



















Operational Delivery Committee Performance Report Appendix A

Operations and Protective Services

Building Services






















1. Customer – Building Services

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
The year to date percentage of repairs appointments kept	99.61%		99.61%		99.49%		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%		92%		91.49%		80%







Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - Building Services	11		22		47		
% of complaints resolved within timescale stage 1 and 2) - Building Services	54.5%		50%		23.4%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Building Services	18.2%		21.4%		31.9%		
*Total No. of lessons learnt identified (stage 1 and 2) - Building Services	0		1		0		










*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	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
The year to date average length of time taken to complete emergency repairs (hrs)	4.62		4.47		4.12		4.1
The year to date average length of time taken to complete non-emergency repairs (days)	7.25		7.01		6.09		8.3
The year to date percentage of reactive repairs carried out in the last year completed right first time	91.65%		92.06%		91.9%		93.6%
The percentage of Repairs Inspections completed within 20 working day target (year to date)	92.4%		93.1%		93.2%		100%
YTD % of ROU Void Path Maintenance Completed Within Timescale	13.2%		14.4%		14.3%		100%
YTD % Death Voids Path Maintenance Completed within Timescale	36.2%		35.9%		34%		100%
YTD % Major Works Void Path Maintenance Completed within Timescales	13.3%		12.5%		11.1%		100%

3. Staff – Building Services

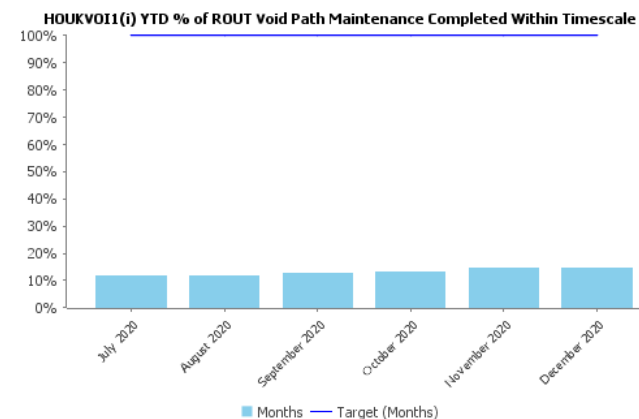
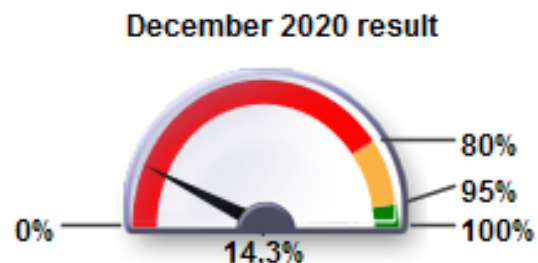
Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Building Services)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Building Services)	0		3		1		

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
*Sickness Absence - Average Number of Days Lost - Building Services	3.7		3.7		3.7		10
Establishment actual FTE	422.4		421.38		426.45		
Staff Costs - % Spend to Date (FYB)	54.5%		62.7%		70.6%		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

YTD % of Routine Void Path Maintenance Completed Within Timescale

**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 (ESSH) 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 **14.3%**
- Death Void path is **34%**
- Major Works Void Path is **11.1%**

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 Charter has been developed and 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 to the new Improvement Board.

Resources from other teams within building services have been temporarily assigned to the voids to increase capacity to return the properties quicker. 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. We are currently preparing external procurement contracts so that companies can absorb 150-200 of our void properties and this will lead to a significant overall reduction.

In response to the current Covid 19 pandemic, a new digital process 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/Martin Smith

December 2020













Environmental Services

1. Customer – Environmental Services







Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Environment	5		21		14		
% of complaints resolved within timescale (stage 1 and 2) - Environment	80%		81%		71.4%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Environment	40%		66.7%		42.9%		
Total No. of lessons learnt identified (stage 1 and 2) - Environment	0		0		1		










Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Number of Partners / Community Groups with links to national campaigns - Green Thread	No activity Q1/Q2				168		

2. Processes - Environmental Services

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
*Street Cleansing - LEAMS (Local Authority Environmental Audit Management System) (Conducted 3 times annually)	92.4%		95%		95%		80%
Grounds - LAMS (Land Audit Management System)	No activity Oct-Dec						87%
Number of Complaints upheld by Inspector of Crematoria	0		0		0		0
% Outdoor play areas visited, inspected and maintained to national standards on a fortnightly basis	100%		100%		100%		100%
% Water safety equipment inspected within timescale	99.8%		99.7%		92.3%		100%

3. Staff - Environmental Services

Performance Indicator	Q1 2020/21		Q2 2019/20		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Environment)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Environment)	0		3		1		

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Environmental	7		7		7.1		10
Establishment actual FTE	315.31		313.41		311.98		
Staff Costs - % Spend to Date (FYB)	57.5%		65.7%		74%		100%

4. Finance & Controls - Environmental Services

Facilities Management










1. Customer – Facilities Management


Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Facilities	0		7		1		
% of complaints resolved within timescale (stage 1 and 2) - Facilities	No complaints Q1		71.4%		100%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Facilities			5		0		
Total No. of lessons learnt identified (stage 1 and 2) - Facilities			1		0		

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		Target 2020/21
	Value	Status	Value	Status	Value	Status	
Number of school lunches served in the year - Primary (YTD)	No service Q1		139,265		460,774		785,738







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	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
% Fly tipping alerts at housing multi-storey blocks responded to within 48 hours	93%		84.1%		94.3%		95%
% Response cleaning alerts responded to within priority timescales	77.8%		80%		75%		95%
% Void cleaning alerts responded to within priority timescales	81.3%		80%		100%		95%

Performance Indicator	Current Status	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	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Month - Quarter)	0		0		1		
Accidents - Non-Reportable - Employees (No in Month - Quarter)	0		3		3		

