Report Title:	Quarterly Assurance Report Q1 2023/24 or where latest data is available until August 23.
Contains	No - Part I
Confidential or	
Exempt Information	
Cabinet Member:	
Meeting and Date:	Corporate Overview and Scrutiny Panel,
	06 November 2023
Responsible	Stephen Evans, Chief Executive
Officer(s):	Rebecca Hatch, Assistant Director of Strategy
	& Communications
	Andrew Vallance, Deputy Director of Finance
Wards affected:	All



REPORT SUMMARY

A new "Quarterly Assurance Report" (QAR) has been introduced for routine consideration by Cabinet as a mechanism to support good governance. The QAR is focused on the latest available position in relation to performance indicators (Q1 2023/24 or where latest data is available until August 23) and the corporate risk register. Audit and Workforce insights are also included.

The first QAR was considered by Cabinet on 25 October 2023 and is now shared with the Corporate Overview & Scrutiny Panel for scrutiny to support good governance.

The Panel are invited to consider whether there may be areas that would benefit from further scrutiny and analysis, as part of the Panel's forward work programme.

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Corporate Overview & Scrutiny Panel notes the report and:

i) Undertakes scrutiny of the Quarterly Assurance Report (Appendix A) and considers potential implications for the Panel's forward work programme.

2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

2.1 The QAR (Appendix A) is a new combined assurance report, bringing together the latest available performance insights and risk information. Audit and Workforce insights are also included. The report is a mechanism to support good governance, and therefore there are no options associated with this report.

3. KEY IMPLICATIONS

- 3.1 The council is developing a new Corporate Plan which will set out a vision for the borough over the coming years and describe the most important aims and priorities that the council will focus on delivering. The new Corporate Plan will therefore provide a framework for decision-making and resource allocation and will be presented to Full Council in February 2024.
- 3.2 Ahead of a new Corporate Plan and related performance indicators being developed, and in the interests of good governance, an interim performance management framework (PMF) has been developed for reporting in 2023/24 as part of new Quarterly Assurance reporting arrangements. Performance reporting for indicators is based on a traffic-light concept where green is on/above target, amber provides an early warning for possible intervention, and red suggests intervention may be necessary.
- 3.3 The intention is to bring the QAR to Cabinet on a quarterly basis. Following Cabinet, the QAR will be shared with the Corporate Overview & Scrutiny Panel for further scrutiny to support good governance.

4. FINANCIAL DETAILS / VALUE FOR MONEY

- 4.1 This report combines the council's performance and risk. Robust information on performance and risk helps to inform future resource allocation decisions, including the current budgeting process.
- 4.2 The current predicted overspend, coupled with a potential budget gap in 2024/25 are significant risks. An update was provided to Cabinet on 27 September, summarising further, urgent action to address the financial risk.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from the recommendations.

6. RISK MANAGEMENT

6.1 Specific risk management activities and consideration of the corporate risk register is included within the relevant sections of Appendix A. Failure to manage risks appropriately could have financial, reputational or other consequences. Risk owners are required to implement controls to mitigate risks and update these regularly.

7. POTENTIAL IMPACTS

- 7.1 **Equalities**. This report does not have direct implications for equality and diversity.
- 7.2 **Climate change/sustainability**. This report does not have direct environmental impacts.

7.3 **Data Protection/GDPR**. There are no data protection impacts as a result of this report

8. CONSULTATION

8.1 No consultation was required in creating this report.

9. TIMETABLE FOR IMPLEMENTATION

9.1 The Quarterly Assurance Report set out at Appendix A provides an update on latest position in relation to performance and risk. There are no implementation items associated with this report.

10. APPENDICES

- 10.1 This report is supported by 1 appendix.
 - Appendix A: Quarterly Assurance Report

11. BACKGROUND DOCUMENTS

11.1 There are no background documents.

12. CONSULTATION

Name of consultee	Post held	Date sent	Date returned
Mandatory:	Statutory Officer (or deputy)		
Elizabeth Griffiths	Executive Director of Resources & S151 Officer	18.09.23	20.09.23
Elaine Browne	Deputy Director of Law & Governance & Monitoring Officer	18.09.23	22.09.23
Deputies:			
Andrew Vallance	Deputy Director of Finance & Deputy S151 Officer	18.09.23	26.09.23
Jane Cryer	Principal Lawyer & Deputy Monitoring Officer		
Mandatory:	Equalities Officer – to advise on EQiA, or agree an EQiA is not required		
Ellen McManus- Fry	Equalities & Engagement Officer	22.09.23	22.09.23
Directors (where relevant)			
Stephen Evans	Chief Executive	18.09.23	11.10.23
Andrew Durrant	Executive Director of Place	18.09.23	20.09.23

Kevin McDaniel	Executive Director of Adult Social Care & Health	18.09.23	11.10.23
Lin Ferguson	Executive Director of Children's Services & Education	18.09.23	22.09.23

REPORT HISTORY

Decision type:	Urgency item?	To follow item?
For information	No	No

Report Author: Radhika Thirunarayana-Govindarajan, Lead Performance Analyst

APPENDIX A

Quarterly Assurance Report Performance Data as at Q1 2023/24 or where latest monthly data is available

until August-23.

Report Author(s)	
Radhika Thirunarayana-	Lead Performance Analyst
Govindarajan	
Rachel Kinniburgh	Service Lead – Strategy, Policy & Performance
Steve Mappley	Insurance & Risk Manager

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1. Executive Summary

Performance

- Ahead of a new Corporate Plan being developed and presented to Council in February 2024, an interim suite of performance metrics ("the Interim PMF") has been developed for reporting in 2023/24 as part of Quarterly Assurance reporting arrangements.
- The Interim PMF has a total of 65 metrics, with further metrics being identified for inclusion as appropriate over time. It is noted that the metrics reported in 2023/24 follow different frequencies (e.g. monthly, quarterly), and this report sets out the latest data available at the time of this report's preparation, acknowledging that the report's preparation has preceded availability of Q2 data for metrics reported on a quarterly frequency.
- Table 1 sets out a summary of latest performance by Directorate. There are 37 target-based metrics, and 28 non-targeted metrics are. Of the 37 target-based metrics, 81% are either green or amber (30/37) and 19% red. (7/37)

Directorate	Red	Amber	Green	Monitoring	Total
				only	
Cross-cutting	1	1	2	9	13
Adult Social Care & Health	4	0	3	6	13
Children's Services &	1	1	8	5	15
Education	1	1	0	5	15
Place	0	2	8	8	18
Resources	1	2	3	0	6
Total	7	6	24	28	65

Table 1: Latest available period performance with Directorate breakdown

Key successes:

- **Compliments Vs complaints:** Q1 2023/24 saw more than double the number of compliments (120) than complaints (53) for RBWM Formal Corporate complaints process. This is also a 52% increase from the previous quarter (79 compliments) owing to more compliments from residents and improved recording of the same.
- Education, Health and Care Plans (EHCP): The % of EHCP assessments completed within 20 weeks, including exceptions, has been above target for the last 2 quarters and currently stands at 97.8%, exceeding the target of 90% set for Q1 2023/24.
- Leisure centre attendances: The number of attendances to leisure centres are the highest over the last 6 years with the year-to-date figures (Aug-23) standing at 1,285,320, a 55% increase from same time in 2018/19.

- **Safeguarding concerns progressing to enquiries:** Safeguarding concerns progressing to inquiries are at 48.5%, surpassing the 34% target for Aug-23, with triage times reduced from 20 days to just 3 days.
- **Council Tax Collection:** Despite the continuing cost of living crisis and the challenges of a restructure within the department which has seen on-going recruitment taking place since April, the collection rate continues to be above target and, more importantly for the authority, the value of the cash collected has significantly increased compared to last year.
- Voluntary turnover (YTD) for RBWM Staff: In Aug-23 % voluntary turnover (YTD) is 6.47%, tracking well against the target for the month (5.38%). Over the past year, the council has successfully recruited and retained officers in key areas and turnover has stabilised following post Covid-19 pandemic staff movements (Mar:22 16.49% vs 12.90% target). Staff recruitment and retention, however, continues to be a key risk and challenge for the organisation.

Key challenges:

- **Residential care placements:** Optalis has highlighted challenges in rising residential costs especially for individuals who were previously self-funded. This has increased 12% pre-pandemic to around 33% of total admissions, impacting council budgets.
- Households in temporary accommodation: The current cost of living crisis has also impacted the housing service. This, combined with a growing number of asylum seekers, a limited housing stock, and increasing prices for rental properties has placed considerable strain on the provision of temporary accommodation within the borough (43.0% vs 50% target and flagging red).
- **Children referred to social care:** In Q1 2023/24 the number of children referred to social care per 10,000 population is 134 which projects 535 by end of 2023/24, indicative of a high level of need coming through the front door, in line with regional trends. Acknowledging the service's efforts to reduce demand by early intervention, nonetheless any additional placement has high financial impact.
- **Benefit Processing times:** While Benefits processing times are generally being met, this has been a key challenge for the team due to long term vacancies which were unable to be filled till August. Two new staff are now in training. The team has done well to maintain performance over the period with reduced numbers.

