

Cabinet Member Portfolio: Leader

External Regulatory Judgements	Date of Judgement	Judgement
Food Standards Agency (FSA)	13-Dec-19	Fourth stage of performance concerns for FSA, report to FSA Board for possible intervention
British Standards Institution: ISO 9001: 2015 for Trading Standards	01-Dec-20	Accredited
Health and Safety Executive- adequacy of health and safety enforcement programme	None recently	Programme adequate
Eastside Judicial Review against the decision of the planning authority to grant planning permission.	N/A	N/A

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
L01	Determine major applications within 13 weeks The target has been achieved.	Q	60%	94%	93%	▼
L02	Determine minor applications within 8 weeks The target has been achieved.	Q	65%	85%	92%	▲
L03	Determine other applications within 8 weeks The target has been achieved.	Q	80%	92%	95%	▲
L04	The number of jobs created through the Business Growth Programme	Q	155	Q1 & Q2 81	91	▲

This is a cumulative measure and figures show YTD performance.

Activity under the Business Growth Programme (BGP2) and Property Investment Programme (PIP) schemes have been severely impacted by the Coronavirus Pandemic and although there has been some activity it significantly reduced against the profile for this quarter. The delivery team has been tasked to work on the delivery of emergency grant funds from the Government designed to assist SMEs who have lost income due to the Pandemic. BGP2 and PIP has continued at a reduced level, but we have a healthy pipeline of applications for the programmes.

(Continued) We have logged a further 10 jobs created in Q3 bringing the total for this financial year to 91. The overall programme total is currently 176. There will be other jobs that have been created through BGP2 but the current situation means that they are not being declared and logged as they normally would. We have now agreed with MHCLG that we can start to count jobs safeguarded along with the new jobs created for some businesses who are struggling under the current operating conditions.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
L05	Public sector investment in the Enterprise Zone £25.4m of public sector infrastructure investment to support development activity in the Enterprise Zone. Public Sector infrastructure investment in this period relates to Arena Central HMRC and Paradise EZ.	Q	£23.5M	Q1 & Q2 (£15.6m)	£25.4m	Δ
L06	Number of new homes completed in the City across a range of tenures through the Birmingham Municipal Housing Trust (BMHT) and InReach development programmes <i>This is a cumulative measure and figures show YTD performance.</i> Actual accumulative as at Q3 handover 91 rental & completed 10 rental sales units.	Q	Rent: 117 Sales: 58 Total: 175	Q1 & Q2 Rent: 45 Sales: 4	Rent: 91 Sales: 10	Δ
L07	Percentage of national Trading Standards target met Performance to be reported as part of the final outturn report at year-end.	A	No target	No baseline	N/A	N/A

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
L08	<p>Percentage delivery of Food Inspections completed against recovery plan agreed by the Food Standards Agency and BCC</p> <p>The food inspection programme is a national programme operated by the Food Standards Agency and each Local Authority has a statutory duty to delivery their interventions. Due to COVID-19, the programme has been suspended for 12 months so far; the Service will be advised by the Food Standards Agency as to the new programmes when it is safe for the interventions to be delivered. This is a Government decision. At this stage it is impossible to advise the demand once the programme opens. A further update should be provided next quarter.</p>	Q	100.0%	N/A	N/A	N/A
L09	<p>Percentage of successful prosecutions (case proved by service Environmental Health, Licensing and Trading Standards).</p> <p>This KPI has not been measured before and as such there is no historical performance data to produce targets, tolerances or baselines. This will be reviewed once the service have reported 6 months of performance data. The December 2020 result is 93%. Service area to review case with Council and legal services to determine if there are any lessons to be learnt.</p>	M	TBC	N/A	93%	N/A
L10	Deliver 8 key corporate campaigns (with a success rating of 80% of above) linked to the priorities outlined in the Delivery Plan	Q				
L11	Increase the reach and engagement levels of all the BCC corporate social media accounts by 10% per year	Q				

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
L12	Proportion of residents aged 16 to 64 claiming out of work benefits compared to West Midlands and National Average	M	N/A	Aug 2020 Birmingham - 13.7% WM – 9.4% UK – 8.5%	November 2020 Birmingham - 14.1% WM- 9.7% GB - 8.7%	▲

This is a monthly measure with a two month time lag for reporting. December 2020 data will be released in February 2021.

The number of people claiming out of work benefits in the city increased in November to 103,552, up by 1,382 on October. The proportion of 16-64 residents claiming out of work benefits now stands at 14.1%. The gap has therefore increased by 0.2 percentage points with the national rate and 0.1% points with the regional rate since August (baseline).

Cabinet Member Portfolio: Deputy Leader

External Regulatory Judgements	Date of Judgement	Judgement
Housing Benefit (Subsidy) Assurance Process	2019 for 2018/19 Subsidy Year	TBC
Ensure compliance with the Data Security and Protection (DSP) Toolkit	Pass/Fail	TBC

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL01	<p>Average number of days to process new housing benefit applications</p> <p>Although new claims are still priority work, the number of days to award new claims has increase for the month of December due to the increase in new claim, and Local Welfare Provision application, and the payment of test and trace isolation payment. This is still however below the 15-day target.</p>	M	17 Under COVID (15)	9.8	10.57	▲
DL02	<p>Average number of days to process changes to housing benefit</p> <p>Another increase in the days to award changes due to the same factors affecting new claims. This is still within the target to achieve under 5 days by year end.</p>	M	5	3.333	4	▲
DL03	<p>Council Tax collection rate</p> <p><i>This is a cumulative measure and figures show YTD performance.</i></p> <p>Due to COVID-19 the service has reprofiled its collection rate target based on the indicative data available in April 2020 and is now reporting an increase on the anticipated month end position.</p>	M	75.79%	52.19%	77.07%	▲
DL04	<p>Council tax paid by Direct Debit</p> <p><i>This is a cumulative measure and figures show YTD performance.</i></p> <p>Due to COVID-19 the service has reprofiled its Direct Debit Key Performance Indicator target based on the indicative data available in April 2020. The increased performance is due to the council tax support hardship payment reducing the percentage of accounts with a balance not on Direct Debit.</p>	M	61.00%	64.40%	69.00%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL05	<p>Collection of business rates in year</p> <p><i>This is a cumulative measure and figures show YTD performance.</i></p> <p>Due to COVID-19 the service has reprofiled its collection rate target based on the indicative data available in April 2020 and is now reporting an increase on the anticipated month end position.</p>	M	77.16%	53.24%	77.53%	▲
DL06	<p>Percentage of housing rents collected during the year</p> <p><i>This is a cumulative measure and figures show YTD performance.</i></p> <p>Our target for the collection of rent in December has been met and exceeded, largely due to the payment holidays. With the whole country locking down again, we still don't know when enforcement will recommence and there will not be any evictions for rent arrears during this period.</p>	M	93.20%	86.70%	95.89%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL07	Total number of Subject Access Requests received (i) and percentage of Subject Access Requests (SARs) actioned and responded to in a timely manner (ii).		85.00%	(i) 96 Total received (ii) 80.19% average	(i) 76 Total received (ii) 81.94% average	▲

Corporate Information Governance Team have generated weekly reports for all directorate Assistant Director's, so they are aware of requests assigned to each directorate and their status from week 1 to week 4. Directorate contacts also compile performance figures for their Heads of Service and respond to any queries from them regarding any difficulties in not achieving the statutory timescales. FOI and SAR performance is discussed at every Corporate Information Governance Group (CIGG) meeting with all directorate contacts each month. If directorates require any assistant/advice on the requests both FOIs and SARs this is provided from the Corporate Team.

- Adult Social Care Directorate received 11 requests – 10 were answered on time (90.91%)
 - Commonwealth Games Directorate received 0 requests.
 - Digital and Customer Services Directorate received 3 requests – 2 were answered on time (66.67%)
 - Education and Skills Directorate received 6 request -5 were answered on time (83.33%)
 - Finance Directorate received 0 requests.
 - Human Resources Directorate received 3 requests – 3 were answered on time (100%)
 - Inclusive Growth Directorate received 3 requests – 3 were answered on time (100%)
 - Neighbourhoods Directorate received 18 requests – 13 were answered on time (72.22%)
 - Partnerships, Insight and Prevention Directorate received 1 request -0 were answered on time (0%)
- In November there were 7 Pending SARs and 2 answered outside deadline:
- Adult Social Care Directorate: 1 out of time due to workload.
 - Digital & Customer Services Directorate: 1 SAR responded late

(Continued) • Education and Skills Directorate: 1 pending SAR - due 6 Jan as extended within the guidelines.

- Neighbourhoods Directorate: 1 out of time due to information late from service area. 4 pending SARs - 3 extended within the guidelines and 1 where ID received late and being worked on.
- Partnership, Insight & Prevention: 1 pending SAR due on 14 January as extended within the guidelines. The total number of pending SARs for the period 1 April 2019 to 30 November 2020 is 19. SARs are only put on hold for two reasons, if data subject has not submitted a copy of their ID therefore this has to be requested prior processing the SAR, and if the request is not clear or too broad further clarification is requested. Once this information is received the SAR will resume with a new/revised due date.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL07	Total number of Freedom of Information (FOI) requests received (iii) and percentage of Freedom of Information actioned to and responded to in a timely manner (iv).	Q	85.00%	(iii) 513 Total received (iv) 83.22% average	(iii) 408 Total received (iv) 89.52% average	▲
	<p><i>This KPI is reported one month in arrears. Quarter 3 result is of October and November.</i></p> <p>Corporate Information Governance Team have generated weekly reports for all directorate Assistant Director's, so they are aware of requests assigned to each directorate and their status from week 1 to week 4. Directorate contacts also compile performance figures for their Heads of Service and respond to any queries from them regarding any difficulties in not achieving the statutory timescales. FOI and SAR performance is discussed at every Corporate Information Governance Group (CIGG) meeting with all directorate contacts each month. If directorates require any assistant/advice on the requests both FOIs and SARs this is provided from the Corporate Team.</p> <p>In November we received 199 FOIs. Of these:</p> <ul style="list-style-type: none"> • Adult Social Care Directorate received 11 requests – 7 were answered on time (63.64%) • Commonwealth Games Directorate received 0 requests • Digital and Customer Services Directorate received 29 requests – 28 were answered on time (96.55%) • Education and Skills Directorate received 25 requests – 23 were answered on time (92.00%) • Finance Directorate received 15 requests – 15 were answered on time (100%) • Human Resources Directorate received 14 requests – 14 were answered on time (100%) • Inclusive Growth Directorate received 63 requests – 61 were answered on time (96.83%) 					

(Continued) • Neighbourhoods Directorate received 40 requests – 33 were answered on time (82.50%)

• Partnerships, Insight and Prevention Directorate received 2 request – 2 was answered on time (100%)

In November there were 13 pending FOI and 3 FOIs answered outside deadline:

• Adult Social Care Directorate: 4 pending FOIs - 2 on hold due to further information requested, 1 being worked on but will be late once completed and 1 due 19 January due to being extended under the legislation.