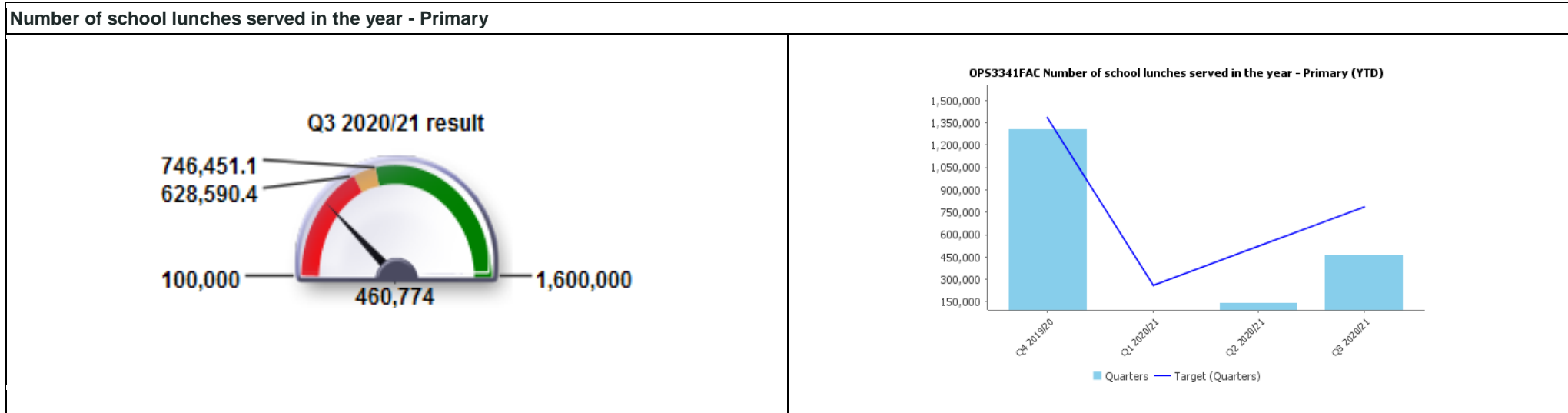
Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Facilities	8.8		9		9.2		10

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Establishment actual FTE	490		491.78		488.08		
Establishment actual FTE (Cleaning)	221.27		224.87		225.16		
Establishment actual FTE (Janitorial)	56.16		54.93		52.58		
Staff Costs - % Spend to Date (FYB)	59.4%		68%		76.7%		100%

4. Finance & Controls - Facilities Management

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

*The overdue corrective action outstanding in Oct and Nov was closed during a Bsi inspection in December 2020. However, a further minor action was raised which will be closed off at the next inspection later in 2021.



Why is this important?

Aberdeen City Council are committed to improving the wellbeing of our children and young people to give them the best possible start in life. Huge benefits accrue from investing in children and young people from an early stage. The short-term dividends include happier and healthier children and young people ready to learn and able to play a positive role in their schools and communities. The longer-term rewards are in the health, wellbeing, and economic prosperity of Aberdeen. What our children and young people eat and, importantly, their understanding of how it arrives on their plate and the impact it has on their health are an important part of this.

So, food in school matters – both what children and young people eat and what they learn about food. It impacts upon their health, on their education, and on the environment and economy. Since the launch of Hungry for Success in 2003, food served in schools has had to meet significantly higher standards. These standards are enacted in legislation which makes health promotion a central purpose of schooling. And with the implementation of Curriculum for Excellence, we have made great strides in providing children and young people with the knowledge and skills they need to help them make better lifestyle choices. We want to build on this progress so that food in schools is properly recognised and understood as a substantial financial and ethical investment which supports young people into adulthood.

Benchmark Information:

This measure is not currently benchmarked.

Target:

The 2020/21 target for this PI is currently set at the adjusted total of 1,047,651 to be achieved by the end of Q4. The Q3 target is 785,738.

This is what the data is saying:

The data shows a significant drop in numbers of young people attending for lunches in our Primary School settings. Dining rooms are by nature crowded places which under normal operating circumstances see large numbers of young people moving through service in a relatively short period of time. There have had to be adjustments made at site level to ensure that only appropriate numbers and/or bubbles of young people are in dining rooms at any given time. The changes which have had to be made to ensure that this can be achieved also appears to have hit consumer confidence with parents choosing alternative provision for their children, such as brought from home packed lunches. It is also worth noting that within Q3, neither October & December are full trading months due to the school holiday periods which fall within those months.

This is the trend:

The trend shows that performance is currently 41% or 324,964 meals served below the adjusted target set. With schools having largely been open only for keyworker children and vulnerable learners from the return to school in January and with only a phased return for Primary 1 to 3 learners from 22nd February, the service do not expect to make the revised target which was set for the full year and as such, will revise the target to a more realistic target to take account of the current operating environment. It should also be noted that whilst children are not in school, the parents/carers of those who are entitled to free school meals are receiving supermarket vouchers as an alternative to in-school meal provision.

This is the impact:

The impact will be felt on the revenue budget, as those who normally pay for school meals are doing so in greatly reduced numbers due. The full financial impact cannot be quantified at this stage.

These are the next steps we are taking for improvement:

The service is working with Finance colleagues to identify the financial impact for the full financial year. Finance colleagues have begun working up lost income figures for submission to Scottish Government and the lost income from School meals will form part of that.

As we move forward through the pandemic response and a full return to school, it is hoped that we can encourage greater numbers to return for in-school meals and we will work collaboratively with Education service colleagues to once again promote the benefits and value of our in-school meals provision.

Responsible officer:

Andy Campbell/John Landragon

Last Updated:

Q3 2020/21

Fleet and Transport

1. Customer – Fleet and Transport

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - Fleet	0		1		0		
% of complaints resolved within timescale (stage 1 and 2) - Fleet	No complaints received in Q1		100%		No complaints received in Q3		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	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
% HGV's achieving first time MOT pass	No tests Q1		83.3%		No tests Q3		100%
% Light Vehicles achieving first time MOT pass	87.5%		87.5%		90%		100%
% of Council fleet - alternative powered vehicles	7.6%		7.6%		7.8%		100%
% of Council fleet lower emission vehicles (YTD)	96.8%		96.8%		85.2%		100%

3. Staff – Fleet and Transport

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Fleet)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Fleet)	0		1		0		

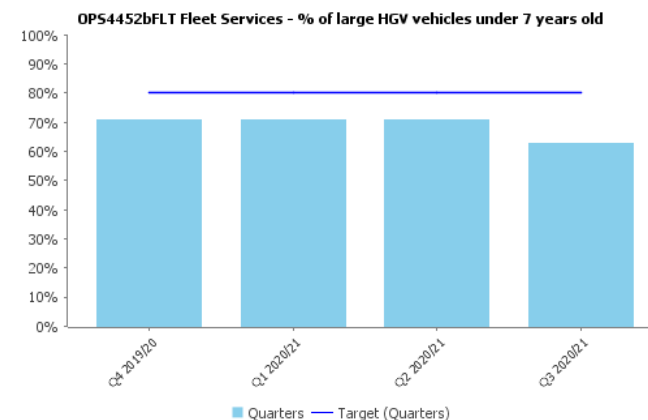
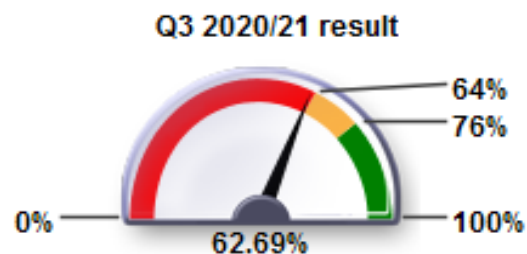
Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Fleet	0.8		1		1.4		10
Establishment actual FTE	35.25		35.6		35.6		
Staff Costs - % Spend to Date (FYB)	57.8%		66.1%		74.4%		100%