<u>Risk</u>

- Risks potentially carrying the most damaging impacts on our measurement scale are classified as key risks. The inclusion of risks within any level of risk register does not mean there is an immediate problem but signifies officers are aware of potential risks and have devised strategies for the implementation of relevant mitigation measures towards the accepted appetite position. Table 2 sets out the current risk assessment status by Directorate.
- Elected Members are notified of the key risks where they are named as the risk owner, typically as part of a Member briefing. Officers are tasked with ensuring that any comments by Members are reflected in the assessment.
- If any risks are of such low impact that there is no good reason to continue referencing them then they are removed from the risk register or re-categorised with a lower risk assessment.

	High	Medium/	Medium	Low
		high		
RBWM strategic risks	2	4	8	2
Adults, Social Care and Health	0	0	3	0
Chief Executive	0	0	1	0
Children's Services and Education	1	0	0	2
Place	0	4	0	2
Resources	0	0	2	0

Table 2: Current risk assessment status by Directorate

2. RBWM Council

Performance

2.1 Scorecard 1 sets out cross-cutting corporate metrics and reflects the latest data available at the time of this report's preparation. Please note that preparation of this report has preceded availability of Q2 data for metrics reported on a quarterly frequency.

Information requests processed in time

- This metric monitors the timeliness of processing Freedom of Information (FOIs), including Environmental Information Requests (EIRs) related to various environmental aspects. There is a one-month time-lag on reporting due to the 20 working days processing timeframe.
- Performance in Jul-23 was 86.2% (81/94), below the 90% target but still within acceptable tolerance thresholds, and a slight improvement on Jun-23 (86.0%, 80/93). Year to date performance is 90.2% (330/366), above the 90% target. This metric will be monitored to assess the need for any corrective actions as necessary.

Sickness for RBWM staff:

- The days lost to sickness (YTD) as at Aug-23 is green (1.36 vs target of 2.42) and an improvement on Jul-23 (1.10 vs target of 1.93, also green). It is also noted that Aug-23 sickness is lower than 1 year ago (1.92 in Aug-22).
- Hybrid working has seen a reduction in sickness absence as staff who feel that they are well enough to work from home may choose to do so. The council has started recording annual leave within iTrent (HR management system) and is planning an internal communication campaign to promote more sickness absence reporting too via iTrent.
- Trends will be monitored closely during the winter seasons when Covid Boosters and Winter flu vaccinations are rolled out by the NHS.
- Sickness is reported at a Directorate and service-level under "Workforce" in relevant sections of this report.

Voluntary turnover (YTD) for RBWM staff

- RBWM voluntary turnover includes those who choose to resign or retire. Turnover is calculated by dividing voluntary leavers by the average headcount (headcount at start and end of period / 2). It is acknowledged that some staffchurn is healthy for any organisation and so this measure is configured as a fixed target each month with appropriate tolerance-bandings both above and below the monthly target.
- At Aug-23 % voluntary turnover (YTD) is 6.47%, tracking well against the target for the month (5.38%) and showing an improvement from Jul-23 (5.96% vs 4.30%). The in-month % voluntary turnover for Aug-23 was 0.54%.
- In 2021/22, council turnover exceeded the target (16.42% vs 12.9%) due to post-Covid-19 staff movements. Since then, staff recruitment and retention has

stablised. However, it remains a challenge and risk for the organisation. Voluntary turnover is reported at Directorate and service-level under "Workforce" in relevant sections of this report. It is noted that where services have fewer staff even a single staff leaving can heavily skew turnover percentages.

Compliments and Complaints

• Q1 2023/24 saw more than double the number of compliments (120) than complaints (53) for RBWM Formal Corporate complaints process. This is also higher than the previous quarter (79), attributable to both general positive comments by residents/customers and also renewed diligence in various services reporting compliments. Some example compliments received are listed below:

"Best council I've ever dealt with. In all areas: from the benefits section to library, refuse service etc. Every SINGLE person I had any communication with was friendly, polite (cheerful even!) and gave prompt, efficient service every time. Congratulations to whoever heads such a great team and thank you!"

"To the excellent team at the Royal Borough of Windsor and Maidenhead THANK YOU for your efficient, friendly and always good service in all the departments I contacted. Unlike some of the Councils I've dealt with, I found you all welcoming and helpful and I had none of the anxiety I've had with others. Best wishes to you all!"

"I contacted the Council regarding completing an SMI form on behalf of my husband. I also contacted the Council regarding completing a Blue Badge application. Each time the phones are answered really quickly (unheard of these days) and the department concerned answers promptly. "

- The volume of complaints received for Q1 23/24 (53) is the same as last quarter (Q4 22/23: 53) and broadly the same as a year ago (Q1 22/23: 52). It is noted that complaints made to the council enter a process and may not necessarily be found to be upheld. Overall, the volume of complaints for RBWM Formal Corporate complaints process has seen a reduction year on year [20/21 (354); 21/22 (302); 22/23 (168)].
- It is acknowledged that "universal services" such as waste & recycling, council tax, parking) tend to see higher complaints volumes generally, however there can be volatility in volumes of complaints for these areas across quarterly reporting periods due to a range of factors including seasonality (e.g: annual billing for council tax, bin collection during holidays due to collection date changes). In Q1 23/24 the majority of complaints received related to planning applications (15.1%), housing options (15.1%), waste & recycling (13.2%) and parking (11.3%). Waste & recycling complaints showed a reduction from 11 in Q4 22/23 to 7 in Q1 23/24, parking complaints increased slightly from 4 in Q4 22/23 to 6 in Q1 23/24. The council produces an Annual Compliments and Complaints Report, providing detailed focus on volumes of complaints processes (Adults

Statutory, Children's Statutory, Children's Corporate, RBWM Formal Corporate), including reasons for complaints, outcomes and lessons learnt.

Scorecard 1: Corporate cross-cutting performance

Corporate cross-cutting									
Information governance									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:IG1] % of information requests processed within 20 working days or within agreed timelines	Jul 23	86.2%		86.0%	*	90.2%	90.0%	90.0%	Monthly
Budget									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:M1] % forecast variance to service revenue budget	Aug 23	7.3%		7.3%	\$	7.3%	0.0%	0.0%	Monthly
[RBWM:M2] % savings made or on track	Aug 23	45.0%		48.2%	?	45.0%		100.0%	Monthly
[RBWM:M1a] Forecast variance to service revenue budget (£000s)	Aug 23	£6,707	\sim	£6,707	?	£6,707			Monthly
[RBWM:M2a] Savings made or on track (£000s)	Aug 23	£4,871		£5,270	?	£4,871			Monthly
[RBWM:M3] Overdue debts (excluding Housing Benefits over-payments) (£000s)	Aug 23	£6,706		£6,706	?	£6,706			Monthly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
Measure [RBWM:C10] # of compliments received (RBWM Formal Corporate)	Date Jun 23				Improving / Worsening				Frequency Quarterly
[RBWM:C10] # of compliments	Jun 23	Actual		period	Improving / Worsening ↑	Actual			
[RBWM:C10] # of compliments received (RBWM Formal Corporate) [RBWM:C6b] # of contacts progressed as complaints (RBWM Formal	Jun 23	Actual		period 79	Improving / Worsening ↑ ?	Actual			Quarterly
[RBWM:C10] # of compliments received (RBWM Formal Corporate) [RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate)	Jun 23	Actual		period 79	Improving / Worsening ↑ ?	Actual	Target	Target	Quarterly
[RBWM:C10] # of compliments received (RBWM Formal Corporate) [RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate) Workforce	Jun 23 Jun 23 Date	Actual 120 53 Period	trends	period 79 53 Last	Improving / Worsening ↑ ? ? Period Improving / Worsening	Actual 120 53 YTD	Target	Target	Quarterly Quarterly
[RBWM:C10] # of compliments received (RBWM Formal Corporate) [RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate) Workforce Measure [RBWM:P05] # of working days lost to	Jun 23 Jun 23 Date	Actual 120 53 Period Actual 1.36	trends	period 79 53 Last period	Improving / Worsening ↑ ? ? Period Improving / Worsening ↑	Actual 120 53 YTD Actual	YTD Target 2.42	Target YE Target	Quarterly Quarterly Frequency Monthly
[RBWM:C10] # of compliments received (RBWM Formal Corporate) [RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate) Workforce Measure [RBWM:P05] # of working days lost to sickness per headcount (YTD) [RBWM:P07] % voluntary turnover	Jun 23 Jun 23 Date Aug 23	Actual 120 53 Period Actual 1.36 6.47%	trends	period 79 53 Last period	Improving / Worsening ↑ ? ? Period Improving / Worsening ↑	Actual 120 53 YTD Actual 1.36	YTD Target 2.42	YE Target 5.80	Quarterly Quarterly Frequency Monthly
[RBWM:C10] # of compliments received (RBWM Formal Corporate) [RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate) Workforce Measure [RBWM:P05] # of working days lost to sickness per headcount (YTD) [RBWM:P07] % voluntary turnover (YTD)	Jun 23 Jun 23 Date Aug 23 Aug 23	Actual 120 53 Period Actual 1.36 6.47%	trends	period 79 53 Last period 1.10 5.96%	Improving / Worsening ↑ ? ? Period Improving / Worsening ↑	Actual 120 53 YTD Actual 1.36 6.47%	YTD Target 2.42	YE Target 5.80	Quarterly Quarterly Frequency Monthly Monthly

