

Report Title:	Quarterly Assurance Report Q2 2023/24 or where latest data is available until October 23.
Contains Confidential or Exempt Information	No - Part I
Cabinet Member:	
Meeting and Date:	Corporate Overview and Scrutiny Panel, 29 January 2024
Responsible Officer(s):	Stephen Evans, Chief Executive Rebecca Hatch, Assistant Director of Strategy & Communications
Wards affected:	All

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## **REPORT SUMMARY**

*The purpose of this report is to provide the Quarterly Assurance Report (Appendix A) focused on the latest available position in relation to performance indicators and the corporate risk register. Audit and Workforce insights are also included. The Quarterly Assurance Report is a mechanism to support good governance and reflects performance (Q2 23/24 or where latest information is available until October 2023) and risk for RBWM.*

*Panel Members 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 Quarterly Assurance Report (QAR) at Appendix A was introduced in October 2023 to bring together the latest available performance insights and risk information. Audit and Workforce insights are also included. As a mechanism to support good governance, there are no options associated with this report.

## **3. KEY IMPLICATIONS**

- 3.1 The council is developing a new Council 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 Council Plan provides a framework for decision-making and resource allocation.

- 3.2 The aims and priorities of the new Council Plan will be presented at both Cabinet and Full Council in February 2024, alongside the 2024/25 Budget. The full Council Plan, inclusive of deliverables and a refreshed suite of performance indicators, will be considered by the Corporate Overview & Scrutiny Panel and Cabinet in March, and presented to Full Council in April 2024.
- 3.3 As part of its consideration of the first QAR in November 2023, the Corporate Overview & Scrutiny Panel shared constructive feedback in relation to the QAR's future evolution, including feedback on additional performance indicators to be considered for inclusion. The Panel's feedback is being factored into the development of the new performance management framework that will support the new Council Plan, and which will be monitored through the Quarterly Assurance Report going forwards.
- 3.4 In the interests of good governance, an interim performance management framework (PMF) has been developed to share performance with Cabinet and the Corporate Overview & Scrutiny Panel in 2023/24. This is set out in the QAR (see Appendix A). 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.
- 3.5 When considering the last QAR in November 2023, the Panel specifically queried how the council's Citizens' Portal fits in with the new Quarterly Assurance arrangements. For background, the Citizens' Portal was introduced by the council in 2022 as an online dashboard to provide visibility of council performance and progress against its then current Corporate Plan. Performance reports shared with the Panel across 2022 included links to relevant dashboards on the Portal to allow Members to explore and interact with the reported data. The Portal will not play a role in the new performance management arrangements. The Portal's contents, reflective of the previous Corporate Plan's performance management framework, has been deactivated. The council is looking instead at publishing future performance reports on a dedicated page of the RBWM website.

#### **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. A separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position.

#### **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

<b>Name of consultee</b>	<b>Post held</b>	<b>Date sent</b>	<b>Date returned</b>
<i>Mandatory:</i>		<i>Statutory Officer (or deputy)</i>	
Elizabeth Griffiths	Executive Director of Resources & S151 Officer	18.01.24	18.01.24
Elaine Browne	Deputy Director of Law & Governance & Monitoring Officer	18.01.24	18.01.24
<i>Deputies:</i>			
Andrew Vallance	Deputy Director of Finance & Deputy S151 Officer		

Jane Cryer	Principal Lawyer & Deputy Monitoring Officer		
<i>Mandatory:</i>	<i>Equalities Officer – to advise on EQiA, or agree an EQiA is not required</i>		
Ellen McManus-Fry	Equalities & Engagement Officer	N/A	N/A
<i>Directors (where relevant)</i>			
Stephen Evans	Chief Executive		
Andrew Durrant	Executive Director of Place		
Kevin McDaniel	Executive Director of Adult Social Care & Health		
Lin Ferguson	Executive Director of Children's Services & Education		
<i>Assistant Directors (where relevant)</i>			
Rebecca Hatch	Assistant Director of Strategy & Communications	16.01.24	16.01.24

## REPORT HISTORY

<b>Decision type:</b>	<b>Urgency item?</b>	<b>To follow item?</b>
For information	No	No

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## APPENDIX A

# Quarterly Assurance Report

Performance Data as at Q2 (Jul-Sep) 2023/24 or where latest monthly data is available until October-23.

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Report Author(s)	
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Steve Mappley	Insurance & Risk Manager

## 1. Executive Summary

### Performance

- 1.1 An interim suite of performance indicators (“the Interim PMF”) has been developed for reporting in 2023/24 as part of Quarterly Assurance reporting arrangements. A new Council Plan and related performance management framework is currently in development and will be in place by April 2024. The Corporate Overview & Scrutiny Panel will have a role in reviewing the new performance management framework, and comments shared by the Panel to date – including the need to include outcome/impact focused indicators – are being factored into the new framework’s development. The structure and format of this report will continue to be refined in line with feedback from both Cabinet and the Corporate Overview & Scrutiny Panel to ensure that it delivers the insights required for assurance and decision-making.
- 1.2 The Interim PMF has a total of 65 indicators, with further indicators being identified for inclusion as appropriate over time. It is noted that the indicators 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 – either Q2 (Jul-Sep) or Oct-23. This report’s preparation has preceded availability of Q3 data for indicators reported on a quarterly frequency.
- 1.3 Table 1 summarises the volume of indicators reported in this QAR for each Directorate with a breakdown by RAG status and an indication of the change since the last QAR was reported to Cabinet in Oct-23 shown in brackets. Of the 37 target-based indicators, 84% are either green or amber (31/37), 14% are red (5/37) and 3% (1/37) have no latest data available. Details of performance for each Directorate are set out in relevant sections of this report and a high-level summary of key messages across all Directorates is provided at 1.4.

**Table 1: Latest available period performance with Directorate breakdown (previous QAR position identified in brackets to show change)**

Directorate	Red	Amber	Green	Monitoring only	No data available	Total
RBWM corporate cross-cutting	1 (→ 1)	0 (↓ 1)	3 (↑ 2)	9		13
Adult Social Care & Health	2 (↓ 4)	0 (→ 0)	4 (↑ 3)	7		13
Children’s Services & Education	1 (→ 1)	1 (→ 1)	9 (↑ 8)	4		15
Place	1 (↑ 0)	1 (↓ 2)	7 (↓ 8)	8	1	18
Resources	0 (↓ 1)	4 (↑ 2)	2 (↓ 3)	0		6
<b>Total</b>	<b>5</b> (↓ 7)	<b>6</b> (→ 6)	<b>25</b> (↑ 24)	<b>28</b>	<b>1</b>	<b>65</b>

## Key messages:

- 1.4 **Finance:** The council's serious financial position remains the most acute challenge. A separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position. The risk to the council's financial stability is driven in large part by key strategic risks within services – in particular rising costs, demand pressures and recruitment challenges within adult social care, children's social care and housing. The council's financial position is impacted by its ability to mitigate risks in these areas. While the draft budget for next year has been balanced, it is dependent on the delivery of a large transformation programme and on a range of external factors. The in-year position continues to fluctuate and has been worsening over recent months due to these pressures.
- 1.5 **Adult social care:** the service continues to see acute staffing challenges. A reliance on agency staff to deliver a statutory duty has significant financial implications for the council and risks the quality of care provided. The percentage of posts filled by permanent staff has been declining and is at 70% (Oct-23), meaning that almost a third of posts are vacant or filled by temporary or agency staff.
- 1.6 Despite the challenges, data released in December 2023 as part of the annual Adult Social Care Outcomes Framework (ASCOF) shows a trend of growing satisfaction year-on-year in some key areas of service quality. The borough is ranked top nationally for social care-related quality of life, 2<sup>nd</sup> nationally for the proportion of adults with learning disabilities in paid employment, 3<sup>rd</sup> nationally for residents feeling safe, and 4<sup>th</sup> nationally for people's overall satisfaction with their care and support. These figures provide reassurance on the quality of services provided, as requested by Corporate Overview & Scrutiny.
- 1.7 **Children's social care:** The service continues to see acute staffing challenges to deliver its statutory duties, which means an over-reliance on agency staff and related financial implications for the council due to higher costs.
- 1.8 **Housing:** The cost of living crisis continues to impact the housing service. This, combined with a growing number of asylum seekers, a limited housing stock, and increasing prices for rental properties continues to place considerable strain on the provision of temporary accommodation within the borough and remains a key challenge for the council. The % of households in temporary accommodation within the borough was 39.3% in Oct-23 (red), down from 43% (amber, Aug-23) reported in the last QAR. As at Dec-23 there were 264 households in temporary accommodation, 163 of which (62%) were placed out of borough. Of those placed out of borough, 83% (136/163) were placed in Slough.

