vacancies, a high workload and backlog reduce the number of issues that can be resolved in target time.  Improvement Action:  Recruitment drive, including the recruitment of two new starters at the beginning of September.   |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|---|--------------------|------------------|--------|---|----------------|---|
| Number of uncommitted s106 contributions that must be used within two years | Aim to<br>Minimise | 19               | 0      | 40 35 30 25 20 15 10 5 0 Quarters Target (Quarters) | None available | This is a new indicator, first available data is for Q2.  This indicator records the number of uncommitted s106 contributions that must be used within two years.  Performance in Q2 is 19 contributions which is higher (worse) than the target of 0, based on those contributions which have an expiry date between 1st April 2023 and 31st March 2025, and which are uncommitted as at the end of September 2023 (Q2). Of the 19 contributions uncommitted, 7 contributions are being actively progressed and are close to commitment or spend, with the remainder being addressed as a priority.  At the beginning of this year the Council undertook a review of all the s106 contributions that it holds. This identified contributions deemed to be at risk as they were unspent and approaching the expiry date set out in the relevant s106 agreements (this situation arose due to multiple factors pre and post unitary).  Improvement Actions:  • Following the review, the use of contributions has been prioritised so that contributions most at risk are able to be used in accordance with the relevant s106 agreements.  • Introduce a new decision making and monitoring process for 2024 to ensure contributions are committed at an earlier stage. |

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



| PI  | Aim to: | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary  |
|---|---------|------------------|--------|--|----------------|---|
| Percentage of<br>streetlights in<br>light |         | 87%              | 90%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters) | None available | This indicator measures the percentage of streetlight columns that are working (in light) as well as illuminated signs and bollards.  Q2 performance is 87% which is lower (worse) than the 90% target and a decrease from Q1 (90%). This is an interim result based on the latest survey information available. At the end of October, a full night scouting survey will be completed which will provide an up-to-date result across the whole network.  Improvement Action:  Night scouting reports will be used to produce a targeted programme of works to address all defects and bring this indicator back within target. |

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



| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|---|----------------|--|
| Percentage of gullies cleaned against the cyclical gully programme (cumulative) | Aim to<br>Maximise | 58%              | 47%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters — Target (Quarters) | None available | This indicator measures the percentage of gullies cleaned against the cyclical programme (to clean all gullies within 1 year). A gully is a drainage point typically covered by a metal grate at the side of the road. This target has been pro-rata'd equally across each quarter to help show progress, although delivery may not actually be evenly distributed.  In Q2 performance was 58% which is higher (better) than the target of 47%. Up to the end of September, 49,377 gullies were cleaned against a programme of 47,721 gullies. |
| Percentage of completion of Highways Capital Schemes against Agreed Programme   |                    | 92%              | 90%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Quarters Target (Quarters)    | None available | This indicator measures the completion of the Highways Capital Schemes against the Agreed Programme.  Q2 performance is 92% which is higher (better) than the target of 90%. This is a small reduction from Q1 performance (100%). The work delivered in Q2 includes the following: 20 Plane and Patch, 13 Conventional Surfacing, 8 Surface Dressing Surfacing, 15 Micro Surfacing, 3 Footway Schemes, 4 Drainage Schemes, 2 Safety Fencing Schemes and 1 Structures Scheme.  |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|---|--------------------|------------------|--------|---|----------------|---|
| Percentage of invalid Penalty Charge Notices (PCNs) (on and off street)                     | Aim to<br>Minimise | 3%               | 4%     | 5% 4% 3% 2% 1% 0%  QLEAN CONTROL OF AND CONTROL OF | 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).  Performance in Q2 was 3%, which is lower (better) than the 4% target, this is consistent with Q1 (3%) performance. Performance has remained below the 4% target for the last 18 months despite ongoing recruitment demonstrating both good officer performance and effective training. |
| Highways<br>Safety<br>Inspections<br>completed in<br>line with the<br>required<br>Programme | Aim to<br>Maximise | 100%             | 99%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% Target (Quarters)   | None available | This indicator measures the completion of the Highways Safety Inspections in line with the required programme (which is aligned with the carriageway hierarchy as detailed in the Highways Inspection Policy).  Q2 performance was 100% which is higher (better) than the target of 99%. This is consistent with Q1 performance (100%).   |