<u>Risk</u>

- 2.2 Senior management undertook a comprehensive re-evaluation and revision of the entire strategic risk register during December 2022 and January 2023. Table 3 illustrates the outcomes of this exercise.
- 2.3 Several new risks were added to the council's strategic risk portfolio from that exercise:
 - Impact of winter flu and possible future pathogen variants.
 - Uncertainty around the viability and delivery of major schemes and commercial projects involved in regeneration across the entire borough.
 - Maintaining workforce stability i.e. Problems in recruitment and retention of staff.
 - Cost of living crisis results in increased levels of debt, community tension, and anti-social behaviour.
 - Fraud and corruption.
 - Mental Health crisis accelerates with impact on RBWM to support consequences.
 - Change of political control affects strategic direction of RBWM (this risk has subsequently been removed from the strategic risk register following senior officer review).
- 2.4 Additional strategic risks added since that exercise:
 - Accommodation pressures from increasing demand
 - General election planning. This has been on the relevant service risk register for several years but it was felt it ought to be represented as a strategic risk.
 - Financial implications arising from the state of the social care market and demand pressures.

Table 3: Strategic Risks

Risk	Directorate	Q1 rating	Q2 rating	Target	Direction	Last review date
CLIM12 - Climate change – extreme weather conditions, carbon emissions.	Executive Director Place	12	12	9	Static	29/03/23
 Key mitigations in place: Climate strategy approved Dec 2020. Key mitigations in progress: Develop a Climate Change Adaption plan. 						
HOF6 - Financial strategy does not deal sufficiently with pressures. The council's financial strategy needs to be effective in dealing with pressures. Addressing the impact of several years of low CTax bills is still a major concern. Although the council has increased its reserves up to £10m over the last two years, they are still low compared to other unitary councils.	Executive Director Resources	12	16	8	Worsening	25/09/23
The council currently has an overspend in the current financial year of around £7m and a predicted budget gap for 2024/25 of £6m. Together these would exhaust the council's reserves. It's essential that the council finds additional income or savings in the current budget round to achieve a sustainable balanced budget.						
 Key mitigations in place: Corporate savings tracker noted monthly at ELT and Cabinet briefing. MTFP and forecast 24/25 budget gap noted at July Cabinet. Strategic business plan process presented at Cabinet briefing June 23. 						

Risk	Directorate	Q1 rating	Q2 rating	Target	Direction	Last review date
 Key mitigations in progress: Bids and savings process to date has widened the budget gap thus departmental "star chambers" will be taking place in September and October 23 to achieve further savings or additional income. 						
 SDCHIL25 - Major safeguarding issue leads to significant and preventable harm/death to vulnerable people. Key mitigations in place: MASH strengthens response to children and young people at risk of significant harm incl. CSE. Service's business plan specifically addresses mitigating safeguarding risk. Revised adult and children's safeguarding partnership arrangements implemented with external scrutineers engaged throughout. 	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education	6	6	6	Target achieved	29/03/23
 CMT40 – RBWM cannot operate during an emergency or provide support to residents. Key mitigations in place: Joint Emergency Planning Unit contract. Key mitigations in progress: Complete a suite of discrete service business continuity plans 	Executive Director Place	8	8	6	Static	29/03/23
CORP7 - Uncertainty around major schemes and commercial projects. Key mitigations in place:	Executive Director Place	6	6	6	Target achieved	29/03/23

Risk	Directorate	Q1 rating	Q2 rating	Target	Direction	Last review date
 Prop Co's risk register details regeneration risks with joint venture partners with quarterly board review. Appraisal of all our projects so there's complete understanding of each individual scheme. Introduction of improved governance for Prop Co including creation of new Sharehold Panel to hold company to account. 						
HOF15 - Fraud and corruption leads to loss of council resources.	Executive Director Resources	4	4	4	Target achieved	16/08/23
 Key mitigations in place: Strong protocols in place including anti-money laundering, prevention of bribery and anti- corruption policies. Key mitigations in progress: SWAP/RBWM risk manager to identify services at risk of large-scale fraud. 						
HR25 - IT infrastructure failure, cyber-crime, technological change.	Executive Director Resources	8	8	3	Static	13/06/23
 Key mitigations in place: Secure remote working. Networks protected by multiple security layers using firewall and other control technologies. Multiple data centres provide increased resilience. Key mitigations in progress: External review of cyber policy. 						
sHR26 – Maintaining workforce stability. Problems in recruitment and retention of staff.	Chief Executive	9	9	3	Static	13/06/23

Risk	Directorate	Q1 rating	Q2 rating	Target	Direction	Last review date
 Key mitigations in place: Provision for salary increases in MTFP. Salary gateways where appropriate. Consider revisions to posts to attract suitably qualified candidates. Key mitigations in progress Continual review of terms and conditions and further national benchmarking. 						
 POLPER20 - Failure to secure best value for contracted services. Key mitigations in place: Change control mechanisms. Exit clauses/strategies negotiated. Key mitigations in progress: Improve governance on decentralised contract 	Executive Director Resources	8	8	4	Static	20/06/23
 management. POLPER21 - Legislation not responded to effectively leads to external intervention. Key mitigations in place: Assistant directors/managers keep up to date with service developments Legal advice on decisions is a mandatory part of our report writing mechanism. 	Executive Director Resources	4	4	4	Target achieved	16/08/23
RBWM16 - Impact of winter flu and possible future pathogen variants. Key mitigations in place:	Executive Director of Adult Social Care & Health	16	12	8	Improving	29/03/23

Risk	Directorate	Q1 rating	Q2 rating	Target	Direction	Last review date
 RBWM Outbreak Control Plan. Hospitals have critical incident plans e.g., postpone non-urgent operations. Priority that beds are available for seriously ill patients. 						
 SDCHIL26 - Cost of living crisis - increased levels of debt, community tension, anti-social behaviour. Key mitigations in place: HSF pilot well established. Active communication about ways of getting support (Here to Help). Engagement with voluntary sector to support with Household Support scheme. 	Executive Director of Adult Social Care & Health	6	6	6	Target achieved	28/06/23
 SDCHIL27 – a potential increase in residents suffering complex mental health disorders could impact on RBWM to support the consequences. Key mitigations in place: Engage with ICB and ICP to ensure that health services prioritise mental health services. Develop "Mental Health in School" teams across the borough Key mitigations in progress: Public health strategy alignment. Progress in Frimley ICB. 	Executive Director of Adult Social Care & Health	9	9	3	Static	28/06/23
New for Qtr 2 - Failures in running an election leads to loss of confidence by electorate in RBWM. Key mitigations in place: • Mandatory training for staff involved.	Deputy Director of Law and Governance		3	3	New strategic risk	n/a

Risk	Directorate	Q1 rating	Q2 rating	Target	Direction	Last review date
 Guidance provided by the Electoral Commission incl. polling station, verification and count centre risks. Election project group chaired by the RO, comprising senior officers. Group maintains an elections project risk register. 						
 New for Qtr 2 - increasing migration and movement of people placed in local hotels could result in an increased demand on RBWM's critical front-line services. Key mitigations in place: Local Berkshire and national meetings to ensure RBWM is notified of when asylum seekers are appearing. Work with the Home Office, Clearsprings etc to try and find a solution to growing numbers of asylum seekers in hotels. Key mitigations in progress: Improve early notification process by having access to the asylum placement information portal. Recognised budget pressures and reflect in MTFP. 	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education Executive Director of Place		9	3	New strategic risk	n/a
 New for Qtr 2 – financial implications arising from the state of the social care market and demand pressures. Key mitigations in place: Implementation of robust management controls in Optalis to manage funding packages and spend. Key mitigations in progress: Transitions strategy. Commissioning plan for supported housing 	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education		9	6	New strategic risk	n/a

<u>Audit</u>

2.5 The purpose of inclusion in this report is to monitor the implementation of the highest priority actions agreed (priority 1). The audits selected for monitoring are those where high corporate risks have been reported. These are listed in Table 4. Oversight of Internal Audit delivery is the responsibility of the Audit and Governance Committee.