## **Risk**

- 1.9 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.
- 1.10 Cabinet 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.
- 1.11 If any risks are of such low inherent impact that there is no good reason to continue referencing them as key risks then they are removed from the key risk registers. They are usually re-categorised as service area risks unless to do so would simply create extraneous “noise” and be of no management benefit. In which case they would be removed completely.

**Table 2: Current risk assessment status by Directorate**

	High	Medium/ high	Medium	Low
RBWM strategic risks	3	4	5	3
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	2	0	2
Resources	0	0	3	0



## 2. RBWM corporate cross-cutting

### Performance

2.1 Scorecard 1 sets out cross-cutting corporate indicators and reflects the latest data available at the time of this report's preparation.

**Scorecard 1: Corporate cross-cutting performance** [please note a separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position]

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	Oct 23	91.3%		84.4%	➔	90.1%	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	Oct 23	7.9%		6.8%	➔	7.9%	0.0%	0.0%	Monthly
[RBWM:M1a] Forecast variance to service revenue budget (£000s)	Oct 23	£7,396		£6,288	?	£7,396			Monthly
[RBWM:M2] % savings made or on track	Oct 23	45.0%		45.0%	?	45.0%		100.0%	Monthly
[RBWM:M2a] Savings made or on track (£000s)	Oct 23	£4,871		£4,871	?	£4,871			Monthly
[RBWM:M3] Overdue debts (excluding Housing Benefits over-payments) (£000s)	Oct 23	£7,380		£7,457	?	£7,380			Monthly
Complaints & Compliments									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:C10] # of compliments received (RBWM Formal Corporate)	Sep 23	97		120	?	217			Quarterly
[RBWM:C6b] # of contacts progressed as complaints (RBWM Formal Corporate)	Sep 23	43		53	?	96			Quarterly
Workforce									
Measure	Date	Period Actual	Period trends	Last period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[RBWM:P01] Headcount	Oct 23	575		566	?	575			Monthly
[RBWM:P02] FTE	Oct 23	523.21		514.69	?	523.21			Monthly
[RBWM:P05] # of working days lost to sickness per headcount (YTD)	Oct 23	1.95		1.57	➔	1.95	3.38	5.80	Monthly
[RBWM:P06] % voluntary turnover (Month)	Oct 23	1.24%		0.54%	?	1.24%			Monthly
[RBWM:P07] % voluntary turnover (YTD)	Oct 23	8.33%		7.14%	➔	8.33%	7.53%	12.90%	Monthly

## Key messages

2.2 **Finance:** The council's serious financial position remains the most acute challenge. In Oct-23 the % forecast variance to service revenue budget was 7.9% (red), worsening from 6.8% in Sep-23. In monetary terms this is a £7,396,000 variance in Oct-23 compared to £6,288,000 in Sep-23. The council has taken swift and decisive action to address the serious financial challenges it faces. This includes introducing a spending control panel which reviews all avoidable spend over £500 and working with each directorate to create robust and deliverable plans to increase income, reduce costs and deliver transformation. A separate Budget Monitoring report is provided to Cabinet monthly with full detail of the council's latest financial position. The council shared its draft Budget in December 2023, which sets out proposals for a balanced budget for 2024/25, however significant delivery risks remain.

2.3 **Workforce:** The council monitors a range of workforce-related indicators, including the number of working days lost to sickness and voluntary turnover, that are drawn from the council's internal HR system. The Corporate Overview & Scrutiny Panel has acknowledged that it would be beneficial to incorporate additional indicators into this report to provide additional insight into agency staff, vacancy rate and the related financial impact. Discussions are in train with officers from relevant services to define the required indicators and the data points required to report against these as part of future reporting. More broadly, maintaining workforce stability is a key risk for the council and included on the corporate risk register (HR26), shown in Table 3, with key mitigations. It is acknowledged that there are capacity gaps across the council which will take time to be addressed, but which are being actively looked at as part of the budget-setting process for 2024/25.

2.3.1 **Working days lost to sickness:** The end of year target is to have fewer than 5.8 working days lost to sickness in total, with a set monthly target trajectory up to 5.8. In 2023/24 sickness has been consistently below the set target trajectory and therefore flagging as green with no concerns. The latest position at the time of this report's preparation is 1.95 (Oct-23), lower than last year (2.15 Oct-22). It is acknowledged that 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. Trends will be monitored closely during the winter seasons as 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.

2.3.2 **Voluntary turnover:** It is acknowledged that some staff-churn is healthy for any organisation and so the year-end target for RBWM is for % voluntary turnover to be within an acceptable range of 12.9% at the end of the financial year. Monthly targets are profiled as a trajectory line up to that 12.9% year-end target. The latest position at the time of this report's preparation is 8.33%, which falls within the acceptable range of the Oct-23 target (7.53%) and therefore flagging green. Voluntary turnover is reported at Directorate and service-level under "Workforce" in relevant sections of this report.

- 2.4 **Information governance:** The council monitors the timeliness of processing Freedom of Information (FOI) requests, including Environmental Information Requests (EIRs) that relate to various environmental aspects. Monthly performance shows volatility as responsiveness can be impacted by the complexity of incoming FOIs and, on occasion, the need to retrieve records or information stored in offsite storage facilities. The council is currently meeting its target of 90% with 571/634 (90.1%) of FOIs responded to within timescales in total between 1 April and 31 October. This indicator will continue to be monitored.
- 2.5 **Complaints and compliments:** It is acknowledged that all complaints and compliments data is drawn from a live system and data may retrospectively change as complaints progress through the various stages of the process. The council publishes an Annual Compliments and Complaints Report, providing detailed focus on volumes of compliments and complaints including reasons for complaints, outcomes and lessons learnt. A Q2 snapshot of the system shows that there have been lower volumes of both complaints (Q2: 97) and compliments (Q2: 43) received in Q2 compared to Q1.
- 2.6 “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). A higher proportion of complaints received in Q2 related to housing options (23.3%, 10/43) and this follows a quarter on quarter rise in housing options complaints since Q3 22/23, a trend that could be attributable to a combination of factors including increased demand, team vacancies and possible counting of banding appeals as complaints. The service is reviewing the data, key themes and learnings to identify how to reduce complaints in this area. There has been a reduction in the volume of complaints in relation to both waste & recycling (14%, 6/43) and planning applications & enquiries (14%, 6/43) from Q1. There were no complaints in Q2 about debt recovery, enforcement and parking compared to a sum of 13 complaints in Q1, contributing to an overall reduction in complaint volumes in Q2 23/24.

## **Risk**

- 2.7 Senior management undertook a comprehensive re-evaluation and revision of the entire strategic risk register during December 2022 and January 2023 which informs much of the content of our current key strategic risk registers as per Table 3. Throughout the year the key operational and strategic risks are reviewed typically as part of a directorate management meeting to encourage discussion and challenge. A review and refresh of the strategic risk register will take place in 2024 once the new Council Plan is in place.
- 2.8 Since the Q2 report one new risk has been added to the resources directorate's risk portfolio:
- There is a risk that the current CRM<sup>1</sup> needs to be shut down because it goes end of life, fails the necessary mitigations and this happens before the new becomes operational.
- 2.9 No risks have been removed from any our key risk registers in the last quarter.
- 2.10 Mitigation timescales will be introduced into the risk commentaries at future risk review sessions to provide further granularity around the progress of outstanding control measures.

