Operational Delivery Committee Performance Report Appendix A

Operations and Protective Services

Building Services

1. Customer - Building Services

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
The year to date percentage of repairs appointments kept	99.52%	Ø	99.61%	Ø	99.35%	Ø	96.3%	
Percentage of tenants who have had repairs or maintenance carried out in the last 12 months satisfied with the repairs and maintenance service (year to date).	92%	Ø	92%	Ø	92%	Ø	80%	

Performance Indicator	Q4 2019/2	Q4 2019/20		Q1 2020/21		Q2 2020/21	
	Value	Status	Value	Status	Value	Status	Target
**Total No. complaints received (stage 1 and 2) - Building Services	60		11		22		
% of complaints resolved within timescale stage 1 and 2) - Building Services	53.3%		54.5%		50%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Building Services	36.7%		18.2%		21.4%		
*Total No. of lessons learnt identified (stage 1 and 2) - Building Services	1		0		1		

^{*}Lessons learnt referred to throughout this Appendix are lasting actions taken/changes made to resolve an issue and to prevent future re-occurrence for example amending an existing procedure or revising training processes. When a complaint has been upheld, action would be taken in the form of an apology or staff discussion/advice, but these actions are not classified as lessons learnt.

2. Processes – Building Services

Performance Indicator	Sept 2020	Sept 2020		Oct 2020		Nov 2020	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
The year to date average length of time taken to complete emergency repairs (hrs)	4.61		4.62		4.47		4.1
The year to date average length of time taken to complete non-emergency repairs (days)	7.54	②	7.25	②	7.01	②	8.3
The year to date percentage of reactive repairs carried out in the last year completed right first time	90.81%	Ø	91.65%	>	92.06%	Ø	93.6%
The percentage of Repairs Inspections completed within 20 working day target (year to date)	88.1%		92.4%		93.1%		100%
YTD % of ROUT Void Path Maintenance Completed Within Timescale	12.5%		13.2%		14.4%		100%
YTD % Death Voids Path Maintenance Completed within Timescale	35.2%		36.2%		35.9%		100%
YTD % Major Works Void Path Maintenance Completed within Timescales	14.3%		13.3%		12.5%		100%

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
	Value	Status	Value	Status	Value	Status	Target
*YTD How many times in the year did you not meet your statutory obligation to complete a gas safety check within 12 months of a gas appliance being fitted or last checked.	1,462		1,564		1,626		0

^{*}Management of the Gas Maintenance contract lies with the Corporate Landlord cluster

3. Staff – Building Services

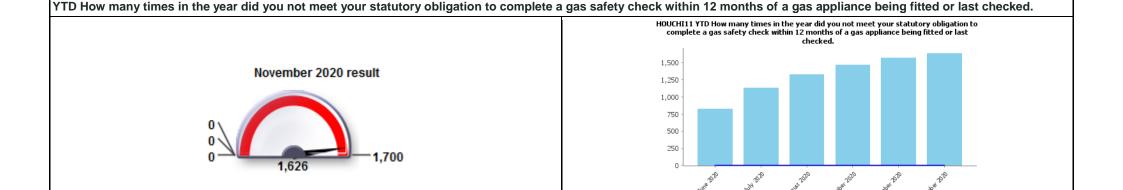
Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - Building Services)	1		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Building Services)	3		0		3		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
*Sickness Absence - Average Number of Days Lost - Building Services	3.67		3.66		3.64		10	
Establishment actual FTE	421.52	4	422.4		421.38			
Staff Costs - % Spend to Date (FYB)	46.8%	②	54.5%	②	62.7%	Ø	100%	

^{*}All sickness absence data contained in this Appendix now reflects the 12-month rolling average of days lost per FTE

4. Finance & Controls – Building Services

Months — Target (Months)



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter outcome 4 - Quality of Housing - stipulates that Social Landlords manager their business so that;

Tenants homes, as a minimum, meet the Scottish Housing Quality Standard by April 2015 and continue to meet it thereafter, and when they are allocated, are always clean, tidy and in a good state of repair.

This indicator, along with others, monitors whether we are achieving our desired outcomes and are committed to 'Sustain/improve performance in respect of the SSHC outcomes'

Benchmark Information:

The SSHC for this measure changed definition for the year 2019/20 currently Scottish LA benchmarking data is not yet available.

Target:

The target set to comply with our Statutory duty to complete a Gas Safety check within 12 months of the Gas appliance being fitted or last checked is set at 100%

This is what the data is saying:

The data shows on increase in the number of outstanding gas safety checks over recent months. This is a result of COVID 19 restrictions and the ability to gain access to properties. This is consistent with guidance provided by Scottish Government and Gas-Safe, the industry regulator.

This is the trend:

For the last 5 years, 2015/16 - 2019/20 performance was maintained at 100%

This is the impact:

The impact of checks not being undertaken within the statutory guidelines is due to tenants not being able or comfortable in giving access for such inspections. Each property has had all checks undertaken over a number of years prior to the most recent inspection. All properties are fitted with carbon monoxide detectors to mitigate risks.

These are the next steps we are taking for improvement:

The arranged access process, where access is forced has been re-instated and is now operating at full capacity. Since the last figures were formally reported the number of outstanding inspections as of 30 November had reduced to 651. This is expected to be the final total lost certificate figure due to the reinstatement of the arranged access program. Access Reminders have also been getting delivered to properties on the program which has assisted in bringing the total outstanding down.