Table 4: Audits Priority 1

Name of Audit	Priority 1 Action	Responsible Officer	Agreed date for implementation	Progress Update
Business Continuity Planning	All services to complete a Business Impact Analysis (BIA)	ED Place	31/01/2024	All services that have yet to complete a Business Impact Analysis will do so, with support from the Joint Emergency Planning Unit (JEPU), where necessary. This will include the recovery solutions needed to resume any critical business processes identified from the analysis.
	All services to complete a Business Continuity Plan (BCP)	ED Place	31/11/2023	In progress with 30% completed, 8 workshop sessions booked and aiming to complete by end of November.
	A corporate BIA to exercise to be completed and incorporated in the corporate BCP	Service Manager – Joint Emergency Planning Unit	31/01/2024	Once all services have completed their service BCPs and Business Impact Analysis, JEPU will update the corporate BCP and present this to CMT for approval.
	A process of review of BCPs to be put in place for all high value contracts.	ED Place	31/12/2023	Target critical service providers and liaise with our procurement colleagues to review the arrangements in place.
Contract Management	Implement a contract management framework and associated guidance	Procurement Manager	31/12/2023	On course for 31/12/2023
	Review the published contract register to ensure completeness and	Procurement Manager	31/03/2023	Review completed in August 2023 and now compliant with the Code.

Name of Audit	Priority 1 Action	Responsible Officer	Agreed date for implementation	Progress Update
	compliance with the Local Transparency Code 2015			
	Complete analysis to identify spend where a contract is needed and agree how compliance can be achieved	Procurement Manager	31/03/2023	Analysis completed. Agresso updated following spend reports and client updates.
	Deliver contract management training to all contract managers	Head of HR	31/03/2023 – Overdue	Procurement will arrange corporate training on contract management principles for all relevant officers by December 2023.
	Analysis undertaken to identify and take action in relation to all agency off-contract spend	Head of HR	31/12/2023	Agency usage is monitored by HR and shared with DMTs monthly
	Procedure to authorise alternatives to the agency corporate contract to be agreed.	Head of HR	31/12/2023	To be completed by the newly requested post
S106 Agreements	Agree a process which sets out roles and responsibilities and the arrangements for recording, monitoring and collecting financial contributions	Service Lead Infrastructure	30/09/2023	On track for completion by the end of September
	Agree a proactive approach to alerting a designated officer for each agreement when a contribution milestone is reached and payment is due.	Service Lead Infrastructure	30/09/2023	On track for completion by the end of September
	To maintain a full audit trail. To consider using Exacom or similar as a management system for S106 agreements and payments.	Service Lead Infrastructure	30/09/2023	On track for completion by the end of September

3. Adult Social Care & Health Directorate

Performance

- 3.1 Scorecard 2 sets out Key Performance Indicators (KPIs) for the Adult Social Care & Health Directorate and reflects the latest data available at the time of this report's preparation. Please note that preparation of this report has preceded availability of Q2 data for metrics reported on a quarterly frequency.
- 3.2 Of the 13 metrics reported there are: 4 red, 0 amber, 3 green and 6 non-targeted metrics for monitoring. There are 3 annual metrics sourced from the Adult Social Care Outcomes Framework (ASCOF) where data is available a year in arrears (2/3 ASCOF measures).
- 3.3 The "% of clients engaged in treatment that are showing 'substantial progress'" is a new metric, and previous national metrics related to successful completions and re-presentation rates. Q1 23/24 figures are indicative, up to the month of May-23 due to a data lag from National Drug Treatment Monitoring System (NDTMS) at the time of this report's preparation. The Q1 figure is 42%, which is below the target of 55.4% (red), however it is broadly in line with national figure of 47%. There is an ongoing effort by NDTMS to improve data collection, currently standing at 89% data completeness.
- 3.4 The proportion of older people (aged 65 years and over) who were still at home 91 days after having a period of reablement discharged from hospital is a snapshot in time from October to March, i.e. relates to people who receive reablement in October, November and December. Since January 2023, the service has taken a "Home First" approach, jointly funded by the NHS, to provide patients with support at home or intermediate care, and those numbers are not included as part of this metric. The cohort of older people (aged 65+yrs) who are tracked within this metric is therefore very small, and are usually those extremely vulnerable going into reablement and who may therefore require repeat visits to hospitals or may unfortunately pass away within the 91-day time period after discharge. At Aug-23, this metric is 75%, below the target (80%) and flagging red for the first time since Apr-23. Going forward, we will ensure that both people who are supported by Home First and reablement from Short Term Services and Reablement are included in the cohort.

3.5 Key successes:

Smoking Cessation

- In Q1 2023/24 66.7% (64/96) service-users (tier 3) had successfully quit smoking at 4 weeks. Q1 performance follows a steady improvement trend from 57% in Q3 2022/23 and exceeds the target of 60%.
- Public Health at RBWM and Bracknell Forest Council have commissioned a vaping insights project to explore young people's use of, and attitudes

towards, e-cigarettes and vaping. Public Health is linking with schools to share the most up-to-date information and guidance on managing vaping amongst children and young people.

Safeguarding concerns progressing as enquiries

- The proportion of safeguarding concerns progressing to enquiries has seen a steady increase from 10.7% (Jun-23) to 48.5% in Aug-23. Referrals made to the safeguarding hubs is the first step to safeguarding adults. Referrals are considered and, if necessary, progressed to enquiry.
- The service acknowledges an improvement in allocation times reducing triage times from 20 days to 3 days.

3.6 Key challenges:

Statutory service establishment posts filled with permanent staff

- As at Aug-23, % of statutory service establishment posts filled with permanent staff is at 72% below target of 90% (red). This metric has broadly been in the range of 70% since April and below target (90%). Wider factors contributing to unfulfilled vacancies include salary disparities with local authorities, an increased demand and a shortage of experienced staff, creating it a job seeker's market.
- The council is planning to undertake a study, under "invest to save" initiative, to explore long term benefits of recruiting permanent staff over agency staff for improved role stability in their roles and sustained service delivery.

Admissions to care for those aged 65yrs + per 100,000

- Aug-23 reports 38 admissions to care for those aged 65+ per 100,000, below the target of 56 and flagging green. August figures are, however, higher than previous months' and this reverses the positive downward trend from May to July.
- Almost a third of permanent admissions to care homes are for those that were previously self-funded. In Aug-23, 20% of new permanent admissions were those who were previously self-funded, down from previous months (in the range of 30%) however still higher than pre-pandemic period (around 10-12%). Post-covid impacts and increased costs of care are likely factors especially in placements to nursing care.
- The council is working closely with Property Company to find suitable properties for care homes.

Scorecard 2: Adult Social Care & Health Directorate

Adult Social Care & Health Directorate									
Health improvement									
					Devied				
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
% of service users (tier 3) who have successfully quit smoking at 4 weeks	Jun 23	66.7%	1	62.2%	*	66.7%	60.0%	60.0%	Quarterly
[DA2:19] % of clients engaged in treatment that are 'showing substantial progress' (Drug & Alcohol)		42.0%		42.0%	?	42.0%	55.4%	55.4%	Quarterly
% of service-users who lost any amount of weight at the end of active intervention	Jun 23	68.4%			?	68.4%	75.0%	75.0%	Quarterly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
[Opt:C1b] # of contacts progressed as complaints (Adults)	Jun 23	11	\checkmark	6	?	11			Quarterly
[Opt:C5] # of compliments received (Adults)	Jun 23	8		10	?	8			Quarterly
Adult social care									
					Period				
Measure	Date	Period Actual	Period trends	Last Period	Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
% of safeguarding concerns progressing to enquiry	Aug 23	48.5%		34.0%	*	48.5%	34.0%	34.0%	Monthly
% of statutory service establishment posts filled with permanent staff	Aug 23	72.0%		72.0%	⇒	72.0%	90.0%	90.0%	Monthly
[ASCOF] % of clients with Learning Disabilities in settled accommodation	Mar 22	79.3%	·		?	79.3%			Annual
[ASCOF] % of Mental Health clients securing appropriate employment	Mar 22	11.0%			?	11.0%			Annual
[ASCOF] % satisfied/very satisfied with the care & support services they receive (exc LD customers)	Mar 23	71.0%	1	65.1%	?	71.0%			Annual
	Aug 23	38		26	*	216	276	668	Monthly
# of permanent admissions to care for those aged 65yrs+ per 100,000	0								
 # of permanent admissions to care for those aged 65yrs+ per 100,000 % of older people (aged 65 and over) who were still at home 91 days after discharge from hospital 	Aug 23	75.0%		80.0%	•	75.0%	80.0%	80.0%	Monthly

<u>Risk</u>

3.7 Table 5 sets out the current key risks for the directorate.

Table 5: Adult Social Care & Health Directorate key risks

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
 HSG0006 - Inadequate strategic planning between children's services, adults and health. Mitigations in place: Robust management controls to manage funding packages and spend. Procedures to plan and 	8	8	6	Static	23/06/23
manage transitions between children's and adult services.					
 HSG0009 - Failure to meet aspiration of suitably integrated health and social care. Mitigations in place: Work with the NHS to develop the ICS as part of the NHS long term plan. Strong governance - integrated health & social care commissioning board takes risk-based decisions on BCF progress/performance. 	6	6	6	Static	28/06/23
 HSG0007 - Increased demand resulting from adult social care demographics. Mitigations in place: Market management by strategic commissioning. Collaborative commissioning with NHS and other East Berkshire authorities on a range of provision, including intermediate care. 	6	6	6	Static	28/06/23

<u>Workforce</u>

3.8 Scorecard 3 outlines workforce information for the Adult Social Care & Health Directorate. Please note that the workforce data does not include figures for Optalis.