• Digital & Customer Services Directorate: 1 pending FOI on hold due to further information requested.

• Education & Skills Directorate: 2 pending FOIs - currently being worked on but will be late once completed.

• Inclusive Growth Directorate: 1 out of time as request extended and 1 pending FOI due 14 January due to being extended under the legislation.

• Neighbourhoods Directorate: 2 FOIs out of time due to heavy workload. 5 pending FOIs - 1 on hold due to further information requested and 4 being worked on but will be late once completed.

The total number of pending FOIs for the period 1 April 2019 to 30 November 2020 is 44.

FOI requests are only put on hold if further/more clarification is required from the requestor, if this is required the request will be put on hold, once requested information is received the FOI is resumed and will have a new revised due date. If the FOI requires an exemption to be considered the request will be extended to consider this as under the Act a local authority is allowed an extra 20 working days.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL08	<p>Customers registering satisfaction with the Council</p> <p>SMS Contact Centre Satisfaction – Corporate Measure Currently</p> <p>Customer Services have carried out a review of this measure for the September update which has resulted in a change in the way overall satisfaction will be measured. Historically the ‘average’ response to the survey was reported as a positive response from the citizen. However, upon further review this is not inline with industry standard. Therefore, this has now been amended so that overall satisfaction is now “Good” responses as a proportion of the total responses (Good + Average + Poor). This change has meant the result in December has now reduced from 66% to 52% due to the volume of average responses (neither satisfied or dissatisfied). As a comparison overall satisfaction has increased from 44% last December to 52% this year taking into consideration the amendment. A review of the target is underway and we intend to implement the revised measure including other channels such as webchat and email from the April.</p> <p>In total 406 response were received overall during the month of December of which Repairs received 121 (30%) so a significant proportion.</p> <p>The overall Housing Repairs satisfaction stood at 49% and verbatim comments showed frustration in respect of incomplete repairs by Contractors, missed Contractor appointments and lack of contact from Contractors. Customer Services are having regular engagement with the Contractors and the Housing Repairs service where customer satisfaction is discussed. The data demonstrates that citizens thought the contact centre advisors were willing and did what they could to help when speaking to our tenants, this equated to 81% of the responses. This is a slight dip from November where agent willingness for Housing Repairs stood at 86%.</p> <p>This was a similar picture for the Waste service, based on 51 responses the overall CSAT was 53%, which was an increase of 7% from November. Although this is still low, 90% thought the contact centre advisors were willing and did what they could. The verbatim in this case shows frustration regarding missed collections. Revenues came in with 77 (19%) responses and Customer Service Advisor willingness stood at 84%, similar to the previous month. For the small number of feedbacks for Revenues where citizens expressed dissatisfaction, it was mainly related to citizens feeling the council was not sympathetic towards their personal circumstances.</p> <p>All calls with negative feedback against the agent have been investigated and over 80% are not justified or accurately reflect the call. Any calls that were justified have been addressed with the individual on a 121 basis.</p> <p>Some citizens score our Customer Service Advisors poorly if there is a poor telephony connection, but staff do call citizens back if a telephone line is very unclear or it is disconnected by the citizen in error.</p>	Q	67.90%	47.00%	52.00%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL09	<p>Online transactions in comparison to telephone calls</p> <p><i>This is a cumulative figure. Figures show KPI performance as at the respective Quarter end.</i></p> <p>44.1% vs profiled December of 42%. Year-end target set at 43%.</p> <p>For comparison, the result was 32.4% in December 2019 compared to this December 44.1% which is positive.</p> <p>Benefits saw a 0.9% decrease from 28.9% to 28% and online volumes have increased by 39% (+2,465) in December 2020 compared to last December. The service had an increase in call volume of however (+46%) compared to last year mainly due to Covid related matters.</p> <p>Revenues saw a 15.7% increase, from 42.4% to 58.1%. Online has increased considerably by 73% when comparing this December (39,026) to Last December (18,783). The call volumes have increased this December by 9% (+2581) compared to last December.</p> <p>Waste Management saw an 16.6% increase from 56% to 72.7%, overall call volumes are relatively static and similar to last year however online has risen by 88% compared to last year (+12,254). Garden Waste sales opened mid way through December however the sales opened in January in the last window which is the primary reason for the significant increase.</p> <p>Housing Repairs has decreased slightly from 5% last December to 4.7% this year, this is mainly due to the increase in call volumes from 29449 last December to 34,465 (+17%) this December. This is due to the service dealing with backlogs as during Covid only certain repair types were being logged.</p>	M	42.00%	38.50%	44.10%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL10	<p>Percentage of Complaints responded to in 15 working days</p> <p><i>This is a cumulative figure. Figures show KPI performance as at the respective Quarter end.</i></p> <p>The total volume of complaints received citywide in November 2020 was 1,158 compared to 1,181 in November 2019. A decrease of 23 complaints year on year.</p> <p>For November 2020, there was a decrease of 101 complaints compared to the previous month (October) which received 1,259 complaints.</p> <p>The main decreases in complaints were in the Neighbourhoods Directorate (90 less complaints).</p> <p>The Neighbourhood Directorate received 888 complaints in November 2020 compared to 978 in October 2020. Waste services saw a decrease in complaints received (451 complaints received in October to 433 in November) a reduction of 18 complaints from the previous month and Housing Repairs saw the largest decrease in complaints (364 complaints in October to 310 complaints in November), a reduction of 54 complaints.</p> <p>All of the other services had similar figures to the previous month.</p> <p>Performance for responding within 15 working days for November citywide was 87% against a 90% target (which is a small increase of 1% on October's performance). These figures may be slightly different than previously reported due to the report data being refreshed as cases are closed every time the monthly report is run.</p> <p>Performance breakdown by directorate for November is below:</p> <ul style="list-style-type: none"> • Adults Social Care and Health Directorate – received 4 complaints with a 0% performance against the 15 days SLA. • Birmingham Children's Trust – received 1 complaint with a 100% performance against the SLA. • Commonwealth Games Directorate – received 0 complaints. • Digital and Customer Services Directorate – received 127 complaints with 99% performance against the SLA. • Education and Skills Directorate – received 42 complaints with a 38% performance against the SLA. • Finance Directorate – received 0 complaints. • Human Resources Directorate – received 0 complaints. • Inclusive Growth Directorate – received 79 complaints with an 86% performance against the SLA. • Neighbourhoods Directorate – received 888 complaints with 88% performance against the SLA. • Partnerships, Insight and Prevention Directorate – received 0 complaints. • 17 cases were unassigned with a 59% performance against the SLA. (These were: Housing Options (7), Housing Repairs (5), Housing South (1), Parking Online Complaints (1) and Transportation & Connectivity (3). 	M	90.00%	86.00%	87.00%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
DL11	Number of complaints received per thousand customers This is a new KPI reported for the first time in December and the first month of data collection shows complaints received is 1 per thousand customers.	M			1.0 per thousand	N/A
DL12	Percentage of ombudsmen complaints upheld This is a new KPI. A performance update will be provided in Q1 2021-22 for this KPI.	Q		New KPI		N/A
DL13	The number of data breaches that have occurred. <i>This is a cumulative measure and figures show YTD performance.</i> There were 15 reported data breaches for December 2020. Email disclosure -7 Unauthorised Disclosure - 8 All data breaches were processed by the Information Governance Team within the 72 hour timeframe. There were no notifications to the Information Commissioner's Office.	M	N/A	31	36	▲
DL14	Percentage compliance to the WCAG2.1 AA Accessibility standard for Birmingham.gov.uk This is a new KPI. In the month of December we have further increased our accessibility target for the WCAG 2.1 accessibility standard for Birmingham.gov.uk. We continue to work through the popular documents on the site to ensure they are to the accessibility standards. Government has introduced a new benchmark standard in December 2020 for the Public Sector Industry which is baselined at 89.5%.	Q	98.50%	New KPI	98.90%	N/A
DL15	Number of BCC websites that meet the international WCAG 2.1 AA accessibility standards. <i>This is a new cumulative KPI and the result shows December performance.</i> Additional sites are now meeting the WCAG2.1 standards from December as we include the appointment booking solution introduced as part of the Covid-19 response. Further work is now scoped out as part of the Customer Programme to identify further sites and work on their compliancy.	Q	TBC	New KPI	6	N/A
DL16	Number of households signed up for Council Tax Base e-billing This is the second month for this KPI and we are up on target due to enhanced levels of businesses registering for ebilling as a condition to their Business grant application.	Q	25000	New KPI	27882	N/A

Cabinet Member Portfolio: Education, Skills and Culture

External Regulatory Judgements	Date of Judgement	Judgement
ILACS (Inspection of Local Authority Children Services)	Dec-18	Requires Improvement
ILACS Focussed visit	Feb-20	None
Local Area Inspection SEND	Jun-18	Written statement of action
Birmingham Adult Education Service Education Inspection Framework (EIF)	Mar-18	Good
West Midlands Combined Authority Performance Management Review	Annual review	No issues

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
ESC01	<p>The proportion of years 12 to 13 pupils whose activity is unknown</p> <p>1. NEETs have increased between the previous and current month following work completed by the tracking team to identify the current status of NKs across the city and finding young people that are NEET. These young people are being referred to Birmingham Careers Service (BCS) to receive specialist support in getting back into EET. NEET numbers are expected to continue to increase as more NKs are contacted.</p> <p>2. NEET had also increased by 0.5% from last year (2019)</p> <p>3. Birmingham continues to perform better than the national average (2.7%) and the core cities average (4%).</p> <p>4. December is the first month of each LA's key performance period for participation, NEET and NK.</p>	M	2.30%	53.6% Sept Q2 ave 21.3%	6.48%	▼

(Continued) Each LA is measured on the average percentage for each of these categories and NEET and NK combined between Dec-Jan-Feb. For 2019/20 Birmingham's score for NEET was 2.2% which placed Birmingham in the second quintile and continued a pattern of improvement year on year. When combined with NK totalled 7.8% which placed Birmingham in the bottom quintile despite improvements made year on year with NEET.