| PI  | Aim to:            | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|---|--------------------|------------------|--------|--|----------------|--|
| Percentage of<br>Highway<br>Searches<br>responded to<br>within 3 days       | Aim to<br>Maximise | 100%             | 99%    | 100% 90% 80% 70% 60% 50% 40% 30% 10% 0% Target (Quarters)    | None available | This indicator measures the Number of Highway Searches responded to in the 3-day turnaround.  Q2 2023/24 performance was 100% against a target of 99%. This is consistent with the high performance from Q1 where 99.93% of searches were completed in 3 days. The team are working to deliver an efficient service.         |
| HS2 highways<br>approvals:<br>Percentage<br>responded wit<br>hin time limit | Maximise           | 100%             | 95%    | 100% 90% 80% 70% 60% 50% 40% 10% 0% 10% 0% Target (Quarters) | None available | This indicator measures the percentage of High Speed 2 (HS2) highways approval applications that were responded to within the time limit.  In Q2 100% of highways applications were determined within the timeframe or agreed extensions against a target of 95%. Performance has been consistent across the last two years. |

| PI   | Aim to:  | Current<br>Value | Target | Trend Chart  | Benchmarking   | Commentary   |
|--|----------|------------------|--------|--|----------------|--|
| HS2 planning approvals: Percentage responded within time limit   | Maximise | 100%             | 95%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  A RALIPA OF | None available | This indicator measures the percentage of High Speed 2 (HS2) planning approvals which were responded to within the time limit.  In Q2 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.  |
| Number<br>of publicly<br>accessible ele<br>ctric-vehicle<br>charging units<br>in Buckingha<br>mshire<br>(cumulative) |          | 267              | 259    | 350 300 250 200 150 100 50 0 Quarters Target (Quarters)  | None available | This indicator is reported one quarter in arrears. Current performance is for Q1.  This indicator measures the number of publicly accessible electric vehicle charging units both on street and off street.  At the end of Q1 there were 267 electric vehicle (EV) charging units accessible to the public across Buckinghamshire, higher than the Q1 target of 259.  There are 64 charging units on route through the 'On-Street Residential Chargepoint Scheme' (ORCS), of which 44 have been delivered at the time of reporting. The remainder are expected to be delivered by end Q3 2023. We have delivered our Expression of Interest to the Local Electric Vehicle Infrastructure (LEVI) fund and are currently working on a Business Case for submission to Department for Transport in November 2023. This will deliver a step change in the number of on-street EV charging units. |

| PI  | Aim to: | Current<br>Value | Target | Trend Chart   | Benchmarking   | Commentary  |
|---|---------|------------------|--------|---|----------------|---|
| Percentage of eligible clients who are provided with transport within agreed timeframe. |         | 97%              | 95%    | 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%  Quarters Target (Quarters) | None available | 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 (special educational needs and disabilities (SEND) clients) or when all the information was provided (Mainstream clients).  In Q2 performance was 97% which is better than the target of 95% and better than Q1 96%. 2,500 referrals for transport were received over the summer period which is the busiest time for the service. |

### 10. Transport Portfolio NO RAG



| PI   | Aim To             | Current<br>Value | Trend Chart |                              | Commentary   |
|--|--------------------|------------------|-------------|------------------------------|--|
| Percentage                                       | Aim to             |                  | 100%        |                              | This indicator is reported annually. Next due in Q4. |
| of strategic carria<br>geway network             | Maximise           |                  | 90%         |                              |  |
| in fair/good and                                 |                    |                  | 80%         |                              |  |
| very good<br>condition                           |                    |                  | 70%         |                              |  |
|  |                    |                  | 60%         |                              |  |
|  |                    |                  | 50%         |                              |  |
|  |                    |                  | 40%         |                              |  |
|  |                    |                  | 30%         |                              |  |
|  |                    |                  | 20%         |                              |  |
|  |                    |                  | 10%         |                              |  |
|  |                    |                  | 0% 1        | A A A A                      |  |
|  |                    |                  | ,           | ASTA BALL BALL BALL          |  |
|  |                    |                  |             | ◆ Years ◆ Target (Years)     |  |
| NHT Public                                       | Aim to<br>Maximise |                  | 100%        |                              | This indicator is reported annually. Next due in Q3. |
| Satisfaction with their local Rights             | Iviaximise         |                  | 90%         |                              |  |
| their local Rights<br>of Way Network<br>(KBI 15) |                    |                  | 80% -       |                              |  |
| (KBI 13)   |                    |                  | 70%         |                              |  |
|  |                    |                  | 60%         |                              |  |
|  |                    |                  | 50%         |                              |  |
|  |                    |                  | 40%         |                              |  |
|  |                    |                  | 30%         |                              |  |
|  |                    |                  | 20%         |                              |  |
|  |                    |                  | 10%         |                              |  |
|  |                    |                  | 1           | Ship Talpha Bart Batha Batha |  |
|  |                    |                  |             | → Years → Target (Years)     |  |