Scorecard 3: Workforce: Adult Social Care & Health Directorate

Adult Social Care & Health Directorate Workfo	rce							
Headcount								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Aug 23	27		26	?			Monthly
Public Health	Aug 23	8		7	?			Monthly
Safeguarding Information & Advice	Aug 23	6		6	?			Monthly
Transformation & Community Partnerships	Aug 23	11		11	?			Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Aug 23	23.43		22.43	?			Monthly
Public Health	Aug 23	7.60		6.60	?			Monthly
Safeguarding Information & Advice	Aug 23	3.68		3.68	?			Monthly
Transformation & Community Partnerships	Aug 23	10.65		10.65	?			Monthly
Working days lost to sickness per headcou	nt YTD							
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Aug 23	0.29		0.30		2.42	5.80	Monthly
Public Health	Aug 23	0.36		0.40	*	2.42	5.80	Monthly
Safeguarding Information & Advice	Aug 23	0.14) 	0.14	*	2.42	5.80	Monthly
Transformation & Community Partnerships	Aug 23	0.33		0.33	*	2.42	5.80	Monthly
Voluntary turnover (Month)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Aug 23	0.00%		0.00%	?			Monthly
Public Health	Aug 23	0.00%		0.00%	?			Monthly
Safeguarding Information & Advice	Aug 23	0.00%		0.00%	?			Monthly
Transformation & Community Partnerships	Aug 23	0.00%		0.00%	?			Monthly
Voluntary turnover (YTD)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Aug 23	7.27%		7.41%	*	5.38%	12.90%	Monthly
Public Health	Aug 23	23.53%		25.00%		5.38%	12.90%	Monthly
Safeguarding Information & Advice	Aug 23	0.00%		0.00%	⇒	5.38%	12.90%	Monthly
Transformation & Community Partnerships	Aug 23	0.00%		0.00%	•	5.38%	12.90%	Monthly

4. Chief Executive Directorate

Performance

4.1 There are no performance indicators reported by this Directorate.

<u>Risk</u>

4.2 Table 6 sets out the current key risks for the directorate.

Table 6: Chief Executive Directorate key risks

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
CMT40 - Insufficient emergency response or business continuity planning (BCP) failure.				Static	23/05/23
 Mitigations in place: Inter authority agreement with JEPU in place (RBWM, WBDC and BFBC) to provide resilience with experts in the field. 	8	8	8		
 Mitigations in progress: Service BCPs continuing development. JEPU to run a BCP test in the form of a whole-council exercise during 2023-2024. 					

Workforce

4.3 Scorecard 4 outlines workforce information for the Chief Executive's Directorate. There are no concerns in relation to sickness, with number of days lost to sickness well below the target for Aug-23. There are no concerns in relation to % voluntary turnover (YTD) as reported amber values (12.50% for Chief Executive Directorate and 12.90% for Strategy, Performance & Communications Service) are due to staff leaving a small team, which significantly inflates reported percentages.

Scorecard 4: Workforce: Chief Executive's Directorate

Chief Executive Directorate: Workforce											
Headcount											
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Chief Executive Directorate	Aug 23	16		16	?			Monthly			
Strategy, Performance & Communications	Aug 23	15	\sim	15	?			Monthly			
FTE											
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Chief Executive Directorate	Aug 23	15.41		15.41	?			Monthly			
Strategy, Performance & Communications	Aug 23	14.41		14.41	?			Monthly			
Working days lost to sickness per headcount YTD											
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Chief Executive Directorate	Aug 23	0.05		0.05	*	2.42	5.80	Monthly			
Strategy, Performance & Communications	Aug 23	0.06		0.06		2.42	5.80	Monthly			
Voluntary turnover (Month)											
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Chief Executive Directorate	Aug 23	0.00%	Λ	0.00%	?			Monthly			
Strategy, Performance & Communications	Aug 23	0.00%	Λ	0.00%	?			Monthly			
Voluntary turnover (YTD)											
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Chief Executive Directorate	Aug 23	12.50%		12.50%	*	5.38%	12.90%	Monthly			
Strategy, Performance & Communications	Aug 23	12.90%		12.50%		5.38%	12.90%	Monthly			

5. Children's Services & Education Directorate

Performance

5.1 Scorecard 5 sets out KPIs for the Children's Services & Education Directorate and reflects the latest data available at the time of this report's preparation. Please note that preparation of this report has preceded availability of Q2 data for metrics reported on a quarterly frequency. Of the 15 metrics reported there are: 1 red, 1 amber, 8 green and 5 non-targeted indicators for monitoring. The service is currently reviewing its targets and tolerance thresholds for all metrics, and this will be reflected in Q2 2023/24.

5.2 Key successes:

• In Q1 23/24 8/10 targeted measures are green and 6/10 target-based measures have either maintained Q4 22/23 performance or improved.

Education, Health and Care Plans assessments:

• The percentage of Education, Health and Care Plan (EHCP) assessments (including exceptions) completed within 20 weeks (97.8%, 44/45), is above the 90% target for Q1 23/24 and exceeding the most recently published national average. Performance can be attributed to the realignment and training initiatives undertaken in the SEN Team, positively impacting staff, enabling them to enhance their knowledge and skills, resulting in more timely assessments.

Care Leavers

The care leaver service is also acknowledged to have seen a rise in the proportion of care leavers in education, employment and training (19-21yr olds) to 67.3% (37/55) in Q1 23/24 compared to 58.3% (35/60) in Q4 22/23. Performance remains strong in relation to the proportion of care-leavers living in suitable accommodation (19-21yr olds) at 96.4% (53/55).

5.3 Key challenges:

Children referred to social care per 10,000 population (cumulative)

- While it is acknowledged that referrals to social care is positive in relation to safeguarding children, and therefore welcome, the service is collaborating with GPs and schools to increase understanding of when a referral is appropriate in order to reduce the numbers of referrals which lead to no further action. This aims to ensure that staff are focusing on the right referrals.
- In Q1 23/24 the number of children referred to social care per 10,000 population is 134 which projects 535 by end of 23/24. Although lower than Q1 22/23 (173), this is still indicative of a high level of need coming through the front door. Quarterly South East Sector Led Partnerships (SESLIP) benchmarking data indicates that an increased level of demand continues to be seen across the South East region and, as at the end of Q4 22/23 (most recently available data) the regional average rate was 162.

• The service acknowledges that a strong early intervention service is in place to reduce demands, however where residential placements are required they are, like adults services, invariably at high-cost which is causing budget pressure.

In house foster placements

- The percentage of children placed within in-house foster placements is green in Q1 23/24 with figures at 67.9% (53/78), above the target of 50%. It is noted that there has been a general decline in the number of children in foster placements over the two years (95 in Q1 20/21 to 78 in Q1 23/24). While the metric is consistently performing above targets, it is raised as a challenge because more elderly foster carers are likely to retire and there is a need to plan ahead to look for suitable alternatives.
- The service is implementing a 'Connected Carers' initiative, working with extended families of the children to provide them placements in a more familiar familial setting.
- The council views the affluence of the borough with higher percentage of detached and semi-detached properties as a positive opportunity to explore increases in in-house foster placements.