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<sup>1</sup> Customer Relationship Management software.

**Table 3: Strategic Risks**

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>HOF6 - The council's financial strategy needs to be effective in dealing with pressures. Addressing the ongoing impact of historical Council Tax cuts and the cost of servicing debt remain key concerns.</p> <p>As at the end of November, the forecast revenue outturn for the year is an overspend of £7.396m reducing to £3.688m including unallocated contingency budgets and changes to funding budgets.</p> <p>The risk is that although we have drafted a balanced budget for the coming year, our reserves will be so depleted that our already low level of financial resilience has reduced even further which increases our risk of having to issue a S114 notice.</p> <p>The drafting of a balanced budget was a significant achievement but in order for it to be realised, a large scale transformation programme is under way and there is still huge uncertainty about the longer term position.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Monthly budget updates at ELT/Cabinet briefing.</li> <li>• Strategic business plan at Cabinet briefing 06/23.</li> <li>• Since October, all non-essential spend over £500 has required approval via a Spending Control Panel.</li> <li>• Capital expenditure has been reviewed to minimise borrowing requirements.</li> <li>• Budget challenge sessions successfully concluded and a balanced draft budget published in December.</li> </ul>	Executive Director Resources	16	16	8	Static	24/10/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>CLIM12 - Climate change – extreme weather conditions, carbon emissions.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Climate strategy approved Dec 2020.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Develop a Climate Change Adaption plan.</li> </ul>	Executive Director Place	12	12	9	Static	21/11/23
<p>SDCHIL29 - Impact of winter flu and possible future pathogen variants.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>RBWM Outbreak Control Plan.</li> <li>Hospitals have critical incident plans e.g., postpone non-urgent operations. Priority that beds are available for seriously ill patients.</li> </ul>	Executive Director of Adult Social Care & Health	12	12	8	Static	21/09/23
<p>HR26 – Maintaining workforce stability. Problems in recruitment and retention of staff.</p> <p>Key mitigations in place: likely</p> <ul style="list-style-type: none"> <li>Provision for salary increases in MTFP.</li> <li>Salary gateways where appropriate.</li> <li>Ongoing consideration of revisions to posts to attract suitably qualified candidates.</li> <li>HR manager - recruitment and retention to work with senior managers to develop strategies to reduce agency spend.</li> </ul> <p>Key mitigations in progress</p> <ul style="list-style-type: none"> <li>Continual review of terms and conditions and further national benchmarking.</li> </ul>	Chief Executive	9	9	3	Static	31/10/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>SDCHIL27 – a potential increase in residents suffering complex mental health disorders could impact on RBWM to support the consequences.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Engage with ICB and ICP to ensure that health services prioritise mental health services.</li> <li>Develop "Mental Health in School" teams across the borough</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Public health strategy alignment.</li> <li>Progress in Frimley ICB.</li> </ul>	Executive Director of Adult Social Care & Health	9	9	3	Static	20/09/23
<p>HOUS03 - Increasing migration and movement of people placed in local hotels could result in an increased demand on RBWM's critical front-line services.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Local Berkshire and national meetings to ensure RBWM is notified of when asylum seekers are appearing.</li> <li>Work with the Home Office, Clearsprings etc to try and find a solution to growing numbers of asylum seekers in hotels.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Improve early notification process by having access to the asylum placement information portal.</li> <li>Recognise budget pressures and reflect in MTFP.</li> </ul>	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education Executive Director of Place	9	9	3	Static	31/10/23
<p>SDCHIL28 – Financial implications arising from the state of the social care market and demand pressures.</p> <p>Key mitigations in place:</p>	Executive Director of Adult Social Care &	9	9	6	Static	05/10/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<ul style="list-style-type: none"> <li>Implementation of robust management controls in Optalis to manage funding packages and spend.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Transitions strategy.</li> <li>Commissioning plan for supported housing</li> <li>Pan ICS commissioning task group for low volume of residents with highly complex needs.</li> <li></li> </ul>	Health/ Executive Director Children's Services and Education					
<p>HR25 - IT infrastructure failure, cyber-crime, technological change.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Secure remote working.</li> <li>Networks protected by multiple security layers using firewall and other control technologies.</li> <li>Multiple data centres provide increased resilience.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Go through cyber policy following external review.</li> </ul>	Executive Director Resources	8	8	3	Static	31/10/23
<p>POLPER20 - Failure to secure best value for contracted services.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Change control mechanisms.</li> <li>Exit clauses/strategies negotiated.</li> <li>Robust governance arrangements at Member and officer levels.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Improve commercial management skills and capacity to assist services.</li> </ul>	Executive Director Resources	8	8	4	Static	24/10/23



Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<ul style="list-style-type: none"> <li>Improve governance on decentralised contract management.</li> </ul>						
<p>SDCHIL25 - Major safeguarding issue leads to significant and preventable harm/death to vulnerable people.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>MASH strengthens response to children and young people at risk of significant harm incl. CSE.</li> <li>Adult Safeguarding hub setup within the general front door service.</li> <li>Revised adult and children's safeguarding partnership arrangements implemented with external scrutineers engaged throughout.</li> </ul>	Executive Director of Adult Social Care & Health/ Executive Director Children's Services and Education	6	6	6	Target achieved	20/09/23
<p>CORP7 - Uncertainty around major schemes and commercial projects.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Prop Co's risk register details regeneration risks with joint venture partners with quarterly board review.</li> <li>Appraisal of all our projects so there's complete understanding of each individual scheme.</li> <li>Introduction of improved governance for Prop Co including creation of new Shareholder Panel to hold company to account.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Ensure minimum EPC<sup>[1]</sup> of E for our commercial and residential stock as per MEES<sup>[2]</sup>.</li> </ul>	Executive Director Place	6	6	6	Target achieved	21/11/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>SDCHIL26 - Cost of living crisis - increased levels of debt, community tension, anti-social behaviour.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• HSF pilot well established.</li> <li>• Active communication about ways of getting support (Here to Help).</li> <li>• Engagement with voluntary sector to support with Household Support scheme.</li> </ul>	Executive Director of Adult Social Care & Health	6	6	6	Target achieved	20/09/23
<p>HOF15 - Fraud and corruption leads to loss of council resources.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Strong protocols in place including anti-money laundering, prevention of bribery and anti-corruption policies.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>• Assess counter-fraud resource options best suited to the council (following up SWAP risk assessment exercise summer 23) by 31 March 2024.</li> </ul>	Executive Director Resources	4	4	4	Target achieved	24/10/23
<p>ELEC02 - Failures in running an election leads to loss of confidence by electorate in RBWM.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Mandatory training for staff involved.</li> <li>• Guidance provided by the Electoral Commission incl. polling station, verification and count centre risks.</li> <li>• Election project group chaired by the RO, comprising senior officers. Group maintains an elections project risk register.</li> </ul>	Deputy Director of Law and Governance	3	3	3	Static	24/10/23

Risk	Directorate	Q2 rating	Q3 rating	Target	Direction	Last review
<p>POLPER21 - Legislation not responded to effectively leads to external intervention.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Assistant directors/managers keep up to date with service developments</li> <li>Legal advice on decisions is a mandatory part of our report writing mechanism.</li> </ul>	Executive Director Resources	4	4	4	Target achieved	24/10/23

[\[1\]](#) Energy Performance Certificate

[\[2\]](#) Minimum Energy Efficiency Standards

## Audit

2.11 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**

<b>Name of Audit</b>	<b>Priority 1 Action</b>	<b>Ref.</b>	<b>Responsible Officer</b>	<b>Agreed date for implementation</b>	<b>Progress Update</b>
<b>Business Continuity Planning</b>	All services to complete a Business Impact Analysis (BIA)	917	ED Place	<del>30/09/2023</del> <b>31/01/2024</b>	Work has been started, but an ICT DR plan will not be ready before January 2024.  All services should have completed their BCP and BIA by the end of November.
	All services to complete a Business Continuity Plan (BCP)	943	ED Place	<del>30/09/2023</del> <b>30/11/2023</b>	The intention is to have 90% of the plans updated and signed off by the end of November, the last 10% will be completed once independencies have been identified.
	A corporate BIA to exercise to be completed and incorporated in the corporate BCP	887	Service Manager – Joint Emergency Planning Unit	<del>31/10/2023</del> <b>31/01/2024</b>	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. CMT meeting has been moved to January 2024.
	A process of review of BCPs to be put in place for all high value contracts.	896	ED Place	<del>31/12/2023</del> <b>31/12/2024</b>	a) The process will initially look at the critical service providers during the BC process.  b) A meeting with the procurement to review the process has been requested.