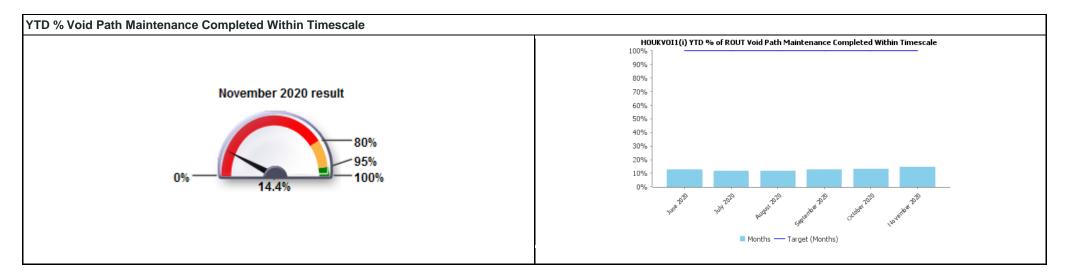
Within the list of properties where access has been denied a prioritisation list is in place, based on flue type which may carry slightly higher risk for early access. These have all been completed.

A record of all properties where access was denied and a programme for ensuring all properties have been inspected by March 2021 is in place and updated daily.

An increase in available resource has been made by the contractor to increase capacity to catch up with outstanding inspections (an additional 5 full-time engineers have been made available). Resources will be monitored closely given the time of year and the likely increase in call outs.

Responsible officer: Last Updated:

Stephen Booth November 2020



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter Outcome 4 – Quality of Housing stipulates that Social Landlords ensure that:

'tenants' homes, as a minimum, meet the Scottish Housing Quality Standard (SHQS) when they are allocated; are always clean, tidy and in a good state of repair; and also meet the Energy Efficiency Standard for Social Housing (EESSH) by December 2020.

Charter outcome 13 – Value for Money - stipulates that Social Landlords manager their business so that: Tenants, owners and other customers receive services that provide continually improving value for the rent and other charges they pay

Benchmark Information:

These indicators and targets are set and measured locally so no benchmarking is available.

Target:

Targets 2020/21

- Routine Voids have 10 working days (14 Calendar days) with Repairs target.
- Properties on the Death void path have 10 working days (14 Calendar days) with additional 2 weeks clearance period with Repairs target.
- Major Works properties 15 working days (21 Calendar days) with Repairs target

This is what the data is saying:

The current performance for those properties on a:

- Routine Void path is currently sitting at 14.4%
- Death Void path is 35.9%
- Major Works Void Path is 12.5%

This is the trend:

A 3-year trend shows that performance was:

2019/20

- Routine Void path 16.7%
- Death Void path 29.9%
- Major Works Void Path 29.2%

2018/19

- Routine Void path 19.7%
- Death Void path 25.8%
- Major Works Void Path 15.0%

2017/18

- Routine Void path 24.9%
- Death Void path 37.6%
- Major Works Void Path 11.1%

This is the impact:

Some of the consequences of this performance are:

- Loss of rental income to the Council.
- New tenants are experiencing lengthy periods of time to wait from when being made an offer of accommodation to the time they can move in.
- Homeless people are spending long periods of time in temporary accommodation.

These are the next steps we are taking for improvement:

A new Voids Improvement Plan was agreed in March 2020, this plan is being led by the Chief Officer – Early Intervention and Community Empowerment and Chief Officer – Operations and is being managed within an enhanced performance framework. This is a corporate improvement project reporting t the new Improvement Board. Significant actions being implemented include:

- Resources from other teams within Building Services have been temporarily assigned to Voids to increase capacity and return the properties more quickly
- External contractors have also been brought in to supplement the in-house team

There are still restrictions in place due to Covid 19 on how many operatives we can have in a property at the same time however it is hoped that with adding all the additional resources this will allow us to work on more properties at any given time. Additional resources from external contractors are also being used.

New digital procedure for undertaking property standards checks prior to offer, providing a more consistent and robust assessment. This should improve condition of properties at termination therefore reducing repair required during void periods.

Responsible officer: Last Updated:

Graham Williamson/Neil Carnegie November 2020

Environmental Services

1. Customer - Environmental Services

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21	
	Value	Status	Value	Value	Status	Value	Target	
Total No. complaints received (stage 1 and 2) - Environment	11		5		21			
% of complaints resolved within timescale (stage 1 and 2) - Environment	90.9%	Ø	80%	②	81%	②	75%	
% of complaints with at least one point upheld (stage 1 and 2) - Environment	72.7%		40%	~	66.7%			
Total No. of lessons learnt identified (stage 1 and 2) - Environment	0		0		0			

	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
Performance Indicator		Status	Value	Value	Status	Value	Target
Number of Partners / Community Groups with links to national campaigns - Green Thread	158		No acti	ivity Q1	58		

2. Processes - Environmental Services

Performance Indicator	Sept 2020	Sept 2020		Oct 2020		Nov 2020	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
*Street Cleansing - LEAMS (Local Authority Environmental Audit Management System) (Conducted 3 times annually)	92.4%	Ø	92.4%	Ø	Update Jan		80%
Grounds - LAMS (Land Audit Management System)	No activity Sept-Nov						87%
Number of Complaints upheld by Inspector of Crematoria	0	②	0	②	0		0
% Outdoor play areas visited, inspected and maintained to national standards on a fortnightly basis	100%	Ø	100%	Ø	100%	>	100%
% Water safety equipment inspected within timescale	100%	Ø	99.8%	Ø	99.7%	②	100%

3. Staff - Environmental Services

Performance Indicator	Q4 2019/20		Q1 2019/20		Q2 2020/21	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - Environment)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Environment)	0		0		3		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Sickness Absence - Average Number of Days Lost - Environmental	6.93		6.90		6.91		10	
Establishment actual FTE	316.74		315.31		313.41			
Staff Costs - % Spend to Date (FYB)	48.9%	②	57.5%	②	65.7%	②	100%	

4. Finance & Controls - Environmental Services

Facilities Management

1. Customer - Facilities Management

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received (stage 1 and 2) - Facilities	6		0		7		
% of complaints resolved within timescale (stage 1 and 2) - Facilities	83.3%	②	No complaints Q1		71.4%	②	75%
% of complaints with at least one point upheld (stage 1 and 2) - Facilities	66.7%		-		5		
Total No. of lessons learnt identified (stage 1 and 2) - Facilities	2				1		