Actions:

ILR data for the LA to be processed once received. Telephone calls to NK young people and young people identified as NEET are referred to BCS.

Continued work in collaboration with SCCB and BMet of the CCF project to further engage NEET and NK young people across the city

Transferring out of young people that have moved out of the LA so they are being tracked by the right LA.

Ongoing Collaborative work with WMP to do targeted door knocking of NK young people with the support of BYS and BCS

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
ESC02	Number of NEET young people supported by the career service	Y		New Figure TBC		N/A
	<p>1.NKs have decreased compared with the previous month. December is the first month of 3 in which the DfE measure overall performance of LAs for NK. Birmingham has equalled the performance for December 2019 despite having a further increase in the number of young people in our cohort this year. The tracking team are continuing to make contact with young people via their previous settings, telephone and email to ensure the LA improves on its 3 month average (Dec,Jan,Feb) in 2019-20 of 5.5%.</p> <p>2.Birmingham is currently behind the national average (3.6%) and core cities (4%)</p>					

(Continued) 3. December is the first month of each LA's key performance period for participation, NEET and NK. Each LA is measured on the average percentage for each of these categories and NEET and NK combined between Dec-Jan-Feb. For 2019/20 Birmingham's score for NK was 5.5% which placed Birmingham in the bottom quintile despite continual improvement year on year with NK identification. When combined with NEET totalled 7.8% which also placed Birmingham in the bottom quintile despite the improvements made with NK.

4. Actions:

ILR data for the LA to be processed once received. Telephone calls to NK young people and young people identified as NEET are referred to BCS.

Continued work in collaboration with SCCB and BMet of the CCF project to further engage NEET and NK young people across the city

Transferring out of young people that have moved out of the LA so they are being tracked by the right LA

Ongoing Collaborative work with WMP to do targeted door knocking of NK young people with the support of BYS and BCS

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
ESC03	Excluded Children without a school place for more than 6 days	M		0 Sept Q2 ave 0	9	▲
	The 3 permanently excluded young people in November, 2020 and 9 in December 2020 who were not admitted to the City of Birmingham School because it was full to capacity have been offered continuing educational provision by the Alternative Provider Flexible Learning. All 12 young people are secondary aged.					

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
ESC04	<p>Number of children missing from education for more than 7 days</p> <p>10 (Nov) and 5 (Dec) missing pupil cases have been logged following completion of our robust CME tracing process which adheres the current DfE statutory CME guidance. In accordance with our CME procedures, these missing pupils have been checked for safeguarding concerns and no concerns have been highlighted. They will be reviewed on a three-monthly cycle and if necessary checks will be made with relevant Central Government Agencies as part of the CME review cycle. The impact of the pandemic indicates a greater number of cases where parents have withdrawn children without formally notifying the school or providing the relevant information</p>	M		25 Sept Q2 ave 13	5	▼
ESC05	<p>Supporting Care Leavers with the career ambitions with regard to Education, Employment or Training (EET)</p> <p>This KPI is no longer reported on as it now falls within the Children's Trust agenda.</p>	Y				N/A
ESC06	<p>Performance in delivering the routes that were needed to transport pupils to school</p> <p>This KPI has been consistently met since the start of November</p>	W		This KPI was not measured in September	99.94% 18.12.20	N/A
ESC07	<p>Performance in transporting the number of pupils that needed to travel to school</p> <p>This KPI has been consistently met since the start of November</p>	W		This KPI was not measured in September	99.64% 19.12.20	N/A

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
ESC08	Overall Proportion of Early years settings Private, Voluntary and Independent providers (PVI) which are good/outstanding	M		94.3% Q2 ave 2019/20	No Data	N/A
	There is no update as there have not been any OfSTED inspections.					
ESC09	<p>The proportion of years 12 to 13 not in employment, education or training (NEET)</p> <p>1. NEETs have increased between the previous and current month following work completed by the tracking team to identify the current status of NKs across the city and finding young people that are NEET. These young people are being referred to Birmingham Careers Service (BCS) to receive specialist support in getting back into EET. NEET numbers are expected to continue to increase as more NKs are contacted.</p> <p>2. NEET had also increased by 0.5% from last year (2019)</p> <p>3. Birmingham continues to perform better than the national average (2.7%) and the core cities average (4%).</p> <p>4. December is the first month of each LA's key performance period for participation, NEET and NK. Each LA is measured on the average percentage for each of these categories and NEET and NK combined between Dec-Jan-Feb. For 2019/20 Birmingham's score for NEET was 2.2% which placed Birmingham in the second quintile and continued a pattern of improvement year on year. When combined with NK totalled 7.8% which placed Birmingham in the bottom quintile despite improvements made year on year with NEET.</p> <p>Actions:</p> <p>ILR data for the LA to be processed once received. Telephone calls to NK young people and young people identified as NEET are referred to BCS.</p> <p>Continued work in collaboration with SCCB and BMet of the CCF project to further engage NEET and NK young people across the city</p> <p>Transferring out of young people that have moved out of the LA so they are being tracked by the right LA.</p> <p>Ongoing Collaborative work with WMP to do targeted door knocking of NK young people with the support of BYS and BCS</p>	M		1.7% Sept Q2 ave 2.6%	2.61	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
ESC10	Overall Proportion of schools which are good/outstanding There is no update as there have not been any OfSTED inspections.	M		81% Q2 ave 2019/20		N/A
ESC11	Number of Permanent Exclusions - Primary The 4 young people permanently excluded from primary schools in November and December 2020 were all male. 3 of the permanent exclusions were for physical aggression to staff and pupils, 1 for disruption and defiance. The total of 7 children permanently excluded from Birmingham primary schools during the Autumn Term 2020 compares to 30 permanently excluded at the same time last year during the Autumn Term 2019 - a 76% reduction.	M		3 Sept Q2 avg 1	1	○
ESC12	Number of Permanent Exclusions - Secondary 22 of the 25 young people permanently excluded from secondary schools in November and December 2020 were male, 3 were female. 4 of the permanent exclusions were drug related, 6 for disruption/defiance, 2 for physical to staff, 1 for bullying, 10 were weapon related, 1 for threatening behaviour to staff and 1 for a firework related incident. The total of 46 young people permanently excluded from secondary schools during the Autumn Term 2020 compares to 87 permanently excluded at the same time last year during the Autumn Term 2019 - a 41% reduction.	M		10 Sept Q2 ave 3.3	7	▼
ESC13	Number of Permanent Exclusions - Special Schools The young person permanently excluded from a special school in November 2020 was female. The exclusion was for physical aggression towards staff. The total of 2 young people permanently excluded from special schools during the Autumn Term 2020 compares to 3 permanently excluded at the same time last year during the Autumn Term 2019.	M		0 Sept Q2 avg 0	0	○

Cabinet Member Portfolio: Children's Wellbeing

External Regulatory Judgements	Date of Judgement	Judgement
Children's Services	Dec-18	Requires Improvement
Adoption	Mar-19	Good
Fostering	Jan-19	Requires Improvement
Cambourne House	Aug-19	Requires Improvement
Edgewood Road	Aug-19	Requires Improvement
Warwick House	Jan-20	Good
Charles House	Dec-19	Good
ILACS (Inspection of Local Authority Children Services)	Dec-18	RI
ILACS Focussed visit	Feb-20	None
Local Area Inspection SEND	Jun-18	Written statement of action

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
CW01	Percentage of all referrals with a decision within 24 hours	M	80%	1139 80%	82%	▲
	Timeliness of decision-making has remained the same at 82% this month, but is still above target and within tolerance. There continues to be a focus on timely and appropriate decisions at the front door of children's services.					
CW02	Percentage of re-referrals to children's social care within 12 months	M	22%	302 20%	25%	▲
	1294 referrals were progressed to Asti in December 2020. Of these, 324 were re-referrals. We are currently undertaking a piece of work to better understand how many children were referred for different reasons and how many for the same reason. It is important for us to differentiate as we need to better understand those children being re-referred for the same reason. This is so that we can understand why past help and support may not have worked and/or whether is more that others could have done. We know the latter is the case for some children and families and we are escalating this through the POG.					