Scorecard 5: Children's Services & Education Directorate

Children's Services & Education Direct	ora <u>te</u>								
Domestic abuse									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
# of children in households of MARAC referrals (including repeats)	Jun 23	33	$\sim \sim \sim \sim$	13	?	33			Quarterly
# of reports to police in RBWM (crimes + non-crimes)	Jun 23	712	^	771	?	712			Quarterly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
[AfC:C1b] # of contacts progressed as complaints (Children's)	Jun 23	21	\sim	28	?	21			Quarterly
[AfC:C5] # of compliments received (Children's)	Jun 23	27	1	22	?	27			Quarterly
Children & young people									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
[AfC:16] # of children referred per 10,000 population (cumulative)	Jun 23	134.00		588.00		134.00	115.75	463.00	Quarterly
[AfC:21] % of children subject to a CPF for 2+wks visited within last 10working days		96.5%	\	90.6%	*	96.5%	95.0%	95.0%	Quarterly
[AfC:33] % of children placed with in- house foster placements	Jun 23	67.9%		64.9%	•	67.9%	50.0%	50.0%	Quarterly
[AfC:35] % of care-leavers in education, training and employment (19-21yr olds)	Jun 23	67.3%	1	58.3%	*	67.3%	50.0%	50.0%	Quarterly
[AfC:6] % of eligible children receiving a 6-8wk review within 8wks	Jun 23	86.2%		78.8%		86.2%	70.0%	70.0%	Quarterly
[AfC:3] % of EHCP assessments completed within 20wks (inc exceptions)	Jun 23	97.8%		97.8%	•	97.8%	90.0%	90.0%	Quarterly
[AfC:38] % of referrals closed in the period with a positive outcome	Jun 23	94.2%		97.1%	?	94.2%			Quarterly
[AfC:15] # of first-time entrants into youth justice system	Jun 23	6	$\sim \sim \sim$	3	•	6	11	45	Quarterly
[AfC:2] % of borough schools rated by Ofsted as good/outstanding	Jun 23	90.9%		93.9%	•	90.9%	95.0%	95.0%	Quarterly
[AfC:34] % of care-leavers living in suitable accommodation (19-21yr olds)		96.4%		96.7%	•	96.4%	80.0%	80.0%	Quarterly
[AfC:7] % of children with a review at	Jun 23	72.0%	1	73.3%		72.0%	70.0%	70.0%	Quarterly

<u>Risk</u>

5.4 Table 7 sets out the current key risks to the directorate.

Table 7: Children's Services & Education Directorate key risks

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
 SSS017 - Failure to improve standards in our schools. Mitigations in place: Termly meetings with all Heads and Chairs of Governors, engaging regional Ofsted lead as appropriate, to drive education agenda. Maintain the education and early years link approach with risk assessed identification of challenging schools. 	4	4	4	Static	21/07/23
 SSS018 - Exposure to health and safety risks in schools. Mitigations in place: Ongoing programme of fire safety works. Asbestos management surveys in place. Electrical testing up to date. 	4	4	4	Static	21/07/23
 SSS019 - Maintain a satisfactory level of health or development for children with complex and multiple needs. Mitigations in place: Capital funding secured to increase the number of special units attached to mainstream schools Intensive Support team work to avoid children coming into the care of the council/reunify with their family when safe to do so. Mitigations in progress: RBWM to have one of 33 new special free schools being created nationally. 	n/a	12	6	New risk from 21/07/23	21/07/23

Workforce

Agency rate in front line social worker posts

5.5 Scorecard 6 outlines workforce information for the Children's Services & Education Directorate. Please note that the workforce data does not include figures for Achieving for Children. Key indicators related to vacancy and agency rates within Achieving for Children will be reportable from Q2 onwards.

Scorecard 6: Workforce: Childre Children's Services & Education Directorate: Workfor		rvices		ucatio	n Directo	rate		<u></u>
Headcount	ce							
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Aug 23	2		2	?			Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Aug 23	2.00		2.00	?			Monthly
Working days lost to sickness per headcour	nt YTD							
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Aug 23	2.00		2.00		2.42	5.80	Monthly
Voluntary turnover (Month)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Aug 23	0.00%		0.00%	?			Monthly
Voluntary turnover (YTD)								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Aug 23	0.00%		0.00%	\$	5.38%	12.90%	Monthly
Achieving for Children: Workforce					Doriod			
Measure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
Vacancy rate in front line social worker posts	Sep 23				?			Quarterly

Sep 23

Scorecard 6: Workforce: Children's Services & Education Directorate

?

Quarterly

6. Place Directorate

Performance

6.1 Scorecard 7 sets out KPIs for the Place Directorate and reflects the latest data available at the time of this report's preparation. Please note that preparation of this report has preceded availability of Q2 data for indicators reported on a quarterly frequency. Of the 18 metrics reported and where latest data (either Q1 23/24 or latest monthly data) is available, there are: 0 red, 2 amber, 8 green (where 1 metric relates to Q4 22/23 data) and 8 non-targeted metrics for monitoring.

6.2 Key successes:

• At the time of preparation of the report, there has been in-period improvement of 5/8 green metrics and 2/8 being at 100% in the last 3 months.

Leisure Centre attendances

 The number of attendances at leisure centres (LC) has increased since Feb-23 reaching a record high of 312,154 in Aug-23, the highest since reporting began in 2017, and with high attendances at both the Braywick and Windsor leisure centres particularly. Contributing factors include the maturing offerings at Braywick LC, now in its third year since opening its doors in Summer 2020; initiatives like free youth swim sessions, and potentially inclement weather in summer driving indoor activities.

Planning applications processed within timeframe

 There has been overall improvement in planning applications processed in time, with all categories (major/minor/other) either above target for Q1 23/24 (major/minor) or showing an improvement over the last 2 quarters (minor/other). The Assistant Director for Planning acknowledges that voluntary turnover has previously impacted processing times and so while performance is seeing an improvement, there remains a backlog of applications.

Incidents and complaints in relation to Anti-social behaviour

- While there is no polarity or targets associated with the number of anti-social behaviour (ASB) incidents and complaints (142 in Q1), or the number of group dispersals across the borough (91 in Q1), it is noted that there has been an increase in both compared to Q4 22/23. Seasonality affects both indicators, however the number of ASB incidents & complaints shows a 492% increase in Q1 23/24 compared to Q1 22/23. This is due to active promotion of reporting lines by the Community Safety team in their Community Engagement & Crime prevention stands across the borough and there are currently no concerns about these metrics.
- It is also acknowledged that there is a grey area in what can be perceived as an ASB by a complainant and may not be so, however once a complaint is

received, community wardens are sent to assess the situation and take appropriate action.

6.3 Key challenges:

Households in temporary accommodation

- The number of households in temporary accommodation is 230 in Aug-23, broadly in line with monthly trends since Apr-21 but the highest it's been since Dec-22 (235). The % of households in temporary accommodation within the borough is 43% in Aug-23, below the target of 50% and following a month-on-month downward trend since May-23 (46.2%).
- There are significant challenges including limited housing stock, cost of living crisis, and increases in property prices and rents. Additional pressures faced by the Housing Service include housing asylum seekers, and Government decision to freeze Local Housing allowance rates for 2023/24.
- Separately, increases in rent for private rental properties, coupled with other factors like loss of jobs or cost of living crisis, also sees an increase in rough sleepers who are not placed in temporary accommodation.
- The service is looking at a range of options to secure more housing stock within the borough, including looking at its own assets and externally funding sources such as Community Infrastructure Levy (CIL) and central government funding. The service is also liaising with partners and charities to secure accommodation and work for rough sleepers.

Recycling rates

- Latest waste management data has not been provided for this report due to the team being acutely short staffed and with a wide range of services in its remit in addition to waste and recycling.
- Anecdotal evidence indicates the recycling rates might decline. There is potential to run a promotion campaign to encourage residents to recycle more, however with staff shortages this campaign is yet to be confirmed. Latest available data for the proportion of household waste sent for reuse, recycling (Q4 22/23) is 52.1% above target of 50% and green. Latest available data for the average number of missed collections per 100,000 collections relates to Jul-23 (19.25 vs target of 60 and flagging green).

Scorecard 7: Place Directorate

Place Directorate	ale								
Planning applications									
					Period				
Measure	Date	Period	Period	Last	Improving /	YTD	YTD	YE	Frequency
ineasule	Date	Actual	trends	Period	Worsening ↑	Actual	Target	Target	rrequency
[P:2] % of minor planning applications processed in time	Jun 23	80.6%		80.5%	*	80.6%	70.0%	70.0%	Quarterly
[P:3] % of other planning applications processed in time	Jun 23	84.0%		80.3%	*	84.0%	85.0%	85.0%	Quarterly
[P:1] % of major planning applications processed in time	Jun 23	80.0%		100.0%	*	80.0%	65.0%	65.0%	Quarterly
Community safety									
					Period				
Measure	Date	Period Actual	Period trends	Last Period	Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
# of ASB interventions	Jun 23	0	\sim	3	?	0			Quarterly
# of group dispersals across the borough	Jun 23	91	\sim	6	?	91			Quarterly
Number of ASB incidents & complaints	Jun 23	142	\sim	129	?	142			Quarterly
Environmental health & Trading stan	dards								
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
[HEHTS:01] % food businesses that are broadly compliant with food law	Aug 23	86.4%		88.0%	1 1	86.4%	80.0%	80.0%	Monthly
[HEHTS:02] # of properties/dwellings improved formally and informally	Jun 23	10			?	10			Quarterly
[HEHTS:03] % of complaints (noise) that result in abatement notices	Aug 23	0.0%		0.0%	?	0.0%			Monthly
[HEHTS: 04] # of test purchase operations (TPOs) for age restricted products	Jun 23	4	\checkmark	0	?	4			Quarterly
Leisure centres									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
# of attendances at leisure centres	Aug 23	312,154		269,932		1,285,32 0	794,819	2,010,2 86	Monthly
Highways									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
(Vol:4) % of 24hr orders responded to on time	Aug 23	100.0%	Y	100.0%	\$	98.9%	98.0%	98.0%	Monthly
(Vol:5) % of emergency 2hr orders responded to on time	Aug 23	100.0%		100.0%	•	99.5%	98.0%	98.0%	Monthly