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
<b>Contract Management</b>	Implement a contract management framework and associated guidance	494	Procurement Manager	31/12/2023	No update received
	Review the published contract register to ensure completeness and compliance with the Local Transparency Code 2015	495	Procurement Manager	31/03/2023	<b>Self-assessed as complete</b> in August 2023 as compliant with the Code.
	Complete analysis to identify spend where a contract is needed and agree how compliance can be achieved	496	Procurement Manager	31/03/2023	<b>Self-assessed as complete</b> in August 2023. Analysis completed and Agresso updated following spend reports and client updates.
	Deliver contract management training to all contract managers	497		31/03/2023 <b>Overdue</b>	Cannot be delivered by HR. Asked Procurement to take forward if new posts are approved – <b>TBC</b>
	Analysis undertaken to identify and take action in relation to all agency off-contract spend	504	Head of HR	<del>31/12/2023</del> <b>31/03/2024</b>	Appointment to new HR post has now been made, starting in Dec 2023. Priority will be to work with services on use of agencies and to scope a new contract.
	Procedure to authorise alternatives to the agency corporate contract to be agreed.	505	Head of HR	<del>31/12/2023</del> <b>31/03/2024</b>	Appointment to new HR post has now been made, starting in Dec 2023. Priority will be to work with services on use of agencies and to scope a new contract.

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
<b>S106 Agreements</b>	Agree a process which sets out roles and responsibilities and the arrangements for recording, monitoring and collecting financial contributions	1211	Service Lead Infrastructure	30/09/2023	<b>Self-assessed by service as complete.</b> A follow-up audit has just commenced, and early indications are that the new process designed and implemented has made clear the roles and responsibilities for the end-to-end process.
	Agree a proactive approach to alerting a designated officer for each agreement when a contribution milestone is reached and payment is due.	1212	Service Lead Infrastructure	30/09/2023	<b>Self-assessed by service as complete.</b> A follow-up audit has just commenced, and early indications are that the new process designed and implemented has provided a full audit trail of payment milestones agreed and due.
	To maintain a full audit trail. To consider using Exacom or similar as a management system for S106 agreements and payments.	1213	Service Lead Infrastructure	30/09/2023	<b>Self-assessed by service as complete.</b> A follow-up audit has just commenced, and early indications are that the new process designed and implemented has provided a full audit trail for agreements and payments.
<b>Premises Health &amp; Safety</b>	Conduct a comprehensive review of all premises not solely occupied by RBWM staff. Where roles and responsibilities are not clearly defined, introduce Service Level Agreements	2039	Executive Director of Place Services	31/03/2024	Executive Director and Prop Co will be liaising with the Asset Management Team and Legal to review the leases in place to clarify roles and responsibilities. There is also a working group for Tinkers Lane with Contract Managers to bottom out what the obligations in the contracts are. Property Services have

Name of Audit	Priority 1 Action	Ref.	Responsible Officer	Agreed date for implementation	Progress Update
	(SLAs) to explicitly outline each party's roles and responsibilities related to health and safety.				collated a list of assets as a start for the Asset Team to either add to or remove. <b>Self-assessed as on track for completion by 31/03/24.</b>
	Ensure that all fire risk assessments for properties with lease or partnership arrangements are brought up to date. Ensure all fire extinguisher inspection certificates are stored for centralised monitoring.	2118	Head of Compliance and Operations, RBWM Property Company	31/12/2023	<b>Self-assessed as complete.</b>

### 3. Adult Social Care & Health Directorate

#### Performance

3.1 Scorecard 2 sets out KPIs reported for the Adult Social Care & Health Directorate and reflects the latest data available at the time of this report's preparation.

#### Scorecard 2: Adult Social Care & Health Directorate

Adult Social Care & Health Directorate									
Health improvement									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[DA2:19] % of clients engaged in treatment that are 'showing substantial progress' (Drug & Alcohol)	Sep 23	44.4%		44.0%	↑	44.4%	55.4%	55.4%	Quarterly
% of service users (tier 3) who have successfully quit smoking at 4 weeks	Sep 23	63.8%		67.0%	↓	63.8%	60.0%	60.0%	Quarterly
% of service-users who lost any amount of weight at the end of active intervention	Sep 23	85.0%		68.4%	↑	76.9%	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)	Sep 23	6		13	?	19			Quarterly
[Opt:C5] # of compliments received (Adults)	Sep 23	6		8	?	14			Quarterly
Adult social care									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of permanent admissions to care for those aged 65yrs+ per 100,000	Oct 23	28		34	↓	278	388	668	Monthly
% of older people (aged 65 and over) who were still at home 91 days after discharge from hospital	Mar 23	90.7%		90.8%	?	90.7%			Annual
% of permanent admissions to a care home for those aged 65yrs+ (previously self-funded)	Oct 23	21.4%		29.4%	?	21.4%			Monthly
% of safeguarding concerns progressing to enquiry	Oct 23	36.2%		42.0%	↓	36.2%	34.0%	34.0%	Monthly
% of statutory service establishment posts filled with permanent staff	Oct 23	70.0%		72.0%	↓	70.0%	90.0%	90.0%	Monthly
[ASCOF] % of clients with Learning Disabilities in settled accommodation	Mar 23	75.1%		79.3%	?	75.1%			Annual
[ASCOF] % of Mental Health clients securing appropriate employment	Mar 22	11.0%		11.0%	?	11.0%			Annual
[ASCOF] % satisfied/very satisfied with the care & support services they receive (exc LD customers)	Mar 23	73.5%		65.1%	↑	73.5%			Annual



## Key messages:

- 3.2 Adult Social Care is a highly regulated environment, and it is acknowledged that the indicators reported in Scorecard 2 are a sub-set of a larger and more detailed data-set that the service monitors routinely to provide assurance of delivery against its remit.
- 3.3 **Adult social care:** The service continues to see acute staffing challenges with the % of statutory service establishment posts filled with permanent staff following a sustained downward/worsening trend from Apr-23 (74%) to 70% in Oct-23, below the 90% target. Wider factors contributing to unfulfilled vacancies, especially for Adult Social Workers, include salary disparities with local authorities, an increased demand and a shortage of experienced staff, creating it a job seeker's market. A reliance on agency staff has significant financial implications for the council and the corporate risk register includes "maintaining workforce stability" as a key risk (HR26) with mitigations including development of strategies to increase permanent recruitment / retention to reduce agency spend (see Table 3).
- 3.4 Data released in December 2023 as part of the annual Adult Social Care Outcomes Framework (ASCOF) ranks the 150 local authorities which provide social care in England on how well they deliver to achieve the outcomes that matter most to people. The rankings include feedback from independent survey undertaken annually in the borough. The data shows a trend of growing satisfaction year-on-year in some key areas, and the borough is ranked top nationally for social care-related quality of life, 2<sup>nd</sup> nationally for the proportion of adults with learning disabilities in paid employment, 3<sup>rd</sup> nationally for residents feeling safe, and 4<sup>th</sup> nationally for people's overall satisfaction with their care and support. A random selection of adults who had contact in the last 12 months with Optalis, or a contracted social care provider, were invited to participate and over 275 borough residents responded to the survey, including residents with learning disabilities, those living in care homes and residents in the community.
- 3.5 **Health improvement:** the indicators reported are drawn from a more detailed suite of indicators used to monitor key contracted services for drug and alcohol treatment, weight management and smoking cessation. It is acknowledged that the council's Public Health commissioned weight management service is relatively new, and while the proportion of service-users who lost any amount of weight at the end of intervention is performing above target (75%) at 85% in Q2 it should be noted this is 17 of 20 people who completed the programme from the 155 who were referred in the quarter.
- 3.6 The proportion of clients engaged in drug and alcohol treatment showing "substantial progress" is 44.4%, below target (55.4%) and the national figure of 47% but showing a sustained quarterly improvement from Q3 22/23 (39%). The cohort includes service-users who are new to treatment as well as service-users who have relapsed and been readmitted.