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
CW03	Percentage of assessments completed within 45 working days	M	85%	757 86%	86%	○
	Performance in this area has regularly remained above target since April 2020. This is despite an increase in demand through the front door. We consistently perform better than the England average and our statistical neighbours.					
CW04	Percentage of Initial CP Conferences (ICPCs) held within 15 working days This month 82% of initial child protection case conferences were held within 15 days of the strategy discussion. Practice continues to meet our target and is within tolerance. We continue to monitor the reason why some conferences are outside of timescales.	M	80%	115 81%	82%	▲
CW05	Percentage of children who become the subject of a CP plan for a second or subsequent time within the last 2 years We expected to see an increase in second or subsequent plans as a result of the pandemic. Current performance remains within tolerance and above target. We continue to monitor this indicator closely. A planned audit in January will enable us to have a more informed understanding of the nature and reasons for children becoming subject to a child protection plan for a second or subsequent time.	M	10%	198 12%	13%	▲
CW06	Percentage of children (under 16 years) who have been looked after for 2.5 years or more, and in the same placement (or placed for adoption) continuously for 2 years or more We have exceeded our target again this month. We continue to ensure the vast majority of children in care consistently receive timely statutory reviews.	M	68%	596 72%	74%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
CW07	<p>Percentage children experiencing 3 or more moves in a year</p> <p>This month we have recorded 3% which demonstrates excellent progress and evidences fewer children are experiencing placement moves within the Trust.</p> <p>We are continuing to perform better than the England average and our statistical neighbours and are exceeding both our target and tolerance figures.</p>	M	10%	48 2%	3%	▼
CW08	<p>Percentage of looked after reviews held on time</p> <p>We continue to ensure the majority of children in care receive timely statutory reviews.</p> <p>In December we recorded 96% of reviews in time which remains well within tolerance and meets our target.</p>	M	96%	2206 YTD 94%	96%	▲
CW09	<p>Percentage of care leavers who are in Education, Employment, and Training (EET)</p> <p>We are encouraged to see that the on-going effort of all staff in the care leavers service is reflected in the improved EET figure. The challenges of the last year have seen many of our young people become more determined to engage in further and higher education and achieve their aspirations. The DfE funded laptop scheme and additional support from charities such as the Matt Kendall Foundation and Capstone Trust have enabled more of our young people to have essential IT equipment and wifi so they can access learning online. In 2021 we hope to gain access to more supported and ring-fenced job opportunities through partnerships with BCC Employment and Skills, WMCA and the Commonwealth Games.</p>	M	62%	218 YTD 62%	64%	▲
CW10	<p>Percentage of year-to-date care leavers in suitable accommodation (19-21)</p> <p>Performance this month has reached 94% which has remained consistent for many months now. The KPI remains above the national and statistical neighbour averages. This is supported by the availability of accommodation through the City Council and third sector housing providers, care leavers being a priority for City Council housing. Although there is an established Care Leavers Housing Pathway, the 'choice' as to the location and type of the accommodation remains limited and there is more to do in this area.</p>	M	93%	329 YTD 93%	94%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
CW11	<p>Average time between a child entering care and moving in with its adoptive family, for children who have been adopted. (A1)</p> <p>Whilst performance in December has improved against last December, the figure may start to rise over the next few months as with so few adoptions compared to previous years, this could adversely affect being able to offset any outliers.</p> <p>Improvement actions in place:</p> <p>Family Finding Pilot from September 2019 with PACT whose adopters consider Trust children first, resulting in 13 children placed or matches made to date.</p> <p>National recruitment campaign September - December 2020 as well as a Black African and African Caribbean campaign focussed on Birmingham and London.</p> <p>26% of approvals so far this year are of Early Permanence carers compared to 6% this time last year. Rise in number of Early Permanence referrals and some placements taking place.</p> <p>Monthly Adoption Monitoring meeting in each area to track progress of children who have a plan of adoption and to review changes of plans, revocations, new plans and placement orders.</p>	M	578 days	494	499 3 year avg.	▲
CW12	<p>Number of children who have been adopted in the year or who leave care</p> <p>Due to the impact of Covid-19 on court proceedings, only 29 children have been adopted YTD compared to 74 adoptions in the same period last year. However, there has been increased activity with adoption hearings.</p> <p>There are currently 92 children in an adoptive placement awaiting an adoption order. Therefore, we are expected to be back on target later in the year.</p>	M	70	10 YTD	29	▼
CW13	<p>Percentage of agency social workers (including team managers)</p> <p>There are challenges nationally, regionally and for the Trust in both the recruitment and retention of qualified social workers. We are working hard to mitigate against the use of agency staff and we plan to issue a revised strategy in the coming weeks.</p>	M	12%	13% YTD	12%	▼

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
CW14	<p>Average caseload of qualified social workers</p> <p>The caseload average for December is recorded at 17. This relates to the recruitment and retention matter discussed in KPI 13. This figure remains within tolerance but above our target figure for 2020/21. We know that caseloads across the Trust vary and propose to review the operating model to ensure equity of caseloads and smoother transitions for children across the social care/social work system.</p>	M	15	17	17	○
CW15	<p>Percentage of social workers who have had supervision (in month)</p> <p>There has been a drop in performance this month due to staff sickness, bereavement and staff shortages although we remain within tolerance.</p>	M	86%	456 89%	80%	▼
CW16	<p>Ofsted will have found improvement in all areas and rated services at least Good.</p> <p>There is considerable work taking place to ensure the work is progressing for the WSOA . 91% of the actions have been completed. First draft of the SEF collating actions taken in relation to each of the 12 actions has taken place in November and December to identify gaps. This will continue to be a focused piece of work.</p>	M				N/A
CW17	<p>Percentage of new Education Health Care (EHC) plans issued within 20 weeks, excluding exceptions</p> <p>In November, there was a turnover of interim staff which had a significant impact on timeliness during the handover. Replacements are now in place and a new system for the allocation and monitoring of assessments is expected to produce more timely results as is evidenced in December.</p>	M	90.0%	63% Sept Q2 Avg. 77%	61%	▼
CW18	<p>Quality of Education Health Care Plans - Monthly Case Audits</p> <p>During December there was improvement in the overall quality of plans. This improvement is likely due to guidance provided to the team following key findings in October – resulting in improvements during November and December.</p>	M	61%	64% Sept Q2 Avg. 73%	87%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
CW19	Corporate Parenting Board Promise for children who have experienced Birmingham's care system. We'll take care of your health and encourage you to be healthy. The Council is working closely with the Corporate Parent Board to further develop the Corporate Parenting offer from the Council including Housing, Apprenticeships and access to Educational opportunities.	M		N/A		N/A
CW20	Reduction in complaints/mediations/tribunals through an early help offer The number of mediations has reduced and none were held in December or are due to be held in January. 24 Icase complaints and 34 yellow letter responses have been signed off and closed between the beginning of December and middle of January. The C&L team now have BCC laptops and access to SharePoint which will enable them to gather information to draft responses in a more timely manner.	M		This KPI was not measured in September	0 Mediations 24 iCase 34 Yellow Letter	N/A
CW21	Reduction in the referrals for specialised resources through investment in early school-based support and provision New provision teams for the allocation of specialist resources have now been put in place. The team will begin to collate monthly data to record referrals by SEND need for future reporting.	M		N/A		N/A
CW22	Proportion of children aged 2-2½ years offered ASQ-3 (Ages and Stages Questionnaires) This is a new KPI and will be reported on next quarter.	M		N/A		N/A

Cabinet Member Portfolio: Finance and Resources

External Regulatory Judgements	Date of Judgement	Judgement
Annual Governance Statement as defined by the external audit sign off of the BCC financial statements.	08-Jan-21	Qualified Value for Money conclusion in respect of two items
The external audit opinion on the financial statements	08-Jan-21	Auditor's opinion on the financial statements is unmodified
Lexcel and ISO 9001 accreditation	Oct-20	Accreditation obtained

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
FR01	Financial Resilience (using Chartered Institute Public Finance Accountants Resilience Index) A performance update will be provided in Q1 2021-22 for this KPI.	Q				N/A
FR02	Health & Safety Compliance Audits undertaken across directorates in targeted areas The next step will be to complete a cycle of verification audits to follow up the information submitted in the return.	A	BE Heard Survey launched with 170 manager responses which we estimate covers > 50% of the workforce			N/A
FR03	Number of accidents, Incidents and near misses within the City Council Whilst accident, incident and near miss data is often considered to be a lagging indicator which can fluctuate in response to both positive and negative factors, such a KPI presents an important opportunity to track compliance, implement preventative measures to avoid recurrence and in addition provides a background level from which to benchmark internal data. In addition it also demonstrates the organisations ongoing understanding of the importance to record and act upon this data and adhere to internal reporting protocols. When figures follow predictable trends based upon historic data, this also demonstrates to some extent the effectiveness of the controls in place and provides an indication of the residual risks that exists once those control measures have been fully implemented.	M	Trend	51	56	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
FR04	<p>Number of accidents and Incidents* reported to the HSE</p> <p>*This KPI now includes cases of Covid where there is considered to be reasonable evidence to suggest that the exposure was occupational (Q2 13 Covid / Q3 13 Covid).</p>	M	Trend	20	28	Δ
FR05	<p>The average number of working days lost due to sickness absence per FTE (full time equivalent) employee</p> <p>Absence levels remain better than previous year. Mental health (anxiety/stress/depression) remains significant as 23.13% of absence, a decrease on previous year (24.37%), as well as a decrease on last month (27.15%).</p>	M	9.25 per fte	7.11	8.24	Δ
FR06	<p>Grow channels such as Yammer to increase engagement ratings with staff</p> <p>2 sessions have been run in February and a MS Teams live session is planned for March. In addition engagement in the H&W survey has been increased (18% in June 2020 and 23% in Jan 2021). A staff engagement survey is proposed for 2021 which will be refreshed and improve on the 33% participation levels from 2019, targeting 40% participation.</p>	Q	<p>Year-end target = 12 Yammer Engagement (HR focussed) sessions (1 per month) with a 25% increase in participation baseline of 1168 at start of March 2021.</p>			N/A

Cabinet Member Portfolio: Health and Social Care

External Regulatory Judgements	Date of Judgement		Judgement
CQC - Shared Lives	Sep-19	Good	
CQC - North Homecare (Enablement)	Nov-19	Good	
CQC - South Birmingham Homecare (Enablement)	Apr-20	Good	
CQC - Care Centre – Anne Marie Howes	Jul-20	Requires Improvement	
CQC - Care Centre - Kenrick	Dec-19	Requires Improvement	
CQC - Care Centre Perry Trees	Sep-19	Good	

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC01	<p>The percentage of concluded Safeguarding enquiries where the desired outcomes were met during the enquiry</p> <p>Our performance on this measure this month is well above the target, with 95% of the people who told us their desired outcomes for their safeguarding enquiry having at least one of them met.</p> <p>The target is new for this month, but our performance for most of the last year has been above it. It dipped below the target only in October. This may have been related to the inevitable disruption caused by the implementation of our new customer journey. It has recovered since, and our overall performance for the last 12 months is 90.7%</p>	M	85%	93%	95%	▲
HSC02	The number of long term admissions to residential or nursing care (per 100.000 over 65s)	Q	560	612.3		

The number of people who we placed permanently in care homes has increased slightly since the last reported quarter. This figure includes people placed into care homes between October 2019 and September 2020, so it still includes the large number of placements we had to make at the start of the Covid-19 pandemic.

(Continued) April in particular saw a large increase in the placements we made (146 compared to between 80 and 100 in a typical month), and while it dropped again, we have still seen higher than usual numbers since. The increase has come from placements for people either being discharged from hospital, or coming from short-term services following a hospital admission. Due to the circumstances of the pandemic this was most likely unavoidable, as care home admissions were being used to free hospital capacity and there were also high numbers of older people being admitted to hospital with a severe illness. The number of placements we made appears to have dropped towards normal levels at the end of the quarter, and we hope that this trend will continue but this will be heavily dependent on how the pandemic develops.

In hospitals, we follow a Home First policy. We aim to avoid placing people permanently in care homes when they are discharged from hospital, and support them to remain in their own home whenever this is possible.

We have also moved to a “Discharge to Assess” model for hospital admissions, which means that we are not undertaking any long term planning for people while they are in hospital. Instead, the assessment takes place in the community with the aim of supporting people to remain as independent as possible for as long as possible. Alongside this model, our Early Intervention Community Team is helping to keep people at home following discharge from hospital. With it, we aim to prevent people being admitted to care homes by providing them with an intensive period of support that helps them be as independent as possible.