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		Target	
	Value	Status	Value	Status	Value	Status	2020/21	
Number of school lunches served in the year - Primary (YTD)	1.305,874		No se	rvice Q1	139,265		523,825	

Performance Indicator	Current Status	2020/21 Target
We will provide Free School Meals to Primary 1 to 3 children, which meet the Nutritional requirements for Food and Drink in Schools (Scotland) Regulations		70%

Our School Catering service aims for 100% compliance with the Nutritional Requirements for Food and Drink in Schools (Scotland) Regulations. This is set as a service standard particular to Aberdeen City Council's school catering service and there is no comparator benchmarking information which we can use to compare performance with other local authorities. Performance is not reported as a metric but the intention of the measure is to highlight to Committee any reports from Education Scotland on non-compliance with the regulations resulting from school inspection visits. The target for this Service Standard was reviewed at Urgent Business Committee in June and was set to amend from the original 100%. The reason for amendment is to reflect the provision of supermarket vouchers during the initial lockdown period, which meant nutritional content could not be guaranteed.

2. Processes – Facilities Management

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
	Value	Status	Value	Status	Value	Status	Target
% Fly tipping alerts at housing multi-storey blocks responded to within 48 hours	87.9%		93%	Ø	84.1%		95%
% Response cleaning alerts responded to within priority timescales	88.2%		77.8%		80%		95%
% Void cleaning alerts responded to within priority timescales	No activity		81.3%		80%		95%

Pe	rformance Indicator	2020/21 Target
We	will deliver 39 weeks contracted school cleaning	95%

Cleaning service is delivered by the in-house team at all non-3Rs schools in the city, for the 38 weeks of school term plus the five annual in-service days. We will use this measure to highlight any instances where a school has been unable to open due to our inability to provide a satisfactory cleaning service. No issues identified.

3. Staff - Facilities Management

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Month - Quarter)	0		0		0		
Accidents - Non-Reportable - Employees (No in Month - Quarter)	2		0		3		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
	Value	Status	Value	Status	Value	Status	Target
Sickness Absence - Average Number of Days Lost - Facilities	8.73	**	8.74		8.86	**	10
Establishment actual FTE	488.25		490		491.78		

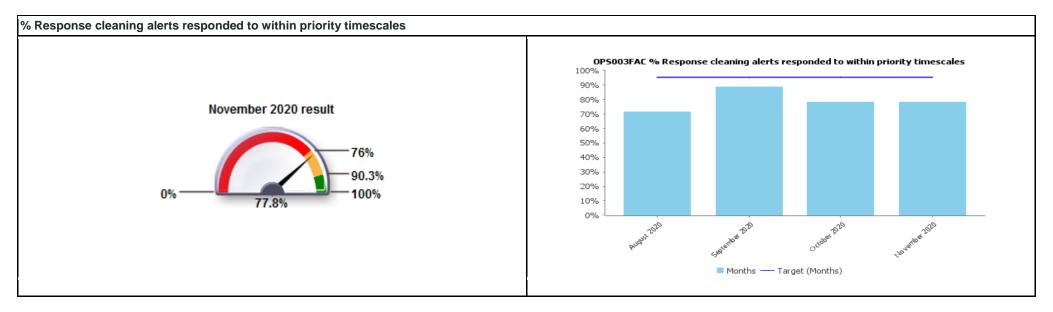
Appendix A

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
	Value	Status	Value	Status	Value	Status	Target
Establishment actual FTE (Cleaning)	218.89		221.27		224.87		
Establishment actual FTE (Janitorial)	56.16		56.16		54.93		
Staff Costs - % Spend to Date (FYB)	50.8%	Ø	59.4%	②	68%	Ø	100%

4. Finance & Controls - Facilities Management

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
*Inspection - Number of overdue corrective actions requests as at month end	0	②	1		1		0	

^{*}The overdue corrective action outstanding was raised at a Bsi inspection in December 2019. The service has taken the appropriate action however, it has not been possible to officially close off this action since the last Bsi inspection due to take place in May 2020 was cancelled due to COVID 19.



Why is this important?

The work being undertaken which informs this measure is generally within communal parts of our social housing blocks and multi-storey properties. The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010 and requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities. Untimely response to cleaning requests may negatively impact on the acceptable levels of cleanliness within these communal parts.

Benchmark Information:

There is no known benchmark information for cleanliness in building common parts.

Target:

This is the first year that performance for response cleaning alerts has been reported, with a target set for 95% of alerts to be responded to within priority timescales. It may be that the target was set unrealistically high, taking into account increased demands on the Cleaning Service overall and this will be reviewed for 2021/22 and beyond.

This is what the data is saying:

The data shows a slight decrease in performance against target which was at 88.2% in September to 77.8% in October and 80% November.

This is the trend:

As this is a new measure, a full view of trends over time is yet to be established.

This is the impact:

The impact being experienced by customers is minimal, with all alerts being responded to as quickly as resources available to the service have allowed. The service feels that some of the alerts have been wrongly categorised as Emergencies, which only give the service 4 hours to respond. Some of these should have been classed as urgent, giving the service 24 hours to respond.

These are the next steps we are taking for improvement:

The service will work with the Alerts team to ensure that all alerts are being accurately categorised. There have also been driver shortfalls due to annual leave and sickness cover for key personnel and which the Service has begun to address by redrafting the job profile and job evaluation questionnaire for roles, to include driving as an essential criteria. The team have also been pulled into the undertaking of other priority work in our schools and operational properties and to deliver emergency PPE and material supplies to both public buildings and multi-storey housing properties, to ensure that staff delivering service on the ground have the PPE and materials required to do their work safely and effectively.