Waste management & recycling									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
(4.2.1) % of household waste sent for reuse, recycling	Mar 23	52.1%		51.2%		51.7%	50.0%	50.0%	Quarterly
(Ser:1) Average no. missed collections per 100,000 collections	Jul 23	19.25	\sim	21.15	•	19.33	60.00	60.00	Monthly
Housing									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
% of households in temporary accommodation that is located within the borough	Aug 23	43.0%		43.3%	*	43.0%	50.0%	50.0%	Monthly
# of households in temporary accommodation	Aug 23	230		224	?	230			Monthly
% successful homelessness prevention activity for households subject to the Prevention/Relief duty	Aug 23	24.6%		33.1%	?	12.3%			Monthly

<u>Risk</u>

6.4 Table 8 sets out the key risks to the directorate.

Table 8: Place Directorate key risks

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
 HOUS02 - Costs of temporary accommodation increasing beyond capacity to fund. Mitigations in place: Prioritise and manage placements to ensure full occupancy. Homelessness and Rough Sleeping Strategy 18-23. Mitigations in progress: Seek out new providers, negotiating lower cost and ceasing high-cost placements. Look at alternative options such as social housing stock levels and private landlords. 	9	9	6	Static	21/06/23
HPLAND019 – Failure to undertake inspections of council trees and delivering works.	9	9	8	Static	13/12/22

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
 Mitigations in place: Safety works are raised through the Arboriculture Services Framework. Inspections targeted at trees in urban areas, as this is where impacts on tree health are the most frequent and significant. Mitigations in progress: Contracted inspections ceased end of 21/22 financial year. Budget proposals for 23/24. IST02 - Flood risk is not sufficiently dealt with by preventative and responsive measures. Mitigations in place RBWM emergency plan and flooding risk management strategy Multi agency response plan co- 	4	4	4	Static	22/05/23
 ordinated by flood risk manager. Mitigations in progress: A workshop has been completed with JEPU to identify gaps with a flooding exercise planned for October 23. PPS013 - Failure to assess resources 				Static	23/05/23
 and demands resulting from cold weather. Mitigations in place: A comprehensive annual winter maintenance plan is in place detailing the roles and responsibilities of contractors. Risk assessments behind road treatment strategy. Contractors also have their own risk assessments for carrying out the works. 	2	2	2		

<u>Workforce</u>

6.5 Scorecard 8 outlines workforce information for the Place Directorate. There are no concerns in relation to working days lost to sickness which is well below target for the Directorate as a whole and all related services in Aug-23.

Place Workforce								
Headcount								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Aug 23	215		213	?			Monthly
Housing and Environmental Health	Aug 23	57		57	?			Monthly
Infrastructure, Sustainability and Economic Growth	Aug 23	50		49	?			Monthly
Neighbourhood Services	Aug 23	52		53	?			Monthly
Planning	Aug 23	55		53	?			Monthly
FTE								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Aug 23	199.50		197.50	?			Monthly
Housing and Environmental Health	Aug 23	55.16		55.35	?			Monthly
Infrastructure, Sustainability and Economic Growth	Aug 23	42.83		41.64	?			Monthly
Neighbourhood Services	Aug 23	48.94		49.94	?			Monthly
Planning	Aug 23	51.57		49.57	?			Monthly

Scorecard 8: Workforce: Place Directorate

Working days lost to sickness per headcount YTD

Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Aug 23	1.16		0.95		2.42	5.80	Monthly
Housing and Environmental Health	Aug 23	2.15	r V	1.90		2.42	5.80	Monthly
Infrastructure, Sustainability and Economic Growth	Aug 23	0.05		0.00	*	2.42	5.80	Monthly
Neighbourhood Services	Aug 23	1.55	M	1.11	*	2.42	5.80	Monthly
Planning	Aug 23	0.74		0.68		2.42	5.80	Monthly

Voluntary turnover (Month)

Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate			M		?			Monthly
Housing and Environmental Health	Aug 23	1.80%	/\/_	1.80%	?			Monthly
Infrastructure, Sustainability and Economic Growth	Aug 23	0.00%		0.00%	?			Monthly
Neighbourhood Services	Aug 23	0.00%	M_{-}	1.92%	?			Monthly
Planning	Aug 23	1.75%	\sim	0.00%	?			Monthly

Voluntary turnover (YTD)

Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Aug 23	7.57%		6.65%		5.38%	12.90%	Monthly
Housing and Environmental Health	Aug 23	9.01%		7.21%	*	5.38%	12.90%	Monthly
Infrastructure, Sustainability and Economic Growth	Aug 23	4.30%		4.35%	•	5.38%		Monthly
Neighbourhood Services	Aug 23	1.94%		1.92%	*	5.38%	12.90%	Monthly
Planning	Aug 23	14.04%	The state of the s	12.50%		5.38%	12.90%	Monthly

7. Resources Directorate

Performance

7.1 Scorecard 9 sets out KPIs for the Resources Directorate and reflects the latest data available at the time of this report's preparation. Of the 6 metrics reported there are: 1 red, 2 amber, and 3 green.

7.2 Key successes:

Council Tax collection rates

At Aug-23, the % of council tax collected is 49.22%, above the target of 48.90% and above monthly targets for the last 3 months. In cash terms this is £3.5m more collected this year compared to same time last year. Latest benchmarking data puts RBWM's council tax collection rates for the year 2022/23 (98.55%) higher than England (96.02%).

Processing new benefits claims (Housing Benefits)

- The average number of days to process new claims is 9.59, flagging green for the first time in 2023/24 following a steady improvement trend. The year-to-date figure is 13.94 (amber), just short of target of 12. Council performance is better than both the South East and England over the last 12 months with the exception of Dec-22 (Mar -22 to Mar-23, latest benchmarking data).
- It is acknowledged that figures are retrospectively adjusted by the Department for Work and Pensions and these figures will be updated as confirmed by the DWP.

7.3 Key challenges:

Non-domestic rates collection

- Staff shortages have impacted Revenue, Benefits, Library & Resident Services across a number of service-delivery areas, including difficulty filling an NNDR (National Non-Domestic Rates) vacancy from September 2022. This vacancy has now been filled but the officer has not yet started. This, coupled with processing other Government schemes, has impacted performance.
- The % of non-domestic rates collected is 49.53%, above the target of 49.00% for Aug-23 and has remained above target since May-23. Latest benchmarking data puts RBWM's non-domestic collection rates for 2022/23 (98.0%) higher than England (96.76%).

Customer Service Centre Performance

In Aug-23, the % of calls answered within 2 minutes is at 79.1% slightly below target of 80% (amber), for the first time since Feb-22, however YTD figures are above target (85.5% Vs 80%). The % of calls abandoned after 5 seconds is at 5.0%, just above the target of 4% (amber). Nonetheless the year-to-date performance is green (3.7% Vs 4.0%). The slight dip in performance for both metrics is attributed to staff being on leave during the summer holidays coupled with some long-term sickness absence starting in July.

Scorecard 9: Resources Directorate

Resources Directorate									
Revenues									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
(RB:1) Percentage of Council Tax collected	Aug 23	49.22%		40.06%		49.22%	48.90%	98.50%	Monthly
(RB:2) Percentage of Non Domestic Rates (Business Rates) collected	Aug 23	49.53%		42.05%	*	49.53%	49.00%	98.30%	Monthly
Customer service									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑	YTD Actual	YTD Target	YE Target	Frequency
(LRS:4) % of calls answered within 2 mins (monthly)	Aug 23	79.1%		82.9%	*	85.5%	80.0%	80.0%	Monthly
(LRS:5) % of calls abandoned after 5 secs (monthly)	Aug 23	5.0%	1	4.5%	•	3.7%	4.0%	4.0%	Monthly
Benefits Claims									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening ↑		YTD Target	YE Target	Frequency
(RB:5) Average # of days to process new claims (Housing Benefits)	Aug 23	9.59		12.15	*	13.94	12.00	12.00	Monthly
(RB:6) Average # of days to process changes in circumstances (Housing Benefits)	Aug 23	8.82		4.89	•	5.87	5.00	5.00	Monthly

<u>Risk</u>

7.4 Table 9 sets out the current key risks to the directorate.

Table 9: Resources Directorate key risks

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
 POLPER19 - Failure to comply with council constitution and code of conduct. Mitigations in place: Scheme of delegation and report writing sign off. There is no opportunity for an individual member to make a significant decision in isolation. 	8	8	4	Static	31/05/23
Mitigations in progress:					

Risk	Q1 rating	Q2 rating	Target	Direction	Last review date
 Constitution working group undertaking a review of the constitution. 					
 PEN01 - Not bringing the fund back to a fully funded position by the agreed date of 31 March 2040. Mitigations in place: Triannual valuation signed off on 19 March 2023 including consideration of climate risk. Mitigations in progress: Arrange independent test of systems and recommend any further cyber security measures to implement. 	8	8	8	Static	20/06/23