In the community, our social work teams have adopted a “Three Conversations” model of working. Under this model, social workers focus on connecting people with their communities as a source of support, and actively seek out opportunities and assets in the community that can help to meet people’s needs.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC03	Percentage of concluded Safeguarding enquiries where the individual or representative was asked what their desired outcomes were	M	85%	92%	91%	▲
	<p>Our performance on this measure has improved this month and it is once again over 90%. We continue to exceeding the target. Our overall performance over the last 12 months is 90.0%.</p> <p>As we have noted previously, this measure is based on relatively small numbers, so we expect variations in the result from month to month. However, the consistently high performance indicates that social work staff are making efforts to include vulnerable people in their safeguarding enquiries.</p>					

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC04	<p>Uptake of Direct Payments</p> <p>The proportion of people we provide direct payments to has increased slightly this month, and the overall trend continues to show improvement. Based on the positions in the 2019-20 ASCOF measures, we are still in the top quartile of all councils for this measure. Despite the increase the direction of travel indicator is pointing downwards- this is because it is less than the increase in the profile target.</p> <p>We have seen a period where the uptake of direct payments has slowed as due to the Covid-19 pandemic and emergency measures, and the lack of community opportunities that have resulted.</p> <p>Our workers will continue to encourage people to consider Direct Payments, and we will continue to train new workers on Direct Payments using online training tools.</p> <p>The Direct Payment challenge group is looking at innovative measures to further increase the uptake of Direct Payments and creative ways of engaging with community activities.</p>	M	39%	37.50%	38.00%	▲
HSC05	<p>The percentage of people who receive Adult Social Care in their own home</p> <p>The proportion of people receiving support from us in their own homes has risen this month. Over the longer term, we have seen an incremental improvement in this measure, though we expect to see some slight fluctuation.</p> <p>We are continuing to help people to remain living in their communities for as long as possible, so long as it meets their care needs and does not place them at risk. We have a variety of policies and initiatives in place to support this aim. These include our Home First policy, which aims to prevent discharging people from hospital into a care home wherever we can avoid it. We have implemented a Discharge to Assess model in hospitals which means we are not undertaking any long term planning for people while they are in hospital. Instead, the assessment takes place in the community with the aim of supporting people to remain as independent as possible for as long as possible. Our Early Intervention Community Team is helping to keep people at home following discharge from hospital. With it, we aim to prevent people being admitted to care homes by providing them with an intensive period of support that helps them be as independent as possible. We are also supporting people at the hospital ‘front door’, linking them into their communities to avoid hospital admission and supporting them to remain at home.</p>	M	Direction of travel only (pref. upwards)	70.1%	70.20%	▲

(Continued) Our Occupational Therapists continue to support our Social Workers to use equipment and assistive technology effectively so that people can remain in their homes for longer. We have adopted a new model for social work across a large part of our service, the Three Conversations model, and we are in the process of rolling it out to the remaining teams. As part of the Three Conversation model, we focus on reconnecting people with their local communities as a source of support, and this should prevent, or at least delay, them needing to move into a care home. In some cases, it can even prevent people needing support at all.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC06	Proportion of clients reviewed, reassessed or assessed within 12 months	M	85.0%	73.6%	75.6%	▲
	<p>Our performance on this has again improved significantly since last month. There were a large number of reviews that were due in March as a result of our efforts in previous years to meet the target at the end of the year. Added to this, we have had to redirect our social workers to support our response to the Covid-19 outbreak, which reduced the number of staff available to complete reviews.</p> <p>In particular, during October our Social Workers focussed on making welfare calls to the vulnerable people we support, as coronavirus restrictions tightened. They have now completed this work and have more capacity to complete reviews, which can be seen in the improvement this month.</p> <p>Adult Social Care senior management team have implemented a monthly performance board to monitor the review and assessment activity, reporting to the Director of Adult Social Care each quarter.</p> <p>The social work teams have specific targets for the number of reviews they need to complete, and their managers are monitoring their progress.</p> <p>The operational teams are currently working with Care First, Performance and Finance colleagues to ensure the system captures the review activity, review activity and allocation of cases is to be monitored and considered at a team level to ensure the 85% target is achieved by the end of March 2021.</p>					
HSC07	The number of people with Learning Disabilities who have been supported into employment by the PURE Project This measure is currently suspended due to the Covid-19 pandemic.	Q		10	N/A	

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC08	<p>The number of people who have Shared Lives</p> <p>The number of people receiving a Shared Lives service has dropped slightly this month. As well as making new placements, we have to replace placements that have ended. Over the last year, we have had 11 placements end. These are mostly because the person moved back to live independently in the community or in a supported living placement, but there were some where the person had to move into a care home because their needs increased. In the same period, 21 people began long term placements with us.</p> <p>We have faced challenges as a service during the pandemic, but we have also taken it as an opportunity change the way we work and respond to the ways it has changed people's needs. We have improved the processes involved in placing people with carers, making them more efficient.</p> <p>We have also used short term placements to support our pandemic response. While these can't be included in this KPI, they are a valuable form of support.</p> <p>One person we have helped this year, "J", was discharged from hospital during the Covid-19 lockdown and she moved directly into a Shared Lives placement. Her Shared Lives carer was able to provide enablement support for her, which assisted her in being able to improve her life skills and become more independent. Following this period of support, she was able to return to her family home.</p> <p>We are currently developing a pathway into Shared Lives placements for people being discharged from hospital. Our workstream is also focussing on:</p> <ul style="list-style-type: none"> - our communication strategy, so that we can get the word out to encourage more referrals - writing a business case for expanding the scheme - carer recruitment, including an improved website and use of the media, and addressing areas where we have recruited few carers. <p>We are also continuing to share success stories with the wider directorate to encourage referrals.</p> <p>During this challenging time, we are continuing to make urgent placements where they are appropriate, to keep vulnerable people safe and free from exploitation. We are also making placements to support people being discharged from hospital. We are using the technology available to us, so that we can do this with as little "in person" contact as possible.</p> <p>We are supporting our carers and service users, by making weekly welfare calls, and maintaining virtual carers' meetings and "open door" sessions for carers.</p>	M	120	101	101	0

(Continued) Alongside this, our service manager has been working in partnership with health professionals, our commissioning team, and other Shared Lives services in order to raise the profile of Shared Lives carers and ensure they are prioritised for Covid-19 vaccinations along with the rest of the caring workforce.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC09	The proportion of clients receiving Residential, Nursing or Home Care, or Care and Support (supported living) from a provider that is rated as Silver or Gold Q3 data will be reported next month	Q	75.0%	75.9%	75.9%	N/A
HSC10	Social work client satisfaction - postcard questionnaire The postcard questionnaire is currently suspended due to the Covid-19 pandemic.	Q	85.0%	Suspended		N/A
HSC11	Number (11a) and percentage (11b) of parent/carers satisfied with the Transition Plan co-produced with their young people 11a- This is a new measure relating to a new service, so there is no historic data and we are still building up a baseline idea of what “normal” looks like. However, this quarter 29 parents or carers said they are satisfied with the transition plan co-produced with their young people. 11b- This is a new measure relating to a new service, so there is no historic data and we are still building up a baseline idea of what “normal” looks like. However, this quarter 78.4% parents or carers said they are satisfied with the transition plan co-produced with their young people. The Integrated Transitions Team (ITT) launched in September, during the Covid-19 pandemic. This required our team to work in creative and innovative ways. We have mostly been engaging with the young people we support virtually, but when it has been possible, we have also met them outside for a walk in the park, or at a café. Since our launch, we have received around 115 connection requests, which have led to us working with 76 young people so far.	Q		New measure	11a= 29 11b= 78.4%	N/A

(Continued) Our service focusses on assisting young people aged 14-30 who will continue to require support from adult care services, such as people with special educational needs and disabilities. Our service will support them to achieve outcomes around employment, housing, health, relationships and community. Our wider proof-of-concept also includes a team that works with young people who have experienced trauma which may make them more vulnerable as adults.

We are co-producing our service with the young people we aim to support. We include them on our recruitment panels along with professionals, and some have formed a group, the Youth Empowerment Squad, that works with our commissioning colleagues. Our young people also contribute directly to our training programmes.

We will be monitoring our team's performance, both with measures like this, and by looking at stories of difference. Our workers will be capturing information throughout each young person's time with us to show what difference our service has made to them. We have our own data analyst, and all this information is collated for reporting to Ofsted, and the Adults and Children's scrutiny committees.

We also report to the monthly Preparation for Adulthood board (PfA) which is chaired by the Children's Trust, and the bi-monthly Life Course board which is chaired by the Director of Adult Social Care, and reports are shared with the cabinet member for Adult Social Care and Health.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC12	<p>Number (12a) and percentage (12b) of young people aged 14-25 transitioning to the Integrated Transition Team who feel that they can achieve their outcomes</p> <p>12a- This is a new measure relating to a new service, so there is no historic data and we are still building up a baseline idea of what "normal" looks like. However, this quarter 34 young people said that they feel they can achieve their outcomes.</p> <p>12b- This is a new measure relating to a new service, so there is no historic data and we are still building up a baseline idea of what "normal" looks like. However, this quarter 91.9% of young people said that they feel they can achieve their outcomes.</p> <p>The Integrated Transitions Team (ITT) launched in September, during the Covid-19 pandemic. This required our team to work in creative and innovative ways. We have mostly been engaging with the young people we support virtually, but when it has been possible, we have also met them outside for a walk in the park, or at a café. Since our launch, we have received around 115 connection requests, which have led to us working with 76 young people so far.</p>	Q	TBC	New measure	12a= 34 12b= 91.9%	N/A

(Continued) Our service focusses on assisting young people aged 14-30 who will continue to require support from adult care services, such as people with special educational needs and disabilities. Our service will support them to achieve outcomes around employment, housing, health, relationships and community. Our wider proof-of-concept also includes a team that works with young people who have experienced trauma which may make them more vulnerable as adults.