Responsible officer: Last Updated:

Andy Campbell November 2020

Fleet and Transport

1. Customer – Fleet and Transport

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
renormance indicator	Value	Status	Value	Value	Status Value	Target	
Total No. complaints received (stage 1 and 2) - Fleet	0		0		1		
% of complaints resolved within timescale (stage 1 and 2) - Fleet	No complaints received in Q4/Q1				100%	②	75%
% of complaints with at least one point upheld (stage 1 and 2) - Fleet					100%		
Total No. of lessons learnt identified (stage 1 and 2) - Fleet					1		

2. Processes – Fleet and Transport

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
renormance mulcator	Value	Status	Value	Value	Status	Value	Target
% HGV's achieving first time MOT pass	95.5%		No tests		83.3%		100%
% Light Vehicles achieving first time MOT pass	79.6%		87.5%		87.5%		100%
% of Council fleet - alternative powered vehicles	7.6%		7.6%		7.6%		100%
% of Council fleet lower emission vehicles (YTD)	96.8%	Ø	96.8%	②	96.8%	Ø	100%

3. Staff – Fleet and Transport

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - Fleet)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Fleet)	1		0		1		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/24 Target	
	Value	Status	Value	Status	Value	Status	2020/21 Target	
Sickness Absence - Average Number of Days Lost - Fleet	0.64		0.76		1.01		10	
Establishment actual FTE	34.59	<u>~</u>	35.25		35.6			
Staff Costs - % Spend to Date (FYB)	49.6%	②	57.8%	②	66.1%	②	100%	

4. Finance & Controls – Fleet Transport

Performance Indicator	Q4 2019/2	20	Q1 2020/21		Q2 2020/21		2020/21	
renormance indicator	Value	Status	Value	Status	Value	Status	Target	
Fleet Management - First Use Check Exceptions (Environmental) – Year to date	22		4		19		15	
Fleet Management - First Use Check Exceptions (Fleet) - Year to date	2		0		0		2	
Fleet Management - First Use Check Exceptions (Roads) - Year to date	2		0		0	②	2	
Fleet Management- First Use Check Exceptions (Waste) – Year to date	25	②	2	Ø	6	②	18	
Unreported Vehicle, Plant and Equipment Accidents (Environmental) - Year to date	8	②	2	Ø	3	②	8	
Unreported Vehicle, Plant and Equipment Accidents (Roads) - Year to date	1	②	0	Ø	0	②	2	
Unreported Vehicle, Plant and Equipment Accidents (Waste) - Year to date	9	②	4	Ø	4	②	15	

Performance Indicator	Q4 2019/20		Q1 2019/20		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Fleet Services - % of LGV/ Minibuses/ Small Vans Vehicles under 5 years old	72.68%		74.21%		74.21%		80%
Fleet Services - % of large HGV vehicles under 7 years old	70.63%		70.63%		70.63%		80%

Integrated Children's Services (excluding Education)

1. Customer – Integrated Children's Services (ex-Education)

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received (stage 1 and 2) - CSW	21		8		7		
% complaints resolved within timescale (stage 1 and 2) - CSW	52.4%		25%	•	42.9%		75%
% of complaints with at least one point upheld (stage 1 and 2) - CSW	19%		25%		33.3%		
Total No. of lessons learnt identified (stage 1 and 2) - CSW	1		0		0		

Performance Indicator	Q4 2019/2	Q4 2019/20		Q1 2020/21		Q2 2020/21	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
% Care provided in Council children's homes, fostering and adoption services achieve a care standard of good or better	100%	Ø	100%	Ø	100%	>	100%
LAC looked after in a residential placement in Aberdeen City (%)	3.8%	②	3.7%	②	3.9%	②	5%
LAC looked after in a residential placement out with Aberdeen City (%)	5.8%	②	6.4%		6.6%		6%
Looked After Children looked after at home (%)	20.2%		21.4%	>	21.2%	>	26%
Looked After Children looked after in Kinship (%)	18.3%		18.0%		18.0%		28%
Looked After Children looked after in Foster Care (%)	48.8%		47.2%		47%		34%

2. Processes - Integrated Children's Services (ex-Education)

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21	
Performance indicator	Value	Status	Value	Status	Value	Status	Target	
% Initial child protection conferences held within 21 days	57%		79%		70%		100%	
% Child Protection Case Conference decisions issued to families within 24 hours	100%	②	96%	②	100%	②	95%	
% Child Protection Plans issued within 5 calendar days	57.9%		52%		35.3%		95%	
% Care experienced children and young people with 2 or more consecutive placements away from home in 12 months	21%		18%	②	17%	Ø	30%	
% Care experienced children and young people with a pathway plan by age 15	100%	②	100%	②	100%	Ø	100%	
% Foster carers and adopters are approved within a timescale of 6 months from application		•	22%		100%	Ø	100%	

3. Staff - Integrated Children's Services (ex-Education)

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - CSW)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - CSW)	0		0		0		

Performance Indicator	Sept 2020	Sept 2020		Oct 2020		Nov 2020	
	Value	Status	Value	Status	Value	Status	Target
Sickness Absence - Average Number of Days Lost - CSW	3.78		3.80		3.77		To be confirmed
Establishment actual FTE	346.39		348.28		352.62		
Staff Costs - % Spend to Date (FYB)	50.1%	②	58.4%	②	66.7%	Ø	100%

4. Finance & Controls Integrated Children's Services (ex-Education)

Protective Services

1. Customer - Protective Services

Performance Indicator	Q4 2019/2	Q4 2019/20		Q1 2020/21		1	2020/21	
	Value	Status	Value	Value	Status	Value	Target	
Total No. complaints received - Protective Services	3		0		5			
% of complaints resolved within timescale - Protective Services	33.3%		No complaints Q1		80%	②	75%	
% of complaints with at least one point upheld (stage 1 and 2) - Protective Services	0%				0%			
Total No. of lessons learnt identified (stage 1 and 2) - Protective Services	0				0			