4. Finance & Controls – Fleet Transport

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Fleet Management - First Use Check Exceptions (Environmental) – Year to date	4		19		34		22
Fleet Management - First Use Check Exceptions (Fleet) – Year to date	0		0		0		3
Fleet Management - First Use Check Exceptions (Roads) – Year to date	0		0		2		3
Fleet Management- First Use Check Exceptions (Waste) – Year to date	2		6		10		27
Unreported Vehicle, Plant and Equipment Accidents (Environmental) - Year to date	2		3		3		12
Unreported Vehicle, Plant and Equipment Accidents (Roads) - Year to date	0		0		0		3
Unreported Vehicle, Plant and Equipment Accidents (Waste) - Year to date	4		4		4		22

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Fleet Services - % of LGV/ Minibuses/ Small Vans Vehicles under 5 years old	74.21%		74.21%		65.54%		80%
Fleet Services - % of large HGV vehicles under 7 years old	70.63%		70.63%		62.69%		80%

Fleet Services - % of large HGV vehicles under 7 years old



Why is this important?

Aberdeen City Council is committed to reducing carbon emissions both within its operations and across the city as part of Powering Aberdeen.

Benchmark Information:

The data information comes from the current Fleet Management system. The % number of vehicles in current year measuring against previous years which will show an increase in the percentage annually as Fleet vehicles are replaced. National benchmarks are not currently available.

Target:

The target for 2020/21 has been set at 80%.

This is what the data is saying:

The figure for HGV vehicles under 7 years old quarter 3 2020/21 is 62.69%.

This is the trend:

The figure for quarter 3 2020/21 shows a reduction on the previous quarter, this due to no replacement vehicles being purchased over the last period. There are 21 HGV vehicles on order but due to the delivery timescales will only be reflected in the next quarter results, barring any delays.

This is the impact:

The Council still operate a high % of Low Carbon / Emission vehicles 85.20%, it will not have a negative impact if vehicles continue to be replaced as per the replacement programme.

These are the next steps we are taking for improvement:

The service is developing further alternative fuelled vehicles within the Council's Fleet to reduce Aberdeen City Council's Carbon Footprint and reduce exhaust emission levels.

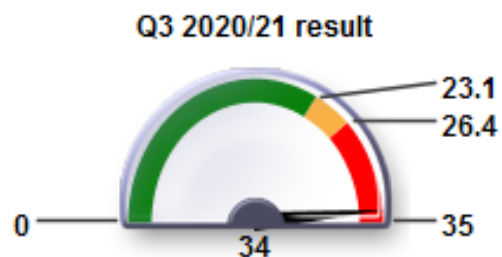
Responsible officer:

William Whyte/John Weir

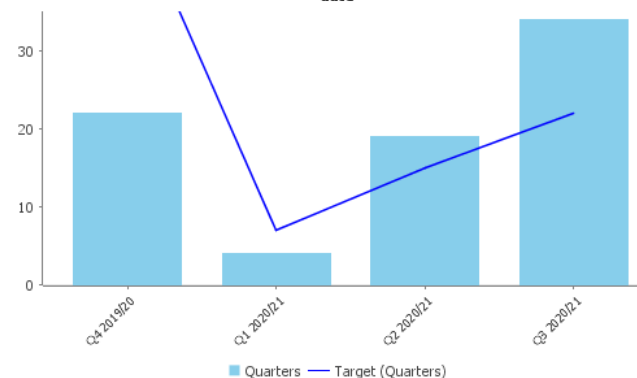
Last Updated:

Q3 2020/21

Fleet Management- First Use Check Exceptions (Environmental) – Year to date



OPS417ZENV Fleet Management- First Use Check Exceptions (Environmental) – Year to date



Why is this important?

This Indicator monitors the number of unreported Incidents that occur within all Services. The Incidents relate to damage, unfair wear and tear to vehicles and plant, it also relates to non-compliance of Services in relation to carrying out vehicle first use checks which should highlight any reportable defects.

Benchmark Information:

Benchmarking of the number of Incidents is conducted across Services on a quarterly and annual basis to monitor Incident reductions. No external benchmarking of this indicator is currently conducted.

Target:

The current target for the number of first use check exceptions for Environmental Services to the end of Q3 is 22 and 30 to the end of Q4.

This is what the data is saying:

There has been an increase in this number due to the fact that it is during Q3 that all our grass machinery is submitted for winter overhaul.

This is the trend:

The trend indicates that pre-use checks are not always capturing all defects when vehicles are being submitted to Fleet workshops.

This is the impact:

There is a cost to the service due to unfair wear and tear, equipment being non-operational for longer or having to be replaced earlier than the expected lifespan. It also results in an increased workload for the fleet workshop.

These are the next steps we are taking for improvement:

Instruction and toolbox talks have been given to all staff highlighting the need to log all defects on FUV. The service will be increasing gatehouse checks by getting charge-hands to complete these along with Area Supervisors and will also continue to work with Fleet Compliance to organise random depot audits.

Responsible officer:













William Whyte/Steven Shaw



















Last Updated:

Q3 2020/21

Integrated Children's Services (excluding Education)

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

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received (stage 1 and 2) - CSW	8		7		11		
% complaints resolved within timescale (stage 1 and 2) - CSW	25%		42.9%		63.6%		75%
% of complaints with at least one point upheld (stage 1 and 2) - CSW	25%		14.3%		16.7%		
Total No. of lessons learnt identified (stage 1 and 2) - CSW	0		0		0		

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
% Care provided in Council children's homes, fostering and adoption services achieve a care standard of good or better	100%		100%		100%		100%
LAC looked after in a residential placement in Aberdeen City (%)	3.7%		3.9%		4.2%		5%
LAC looked after in a residential placement out with Aberdeen City (%)	6.4%		6.6%		6.6%		6%
Looked After Children looked after at home (%)	21.4%		21.2%		19.3%		26%
Looked After Children looked after in Kinship (%)	18.0%		18.0%		19.4%		28%
Looked After Children looked after in Foster Care (%)	47.2%		47%		46.7%		34%