- 3.7 It is highlighted that while the Q2 position in relation to the proportion of service-users who have successfully quit smoking at 4 weeks has worsened in Q2 (63.8%) from Q1 (67%) there are no concerns as Q2 saw higher volumes of people accessing the service in Q2 (116) compared to Q1 (97). Service-provider information has shown that the majority of quitters in Q2 are from identified priority groups that the council is trying to reach, and those with a mental health condition and/or a long-term condition continue to have strong outcomes.
- 3.8 Overall, there are no concerns currently with performance against health improvement indicators as all are either meeting target or showing sustained incremental improvement:

### **Workforce**

- 3.9 Scorecard 3 outlines workforce information for the Adult Social Care & Health Directorate across each of its service-delivery units. Please note that the workforce data does not include figures for Optalis. Working days lost to sickness for the Directorate and each of its service-delivery units has been consistently below the set target trajectory and therefore flagging as green with no concerns. There are no concerns at present in relation to voluntary turnover in relation to the Directorate and the service-delivery units identified in Scorecard 3.
- 3.10 Optalis carry out a range of services for residents of the borough, including the delivery of statutory social work assessments for those who may need our care. The workforce in this service has an establishment of 130 posts, of which 74% (96/130) are covered by permanent staff, 11% (14/130) by agency staff and the remainder 15% (20/130) are vacant.
- 3.11 Within this cohort, 71% (10/14) of the agency staff are qualified social workers with only 58% (23/40) of the social worker establishment covered by permanent staff. The current level of social worker capacity - 33 people - is the lowest level of safe operation, and any further permanent turnover will have to be covered with agency staff.

### Scorecard 3: Workforce (Adult Social Care & Health Directorate)

Adult Social Care & Health Directorate Workforce								
Headcount								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Oct 23	27		26	?			Monthly
Public Health	Oct 23	8		8	?			Monthly
Safeguarding Information & Advice	Oct 23	6		6	?			Monthly
Transformation & Community Partnerships	Oct 23	11		10	?			Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Adult Social Care & Health Directorate	Oct 23	23.43		22.43	?			Monthly
Public Health	Oct 23	7.60		7.60	?			Monthly
Safeguarding Information & Advice	Oct 23	3.68		3.68	?			Monthly
Transformation & Community Partnerships	Oct 23	10.65		9.65	?			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
^Adult Social Care & Health Directorate	Oct 23	0.56		0.29	↘	3.38	5.80	Monthly
Public Health	Oct 23	1.09		0.36	↘	3.38	5.80	Monthly
Safeguarding Information & Advice	Oct 23	0.29		0.14	↘	3.38	5.80	Monthly
Transformation & Community Partnerships	Oct 23	0.31		0.33	↗	3.38	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	Oct 23	0.00%		0.00%	?			Monthly
Public Health	Oct 23	0.00%		0.00%	?			Monthly
Safeguarding Information & Advice	Oct 23	0.00%		0.00%	?			Monthly
Transformation & Community Partnerships	Oct 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	Oct 23	7.27%		7.41%	↗	7.53%	12.90%	Monthly
Public Health	Oct 23	23.53%		23.53%	↗	7.53%	12.90%	Monthly
Safeguarding Information & Advice	Oct 23	0.00%		0.00%	↔	7.53%	12.90%	Monthly
Transformation & Community Partnerships	Oct 23	0.00%		0.00%	↔	7.53%	12.90%	Monthly

## Risk

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

**Table 5: Adult Social Care & Health Directorate key risks**

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>HSG0006 - Inadequate strategic planning between children's services, adults and health.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Robust management controls to manage funding packages and spend.</li> <li>• Procedures to plan and manage transitions between children's and adult services.</li> </ul>	8	8	6	Static	20/09/23
<p>HSG0009 - Failure to meet aspiration of suitably integrated health and social care.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Work with the NHS to develop the ICS as part of the NHS long term plan.</li> <li>• Strong governance - integrated health &amp; social care commissioning board takes risk-based decisions on BCF progress/performance.</li> </ul>	6	6	6	Static	20/09/23
<p>HSG0007 - Increased demand resulting from adult social care demographics.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Market management by strategic commissioning.</li> <li>• Collaborative commissioning with NHS and other East Berkshire authorities on a range of provision, including intermediate care.</li> </ul>	6	6	6	Static	20/09/23

## 4. Chief Executive Directorate

### Performance

4.1 There are no performance indicators reported by this Directorate.

### Workforce

4.2 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 Oct-23 for both the Directorate and the service-delivery unit. There are no concerns in relation to % voluntary turnover (YTD) as reported amber values (12.90% for Chief Executive Directorate and 12.50% for Strategy, Performance & Communications Service) are the result of staff leaving a small team earlier in the year, 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	Oct 23	16		16	?			Monthly
Strategy, Performance & Communications	Oct 23	15		15	?			Monthly
FTE								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Chief Executive Directorate	Oct 23	15.41		15.41	?			Monthly
Strategy, Performance & Communications	Oct 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	Oct 23	0.09		0.09	↗	3.38	5.80	Monthly
Strategy, Performance & Communications	Oct 23	0.10		2.00	↗	3.38	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	Oct 23	0.00%		0.00%	?			Monthly
Strategy, Performance & Communications	Oct 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
^Chief Executive Directorate	Oct 23	12.90%		12.50%	↗	7.53%	12.90%	Monthly
Strategy, Performance & Communications	Oct 23	12.50%		12.90%	↗	7.53%	12.90%	Monthly

## Risk

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

**Table 6: Chief Executive Directorate key risks**

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>CMT40 - Insufficient emergency response or business continuity planning (BCP) failure.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"><li>• Inter authority agreement with JEPU in place (RBWM, WBDC and BFBC) to provide resilience with experts in the field.</li></ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"><li>• 90% of service BCP's agreed by end of November. Those outstanding will be completed once interdependencies are identified.</li><li>• Work has been started, but an ICT disaster recovery plan will not be ready before January 2024.</li><li>• JEPU to run a BCP test in the form of a whole-council exercise during 2023-2024.</li></ul>	8	8	8	Static	26/09/23

## 5. Children's Services & Education Directorate

### Performance

5.1 Scorecard 5 sets out KPIs reported for the Children's Services & Education Directorate and reflects the latest data available at the time of this report's preparation.