2. Processes - Protective Services

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Non-Domestic Noise % responded to within 2 days	100%		97.7%		96.9%		100%	
High Priority Pest Control % responded to within 2 days	98.6%	②	100%	②	100%	②	100%	
High Priority Public Health % responded to within 2 days	97.2%	②	97.7%		97.6%	Ø	100%	
Dog Fouling - % responded to within 2 days	93.1%		96.3%	②	100%	②	100%	

Performance Indicator)	Q1 2020/21		Q2 2020/21		2020/21
Performance indicator	Value	Status	Value	Value	Status	Value	Target
% of registered tobacco retailers visited to give Business Advice on compliance with tobacco legislation - Year to Date	17.85%			10%			
% of registered tobacco retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date	13.18%	Ø		5%			
% of registered Nicotine Vapour Products retailers visited to give Business Advice on compliance with legislation - Year to Date	42.29%			10%			
% of registered Nicotine Vapour Products retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date	12.3%	>		5%			
% of Samples reported within specified turnaround times (Aberdeen Scientific Services Laboratory)	74.5%		60.6%		85.2%	Ø	80%

^{*}As of 01/07/2019, the risk rating scheme for food premises has changed which will require the PIs for Food Safety Hygiene Inspections to be overhauled. Premises are now rated across 3 types of business based on the type of operations undertaken and 5 compliance categories, giving 15 separate ratings. The Service is currently identifying an appropriate manner to record, correlate and report this information working nationally with other authorities.

3. Staff - Protective Services

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No. In Quarter - Protective Services)	0		0		0		
Accidents - Non-Reportable - Employees (No. In Quarter - Protective Services)	0		0		2		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Sickness Absence - Average Number of Days Lost - Protective Services	1.77		1.75		1.64		10	
Establishment actual FTE	64.29		64.11		64.11			
Staff Costs - % Spend to Date (FYB)	49.5%	②	57.8%	②	66.1%	②	100%	

4. Finance & Controls - Protective Services

	Q3 2019/20		Q1 2020/21		Q2 2020/21	2020/21	
Performance Indicator	Value	Status	Value	Status	Value	Status	Target
% of External Quality Assurance reported results that were satisfactory (Aberdeen Scientific Services Laboratory)	99.3%	Ø	96.5%	Ø	95.2%	Ø	95%

Road and Infrastructure Services

1. Customer - Roads

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
Performance indicator	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received - Roads	21		0		34		
% of complaints resolved within timescale - Roads	71.4%	②	No complaints Q1		61.8%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Roads	71.4%				52.6%		
Total No. of lessons learnt identified (stage 1 and 2) - Roads	0				0		

2. Processes - Roads

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Percentage of all streetlight repairs completed within 7 days	93.07%	Ø	86.23%	②	77.27%		90%	
Number of Street Light Repairs completed within 7 days	524		313	-	221			
Potholes Category 1 and 2 - % defects repaired within timescale	95.39%	Ø	98.4%	②	98.07%	Ø	95%	

Appendix A

Performance Indicator	Sept 2020		Oct 2020		Nov 2020	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Potholes Category 1 and 2 - No of defects repaired within timescale	435		432		509		

3. Staff - Roads

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
renormance indicator	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - Roads)	2		0		1		
Accidents - Non-Reportable - Employees (No in Quarter - Roads)	1		0		3		

Performance Indicator Sickness Absence - Average Number of Days Lost - Roads	Sept 2020		Oct 2020		Nov 2020		2020/21	
Performance indicator	Value	Status	Value	Status	Value	Status	Target	
Sickness Absence - Average Number of Days Lost - Roads	2.79	*	2.87		2.91		10	
Establishment actual FTE	157.26		158.11		159.19			
Staff Costs - % Spend to Date (FYB)	45.7%	②	53.1%		60.7%	②	100%	

4. Finance & Controls - Roads

Waste Services

1. Customer - Waste

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21	
	Value	Status	Value	Value	Status	Value Target	Target	
Total No. complaints received - Waste	32		29		75			
% of complaints resolved within timescale - Waste	87.5%	②	82.8%	Ø	76%	②	75%	
% of complaints with at least one point upheld (stage 1 and 2) - Waste	62.5%		51.7%		48.1%			
Total No. of lessons learnt identified (stage 1 and 2) - Waste	0		0		1			

2. Processes - Waste

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
renormance indicator	Value	Status	Value%	Value	Status	Value	Target
% Waste diverted from Landfill	80.3%		85.5%	Ø	81.8%	Ø	85%
Percentage of Household Waste Recycled/Composted	49.6%	②	48.3%	Ø	48.2%	Ø	50%

^{*%} Waste diverted from Landfill/% Household Waste Recycled/Composted – These figures are intended and used for internal monitoring purposes only.

3. Staff - Waste

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - Waste)	2		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Waste)	5		1		0		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Sickness Absence - Average Number of Days Lost - Waste	7.59		7.77		8.21		10	
Establishment actual FTE	193.62		194.07		192.58			
Staff Costs - % Spend to Date (FYB)	51.5%	Ø	58.4%	Ø	66.7%	Ø	100%	

4. Finance & Controls - Waste

Customer

Customer Experience

1. Customer – Customer Experience

Denfermente Indicator Comente	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21	
Performance Indicator – Corporate	Value	Status	Value	Value	Status	Value	Target	
Total number of Stage 1 complaints	289		82		263			
The number of complaints closed at Stage 1 within 5 working days as % of total no of Stage 1 complaints	70.93%	_	78.05%	>	71.86%	②	75%	
Total number of Stage 2 complaints	42		16		32			
The number of complaints closed at Stage 2 within 20 working days as % of total no of Stage 2 complaints	23.81%	•	31.25%		40.63%		75%	
Total number Escalated Stage 2 complaints	29		8		24			
The number of complaints closed at Escalated Stage 2 within 20 working days as % of total no of Stage 2 complaints	55.17%		25.00%		66.67%		75%	
No. of Non-complex Subject Access Requests received	44		28		43			