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ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC13	Number and percentage of young people who do achieve their outcomes following support from the Integrated Transition Team	A		New measure		N/A
	This is a new annual measure and will be reported on once the 2020/21 data is available					
HSC14	Number of Changing Places across the city	A		New measure		N/A
	This is a new annual measure and we will report on it at year end.					
HSC15	The percentage of births that receive a face-to-face new-born visit within 14 days	Q	92%	97%		
HSC16	Proportion of eligible population receiving an NHS health check	Q	2.50%	1.04%	1.23%	▲
HSC17	Rate of chlamydia detection (per 100,000 young people aged 15 to 24)	Q	2300	1,690		N/A
	Q3 Oct-Dec 2020: Not available until June 2021					
HSC18	Number of smoking quitters at 4 and 12 weeks	Q	672	240	4 Week Quits = 508 12 Week Quits = 299	▲
HSC19	Under 18 conception Rates per 1000 girls (15-17)	Q		Q1 Apr-June 2019: 19.1 Q2 Jul-Sept 2019: 17.9		N/A
	Q3 2019 data due to be published in Nov 2020 are delayed due to COVID activity					
HSC20	Corporate Parent Board Promises for children in care or with care experience: We'll involve you in decisions that affect you and listen to your views	M				

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC21	Corporate Parent Board Promises for children in care or with care experience: We'll try really hard to find the best possible place for you to live	M				
HSC22	Corporate Parent Board Promises for children in care or with care experience: We'll work with you and give you all the help and support you need to move successfully from care to adult life	M				
HSC23	<p>Miles travelled on free bicycles provided by the Council</p> <p>This is the Quarter 2 performance. The Quarter 3 performance will be available next month due to this KPI being reported one month in arrears: Due to COVID-19, wellbeing activities have been ceased since 20th March 2020. Some sessions have gradually started to recommence from the beginning of July 2020; of which 486 miles have been travelled on free bicycles provided by the council. NB: Due to COVID-19 restrictions, there were no targets in Quarter 1 or Quarter 2.</p>	Q	15853 (end-of-year cumulative target)	191287	486	N/A
HSC24	Placeholder - New national measure to replace Delayed Transfers of Care (DTC)	M		Placeholder		N/A

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HSC25	<p>Percentage of opiate drug users who are in full time employment for 10 working days following or upon discharge</p> <p>Data for Q3 2020/21 will be available from the National Drug Treatment Monitoring System (NDTMS) on or around 27th February 2021, however there may be a delay due to COVID-19. The Q2 figure of 15.5% is below the target of 19.3% which can be attributed to the impacts of COVID-19 on the employment market. This level of performance is expected to be repeated/decrease in Q3.</p>	Q	19.30%	15.5%		N/A
HSC26	<p>Percentage of non-opiate drug users who are in full time employment for 10 working days following or upon discharge</p> <p>Data for Q3 2020/21 will be available from the National Drug Treatment Monitoring System (NDTMS) on or around 27th February 2021, however there may be a delay due to COVID-19. The Q2 figure of 29.2% is an increase when compared to Q1 and whilst below the target of 34% it is a considerable achievement given the impacts of COVID-19 on the employment market. This level of performance is expected to be repeated/decrease in Q3.</p>	Q	34%	29.20%		N/A

Cabinet Member Portfolio: Homes and Neighbourhoods

External Regulatory Judgements	Date of Judgement	Judgement
Human Tissue Authority- re Public Mortuary	Jul-19	Achieved required CAPA plan
Register Office- Annual assessment based on annual return	Jul-20	Improving, but not meeting national performance targets

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HN01	We will respond to all council housing emergency repairs in 2 hours	M	98%	87%	90%	▲
	<p><i>This KPI is reported one month in arrears. The baseline result provided is July 2020 performance.</i></p> <p>The November 2020 result is 90.0% which is below both the contractual target of 98.1%. An audit into the quality of data submitted by the contractors has taken place and this has shown some questionable datasets on one contract area. We continue to work with this contractor to address these concerns and we have received the updated data as per our request which is currently being reconciled and any adjustments to the KPIs will be made. This should be reflected in January's figures. Below is a breakdown of the percentages per contractor: Engie: 99.2%, Wates Central: 98.3%, Wates East: 98.3%, Fortem: 70.6%.</p>					
HN02	We will resolve council housing routine repairs within 30 days	M	93%	98%	94%	▼
	<p><i>This KPI is reported one month in arrears. The baseline result provided is July 2020 performance.</i></p> <p>November 2020 performance is 94.1% which is above the contractual target of 92.6%</p>					

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HN03	Percentage of Right to Repair jobs completed against period profile	M	93%	89.3%	91.6%	▲

This KPI is reported one month in arrears. The baseline result provided is July 2020 performance.

The November 2020 result is 91.6%, which is below the 92.6% contractual target for this period, but still within the tolerance of this measure. Whilst performance is still within tolerance, Test & Trace and the increase of transmission of COVID-19 is leading to an increase in the number of operatives requiring to self-isolate at short notice impacting completions within timescale, particularly impacting – roofing, fencing, carpentry and plastering. There are also difficulties with the availability of

HN04	Average days void turnaround - excluding void sheltered properties	M	28	46.9	41.6	▼
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The baseline result provided is August 2020 performance.

The December 2020 result for average void turnaround (excluding sheltered voids) is 41.6 days which has not achieved the target of 28.0 days. However, this is a significant reduction of nearly 4 days from the November figure (45.0). This has been a significant achievement as this improvement took place whilst the service was impacted by the ongoing pandemic and Tier 4 restrictions, combined with the impacts of additional staff and contractor leave over the Christmas Holiday period (3 bank holiday days). Average repairs times for the month was 25.4 across all void repairs. Repair partners report an ongoing increase in staff affected by COVID-19 and having to self-isolate. With the reduction in availability of operatives, this has impacted on repair times. The impact of the pandemic and adhering to social distancing guidelines, continues to limit the numbers of operatives the repair partners may have working within a property at any one time (no more than two). However, partners are organising/ structuring time and labour to manage and mitigate the effects on time taken to repair. The average time taken from the void being fit for letting to the tenancy start date was 19.59 days. This is an improvement of nearly 3 days from November's performance. During December 2020, a total of 221 voids were re-let which was a significant achievement in light of the restrictions imposed from Tier 3 to 4, and set against the considerable increase in infection rates both affecting the Repair Partner's ability to complete repairs, and also customer's ability to move home.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HN05	<p>Available properties as a percentage of total stock</p> <p><i>The baseline result provided is August 2020 performance.</i></p> <p>The December 2020 snapshot result is 99.4% which has exceeded the target of 98.0% for this period.</p>	M	98%	99.4%	99.4%	○
HN06	<p>Percentage of tenancies sustained at 12 months (where appropriate)</p> <p><i>The baseline result provided is the March 2020 performance.</i></p> <p>Annual result to be reported as part of the final outturn report at year-end.</p>	A	94%	98%		N/A
HN07	<p>Households where homelessness is prevented</p> <p><i>The baseline result provided is the August 2020 performance.</i></p> <p>The year-to-date (April 2020 - December 2020) result of 32.14% has surpassed the year-to-date target of 25.00%. There has been a real success in driving forward the prevention agenda in what has been very difficult times. Of the cases closed in prevention this month, a significant percentage have been closed with a positive outcome. This has been because of the use of the homelessness prevention fund to either secure deposits or reduce arrears; redirecting single vulnerable people to suitable housing providers or negotiations with families to prevent exclusion.</p>	M	25%	34%	32%	▼
HN08	<p>Households where homelessness is relieved</p> <p><i>The baseline result provided is the August 2020 performance.</i></p> <p>The year-to-date (April 2020 - December 2020) result of 55.54% is above the year-to-date target of 35.00%. There were 50 homeless cases relieved this month, of which, 29 have secured accommodation or maintained existing accommodation. The number of cases closed each month has reduced as the backlog has been cleared. The Service anticipates an increase in cases proceeding to full duty due to the continued increase in Domestic Abuse and Anti-Social Behaviour presentations.</p>	M	35%	53.59%	55.54%	▲

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
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HN09	<p>Minimising the number of households living in temporary accommodation per 1,000 households</p> <p><i>The baseline result provided is the August 2020 performance.</i></p> <p>The December snapshot result of 8.35 has not achieved the 8.14 target. However, this has reduced from the November snapshot figure of 8.71. The result is attributed to the ongoing COVID-19 pandemic impacting upon the move-on rate from temporary accommodation. Year-to-date, availability of alternative accommodation has reduced significantly; the majority of rough sleepers, however, continue to be accommodated. It is predicted that homelessness presentations will continue to increase with a predicted rise once the courts begin to issue possession orders in 2021. There is a continued increase in domestic abuse and relationship breakdowns as well as Anti-Social Behaviour issues. The third national lockdown announced on 4 January 2021 is expected to impact upon the availability and type of temporary accommodation. Mitigations to try and bring this performance indicator back on target include;</p> <ul style="list-style-type: none"> • Maximising and utilising all self-contained or supported accommodation • Increasing and focussing on early intervention and prevention measures • Looking to engage with third sector organisations to provide support and joined up working on move-on • Working with the private sector to secure accommodation • Encouraging citizens to consider permanent accommodation in the private sector • Developing a more customer-focused approach to support households to move out of Temporary Accommodation. <p>It is anticipated that this measure is unlikely to be achieved despite closely monitoring performance. This is wholly dependent upon the duration and impact of the COVID-19 pandemic and ability to prevent and resolve homelessness during this challenging time.</p>	M	8.14	8.60	8.35	▼
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HN10	<p>Percentage of residents allocated a BCC housing tenancy</p> <p>This new corporately reported KPI is currently being developed. An update should be provided in the next performance report.</p>	M	TBC			N/A
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ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
HN11	<p>Number of properties improved in the Private Rented Sector as a result of Local Authority intervention</p> <p><i>The baseline result provided is the March 2020 performance.</i></p> <p>The year-to-date (April 2020 – December 2020) result is 266 which has exceeded the target of 197 for this period.</p>	M	263	296	266	▼
HN12	<p>Private sector empty properties brought back into use (cumulative)</p> <p><i>The baseline result provided is the March 2020 performance.</i></p> <p>The year-to-date (April 2020 – December 2020) result is 221 which has exceeded the target of 197 for this period.</p>	M	263	352	221	▼
HN13	<p>Number of annual ward meetings held</p> <p>This new corporately reported KPI is reported one month in arrears. The Quarter 3 performance will be available in the next performance report.</p>	Q	100	414		N/A
HN14	<p>Annual Resident Attendee Numbers for Ward Forum Meetings</p> <p>This new corporately reported KPI is reported one month in arrears. The Quarter 3 performance will be available in the next performance report.</p>	Q	1500	1500		N/A
HN15	<p>Number of ward plans updated or completed in the year</p> <p>This new corporately reported KPI is reported one month in arrears. The Quarter 3 performance will be available in the next performance report.</p>	Q	69	69		N/A
HN16	<p>Number of people supporting local Community Infrastructure Levy (CIL) crowdfunding projects per annum</p> <p>This new corporately reported KPI is currently being developed. An update should be available in the next quarterly performance report.</p>	A	TBC			N/A
HN17	<p>Total number of buildings either on Community Asset Transfer lease or community lease</p> <p>This new corporately reported KPI is currently being developed. An update should be available in the next quarterly performance report.</p>	A	TBC			N/A