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

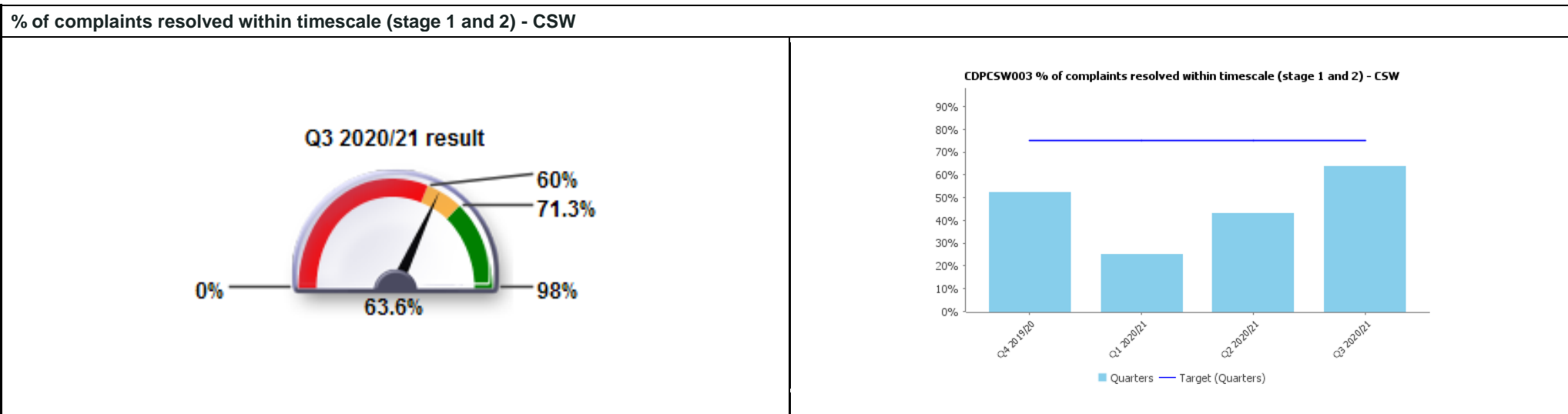
Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
% Initial child protection conferences held within 21 days	79%		70%		64%		100%
% Child Protection Case Conference decisions issued to families within 24 hours	100%		98.7%		98.8%		95%
% Child Protection Plans issued within 5 calendar days	52%		46.2		40.2%		95%
% Care experienced children and young people with 2 or more consecutive placements away from home in 12 months	18%		17%		19%		30%
% Care experienced children and young people with a pathway plan by age 15	100%		100%		100%		100%
% Foster carers and adopters are approved within a timescale of 6 months from application	22%		100%		25%		100%

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

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - CSW)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - CSW)	0		0		0		

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - CSW	3.8		3.8		3.7		5
Establishment actual FTE	348.28		352.62		353.28		
Staff Costs - % Spend to Date (FYB)	58.4%		66.7%		75.1%		100%

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



Why is this important?

It is important that complaints regarding the delivery of statutory children’s social work services are responded to in a timely manner to ensure continuing confidence in the service and to ensure learning arising from complaints is incorporated into service improvement plans.

Benchmark Information:

No benchmarking from other LA’s is available.

Target:

In recognition that complaints into the delivery of children’s social work services are often complex and multi-faceted a target of 75% is considered realistic. Such demonstrates a commitment to responding to complaints in a timely manner. When a complaint cannot be responded to within the agreed timescale, we communicate such to individuals and let them know when they can expect a response.

This is what the data is saying:

The data notes that 63.6% of complaints were responded to within the agreed timescale. This represents 7 out of 11 complaints. Two Stage 1 complaints, due to staff leave, concluded just out with the timescale. The two Stage 2 complaints that were out with the timescale were both highly complex in nature and it was always going to take longer to complete the investigation within the agreed timescale.

This is the trend:

The data indicates that there has been steady improvement over the past three quarters. In the current quarter 63.6% complaints were responded to in timescale.

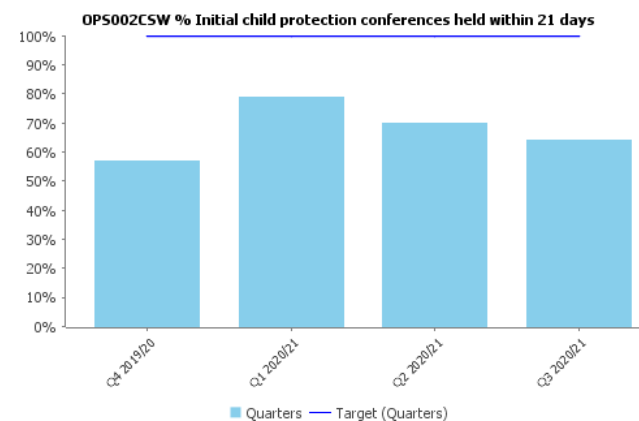
This is the impact:

All complainants were notified that the Service was not going to be able to respond within the agreed time scale and advised of a timescale by which we would respond.

These are the next steps we are taking for improvement:

Children's Social staff have worked closely with the Customer Feedback team over the past year to identify barriers to responding to complaints within the agreed timescale. This has led to some process changes which have contributed to the noted improvement over the past 3 quarters. The service clearly has no control over the volume or complexity of the complaints that are received. Both factors will have a continuing influence on the service's ability to deliver to the agreed target, however the noted improvements and collaboration between teams will ensure that any delays are minimised and clearly communicated to complainants.

% Initial child protection conferences (CPCC's) held within 21 days



Why is this important?

It is important that decisions regarding the planning for children deemed as potentially being at risk of significant harm are made in a timely manner

Benchmark Information:

This measure is not currently benchmarked.

Target:

The 20/21 target for this measure has been set at 100%. The scheduling of Case Conferences needs to take account of family availability. Looking at the data for the current quarter, family availability is a noticeable factor for CPCC's not being held within 21 days. Having reviewed our data it is proposed that the target for this Service Standard be varied to 80%. This amendment recognises the continuing need to give priority to arranging an initial CPCC but also that there will be factors out with anyone's control which makes 100% unachievable.

Aligned to this is the distribution of minutes within 5 calendar days. The proposed updated National Child Protection Guidance is recommending that minutes be distributed within 5 days, which are taken to be working days. It is proposed that this Service Standard be amended to align with this guidance. Although this may appear a slight change it is anticipated that it will have a noticeable impact on performance, particularly for part time staff who, due to work patterns, find it impossible to be meet the 5 calendar day timescale.

This is what the data is saying:

Data continues to show that all agencies are continuing to prioritise child protection work including the attendance at CPCC's. These CPCC's are held on a blended model with CSW staff and the family usually attending in person with other agencies attending virtually.

Q3 showed an increase in the number of Initial CPCC's held. National guidance requires certain agencies (Police; Education; Health and CSW) to be in attendance at these meetings. Given the continuing operational demands as a result of the COVID pandemic and factoring in the October School holidays meant that a small number of CPCC's exceeded the 21-day service standard. In addition, as noted earlier, family availability, including the need to self-isolate resulted in a small number of other CPCC's falling out with the 21 day standard.

Data highlights that families almost invariably receive written confirmation of the decision of the CPCC within 24 hours. However, adherence to the timescale relating to the distribution of the Child Protection Plans within 5 days is not where the service would want it to be. The articulation of this standard along with capacity challenges within the service has adversely impacted on performance against this standard.

This is the trend:

Performance has remained below that where we would want to be in a number of processes aligned to the administration of Child Protection Case Conferences. While not diminishing the significance of these, priority has and will continue to be given to engaging directly with families on the Child Protection Register to ensure the safety and wellbeing of children.