Appendix A

Parformance Indicator Cornerate	Q4 2019/2	0	Q1 2020/21		Q2 2020/21		2020/21	
Performance Indicator – Corporate	Value	Status	Value	Value	Status	Value	Target	
% Non-complex Subject Access Requests responded to within 1 month	84.1%		89.3%		86%		80%	
No. of Members/MP/MSP enquiries received via online portal	1274		831		1593			
% Members/MP/MSP enquiries responded to within 15 working days	72.4%	②	79.4%	>	71.8%		75%	
No. of Complex Subject Access Requests received	8		9		10			
% Complex Subject Access Requests responded to within 3 months	75%	②	22.2%		10%		70%	
No. of Environmental Information Regulation requests received	128	-	53	27	96			
% of Environmental Info Requests replied to within 20 working days - Corporate	85.9%	②	81.1%		67.7%		90%	
No. of Freedom of Information requests received	280		180		210			
% of Freedom of Information requests replied to within 20 working days - Corporate	82.5%	②	75%		69.5%		90%	
No. of Access to School Records requests received	0		0	27	0			
% Access to School Records requests responded to within 15 school days		No requests received						
No. of Data Protection Right requests received	2	-	3		4			
% Data Protection Right requests responded to within 1 month	100%	Ø	100%	②	100%	②	100%	

Performance Indicator – Service	Q4 2019/2	Q4 2019/20		Q1 2020/21		Q2 2020/21	
	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received – Customer Experience	99		13		73		
% of complaints resolved within timescale – Customer Experience	93.94%	Ø	100%	②	90.4%	②	75%
% of complaints with at least one point upheld (stage 1 and 2) - Customer Experience	8.3%		53.8%		62.5%		
Total No. of lessons learnt identified (stage 1 and 2) - Customer Experience	17	-	1		5		

2. Processes - Customer Experience

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Average time taken in calendar days to process all new claims and change events in Housing Benefit (monthly)	7.02						12	
Correct amount of Housing Benefit paid to customer (monthly)	97.39%		97.54%	②			95%	
% Customer Contact Centre calls answered within 60 seconds	69.28%	②	71.51%	Ø	72.08%	Ø	70%	
Percentage of invoices sampled and paid within 30 days	88.31%		85.46%		86.73%	②	90%	

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Value	Status	Value	Target
% Crisis Grant applications processed within 2 working days	95.19%	Ø	97%	②	96%	②	90%
% Community Care Grant applications processed within 15 working days	59.58%	②	57%	②	83%	②	50%

3. Staff – Customer Experience

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter – Customer Experience)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Customer Experience)	1		0		0		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost – Customer Experience	4.54		4.52		4.31		To be confirmed

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
	Value	Status	Value	Status	Value	Status	Target
Establishment actual FTE	305.72		301.3		300.49		
Staff Costs - % Spend to Date (FYB)	51%	Ø	59.4%	②	67.5%	Ø	100%

4. Finance & Controls – Customer Experience

Performance Indicator	Sept 2020		Oct 2020		Nov 2020	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Council Tax Cash Collected (In Year) - monthly	£70.6m	>	£81.6m		£92.9m		£82.5

Data and Insights

1. Customer - Data and Insights

Performance Indicator	Q4 2019/	Q4 2019/20		Q1 2020/21		1	2020/21
Performance indicator	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received – Data and Insights	0		0		0		
% of complaints resolved within timescale – Data and Insights		No complaints received					
% of complaints with at least one point upheld (stage 1 and 2) - Data and Insights							
Total No. of lessons learnt identified (stage 1 and 2) – Data and Insights							

2. Processes - Data and Insights

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Value	Status	Value	Target
% Responses to data breaches and other serious data protection risks within 24 hours (weekdays)	100%	②	100%	Ø	100%	②	100%

3. Staff – Data and Insights

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Month Quarter - Data and Insights)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Data and Insights)	0		0		0		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Sickness Absence – Average Number of Days Lost – Data and Insights	0.51		0.39		0.32		1.5	
Establishment actual FTE	33.69		31.56		31.99			
Staff Costs - % Spend to Date (FYB)	50.9%	Ø	59.2%	Ø	67.6%	Ø	100%	

4. Finance & Controls – Data and Insights

Digital and Technology

1. Customer – Digital and Technology

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21	2020/21	
	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received – Digital and Technology	6		1		2		
% of complaints resolved within timescale – Digital and Technology	50.0%		100%		50%		75%

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Value	Status	Value	Target
% of complaints with at least one point upheld (stage 1 and 2) – Digital and Technology	14.3%		0%		66.7%		
Total No. of lessons learnt identified (stage 1 and 2) – Digital and Technology	0		0		0		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
	Value	Status	Value	Status	Value	Status	Target
Average Call Wait Time (IT Helpdesk)	32 sec.	②	30 sec.	Ø	27 sec.	Ø	120 sec.
Abandonment Rate % (IT Helpdesk)	41.24%		49.24%		45.84%		10%

2. Processes – Digital and Technology

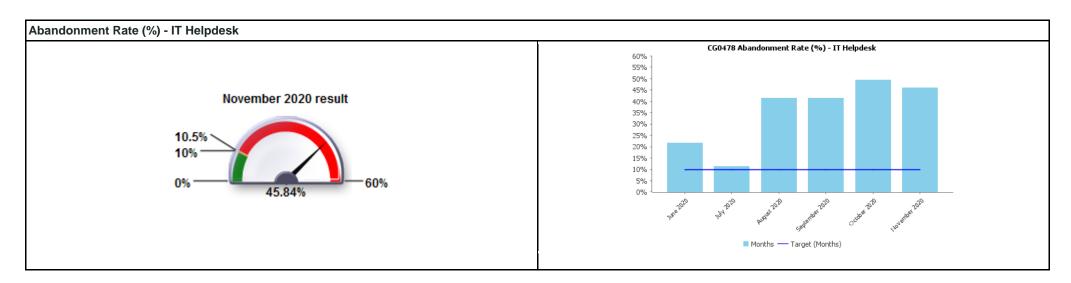
Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21	
	Value	Status	Value	Status	Value	Status	Target	
Percentage of Critical system availability - average (monthly)	100%		100%		100%		99.5%	
% Calls to IT Helpdesk resolved right first time	37%		40%		35%		65%	
% Priority 1 and 2 incidents closed in timescale	100%	②	93.3%	②	80%		99.5%	
% Priority 3 – 5 incidents closed in timescale	96.3%	②	92.6%	②	93.6%	②	95%	