#### Scorecard 5: Children's Services & Education Directorate

Children's Services & Education Directorate									
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)	Sep 23	41		33	?	74			Quarterly
# of reports to police in RBWM (crimes + non-crimes)	Sep 23	840		712	?	1,552			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)	Sep 23	29		21	?	50			Quarterly
[AfC:C5] # of compliments received (Children's)	Sep 23	16		27	?	43			Quarterly
Children & young people									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[AfC:15] # of first-time entrants into youth justice system	Sep 23	3		6	➔	9	11	22	Quarterly
[AfC:16] # of children referred per 10,000 population (cumulative)	Sep 23	265.00		134.00	➔	265.00	265.00	530.00	Quarterly
[AfC:2] % of borough schools rated by Ofsted as good/outstanding	Sep 23	93.8%		92.3%	➔	93.8%	95.0%	95.0%	Quarterly
[AfC:21] % of children subject to a CPP for 2+ wks visited within last 10 working days	Sep 23	86.4%		96.5%	➔	86.4%	95.0%	95.0%	Quarterly
[AfC:3] % of EHCP assessments completed within 20 wks (inc exceptions)	Sep 23	92.1%		97.8%	➔	95.2%	90.0%	90.0%	Quarterly
[AfC:33] % of children placed with in-house foster placements	Sep 23	68.9%		67.9%	➔	68.9%	60.0%	60.0%	Quarterly
[AfC:34] % of care-leavers living in suitable accommodation (19-21yr olds)	Sep 23	96.7%		94.8%	➔	96.7%	95.0%	95.0%	Quarterly
[AfC:35] % of care-leavers in education, training and employment (19-21yr olds)	Sep 23	63.9%		65.5%	➔	63.9%	60.0%	60.0%	Quarterly
[AfC:38] % of referrals closed in the period with a positive outcome	Sep 23	96.6%		94.2%	➔	95.3%	90.0%	90.0%	Quarterly
[AfC:6] % of eligible children receiving a 6-8wk review within 8wks	Sep 23	89.1%		86.2%	➔	87.7%	87.0%	87.0%	Quarterly
[AfC:7] % of children with a review at 2-2.5 years of age	Sep 23	94.6%		72.0%	➔	83.2%	77.2%	77.2%	Quarterly

## Key messages:

- 5.2 Children's Services is a highly regulated environment, and the Children & Young People indicators reported in Scorecard 5 are a sub-set of a larger and more detailed data-set that the service monitors routinely to provide assurance of delivery against its remit.
- 5.3 It is acknowledged that the service has conducted a best practice annual review in Nov/Dec-23 of targets and related tolerance thresholds for all Children & Young People indicators reported here. While this review of targets and tolerances falls outside of standard financial year-end reviews, such a review at this time allows the service to take account of the most up to date regional and national benchmarking data for both children's social care and educational outcomes that is usually published in November/December. The methodology for this target review has been to ensure that, at a local level and as a minimum, the service strives to align with national published performance with the exception of KPIs where performance has been ahead of its comparators – in such instances the service has adjusted targets and tolerance thresholds to continue to be stretching and aligned with Achieving for Children aspirations.
- 5.4 **Children and young people:** Out of the 11 children and young people measures, 8 have improved since the last quarter and 3 have declined. Of the 3 that have declined, 2 (EHCP timeliness and Care Leavers in Education, Employment and Training) remain above target, whilst 1 (child protection visiting) is below target. The below target measure bucks the long-term positive trajectory and work is being carried out to understand why this has happened. However, the AfC target of child protection visiting every 10 days is a good practice target which is above the national expectation.
- 5.5 **Children and young people:** Further outcome-focused indicators are being identified for inclusion in future reporting to bring a stronger focus to quality assurance and outcomes for children beyond the operational delivery focus currently reported. However, of the current measures reported, there are a number that are already outcome-focused. For example, it is a good outcome to have Care Leavers living in suitable accommodation and being engaged in education, training or employment and for both of these measures, we are above our target. Another measure is referrals closed with a positive outcome for the child or young person. The target for this measure is 90% and the current quarter is reporting 96.6%, which is an improvement on the previous quarter, as well as above target performance.
- 5.6 **Domestic Abuse:** the number of children in households of MARAC referrals (including repeats) is 41 in Q2, following a consistent quarterly increase from 13 in Q4 22/23. The number of reports to police in RBWM (crimes + non-crimes) is 840, 18% higher than Q1 23/24 (712) and the highest in the last 3 years since Jun-21. The RBWM Domestic Abuse Executive Group has led on a number of initiatives to raise awareness of domestic abuse in the borough, particularly coercive control and individuals are now reporting incidents that they might not



historically have reported, or even seen as domestic abuse. This means that more families can be supported by the professional network, rather than the domestic abuse remaining hidden. Our Think Families Transformation Project is currently in the research/discovery phase and domestic abuse is coming out as a priority area for action. This research will inform next steps so that we can continue to improve our work in this area, by taking a whole family approach.

## Workforce

5.7 Scorecard 6 outlines workforce information for the Children’s Services & Education Directorate and there are no concerns in relation to either working days lost to sickness or the % voluntary turnover YTD for the Directorate. The vacancy rate in front line social worker posts is 39% in Q2, down from 43.9% in Q1. The agency rate in front line social worked posts remains at 41.5% in Q2.

### Scorecard 6: Workforce (Children’s Services & Education Directorate)

Children's Services & Education Directorate: Workforce								
Headcount								
Org Structure	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Children's Services & Education Directorate	Oct 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	Oct 23	2.00		2.00	?			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
^Children's Services & Education Directorate	Oct 23	2.00		1.00	↘	3.38	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	Oct 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	Oct 23	0.00%		0.00%	➔	7.53%	12.90%	Monthly
Achieving for Children: Workforce								
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	39.0%		43.9%	?			Quarterly
Agency rate in front line social worker posts	Sep 23	41.5%		41.5%	?			Quarterly

## Risk

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

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

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>SSS019 - Maintain a satisfactory level of health or development for children with complex and multiple needs.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Capital funding to increase the number of special units attached to mainstream schools</li> <li>Intensive Support team work to avoid children coming into the care of the council/reunify with their family when safe to do so.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>RBWM to have one of 33 new special free schools being created nationally.</li> </ul>	12	12	6	Static	21/10/23
<p>SSS017 - Failure to improve standards in our schools.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Termly meetings with all Heads and Chairs of Governors, engaging regional Ofsted lead as appropriate, to drive education agenda.</li> <li>Maintain the education and early years link approach with risk assessed identification of challenging schools.</li> </ul>	4	4	4	Static	05/09/23
<p>SSS018 - Exposure to health and safety risks in schools.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Ongoing programme of fire safety works.</li> <li>Asbestos management surveys in place.</li> <li>Electrical testing up to date.</li> </ul>	4	4	4	Static	05/09/23

## 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. Staff shortages have impacted the Directorate across a number of service-delivery areas, including Neighbourhood Services. At the time of this report's preparation resourcing levels are being looked at as part of the budget-setting process for 2024/25. It is acknowledged that the Directorate has been carrying significant pressure in terms of inflationary costs on major contracts and the continued impact of the way in which people use services since the pandemic (e.g. parking).

6.2 Overall performance across the indicators reported here is broadly favourable, albeit with key challenges in relation to Housing particularly. Following feedback from the Corporate Overview & Scrutiny Panel on 6 Nov-23, Officers are identifying suitable indicators relating to grounds maintenance for inclusion in future reports.

### Scorecard 7: Place Directorate

Place Directorate									
Planning applications									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
[P:1] % of major planning applications processed in time	Sep 23	100.0%		80.0%	➔	91.7%	65.0%	65.0%	Quarterly
[P:2] % of minor planning applications processed in time	Sep 23	77.1%		80.6%	➔	78.8%	70.0%	70.0%	Quarterly
[P:3] % of other planning applications processed in time	Sep 23	83.6%		84.0%	➔	83.8%	85.0%	85.0%	Quarterly
Community safety									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
# of ASB interventions	Sep 23	0		0	?	0			Quarterly
# of group dispersals across the borough	Sep 23	46		91	?	137			Quarterly
Number of ASB incidents & complaints	Sep 23	155		142	?	297			Quarterly
Environmental health & Trading standards									
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	Oct 23	87.4%		87.1%	➔	87.4%	80.0%	80.0%	Monthly
[HEHTS:02] # of properties/dwellings improved formally and informally	Sep 23	8		10	?	8			Quarterly
[HEHTS:03] % of complaints (noise) that result in abatement notices	Oct 23	0.0%		0.0%	?	0.0%			Monthly
[HEHTS: 04] # of test purchase operations (TPOs) for age restricted products	Sep 23	1		4	?	5			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	Oct 23	345,991		322,594	➡	1,953,905	1,149,069	2,010,286	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	Oct 23	100.0%		100.0%	➡	99.0%	98.0%	98.0%	Monthly
(Vol:5) % of emergency 2hr orders responded to on time	Oct 23	100.0%		100.0%	➡	99.6%	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	Oct 23	16.00		18.42	➡	18.29	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	Oct 23	244		237	?	244			Monthly
% of households in temporary accommodation that is located within the borough	Oct 23	39.3%		40.5%	➡	39.3%	50.0%	50.0%	Monthly
% successful homelessness prevention activity for households subject to the Prevention/Relief duty	Oct 23	1.9%		4.5%	?	8.6%			Monthly