This is the impact:

All children coming to a CPCC have a multi-agency "safe care" plan in place to manage the risks identified during an investigation. Therefore, there is no risk to the child's safety by the Case Conference being held outwith 21 days or from the distribution of the Plans outwith the 5 days. However, it is important for parents/child to have clarity on the planning without unnecessary delay.

Should risks be assessed as being too high prior to a CPCC then an application to the Courts for an emergency order remains a course open to safeguard the child(ren).

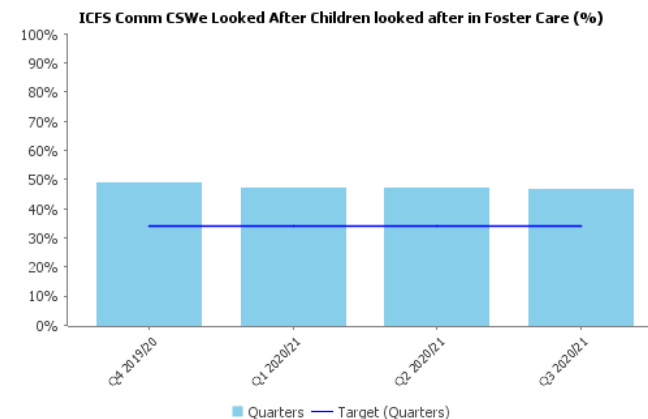
Some of the delays relate to availability of parents who are central to the decision-making process. Arrangements are sometimes made to accommodate their availability/ attendance. Preceding without parents undermines the effectiveness of the meeting and the consequential multi-agency plan.

These are the next steps we are taking for improvement:

During Q3 the multi-agency partnership streamlined the process for bringing children to CPCC's. As would be expected with any new process there has been learning from this which has required further amendments to the process to be made. The expectation will be that, as this process beds in, this will reduce the bureaucracy and minimise the delays in convening CPCC's.

As noted, having reviewed performance and national guidance, amendments have been proposed to Council which will set a more realistic target. It is however also acknowledged that the impact of school closures, remote working and case conferences being held virtually has impacted on the capacity of the service and systems related to the administration of CPCC's. It is anticipated these will continue to be apparent in Q4 reporting but when lockdown measures begin to ease this will have a positive impact on performance.

The percentage of Looked After Children who are looked after in foster care



Why is this important?

Rebalancing the Care Profile is a service priority and is noted within The Promise and the LOIP.

Benchmark Information:

National benchmark data relating to looked after children are collated during July of each year. It is published during the course of the national information release through the Children's Social Work Statistics report (often referred to as the CLAS return) in March of the following year.
<http://www.scotland.gov.uk/Topics/Statistics/Browse/Children/PubChildrenSocialWork>

Target:

To be equal to or better than the national average position.

This is what the data is saying:

Numbers of children within foster placements has continued to steadily reduce over 2020 in line with the key drivers as detailed within the LOIP for shifting the balance of care. This improved position is also in line with the findings of the Independent Care Review report – The Promise. It is however recognised that many of the children living in foster care are settled and secure and to intentionally disrupt these placements is not in their interests. Achieving parity with the national position is therefore going to take a number of years to address.

In supporting this we continue to prioritise the building of in-house fostering capacity. While there has been an up-turn in people intimating an interest in becoming foster carers over the past year, inevitably not all interest will translate into new foster carers. The current performance reflects this reality. It is also recognised that % reporting can be misleading when the numbers involved, as in this standard, are so low. Consequently, amendments are proposed to the reporting of that Service Standard.

The data in relation to foster care needs to be considered alongside that for looked after children living at home (slight decrease) and in kinship care (slight increase). The focus of the service is to ensure that **whenever children are safe in their families and feel loved, they must stay**. Realignment of resources, both in-house and those we commissioned will enable increased capacity to support children to remain within their families. It is also recognised that the impact of COVID has resulted in a significant backlog of Children's Hearings. This has meant that children will be caught up in the delays both in terms of no longer requiring compulsory measures to reflect their care needs but also some who will require such measures.

This is the trend:

Small but steady reductions in the percentage of young people placed in foster care.

This is the impact:

There will be a positive impact from any improvement in the performance of this measure, through reducing the number of looked after children in foster care and supporting more children to remain with their family.

These are the next steps we are taking for improvement:

- Realignment of CSW resources to support children to remain within their family.
- Development of Family Wellbeing Hubs to provide early and preventative multi-agency support to children, young people and families.
- Improvement programme around the earlier identification, assessment and support of potential Kinship Carers.
- Equipping foster carers to be trauma informed thus supporting an increasing number of children to remain within the city.
- Recruitment activity to increase the number of in-house foster carers. We know children who are placed locally can continue to maintain familial links with their communities which can positively impact on their wellbeing.

Responsible officer:










Graeme Simpson

Last Updated:













Q3 2020/21

Protective Services



1. Customer – Protective Services

Performance Indicator	Q1 2020/21		Q1 2020/21		Q2 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received - Protective Services	0		5		2		
% of complaints resolved within timescale - Protective Services	No complaints Q1		80%		50%		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	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Non-Domestic Noise % responded to within 2 days	97.7%		96.9%		93.8%		100%
High Priority Pest Control % responded to within 2 days	100%		100%		87.5%		100%
High Priority Public Health % responded to within 2 days	97.7%		97.6%		93.8%		100%
Dog Fouling - % responded to within 2 days	96.3%		100%		89.5%		100%










Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
% of registered tobacco retailers visited to give Business Advice on compliance with tobacco legislation - Year to Date	No activity in Q1/2/3						15%
% of registered tobacco retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date							7.5%

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
% of registered Nicotine Vapour Products retailers visited to give Business Advice on compliance with legislation - Year to Date	No activity in Q1/2/3						15%
% of registered Nicotine Vapour Products retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date							7.5%
% of Samples reported within specified turnaround times (Aberdeen Scientific Services Laboratory)	60.6%		85.2%				80%




*Since the beginning of April 2020, an exemption from the Food Law Code of Practice (Scotland) has been granted in relation to routine food inspections . Work is ongoing in relation to the restart process and how this will be achieved. As part of this work, Protective Services will aim to identify the most appropriate PIs to capture food hygiene data based on the new risk rating system which came into force on 01/07/2019. This system now rates premises across 3 types of business based on the type of operations undertaken and 5 compliance categories, giving 15 separate ratings.