3. Staff – Digital and Technology

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter – Digital and Technology)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Digital and Technology)	0		0		0		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
Performance Indicator	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost – Digital and Technlogy	1		1.05		1.11		To be confirmed
Establishment actual FTE	86.13	20	87.16		87.52		
Staff Costs - % Spend to Date (FYB)	53.2%	Ø	62.5%	Ø	71.8%	Ø	100%

4. Finance & Controls – Digital and Technology



Why is this important?

The abandonment rate refers to the percentage of inbound phone calls made to the Service Desk that are abandoned by the customer before speaking to an agent. It is calculated as abandoned calls divided by total inbound calls.

Benchmark Information:

Under normal circumstances the Service Desk is able to maintain this rate at the industry standard of 10% or below.

Target:

The target has been set at 10% for 2020/21.

This is what the data is saying:

The data currently illustrates that at points we are unable to provide support to all calls coming through so colleagues are calling us back at quieter times. As they have already joined the queue such calls display as abandoned.

This is the trend:

The trend shows that over the last 4 months there has been an increased abandonment rate, largely down to being two staff down on the Service Desk and the increased demands of carrying out a major device roll out.

This is the impact:

Customers are still getting their calls answered and we have seen an increase in uptake of Self-Serve calls, meaning people can log a call and we will get back to them. There is also a call back request option to be used when callers have been waiting which keeps the position of the call in the queue and they receive a call back once an agent becomes available. Some customers prefer to hang up and call back rather than using the self-service or call back feature.

These are the next steps we are taking for improvement:

An interim desk manager has recently been recruited to cover for long-term sickness and will be moving our apprentice to cover desk duties from January. It is also hoped to be able to fill the vacant role as part of the Service Redesign which will assist with getting performance back on target.

Responsible officer: Last Updated:

David Gammie November 2020

External Communications

1. Customer - External Communications

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21	
	Value	Status	Value	Value	Status	Value	Target	
Total No. complaints received – External Communications	0		0		0			
% of complaints resolved within timescale – External Communications	No complaints received							
% of complaints with at least one point upheld (stage 1 and 2) – External Communications								
Total No. of lessons learnt identified (stage 1 and 2) – External Communications								

2. Processes – External Communications

In July 2020, the decision was taken to integrate the Communications and Marketing cluster redesign with the cross-functional redesign of communications and marketing as part of Build Back Better. Doing so will provide a more holistic view of service provision across the Council. Service standards and targets will be reviewed as part of that exercise, including exploring the need for new standards and more efficient methods used to record performance.

3. Staff - External Communications

Performance Indicator	Q4 2019/20		Q1 2019/20		Q2 2020/21		2020/21
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter – External Communications)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – External Communications)	0		0		0		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020		2020/21
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost – External Communications	0.18	200	0.13		0.06		To be confirmed
Establishment actual FTE	16.51		16.51		16.51		

Performance Indicator	Sept 2020		Oct 2020		Nov 2020	2020/21	
	Value	Status	Value	Status	Value	Status	Target
Staff Costs - % Spend to Date (FYB)	50%	②	58.4%		66.7%		100%

4. Finance & Controls – External Communications

Early Intervention and Community Empowerment

1. Customer – Early Intervention and Community Empowerment

Performance Indicator	Q4 2019/20		Q1 2020/21		Q2 2020/21		2020/21
renormance indicator	Value	Status	Value	Value	Status	Value	Target
Total No. complaints received – Early Intervention and Community Empowerment	61		22		41		
% of complaints resolved within timescale - Early Intervention and Community Empowerment	75.41%		68.2%		56.1%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Early Intervention and Community Empowerment	17.4%		27.3%	**	28.1%	**	
Total No. of lessons learnt identified (stage 1 and 2) - Early Intervention and Community Empowerment	13		1	***	0		

Performance Indicator	Sept 2020	Sept 2020		Oct 2020		Nov 2020	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Percentage of tenants satisfied with the standard of their home when moving in YTD	51.7%		50%		52.2%		75%
Satisfaction of new tenants with the overall service received (Year To Date)	62.1%		63%		70.1%		85%
Financial Inclusion - No of open cases and enquiries per month	246		232		299		
Number of visits to libraries - person	8,960		10,535		11,673		
Number of visits to libraries - virtual	89,649		82,853				

Performance Indicator	Sept 2020		Oct 2020		Nov 2020	2020/21	
	Value	Status	Value	Status	Value	Status	Target
*% Libraries open during agreed opening hours	100%	>	100%		100%		98%

^{*}Limited number of libraries currently offering browsing, PC access and Click and Collect services in line with phase 3 reinstated services.