### Key messages:

**6.3 Housing:** The number of households in temporary accommodation (TA) is 244 in Oct-23, rising from 223 in Apr-23 and at its highest point in the last 3 years. The % of households in temporary accommodation within the borough is 39.3% in Oct-23, below the target of 50% and following a month-on-month downward trend since May-23 (46.2%). This remains a key challenge for the council with contributing factors including: limited housing stock, the continuing cost of living crisis, increases in property prices and rents, and evictions from private rented sector. Additional pressures faced by the Housing Service include providing housing for asylum seekers exiting hotels following confirmation of refugee status. Changes in government policy mean that individuals receiving refugee status may only be given 7 days' notice to leave Home Office accommodation. Other factors include the Government's decision to freeze Local Housing allowance rates for 2023/24. It is acknowledged that 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. As at Dec-23 there were 264 households in temporary

accommodation, 163 of which (62%) were placed out of borough. Of those placed out of borough, 83% (136/163) were placed in Slough.

- 6.4 The factors affecting temporary accommodation demand also have an impact on the number of rough sleepers in the borough. In Dec-23 there were 25 known rough sleepers which is a significant rise since Dec-22 where 10 were recorded. The housing service continues to provide a 3-stage pathway for rough sleepers to obtain support and access to healthcare, addiction services, education and housing.
- 6.5 The council largely relies on private rented sector to secure temporary accommodation and is looking to recruit an officer to bridge and nurture relationships with private rented sector, however has had two failed recruitment drives. The cost of temporary accommodation increasing beyond the council's capacity to fund is a key risk on the Directorate's risk register (HOUS02), shown in Table 8, with key mitigations in progress including seeking out new providers, negotiating lower costs and ceasing high-cost placements. The service is also liaising with partners and charities to secure accommodation and work for rough sleepers.
- 6.6 **Waste management & recycling:** The latest available data for the average number of missed collections per 100,000 collections for Oct-23 show a year-to-date average of 18.29 missed collections per 100,000, well below the target of 60, and with no concerns in Q2. However, we are aware of some localised issues with some residents and are working with Councillors and residents to resolve this. The recycling rate data is awaiting national verification from Defra and is shown up to March 2023 indicating an increase in recycling taking place across the borough. 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. Resource has now been identified to update the figures following necessary training and the latest information should be available for the next report. 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. The service is proactively using resources as effectively as it can to support the waste agenda, including looking at opportunities with contractors and partners for financial contributions to support campaigns in relation to food waste and food minimisation.
- 6.7 **Planning applications:** Performance is broadly stable, with processing of both major and minor planning applications well above set targets for the year (Major 91.7% YTD vs 65% target; Minor 78.8% YTD vs 70% target). Processing of other planning applications shows some volatility quarter on quarter as the volume of applications fluctuates, and while year to date performance is short of target (85%) at 83.8% (amber), there are no current concerns.
- 6.8 **Environment Health & Trading Standards:** Performance in relation to the % of food businesses broadly compliant with food law is tracked monthly and remains

consistently above the 80% target at 87.4% (1,340/1,534) in Oct-23. There are currently no concerns in relation to this service.

**6.9 Leisure centre attendances:** Monthly attendance figures have followed a continuous upward trend since Apr-23, with a total of 1,953,905 attendances in 2023/24 up to end Oct-23, only 56,381 away from the year-end target of 2,010,286. Attendance figures are impacted by seasonality and usually show a decline in the months following peak summer. The service has, however, introduced events including swimming galas, building events, and a young people’s themed event “Random and Rocks” which has drawn in more customers.

**6.10 Highways:** There are no concerns in relation to Highways performance with the % of both 24hr orders and emergency 2hr orders responded to on time consistently maintained at 100% and above set targets of 98%.

## Workforce

**6.11 Scorecard 8** outlines workforce information for the Place Directorate across each of its service-delivery units. The number of working days lost to sickness has been consistently below the set target trajectory for 2023/24 and flagging green with no concerns. There has been some staff turnover in the Housing & Environmental Health, Neighbourhood, and Planning Services in Oct-23 however the year-to-date position for each of these service-delivery units shows an improving monthly trend in terms of moving closer to the target trajectory line.

### Scorecard 8: Workforce (Place Directorate)

Place Workforce								
Headcount								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Oct 23	222		218	?			Monthly
Housing and Environmental Health	Oct 23	61		59	?			Monthly
Infrastructure, Sustainability and Economic Growth	Oct 23	54		52	?			Monthly
Neighbourhood Services	Oct 23	51		52	?			Monthly
Planning	Oct 23	55		54	?			Monthly

FTE								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Oct 23	207.17		203.09	?			Monthly
Housing and Environmental Health	Oct 23	59.27		57.27	?			Monthly
Infrastructure, Sustainability and Economic Growth	Oct 23	46.80		44.80	?			Monthly
Neighbourhood Services	Oct 23	47.94		48.86	?			Monthly
Planning	Oct 23	52.17		51.17	?			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
^Place Directorate	Oct 23	1.85		1.34	🔴	3.38	5.80	Monthly
Housing and Environmental Health	Oct 23	2.63		2.25	🔴	3.38	5.80	Monthly
Infrastructure, Sustainability and Economic Growth	Oct 23	0.36		0.23	🔴	3.38	5.80	Monthly
Neighbourhood Services	Oct 23	2.91		1.94	🔴	3.38	5.80	Monthly
Planning	Oct 23	1.40		0.80	🔴	3.38	5.80	Monthly

### Voluntary turnover (Month)

Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Oct 23	1.40%		0.94%	?			Monthly
Housing and Environmental Health	Oct 23	1.74%		1.77%	?			Monthly
Infrastructure, Sustainability and Economic Growth	Oct 23	0.00%		0.00%	?			Monthly
Neighbourhood Services	Oct 23	1.96%		0.00%	?			Monthly
Planning	Oct 23	1.75%		1.77%	?			Monthly

### Voluntary turnover (YTD)

Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Place Directorate	Oct 23	9.30%		8.45%	🟢	7.53%	12.90%	Monthly
Housing and Environmental Health	Oct 23	12.17%		10.62%	🟢	7.53%	12.90%	Monthly
Infrastructure, Sustainability and Economic Growth	Oct 23	4.12%		4.21%	🔴	7.53%		Monthly
Neighbourhood Services	Oct 23	3.92%		1.94%	🟢	7.53%	12.90%	Monthly
Planning	Oct 23	17.54%		15.93%	🟢	7.53%	12.90%	Monthly

## Risk

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

**Table 8: Place Directorate key risks**

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>HOUS02 - Costs of temporary accommodation increasing beyond capacity to fund.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Prioritise and manage placements to ensure full occupancy.</li> <li>• Homelessness and Rough Sleeping Strategy 18-23.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>• Seek out new providers, negotiating lower cost and ceasing high-cost placements.</li> <li>• Look at alternative options such as social housing stock levels and private landlords.</li> </ul>	9	9	6	Static	21/06/23
<p>HPLAND019 – Failure to undertake inspections of council trees and delivering works.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>• Safety works are raised through the Arboriculture Services Framework.</li> <li>• Inspections targeted at trees in urban areas, as this is where impacts on tree health are the most frequent and significant.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>• Contracted inspections ceased end of 21/22 financial year. Budget proposals for inspection 23/24 put forward.</li> </ul>	9	9	8	Static	21/11/23
<p>IST02 - Flood risk is not sufficiently dealt with by preventative and responsive measures.</p> <p>Key mitigations in place</p> <ul style="list-style-type: none"> <li>• RBWM emergency plan and flooding risk management strategy</li> </ul>	4	4	4	Static	03/11/23



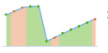
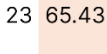
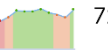
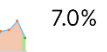


Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<ul style="list-style-type: none"> <li>Multi agency response plan co-ordinated by flood risk manager.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Follow up strategic and EOC outcomes from October 23 flooding exercise. Date: tba.</li> </ul>					
<p>PPS013 - Failure to assess resources and demands resulting from cold weather.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>A comprehensive annual winter maintenance plan is in place detailing the roles and responsibilities of contractors.</li> <li>Risk assessments behind road treatment strategy. Contractors also have their own risk assessments for carrying out the works.</li> </ul>	2	2	2	Static	21/11/23

## 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. Overall there are no concerns in relation to the indicators reported. Staff shortages have impacted the Revenue, Benefits, Library & Residents Service across a number of service-delivery areas, including a long-standing vacancy in the Collections team since 2022 and three vacancies in the Benefits team. The service has now filled these vacancies, and new staff continue to receive training.