| PI  | Aim To             | Current<br>Value | Trend Chart  | Commentary  |
|---|--------------------|------------------|--|---|
| NHT Public  | Aim to             |                  | 100%   | This indicator is reported annually. Next due in Q3.  |
| Satisfaction on<br>the condition<br>of road surfaces<br>(HMBI 01) | Maximise           |                  | 90%  |   |
|   |                    |                  | 80%  |   |
| (HIVIDI UT)   |                    |                  | 70%  |   |
|   |                    |                  | 60%  |   |
|   |                    |                  | 50%  |   |
|   |                    |                  | 40%  |   |
|   |                    |                  | 30%  |   |
|   |                    |                  | 20%  |   |
|   |                    |                  | 10%  |   |
|   |                    |                  | ASSIS AUSTE AND                          |   |
|   |                    |                  | → Years → Target (Years)   |   |
| Average daily cycling count per active cycle counter per day      | Aim to<br>Maximise |                  | 120<br>110<br>100<br>90<br>80<br>70<br>60<br>50<br>40<br>30<br>20<br>10<br>0 | This indicator measures the average daily cycling count per active cycle counter per day.  This indicator has been temporarily paused while we investigate some inconsistencies with the reporting system. We expect reporting to be back online in Q3 when we will report all three quarters from this year. |
|   |                    |                  | → Quarters → Target (Quarters)   |   |

| PI                                    | Aim To             | Current<br>Value | Trend Chart                    | Commentary   |
|---------------------------------------|--------------------|------------------|--------------------------------|--|
| Percentage of                         | Aim to<br>Maximise |                  | 100%                           | This is a new indicator and will be reported in Q3.  |
| Community<br>Infrastructure           |                    |                  | 90%                            |  |
| Levy (CIL)<br>Liability Notices       |                    |                  | 80% -                          |  |
| issued within 12<br>weeks of planning |                    |                  | 70%                            |  |
| permission being                      |                    |                  | 60%                            |  |
| granted                               |                    |                  | 50%                            |  |
|                                       |                    |                  | 40%                            |  |
|                                       |                    |                  | 30%                            |  |
|                                       |                    |                  | 20%                            |  |
|                                       |                    |                  | 10%                            |  |
|                                       |                    |                  | 0%                             |  |
|                                       |                    |                  | → Quarters → Target (Quarters) |  |
| Number of                             | Monitor            | 152,530          | 250,000                        | This indicator is reported one quarter in arrears. Current   |
| passengers<br>travelling on           |                    |                  | 225,000                        | performance is for Q1.   |
| subsidised bus services               |                    |                  | 175,000                        | This indicator measures the number of passenger journeys being made on services either wholly or partly subsidised by the Council but where passenger numbers can be clearly |
| 361 11063                             |                    |                  | 150,000                        | the Council but where passenger numbers can be clearly   |
|                                       |                    |                  | 125,000                        | disaggregated.   |
|                                       |                    |                  | 100,000                        | In Q1 performance was 152,530 (provisional). The Service is  |
|                                       |                    |                  | 75,000                         | yet to receive some data from operators. It is estimated that the figure provided represents about 60% of available data.  |
|                                       |                    |                  | 50,000                         | The updated figure will be provided in Q3.   |
|                                       |                    |                  | 25,000                         |  |
|                                       |                    |                  | 0 1                            |  |
|                                       |                    |                  | QL ZSZZILA                     |  |
|                                       |                    |                  | <b>→</b> Quarters              |  |