Cabinet Member Portfolio: Social Inclusion, Community Safety and Equality

External Regulatory Judgements	Date of Judgement	Judgement
<p>The Equality duty is supported by specific duties. This duty requires LAs to:</p> <ul style="list-style-type: none"> • annually publish information demonstrating compliance with the Equality duty. • Set equality objectives at least every four years. <p>We have published our equality objectives 2019 – 2023. (HR publish the equality data.)</p>	No Standard Judgement	<p>The Equality and Human Rights Commission is responsible for assessing compliance with and enforcing the duty.</p> <p>To support compliance, we are assessing our progress against the Equality Framework for Local Government.</p>
<p>Prevent Duty under the Counter terrorism and Security Act 2015, requires specified authorities, including local authorities, to give ‘due regard’ to the need to prevent people being drawn into terrorism.</p>	<p>No standard judgement although the Home Office did undertake a Peer Review of Prevent in January 2018</p>	<p>The Home Office is responsible for assessing compliance with and enforcing the duty.</p> <p>To support compliance, we are assessing our progress against the Prevent Duty Toolkit and undertaking regular Peer reviews.</p> <p>The outcome of the January 2018 Peer Review assessed Birmingham’s Prevent programme as “an extremely strong approach that is internationally recognised”.</p>

<p>Crime and Disorder ACT 1998</p> <p>Section 5 requires the Police and local authorities to have joint responsibility for preventing and reducing crime in an area through the establishment of community safety partnerships.</p> <p>Section 6 requires responsible authorities to formulate and implement a strategy for the reduction of crime and disorder in the area and produce a strategic assessment.</p> <p>Section 17 requires local authorities to exercise their functions and to all that is reasonable to prevent crime and disorder in its area.</p>	<p>No Standard Judgement although the local authority did undertake a Peer Review of CSP Arrangements in Sep 2018</p>	<p>The Home Office is responsible for assessing compliance with and enforcing the duty which they do through the Office of the Police and Crime Commissioner.</p> <p>To support compliance, we are able to assess our progress through Peer reviews. The outcome of the last Peer review was a strengthened partnership governance framework and a realignment of local delivery structures.</p>
<p>Modern Slavery 2015</p> <p>Duty to notify and National Referral Mechanism (NRM)</p> <p>Local authorities have a duty to notify the Home Office of any individual encountered in England and Wales who they believe is a suspected victim of slavery or human trafficking.</p> <p>Advice Services Alliance</p>	<p>No standard inspection</p> <p>15th October 2020</p>	<p>The Home Office is responsible for assessing compliance with and enforcing the duty.</p> <p>Advice Quality Standard Awarded to Neighbourhood Advice & Information Service (for Welfare Benefits, Housing and Debt.)</p>

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SCE01	<p>Proportion of BAME staff in each grade compared to Birmingham population</p> <p>A baseline figure is something that we are looking to establish at this stage with a view to monitoring in future performance reports.</p>	A				

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SCE02	<p>Reduce first time entrants to the Youth Justice System aged 10-17 (per 100,000 10-17 year olds)</p> <p>While we are not performing as well as core cities, our performance has improved on the last period by 9.5%. The figures have been going in the right direction over the last six months and we are approaching our comparator.</p> <p>Improvement actions in place:</p> <p>Review decision-making and guidance with Police and CPS for Community Resolutions and entry into formal youth justice system.</p>	M			351 Oct 2018 - Sept 19	
SCE03	Reoffending by young offenders (10 to 14 year olds and 15-17 year olds)	Q				
SCE04	<p>The Neighbourhood Advice Service will maximise income for citizens from benefits / charitable sources or employment.</p> <p>This is the Quarter 2 performance. The Quarter 3 performance will be available next month due to this KPI being reported one month in arrears: The year to date (April - September 2020) estimated income maximisation performance is £3,410,579 which exceeds the YTD target of £2,500,000. Whilst home working officers have made around 600 outgoing calls to persons who received food parcels in lockdown and maximised income for many of them. The over-achievement by the Neighbourhood Advice Service offsets the shortfall in the income figure for the advice services provided by the third sector.</p>	Q	£6m	9.040,650	3,410,579.00	

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SCE05	PLACEHOLDER: Community Safety Partnership indicators	TBC				
SCE06	PLACEHOLDER: Equalities indicators	TBC				
SCE07	<p>Our advice services delivered by the third sector will maximise income for citizens from benefits / charitable sources or employment</p> <p>This is the Quarter 2 performance. The Quarter 3 performance will be available next month due to this KPI being reported one month in arrears: The year-to-date (April 2020 - September 2020) actual result is £761,333 which has not achieved the year-to-date target of £1,500,000. Performance review meetings with delivery partners will be held to discuss and address underperformance, but it is already understood that partners will be unable to achieve the income maximisation contractual target due to the impact of COVID-19 in its operation during the Quarter 1 (April 2020 - June 2020) and Quarter 2 (July 2020 - September 2020) periods.</p>	Q	£3.5m	4,349,949	761,333.28	▼

Continued: Social Inclusion, Community Safety and Equality

As described in the overarching portfolio commentary, the following KPIs were approved by Community Safety in December 2020. This enabled the service to consult with all other members of the Community Safety Partnership (CSP). It also provides a platform to align the future CSP performance framework with this, and thus ensure a focused citywide approach towards community safety. Targets have been agreed, and benchmarking information is now being compiled to enable the first detailed reporting at Q4.

ID	Key Performance Indicator	Availability
TBC	Percentage of enquires responded to within 48 hours from the Community Safety Team Front Door	Q
TBC	Number of Anti-Social Behaviour incidents reported	Q
TBC	Percentage of Anti-Social Behaviour related incidents actioned within one month	Q
TBC	Number of Community Triggers enquiries meeting threshold	Q
TBC	Number of Community Triggers reviews where investigations have not followed policies and procedures	Q
TBC	Incidents of Domestic Abuse reported to Birmingham City Council	Q
TBC	Increase the number of incidents of Domestic Abuse logged, to being progressed and actioned, including via the criminal justice system	Q
TBC	Percentage of victims of Domestic Abuse reporting further incidents	Q
TBC	Percentage of staff / managers undertaking Domestic Abuse Awareness training	A
TBC	Number of Domestic Abuse disclosures from staff	Q
TBC	Incidents of Hate Crime reported	Q
TBC	Increase the number of incidents of Hate Crime logged, to being progressed and actioned, including via the criminal justice system	Q
TBC	Total Recorded Crime in Birmingham	Q
TBC	Violent Crime in public places	Q

ID	Key Performance Indicator	Availability
TBC	Number of National Referral Mechanism (NRM) reported for Modern Slavery and continue to increase awareness around modern slavery, including working with partners to disrupt activities	Q
TBC	Percentage of staff receiving Modern Slavery Training	A
TBC	Reduce first time entrants to the Youth Justice System aged 10-17 (per 100,000 10-17-year olds	M
TBC	Reoffending by young offenders (10 to 14-year-olds and 15 to 17-year olds)	Q

Cabinet Member Portfolio: Street Scene and Parks

External Regulatory Judgements	Date of Judgement	Judgement
CAR's (Compliance Assessment Reports) carried out by the Environment Agency to evaluate compliance against Permit/Licenced waste facility obligations. This is a physical officer inspection with water sampling of discharge activity or groundwater activity	Inspections are planned or unannounced during the year with a CAR's score being delivered after each assessment	Available to view via the DEFRA portal, but copies can be viewed on request from Veolia if required.
To ensure that DEFRA inspections take place on a regular basis and that any identified problems are dealt with appropriately. Plant Passport system in place to cover new government guidelines following withdrawal from EU in January.	Coleshill Road Nursery was visited 22nd October 2020	No issues were found

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SSP01	<p>Level of street cleanliness as assessed by the Land Audit Management System (LAMS)</p> <p>This is the Quarter 2 performance. The Quarter 3 performance will be available next month due to this KPI being reported one month in arrears: The year-to-date (August 2020 – September 2020) result is 77.74%, which is slightly below the target of 80.00%, but still within tolerance. The performance of this measure has been impacted as the street cleaning service have been supporting the refuse collection services though the current COVID-19 pandemic, which has led to some slight changes in cleansing schedules. The Land Audit Management System (LAMS) surveys carried in September 2020 show a decrease in the reporting for detritus and litter to a larger degree, in comparison to the same period last year (September 2019). Fly-tipping on the highway has increased across all areas of the City, and from checking with other local authorities and the Local Government Association, this has currently been recognised as a country-wide issue. Reporting comparisons for week 39 (2020) to the same period last year (2019) show a rise of 50% in reported instances of fly-tipping across the City wards.</p>	Q	80%	79.55%	77.74%	▼

(Continued) Taking into account fluctuations in recording, a steady rise in the median of reported cases of fly-tipping has increased from 390 in September 2019 to 820 in September 2020. As a recourse, the Service have taken steps to put in some extra resources, in the key areas that are seeing the largest increases in fly-tipping. NB: Government restrictions caused by COVID-19 resulted in a suspension of LAMS data collection between April and July 2020; this meant performance data was unavailable during that time period. Surveys recommenced at the beginning of August 2020.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SSP02	<p>Increase Recycling, Reuse, and Green Waste (both with and without bottom ash)</p> <p>Measure reported one month in arrears: The estimated year-to-date (April 2020 - November 2020) result is 39.10% which has achieved the year-to-date target of 39.00%. The estimated year-to-date (April 2020 - November 2020) amount of waste disposed of is 316,900 tonnes, of which, an estimated 123,900 tonnes were reused, recycled or composted. This measure has been significantly affected by the extended maintenance shutdown of the Tyseley Energy Recovery Facility (ERF) and COVID-19 restrictions. The recycling estimate has been adjusted to include the bottom ash from the alternate Energy Recovery Facilities confirmed to have been recycled. The shutdown began on 13th June 2020 and ended on the 11th August 2020; this covered not only the regular annual maintenance, but also work in the Essential Works Program. A longer shutdown of the Tyseley ERF has meant a reduction in metals and bottom ash sent for recycling. The Household Waste Recycling Centres were initially closed due to COVID-19 and have re-opened with additional controls and reduced waste inputs, the year-to-date (April 2020 - November 2020) estimated recycling tonnage is 22,300 tonnes (54%) lower than the same period last year. The estimated amount of recycling collected directly from households year-to-date (April 2020 - November 2020) is higher than the same period last year, but by only 5,000 tonnes, giving an overall reduction in collected segregated recycling of 17,300 tonnes. Without this reduction in collected recycling, the estimated year-to-date (April 2020 - November 2020) result would be 41%. The estimated year-to-date (April 2020 - November 2020) recycling figure (excluding the bottom ash) is 24.20%.</p>	M	40%	38.51%	39.10%	Δ