### 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	Oct 23	67.49%		58.35%	🔴	67.49%	67.50%	98.50%	Monthly
(RB:2) Percentage of Non Domestic Rates (Business Rates) collected	Oct 23	65.43%		57.20%	🔴	65.43%	66.70%	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)	Oct 23	90.2%		72.1%	🟢	84.2%	80.0%	80.0%	Monthly
(LRS:5) % of calls abandoned after 5 secs (monthly)	Oct 23	2.9%		7.0%	🟢	4.1%	4.0%	4.0%	Monthly
Benefits Claims									
Measure	Date	Period Actual	Period trends	Last Period	Period Improving / Worsening	YTD Actual	YTD Target	YE Target	Frequency
(RB:5) Average # of days to process new claims (Housing Benefits)	Oct 23	14.17		14.09	🔴	13.86	12.00	12.00	Monthly
(RB:6) Average # of days to process changes in circumstances (Housing Benefits)	Oct 23	6.97		5.25	🔴	5.85	5.00	5.00	Monthly

### Key messages

7.2 **Revenues:** At Oct-23, the % of council tax collected is 67.49%, slightly below the target of 67.50% (amber). In cash terms, this equates to £75,443,210 collected from April – 31 Oct-23, up £4.3m in comparison to Oct-22 (£71,141,194). At Oct-23 the % of Non Domestic Rates (Business Rates) collected is 65.43%, slightly below the target of 66.70% (amber).

7.3 **Benefits claims:** performance in relation to the average number of days to process both new claims and changes in circumstances for Housing Benefits is monitored monthly through internal systems and reported into the Department for Work and Pensions (the DWP) who will then adjust figures to enable

benchmarking with regional and national comparators. Performance against both indicators has shown volatility month on month, largely impacted by the service's staffing capacity challenges. Year-to-date performance for **processing new claims** is 13.86 days in Oct-23, above target (12.00) but within acceptable tolerance thresholds and so flagging amber. It is acknowledged that the service has always set an aspirational target of 12 days whilst the national average is 20 days to process new benefits claims. Latest available benchmarking data (Jun-23) shows RBWM to be outperforming both regional and national performance: RBWM 12 days / South East 21 days / England 21 days. The year-to-date performance for **processing changes in circumstances** is 5.85 days, above target (5.00) but again within acceptable tolerance thresholds and so flagging amber. Latest available benchmarking data (Jun-23) shows RBWM to be outperforming regional and national performance: RBWM 5 days / South East 10 days / England 10 days.

7.4 **Customer service:** the contact centre continues to perform well in relation to calls answered within 2 minutes (84.2% YTD, 58,762 / 69,826) and calls abandoned after 5 seconds (4.1% YTD, 2,867 / 69,826).

## Workforce

7.5 Scorecard 10 outlines workforce information for the Resources Directorate. Working days lost to sickness per headcount for Oct-23 is below target at directorate and all service levels (with the exception of Revenues, Benefits, Library and Resident Services) nonetheless, shows a decline in performance from Sep-23, in line with RBWM and other directorate performance. This could be attributed to the onset of winter.

### 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	Oct 23	308		304	?			Monthly
Finance	Oct 23	54		55	?			Monthly
HR, Corporate Projects and IT	Oct 23	63		63	?			Monthly
Law & Governance	Oct 23	42		42	?			Monthly
Revenue, Benefits, Library and Resident Services	Oct 23	148		143	?			Monthly

FTE								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Oct 23	275.20		271.76	?			Monthly
Finance	Oct 23	52.06		53.06	?			Monthly
HR, Corporate Projects and IT	Oct 23	61.47		61.47	?			Monthly
Law & Governance	Oct 23	37.64		37.64	?			Monthly
Revenue, Benefits, Library and Resident Services	Oct 23	123.03		118.59	?			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
^Resources Directorate	Oct 23	2.26		1.93	↘	3.38	5.80	Monthly
Finance	Oct 23	0.64		0.29	↘	3.38	5.80	Monthly
HR, Corporate Projects and IT	Oct 23	1.07		0.71	↘	3.38	5.80	Monthly
Law & Governance	Oct 23	0.75		0.60	↘	3.38	5.80	Monthly
Revenue, Benefits, Library and Resident Services	Oct 23	3.75		3.44	↗	3.38	5.80	Monthly

Voluntary turnover (Month)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Oct 23	1.32%		0.33%	?			Monthly
Finance	Oct 23	1.85%		0.00%	?			Monthly
HR, Corporate Projects and IT	Oct 23	4.65%		0.00%	?			Monthly
Law & Governance	Oct 23	0.00%		0.00%	?			Monthly
Revenue, Benefits, Library and Resident Services	Oct 23	0.00%		0.70%	?			Monthly

Voluntary turnover (YTD)								
Org Structure ↑	Date	Latest Actual	Trends	Last Period	Period Improving / Worsening	Latest Target	YE Target	Frequency
^Resources Directorate	Oct 23	7.57%		5.96%	↗	7.53%	12.90%	Monthly
Finance	Oct 23	11.11%		9.17%	↘	7.53%	12.90%	Monthly
HR, Corporate Projects and IT	Oct 23	10.85%		6.20%	↘	7.53%	12.90%	Monthly
Law & Governance	Oct 23	7.41%		7.41%	↗	7.53%	12.90%	Monthly
Revenue, Benefits, Library and Resident Services	Oct 23	4.15%		4.23%	↘	7.53%	12.90%	Monthly

## Risk

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

**Table 9: Resources Directorate key risks**

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<p>POLPER19 - Failure to comply with council constitution and code of conduct.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Scheme of delegation and report writing sign off.</li> <li>There is no opportunity for an individual member to make a significant decision in isolation.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Constitution working group undertaking a review of the constitution.</li> </ul>	8	8	4	Static	24/10/23
<p>PEN01 - Not bringing the fund back to a fully funded position by the agreed date of 31 March 2040.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>Triannual valuation signed off on 19 March 2023 including consideration of climate risk.</li> </ul> <p>Key mitigations in progress:</p> <ul style="list-style-type: none"> <li>Arrange independent test of systems and recommend any further cyber security measures to implement.</li> </ul>	8	8	8	Static	24/10/23
<p>HR27 - There is a risk that the council must shut down the current CRM because it goes end of life, fails the necessary mitigations and this happens before the new CRM becomes operational.</p> <p>Key mitigations in place:</p> <ul style="list-style-type: none"> <li>System not currently end of life and platform managed by external supplier</li> <li>Agreed testing schedule and alterations made on testing outcomes.</li> </ul> <p>Key mitigations in progress:</p>	n/a	8	4	New risk from Q3	02/11/23

Risk	Q2 rating	Q3 rating	Target	Direction	Last review date
<ul style="list-style-type: none"> <li>• Agreed testing schedule, alterations made on testing outcomes, new CRM system installed, fully supported and operational Nov 24.</li> <li>• Additional capacity in the digital development team (exact posts will depend on type of solution chosen).</li> </ul>					