3. Staff - Protective Services

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No. In Quarter - Protective Services)	0		0		0		
Accidents - Non-Reportable - Employees (No. In Quarter - Protective Services)	0		2		0		










Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Protective Services	1.65		1.58		1.48		10
Establishment actual FTE	64.11		64.11		63.17		
Staff Costs - % Spend to Date (FYB)	57.8%		66.1%		74.4%		100%

4. Finance & Controls - Protective Services










Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
% of External Quality Assurance reported results that were satisfactory (Aberdeen Scientific Services Laboratory)	96.5%		95.2%		94.6%		95%




Road and Infrastructure Services

1. Customer - Roads







Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received - Roads	0		34		40		
% of complaints resolved within timescale - Roads	No complaints Q1		61.8%		50%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Roads			52.6%		65%		
Total No. of lessons learnt identified (stage 1 and 2) - Roads			1		2		










2. Processes - Roads

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Percentage of all streetlight repairs completed within 7 days	86.23%		77.27%		40.98%		90%
Number of Street Light Repairs completed within 7 days	313		221		84		
Potholes Category 1 and 2 - % defects repaired within timescale	98.4%		98.07%		89.47%		95%

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Potholes Category 1 and 2 - No of defects repaired within timescale	432		509		563		

3. Staff - Roads

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Roads)	0		1		0		
Accidents - Non-Reportable - Employees (No in Quarter - Roads)	0		3		0		

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Roads	2.8		2.8		2.8		10
Establishment actual FTE	158.11		159.19		158.46		
Staff Costs - % Spend to Date (FYB)	53.1%		60.7%		69.7%		100%

4. Finance & Controls - Roads

Waste Services

1. Customer - Waste

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received - Waste	29		75		52		
% of complaints resolved within timescale - Waste	82.8%		76%		78.8%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Waste	51.7%		48.1%		63.5%		
Total No. of lessons learnt identified (stage 1 and 2) - Waste	0		1		6		










2. Processes - Waste

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value%	Value	Status	Value	
% Waste diverted from Landfill	85.5%		81.8%		86.9%		85%
Percentage of Household Waste Recycled/Composted	48.3%		48.2%		46%		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	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Waste)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Waste)	1		0		2		






















Performance Indicator	Oct 2020		Nov 2020		Nov 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Waste	7.7		8.2		8.7		10
Establishment actual FTE	194.07		192.58		191.85		
Staff Costs - % Spend to Date (FYB)	58.4%		66.7%		76.5%		100%

4. Finance & Controls - Waste

Customer

Customer Experience

1. Customer – Customer Experience

Performance Indicator – Corporate	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total number of Stage 1 complaints	82		263		273		
The number of complaints closed at Stage 1 within 5 working days as % of total no of Stage 1 complaints	78.05%		71.86%		66.67%		75%
Total number of Stage 2 complaints	16		32		24		
The number of complaints closed at Stage 2 within 20 working days as % of total no of Stage 2 complaints	31.25%		40.63%		75%		75%
Total number Escalated Stage 2 complaints	8		24		28		
The number of complaints closed at Escalated Stage 2 within 20 working days as % of total no of Stage 2 complaints	25.00%		66.67%		71.43%		75%
No. of Non-complex Subject Access Requests received	28		43		54		

Performance Indicator – Corporate	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
% Non-complex Subject Access Requests responded to within 1 month	89.3%		86%		83.3%		80%
No. of Complex Subject Access Requests received	9		10		13		
% Complex Subject Access Requests responded to within 3 months	22.2%		10%		15.4%		70%
No. of Environmental Information Regulation requests received	53		96		78		
% of Environmental Info Requests replied to within 20 working days - Corporate	81.1%		67.7%		38.8%		90%
No. of Freedom of Information requests received	180		210		281		
% of Freedom of Information requests replied to within 20 working days - Corporate	75%		69.5%		52%		90%
No. of Access to School Records requests received	0		0		0		
% Access to School Records requests responded to within 15 school days	No requests received						100%
No. of Data Protection Right requests received	3		4		3		
% Data Protection Right requests responded to within 1 month	100%		100%		100%		100%

Performance Indicator – Service	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received – Customer Experience	13		73		83		
% of complaints resolved within timescale – Customer Experience	100%		90.4%		81.9%		75%
% of complaints with at least one point upheld (stage 1 and 2) – Customer Experience	53.8%		53.4%		65.1%		
Total No. of lessons learnt identified (stage 1 and 2) – Customer Experience	1		8		12		
Total No. complaints received – External Communications	0		0		0		
% of complaints resolved within timescale – External Communications	No complaints Q1/Q2/Q3						75%
% 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 – Customer Experience
















Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Average time taken in calendar days to process all new claims and change events in Housing Benefit (monthly)	7.41		7.75		8.04		12
Correct amount of Housing Benefit paid to customer (monthly)	97.54%		97.24%		97.55%		95%
% Customer Contact Centre calls answered within 60 seconds	71.51%		72.08%		72.4%		70%
Percentage of invoices sampled and paid within 30 days	85.46%		86.73%		84.42%		90%

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
% Crisis Grant applications processed within 2 working days	97%		96%		Data not available		90%
% Community Care Grant applications processed within 15 working days	57%		83%				50%




3. Staff – Customer Experience

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter – Customer Experience)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Customer Experience)	0		0		0		

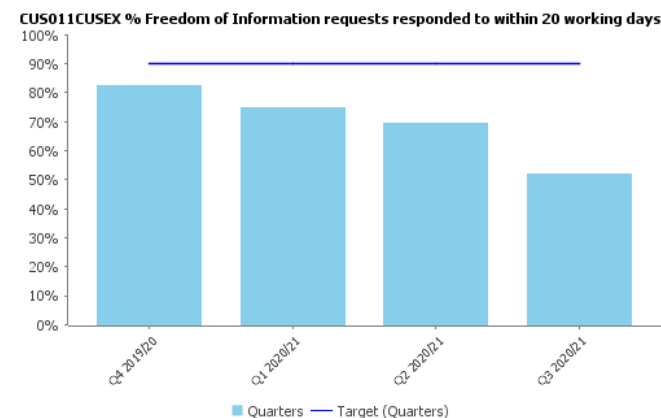
Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost – Customer Experience	3.5		3.2		2.9		To be confirmed

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Establishment actual FTE – Customer Experience	301.37		300.49		302.93		
Staff Costs - % Spend to Date (FYB) – Customer Experience	59.4%		67.5%		75.6%		100%
Sickness Absence – Average Number of Days Lost – External Communications	0.12		0.05		0.04		5
Establishment actual FTE – External Communications	16.51		16.51		16.51		
Staff Costs - % Spend to Date (FYB) - External Communications	58.4%		66.7%		75%		100%

4. Finance & Controls – Customer Experience

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Council Tax Cash Collected (In Year) - monthly	£81.6m		£92.9m		£104.3m		£82.5

% Freedom of Information requests responded to within 20 working days - quarterly



Why is this important?

Responding to Freedom of Information (FOI) requests is a statutory requirement. It is important to demonstrate how we are performing as an organisation in relation to FOI handling and whether we are complying with the Freedom of Information (Scotland) Act 2002 and Environmental Information (Scotland) Regulations 2004 statutory requirements. This includes the timescales for response which we aim to meet wherever possible. This SPI is most closely linked to the Prosperous Place Theme within the LOIP. FOIEIR information engages and informs the public by promoting openness and transparency in the policies, procedures and undertaking of Aberdeen City Council and the shaping of Aberdeen City.