2. Processes – Early Intervention and Community Empowerment

Deufermen en la disease		Sept 2020		Oct 2020		0	2020/21
Performance Indicator	Value	Status	Value	Status	Value	Status	Target
YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed. (Data Provided by Scottish Government on a Quarterly Basis)	3.6%	②	3.6%	Ø	3.6%	②	4.5%
YTD % of statutory homeless decisions reached within 28 Days (Unintentional & Intentional)	100%	②	100%	Ø	100%	Ø	100%
YTD Average length of journey in weeks for statutory homeless cases (Unintentional & Intentional) closed in the year	19.6		20.5	***	20.3		
YTD Percentage of anti-social behaviour cases reported which were resolved	96.8%	②	97.1%	②	97.1%	②	100%
YTD % of calls attended to by the ASBIT Team within 1 hour	No activity					100%	
Number of Households Residing in Temporary Accommodation at Month End	388		401		377	~	
The YTD number of Legal repossessions following decree (Arrears) - Citywide	0		0		0		
The YTD Average time taken to re-let all properties (Citywide - days)	120.5	②	121.5		117.3		100.9
Voids Available for Offer Month Number - Citywide	499		531		496		
Applications processed 28 days YTD %	100%	②	100%		100%	②	100%
Statutory Customer Service Actions - Decisions/Outcomes within statutory timescale	90.3%		89%		89.6%		100%
New Tenants Visits YTD – Outcomes completed within locally agreed timescales (Citywide)	77.6%		78.2%		77.5%		93.5%
Welfare Rights - % of Successful Appeals	80%		88%		71%		
HMO License Applications Pending	178		186		173		

Performance Indicator		Sept 2020		Oct 2020			2020/21
Performance indicator	Value	Status	Value	Status	Value	Status	Target
HMO Licenses in force	1,178		1,154		1,139		

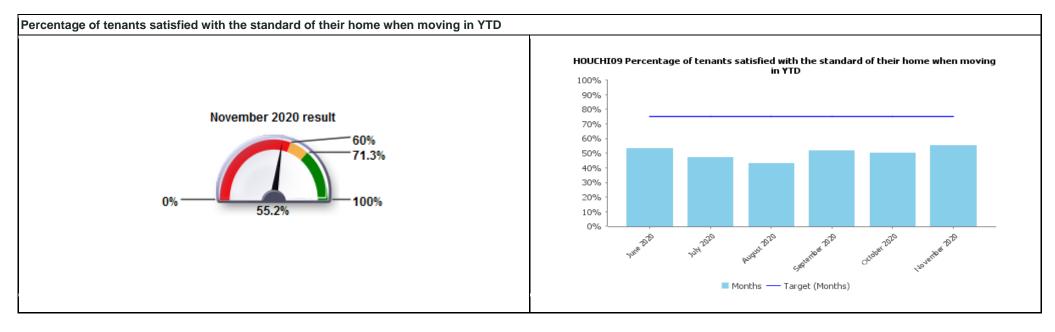
3. Staff – Early Intervention and Community Empowerment

Performance Indicator		Q4 2019/20		Q1 2020/21		Q2 2020/21	
renormance indicator	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - EICE)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – EICE)	1		0		4	-	

		Sept 2020		Oct 2020		Nov 2020	
Performance Indicator	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost - EICE	4.44		4.72		4.99		To be confirmed
Establishment actual FTE	412.07		407.61		405.19		
Staff Costs - % Spend to Date (FYB)	45.3%	②	53.1%	Ø	60.6%	②	100%

4. Finance & Controls – Early Intervention and Community Empowerment

Performance Indicator		Sept 2020		Oct 2020		Nov 2020	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Financial Inclusion - Total Financial Gains Achieved per month	£339,211	*	£248,496	*	£260,280		
Gross rent Arrears as a percentage of Rent due	9.89%	Ø	10.59%	②	10.88%	②	11.5%
Rent loss due to voids - Citywide - YTD average	2.42%		2.45%		2.47%		2.08%



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter Outcome 4 – Quality of Housing stipulates that Social Landlords ensure that:

'tenants' homes, as a minimum, meet the Scottish Housing Quality Standard (SHQS) when they are allocated; are always clean, tidy and in a good state of repair; and also meet the Energy Efficiency Standard for Social Housing (EESSH) by December 2020.

Charter Outcome **10** – Access to Housing – stipulates that Social Landlords ensure that:

People looking for housing find it easy to apply for the widest choice of social housing available and get the information they need on how the landlord allocates homes and their prospects of being housed.

Charter outcome 13 – Value for Money - stipulates that Social Landlords manager their business so that: Tenants, owners and other customers receive services that provide continually improving value for the rent and other charges they pay

Benchmark Information:

2019-20

- Percentage of new tenants satisfied with the standard of their home when moving in was 58.50%
- •

This is a locally set indicator, so no benchmarking data is available.

Target:

Targets 2020-21

Percentage of new tenants satisfied with the standard of their home when moving in was set at 75%

This is what the data is saying:

Links to the satisfaction survey are emailed to tenants (that have supplied an email address) 4-5 weeks after they have moved into their new property. Between the 28th February 20 – 5th November 20 there were **967** new tenancies, **707** (**73.1%**) of those tenancies provided email address and were sent a survey. Of the **707** emailed surveys only **50** (**7.1%**) were completed.

It should be noted that there were 260 new tenancies with no email address (or who did not provide a valid email address).

Telephone surveys recommenced week beginning 9th November to contact the 260 tenants with no email address. 26 tenants were called of those 17 (65.4%) answered and agreed to complete the survey.

This is the trend:

The overall % for standard of home when moving is low partly due to the small number of surveys completed.

This is the impact:

New tenants are experiencing lengthy periods of time to wait from when being made an offer of accommodation to the time they can move in resulting in overall poorer satisfaction levels.

These are the next steps we are taking for improvement:

Reducing void periods is the critical action required which will impact positively on customer satisfaction levels. This will be achieved by the delivery of the Void Improvement Plan with specific actions to increase trades resources, improve digitisation, review of letting standards and tenants' incentives most relevant to increasing satisfaction levels.

Last updated:

Responsible Officers:

Neil Carn	egie/Graham Williamson	November 2020

Appendix A

Traffic Light Icons Used

	On target or within 5% of target
	Within 5% and 20% of target and being monitored
	Below 20% of target and being actively pursued
4	Data only – target not appropriate