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SSP03	<p>Reported missed collections per 100k collections scheduled</p> <p>Measure reported one month in arrears: The year-to-date (April 2020 - November 2020) result is 117 which has not achieved the year-to-date target of 100. The number of missed collections has reduced slightly in November 2020 (the monthly result was 117 missed per 100 thousand collections scheduled). There were 1,964 reported missed residual collections and 1,324 reported missed recycling collections in November 2020. Missed collections are reviewed on a daily basis and tend to be because of access issues, breakdowns and staffing issues. The majority of missed collection have been due to vehicle and access issues this month. The majority of missed collections were collected before the end of the week. The Service believes missed collections will start to be eased now that new reliable vehicles have started arriving into the fleet. These vehicles will be fitted with technology that will assist further in reducing missed collections. The Service is also looking at missed collections in relation to crew performance, and identifying repeat missed collections to avoid any further unnecessary missed collections.</p>	M	100	113	117	N/A

SSP04	<p>Percentage of waste presented to landfill</p> <p>Measure reported one month in arrears: The estimated year-to-date (April 2020 –November 2020) result is 10.80% which has surpassed the year-to-date target of 13.00%. The target profile was adjusted to reflect a postponed shutdown of the Tyseley Energy Recovery Facility (ERF). The landfill estimate has been adjusted to exclude the bottom ash from the alternate Energy Recovery Facilities confirmed to have been recycled and was previously assumed to have been sent to landfill. The rescheduled shutdown of the Tyseley ERF started on 13th June 2020 and ended on 11th August 2020, with a partial shutdown reducing the facility's capacity by approximately half. The shutdown covered not only the regular annual maintenance, but also work in the Essential Works Program. A longer shutdown of the Tyseley ERF has meant more waste has been diverted to other disposal facilities, including landfill.</p>	M	10%	10.03%	10.80%	▲
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(Continued) This measure has been significantly affected by the COVID-19 lockdown in the period to date by; the delay in the Tyseley Energy Recovery Facility (ERF) planned shutdown, and the increase in kerbside collected residual waste will continue to significantly affect the measure over the reporting year. Mitigation measures are in place to limit the ongoing affects going forward, including the use of alternate ERFs to dispose of residual waste. Year-to-date (April 2020 - November 2020), the overall amount of residual waste taken directly to landfill for disposal by the Service is estimated to be 11,000 tonnes (28%) less than the same period last year. It is estimated that only 40 tonnes of waste went directly to landfill in November 2020.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SSP05	Percentage completed annual tree inspections (according to the 5 year plan) As the service is in year 5 of the 5-year plan, there are no routine tree inspections during 2020/21. Tree inspections will recommence in April 2021.	M	N/A	100.00%		N/A
SSP06	If you report a tree that is considered dangerous by our qualified Tree Officer, we will ensure the tree is attended to and the area made safe within 2 hours All emergency call outs were attended to within 2 hours - there were 14 this month.	M	100%	100.00%	100.00%	
SSP07	Level of Grounds Maintenance works completed to green space across the City including H & S inspections. The measure will show the percentage of work completed against programme. The year to date (April 2020 - December 2020) result of 83% has not achieved the target of 95% due to the impact of COVID-19 on Grounds Maintenance (GM) operations. The impact of COVID-19 on GM operations resulted in a low completion percentage of programme works in the first quarter of the year at 61%. Following relaxation of COVID-19 lock down restrictions, the GM programme completed increased to 94% for Quarter 2 and to 97% in Quarter 3. The in-house service provider continues to succeed in high programme works completion rates above the 95% target in spite of operational difficulties resulting from the impact of COVID-19. The low level of completion of GM programme at the start of the grass cutting season is the main reason for the year-to-date percentage being below target.	Q	95%	95.00%	83.00%	▼

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
SSP08	<p>Level of Grounds Maintenance works completed to the specified service standard. The measure will show the percentage of work completed to standard</p> <p>The year to date (April 2020 - December 2020) result of 83% has not achieved the target of 95% due to the impact of COVID-19 on Grounds Maintenance (GM) operations. The impact of COVID-19 on GM operations resulted in a low completion percentage of programme works in the first quarter of the year at 61%. Following relaxation of COVID-19 lock down restrictions, the GM programme completed increased to 94% for Quarter 2 and to 97% in Quarter 3. The in-house service provider continues to succeed in high programme works completion rates above the 95% target in spite of operational difficulties resulting from the impact of COVID-19. The low level of completion of GM programme at the start of the grass cutting season is the main reason for the year-to-date percentage being below target.</p>	Q	95%	95.00%	83.00%	▼

Cabinet Member Portfolio: Transport and Environment

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
TE01	<p>Cat 1 and urgent faults attend and make safe on time. (percentage and number) within 2 hours</p> <p>The services are all performing at or above target levels and this represents the successful mobilisation of the Interim Services Contract (Kier) which commenced in April 2020. Services are being delivered safely during the COVID-19 pandemic and performance has been maintained through this difficult period.</p>	M	99%	99%	(M9) -99%	○
TE02	<p>Street Light In-Light repairs carried out within time (percentage and number)</p> <p>The services are all performing at or above target levels and this represents the successful mobilisation of the Interim Services Contract (Kier) which commenced in April 2020. Services are being delivered safely during the COVID-19 pandemic and performance has been maintained through this difficult period.</p>	M	95%	98%	(M9) -99%	△
TE03	<p>Percentage of dangerous defects ('Category 1' defects) on streets temporarily repaired within 24 hours</p> <p>The services are all performing at or above target levels and this represents the successful mobilisation of the Interim Services Contract (Kier) which commenced in April 2020. Services are being delivered safely during the COVID-19 pandemic and performance has been maintained through this difficult period.</p>	M	98%	99%	(M9) -99%	○
TE04	<p>Cat 1 and urgent faults full repair carried out on time (%) within 35 days</p> <p>The services are all performing at or above target levels and this represents the successful mobilisation of the Interim Services Contract (Kier) which commenced in April 2020. Services are being delivered safely during the COVID-19 pandemic and performance has been maintained through this difficult period.</p>	M	95%	98%	(M9) -99%	△

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
TE05	<p>Number of statutory responses to planning applications returned by the Highway Authority within the statutory deadline</p> <p>High level of performance on this measure has been maintained due to internal working efficiencies and prompt correspondence from both Transport & Connectivity and Planning & Development.</p>	M	85%	91%	(M9) - 96.4%	▲
TE06	<p>Level of CO2 emissions from Council buildings and operations</p> <p>This is an annual measure - next update will be in September 2021 - for period 2020 reported in 2 years lag</p>	A	378,530tCO2 to meet net zero by 2030	417,772tCO2 July 2019 Anthesis annual report	N/A	
TE07	<p>The number of schools progressing a Mode "STARS" (Sustainable Travel Accreditation and Recognition for Schools) programme</p> <p>(i)- Schools using Mode shift STARS to produce a School Travel Plan (ii)- Schools achieving Mode shift STARS Bronze accreditation (ii)- Schools attending a CPD training session</p> <p>Schools, like many others, are continuing to operate in very challenging circumstances due to COVID-19, and this has impacted on what engagement and activity has been possible and, in turn, the number of completed travel plans and accreditations achieved.</p>	Q	(i)- Target 30 (ii)- Target 20 (iii)- Target 60	(i) 5 (YTD 6) (ii) 3 (YTD 3) (iii) 15 (YTD 39)	(i) 8 (YTD 14) (ii) 3 (YTD 6) (iii) 26 (YTD 65)	

(Continued) We have, however, established good points of contact with many schools who were not previously signed up or engaged, and will continue to work with these schools and build on this positive work. We continue to utilise the additional travel planning support provided through funding from the Department for Transport and are working closely with schools who have concerns about congestion at the school gate or high rates of bus boarding.

Despite schools currently being closed to many pupils, the team are continuing to work remotely, and tailored messaging and support packages have been provided to schools. Bespoke messaging and offers of support have been targeted at schools in the vicinity of Active Travel Fund schemes, for example those within low traffic neighbourhood areas. Support is also being offered to schools in other priority areas, such as Perry Barr, and those taking part in the Car Free School Streets initiative or earmarked for Safer Routes to School measures.

Online webinar sessions on the topics of Road Safety, Clean Air and Modeshift STARS are still proving popular, as is reflected in the target for this year already being exceeded.

ID	Key Performance Indicator	Availability	Year End Target	Quarter 2 Result	Quarter 3 Result	DoT
TE08	The amount of publicly available council-controlled parking within the city centre This is an annual new measure - We need to establish the baseline/target at EOY 20/21 and then report EOY 21/22..	A	N/A	N/A	N/A - annual	
TE09	PLACEHOLDER: Route to Zero indicator set. Route to Zero measures in performance management framework reported annually next data available October/November 2021. Report to presented to Council on the priority actions to reduce CO2 in January 2021.	A	Decreasing CO2	3134377.46 CO2 emissions 2018 in the CDP report	N/A - annual	
TE10	Increased percentage of trips taken by bicycles Cycle numbers are only reported on an annual basis. Based on a smaller sample of cycle counters than we will use to calculate the annual average, cycle numbers in Q3 were broadly consistent with the same period 12 months ago. During Q3 and Q4 the number of cyclists can vary significantly, based on poor weather conditions in previous years, and wouldn't necessarily be indicative of a long term trend.	A	104 - (2% increase) 2020/21	102 - (2% increase) 2019/20	N/A - annual	