Benchmark Information:

There is no benchmarking currently in place.

Target:

The target for 2020/21 has been set as 90% of all FOIs responded to within timescale (20 working days).

This is what the data is saying:

For Q3 2020/21, the percentage of FOIs responded to within timescale has reduced to 52% and we are currently underperforming in relation to FOI handling.

This is the trend:

The figure for quarter 3 2020/21 shows a reduction on the previous quarter, this due to a combination of factors, including: -

- Services reporting that they have needed to focus on the pandemic response which has taken priority over responding to Freedom of Information requests.
- a higher number of requests having been received (increase of 80 requests in Q3)
- a reduction of resource within the Access to Information Team due to leave and alternative duties relating to the pandemic.
- Implementation of a new procedure which has taken time to embed.

This is the impact:

Some of the consequences of this performance are:

- An inconsistent customer experience across council services
- Some customers are receiving timely responses to their requests and some are experiencing a longer wait than originally advised, potentially resulting in poorer customer satisfaction levels.

These are the next steps we are taking for improvement:

The reason why response timescales are not always met varies and continues to be explored with services. Where a response timescale cannot be met, for example due to the complexity of the matter, there is a process in place to inform the customer that an extension is necessary. An action plan to improve performance is in place and includes:

Improved monitoring is to be implemented. This will be achieved through the following: -

- The Access to Information Team have reviewed the FOI performance and identified which are the lower performing areas which has been raised with the relevant service managers to address performance issues.
- An FOI escalation and performance dashboard is being developed and will be rolled out to Chief Officers and service managers to increase visibility of outstanding requests
- Training sessions which had been postponed due to Covid-19 have recommenced with key responding officers to reinforce the requirements of the FOI handling procedure. This will help to ensure that FOIs are responded to appropriately and within statutory timescales. The training will also result in an improved quality of responses drafted by officers, which in turn will reduce the time taken to quality assure responses before approval.
- The Access to Information Team have continued to focus on the quality control of responses which in some circumstances has meant that some responses have taken longer to be issued. The quality of responses has been deemed the highest importance as this also results in less Reviews and Appeals to OSIC.

Since commencing these improvement actions the most recent data available indicates a significant improvement in performance for Quarter 4 which is currently over 70%.

Ongoing performance across the organisation will be monitored and the reasons for delays will continue to be explored and addressed accordingly.

Responsible officer:

Lucy McKenzie

Last Updated:

Q3 2020/21

Data and Insights

1. Customer – Data and Insights

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received – Data and Insights	0		0		0		
% of complaints resolved within timescale – Data and Insights	No complaints Q1/Q2/Q3						75%
% 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	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
% Reported Data Protection incidents receiving an initial response within 24 business hours	100%		100%		100%		100%

3. Staff – Data and Insights

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
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	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost – Data and Insights	0.3		0.3		0.3		5







Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Establishment actual FTE	31.56		31.99		31.09		
Staff Costs - % Spend to Date (FYB)	59.2%		67.6%		78.1%		100%

4. Finance & Controls – Data and Insights













Digital and Technology

1. Customer – Digital and Technology







Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received – Digital and Technology	1		2		19		
% of complaints resolved within timescale – Digital and Technology	100%		50%		73.7%		75%
% of complaints with at least one point upheld (stage 1 and 2) – Digital and Technology	0%		66.7%		15.8%		
Total No. of lessons learnt identified (stage 1 and 2) – Digital and Technology	0		0		0		










Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Average Call Wait Time (IT Helpdesk)	30 sec.		27 sec.		28 sec.		120 sec.
Abandonment Rate % (IT Helpdesk)	49.24%		45.84%		39.39%		10%

2. Processes – Digital and Technology

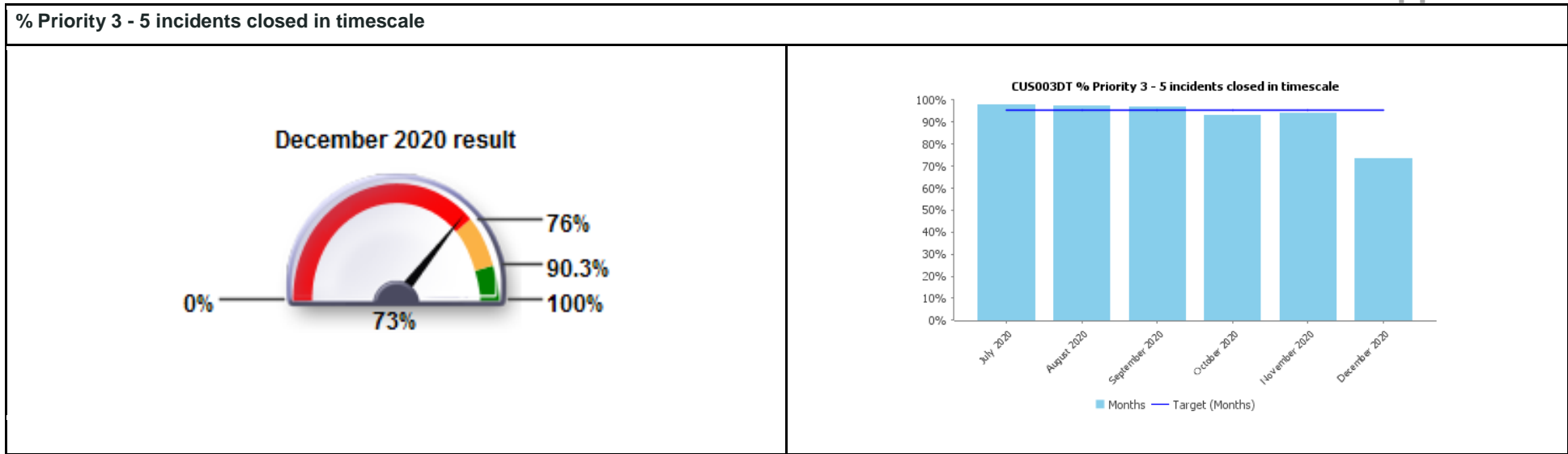
Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Percentage of Critical system availability - average (monthly)	100%		100%		99.8%		99.5%
% Incidents logged by IT Helpdesk (including Self-Serve) resolved right first time	40%		35%		37.5%		65%
% Priority 1 and 2 incidents closed in timescale	93.3%		80%		70%		99.5%
% Priority 3 – 5 incidents closed in timescale	92.6%		93.6%		73%		95%

3. Staff – Digital and Technology

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
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	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost – Digital and Technology	1		1.1		1.2		5
Establishment actual FTE	87.16		87.52		87.52		
Staff Costs - % Spend to Date (FYB)	62.5%		71.8%		81.7%		100%

4. Finance & Controls – Digital and Technology



Why is this important?