<u>Workforce</u>

7.5 Scorecard 10 outlines workforce information for the Resources Directorate.

Scorecard 10: Workforce: Resources Directorate

Resources Directorate Workforce											
Headcount											
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Resources Directorate	Aug 23	299		296	?			Monthly			
Finance	Aug 23	51		50	?			Monthly			
HR, Corporate Projects and IT	Aug 23	68		67	?			Monthly			
Law & Governance	Aug 23	38		38	?			Monthly			
Revenue, Benefits, Library and Resident Services	Aug 23	142		141	?			Monthly			
FTE											
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency			
^Resources Directorate	Aug 23	265.37		262.37	?			Monthly			
Finance	Aug 23	49.06		48.06	?			Monthly			
HR, Corporate Projects and IT	Aug 23	65.91		64.91	?			Monthly			
Law & Governance	Aug 23	34.02		34.02	?			Monthly			
Revenue, Benefits, Library and Resident Services	Aug 23	116.38		115.38	?			Monthly			

Working days lost to sickness per headcount YTD

Working days lost to sickness per headcou	unt YTD							
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Aug 23	1.68		1.33		2.42	5.80	Monthly
Finance	Aug 23	0.27		0.13		2.42	5.80	Monthly
HR, Corporate Projects and IT	Aug 23	0.49	-	0.43		2.42	5.80	Monthly
Law & Governance	Aug 23	0.49	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	0.45		2.42	5.80	Monthly
Revenue, Benefits, Library and Resident Services	Aug 23	3.05		2.41	•	2.42	5.80	Monthly
Voluntary turnover (Month)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Aug 23	0.33%	\bigvee	2.01%	?			Monthly
Finance	Aug 23	0.00%	~~.^	7.69%	?			Monthly
HR, Corporate Projects and IT	Aug 23	1.49%	лЛЛ	0.00%	?			Monthly
Law & Governance	Aug 23	0.00%		0.00%	?			Monthly
Revenue, Benefits, Library and Resident Services	Aug 23	0.00%	1	1.42%	?			Monthly
Voluntary turnover (YTD)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Aug 23	5.34%		5.03%	*	5.38%	12.90%	Monthly
Finance	Aug 23	9.52%		9.62%		5.38%	12.90%	Monthly
HR, Corporate Projects and IT	Aug 23	4.48%	7	3.01%		5.38%	12.90%	Monthly
Law & Governance	Aug 23	7.79%		7.79%		5.38%	12.90%	Monthly
Revenue, Benefits, Library and Resident Services	Aug 23	3.53%	M	3.55%	•	5.38%	12.90%	Monthly

ANNEXE A: Oflog

Background

In July 2023 the Department for Levelling Up, Housing and Communities (DLUHC) established the Office for Local Government (Oflog) as a new performance body focused on local government in England. Oflog collates, analyses and publishes existing data about the relative performance of councils via a new Local Authority Data Explorer, giving councils the opportunity for peer comparison, and central government and its partners the opportunity to identify where there may be challenges and a need to step in to provide support where appropriate.

Initial indicators have been developed for reporting, with 18 indicators in total currently applicable to Unitary Authorities, Metropolitan and London Boroughs and covering Waste Management, Adult Social Care and Finance service-areas. These service areas will be expanded to cover the breadth of what local authorities do, and the initial list of indicators will be improved and expanded over time.

Monitoring and reporting

With Oflog indicators updated at an annual frequency the Strategy, Policy & Performance unit will keep Oflog developments under review, including any mid-year expansion of the list of indicators reported.

The council will publish an annual statement in relation to performance against Oflog indicators within the council's routine Quarterly Assurance Report (QAR) at appropriate times.

2021/22 data

Figure 1 sets out the initial Oflog metrics with comparison of RBWM to the <u>median</u> values for CIPFA statistical nearest neighbours and England. Comparison of RBWM to neighbouring South East LAs (Bracknell Forest, Reading, Slough, West Berkshire, Wokingham) is also provided for interest. Figure 1 provides an indication of RBWM's relative position against its comparators ("Better" or "Worse" for metrics where there is a clear polarity, and "Higher" or "Lower" for metrics where there is no polarity). All data presented at Figure 1 relates to 2021/22 as published through Oflog's Local Authority Data Explorer.

Figure 1: Oflog metrics: comparison of RBWM with CIPFA median, England median, and neighbouring Berkshire authorities

OFLOG	2021/22 Metric comparison		Data								RBWM position in relation to:							
Area	KPI		Windsor and Maidenhead Latest data	CIPFA Nearest Neighbours Median	England Median	Bracknell Fore st	Reading	Slough	W est Berkshire	Wokingham	CIPFA Nearest Neighbours Median	England Median	Bracknell Fore st	Reading	Slough	West Berkshire	Wokingham	
Waste management	Household waste recycling rate (Percentage)	2021/22	50.4%	51.7%	41.9%	56.2%	51.5%	26.7%	49.0%	54.2%	Worse	Better	Worse	Worse	Better	Better	Worse	
	Residual household waste (kg per household)	2021/22	490.2	496.0	502.4	406.9	369.1	699.0	542.9	457.2	Better	Better	Worse	Worse	Better	Better	Worse	
	Recyling contamination rate (Percentage)	2021/22	5.6%	5.8%	5.6%	6.3%	7.2%	2.9%	4.3%	5.8%	Better	Same	Better	Better	Worse	Worse	Better	
Adult social care	Requests resulting in a service (per 100,000 population)	2021/22	1,708	1,476	1,709	1,505	1,669	1,479	1,721	2,343	Higher	Lower	Higher	Higher	Higher	Lower	Lower	
	Workforce turnover rate (Percentage)	2021/22	25.5%	31.9%	28.7%	22.8%	17.4%	31.1%	33.0%	29.6%	Lower	Lower	Higher	Higher	Lower	Lower	Lower	
	People in adult social care: quality of life (Score)	2021/22	0.405	0.406	0.409	0.409	0.379	0.433	0.406	0.369	Worse	Worse	Worse	Better	Worse	Worse	Better	
	People who use services who found it easy to find information	2021/22	73.4%	68.4%	65.3%	68.3%	68.7%	64.2%	74.1%	70.8%	Better	Better	Better	Better	Better	Worse	Better	
	Carers of people in adult social care: quality of life (Score)	2021/22	7.6	7.2	7.2	7.5	6.9	6.1	7.9	7.7	Better	Better	Better	Better	Better	Worse	Worse	
	Carers who found it easy to find information about services	2021/22	61.9%	58.0%	57.3%	63.0%	44.4%	41.8%	56.8%	59.1%	Better	Better	Worse	Better	Better	Better	Better	
	Short term service provision (Percentage)	2021/22	96.0%	74.9%	76.3%	76.0%	83.3%	Not available	64.1%	95.9%	Better	Better	Better	Better	Not available	Better	Better	
Finance	Non-ringfenced reserves as percentage of net revenue expenditure (Percentage)	2021/22	49.6%	60.5%	54.9%	90.4%	42.0%	5.2%	23.7%	105.9%	Lower	Lower	Lower	Higher	Higher	Higher	Lower	
	Non-ringfenced reserves as percentage of service spend (Percentage)	2021/22	42.8%	55.1%	44.6%	71.5%	35.6%	6.3%	24.2%	90.8%	Lower	Lower	Lower	Higher	Higher	Higher	Lower	
	Total core spending power per dwelling	2021/22	£ 1,497.57	£ 1,763.89	£ 1,885.14	£1,763.05	£ 1,901.18	£ 1,931.82	£ 1,833.36	£ 1,969.16	Lower	Lower	Lower	Lower	Lower	Lower	Lower	
	Level of Band D council tax rates	2021/22	£ 1,148.75	£ 1,593.55	£ 1,554.02	£1,403.19	£ 1,776.60	£ 1,490.30	£ 1,596.51	£ 1,620.14	Lower	Lower	Lower	Lower	Lower	Lower	Lower	
	Council tax revenue per dwelling	2021/22	£ 1,592.78	£ 1,670.43	£ 1,293.42	£ 1,672.49	£ 1,631.01	£ 1,350.30	£ 1,884.34	£ 2,092.78	Lower	Higher	Lower	Lower	Higher	Lower	Lower	
	Social care spend as percentage of core spending power	2021/22	64.9%	66.4%	66.4%	69.8%	66.4%	41.8%	66.3%	55.9%	Lower	Lower	Lower	Lower	Higher	Lower	Higher	
	Debt servicing as percentage of core spending power	2021/22	6.0%	6.4%	9.0%	6.4%	15.5%	9.9%	18.1%	4.7%	Lower	Lower	Lower	Lower	Lower	Lower	Higher	
	Total debt as percentage of core spending power	2021/22	197.2%	160.0%	226.7%	214.3%	388.8%	737.1%	175.2%	306.1%	Higher	Lower	Lower	Lower	Lower	Higher	Lower	