This indicator shows the percentage of Priority 3-5 calls closed within agreed timescales over the six months and demonstrates whether the service has met these timescales.

Benchmark Information:

This measure is not currently benchmarked.

Target:

The 2020/21 target for % Priority 3 - 5 incidents closed in timescale is currently 95%.

This is what the data is saying:

Reporting of this measure began in April 2020 when it was implemented as an agreed Service Standard. Since that time, there have been an average of 1,431 Priority 3 – 5 incidents logged per month, with an average of 1,328 or 93.45% resolved in time, slightly below the 95% target set. Performance has remained relatively static since reporting began, ranging from 92.6 to 97.5%, with the exception of December when there was a significant downturn to 73%.

This is the trend:

Despite this downward trend, as the result of a recent programme of work focusing on how calls are processed within the system and also housekeeping ensuring the timeous closing of opened calls, recently calculated performance for January 2021 of 82.5% already shows progress towards a return to pre-December levels, which it is expected will continue.

This is the impact:

Due to the above trend analysis outlining steps which have been put in place and an ongoing focus on resource management there is now a concentrated emphasis on ensuring calls are closed in a way that is more effective and efficient for the customer as January's figures make clear.

These are the next steps we are taking for improvement:

There are now dedicated queue managers within each queue/team following the same process and using the same dashboard information to ensure calls are closed within agreed timescales. There is a weekly management review held enabling a consistent focus on resource management across project and operations.

Responsible officer:













Craig Falconer



















Last Updated:

December 2020

Early Intervention and Community Empowerment

1. Customer – Early Intervention and Community Empowerment

Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Value	Status	Value	
Total No. complaints received – Early Intervention and Community Empowerment	22		41		33		
% of complaints resolved within timescale - Early Intervention and Community Empowerment	68.2%		56.1%		78.8%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Early Intervention and Community Empowerment	27.3%		28.1%		48.5%		
Total No. of lessons learnt identified (stage 1 and 2) - Early Intervention and Community Empowerment	1		2		1		







Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Percentage of tenants satisfied with the standard of their home when moving in YTD	50%		52.2%		53.7%		75%
Satisfaction of new tenants with the overall service received (Year To Date)	63%		70.1%		72%		85%
Financial Inclusion - No of open cases and enquiries per month	232		299		191		
Number of visits to libraries - person	10,535		11,673		9,984		
Number of visits to libraries - virtual	82,853		86,700		77,377		
*% Libraries open during agreed opening hours	100%		100%		99.2%		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










Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
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%		3.6%		3.7%		4.5%
YTD % of statutory homeless decisions reached within 28 Days (Unintentional & Intentional)	100%		100%		100%		100%
YTD Average length of journey in weeks for statutory homeless cases (Unintentional & Intentional) closed in the year	20.5		20.3		20.5		
YTD Percentage of anti-social behaviour cases reported which were resolved	97.1%		97.1%		97.8%		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	401		378		368		
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)	121.5		117.3		114.4		100.9
Voids Available for Offer Month Number - Citywide	531		496		522		
Applications processed 28 days YTD %	100%		100%		100%		100%
Statutory Customer Service Actions - Decisions/Outcomes within statutory timescale	89%		89.6%		89.6%		100%
New Tenants Visits YTD – Outcomes completed within locally agreed timescales (Citywide)	78.2%		77.5%		78.8%		93.5%
Welfare Rights - % of Successful Appeals	88%		71%		85.71%		
HMO License Applications Pending	186		173		173		
HMO Licenses in force	1,154		1,139		1,150		
% Library item requests satisfied within 21 days	No service		71.3%		71.8%		85%

3. Staff – Early Intervention and Community Empowerment

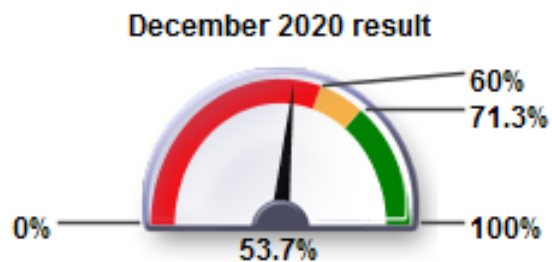
Performance Indicator	Q1 2020/21		Q2 2020/21		Q3 2020/21		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - EICE)	0		0		1		
Accidents - Non-Reportable - Employees (No in Quarter – EICE)	0		4		1		

Performance Indicator	Oct 2020		Nov 2020		Nov 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost - EICE	4.7		4.9		5.3		5
Establishment actual FTE	407.61		405.19		402.2		
Staff Costs - % Spend to Date (FYB)	53.1%		60.6%		68.1%		100%

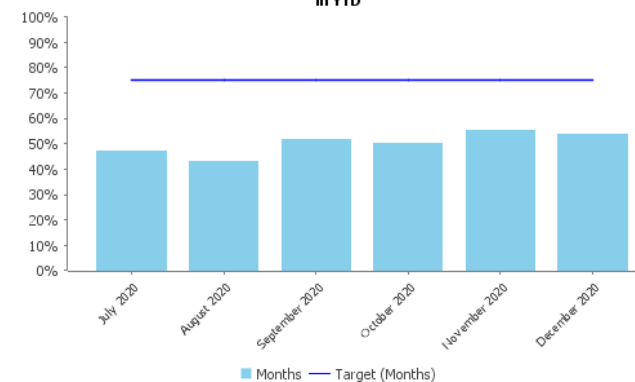
4. Finance & Controls – Early Intervention and Community Empowerment

Performance Indicator	Oct 2020		Nov 2020		Dec 2020		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Financial Inclusion - Total Financial Gains Achieved per month	£253,237		£343,109		£277,135		
Gross rent Arrears as a percentage of Rent due	10.59%		10.88%		11.21%		11.5%
Rent loss due to voids - Citywide - YTD average	2.45%		2.47%		2.48%		2.08%

Percentage of tenants satisfied with the standard of their home when moving in (Year to Date)



HOUCHI09 Percentage of tenants satisfied with the standard of their home when moving in YTD



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 (ESSH) 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:

Percentage of new tenants satisfied with the standard of their home when moving in is currently sitting at **53.7%**

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 – 8th December 20 there were **1188** new tenancies, **881 (74.2%)** of those tenancies provided email address and were sent a survey. Of the **881** emailed surveys only **55 (6.2%)** were completed.

It should be noted that there were **307** 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 **307** tenants with no email address. **43** tenants were called of those **27 (62.8%)** 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 new Void Improvement Charter with specific actions to increase trades resources, improve digitisation, revisit and implement a new letting standard and maximising tenant's incentives most relevant to increasing satisfaction levels.





Responsible officer:

Graham Williamson/Martin Smith

Last Updated:

December 2020

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
	Data only – target not appropriate