



















Operational Delivery Committee Performance Report Appendix A

Operations and Protective Services

Building Services

1. Customer – Building Services





Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
The year to date percentage of repairs appointments kept	99.46%		99.36%		99.28%		90%
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).	96.08%		96.08%		96.08%		80%

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - Building Services	59		39		90		
% of complaints resolved within timescale stage 1 and 2) - Building Services	42.4%		56.4%		45.6%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Building Services	33.9%		33.9%		27.8%		
*Total No. of lessons learnt identified (stage 1 and 2) - Building Services	3		3		2		







*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.










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2. Processes – Building Services

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
The year to date average length of time taken to complete emergency repairs (hrs)	3.61		3.64		3.67		4.1
The year to date average length of time taken to complete non-emergency repairs (days)	6.26		6.6		6.71		8.3
The year to date percentage of reactive repairs carried out in the last year completed right first time	90.81%		90.83%		91.06%		90%
The percentage of Repairs Inspections completed within 20 working day target (year to date)	99.2%		99.3%		99.4%		100%

3. Staff – Building Services

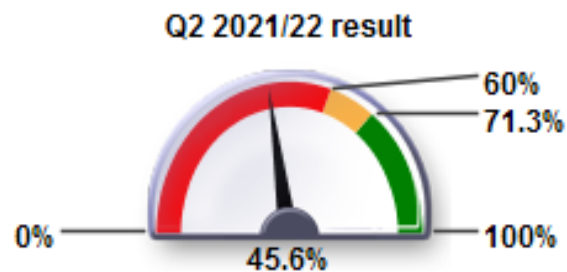
Performance Indicator	Q4 2020/21		Q1 2021//22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Building Services)	3		0		1		
Accidents - Non-Reportable - Employees (No in Quarter - Building Services)	4		1		3		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
*Sickness Absence - Average Number of Days Lost - Building Services	2.9		2.8		2.7		10
Establishment actual FTE	418.13		414.87		417.46		
Staff Costs - % Spend to Date (FYB)	48.2%		56%		64.3%		100%

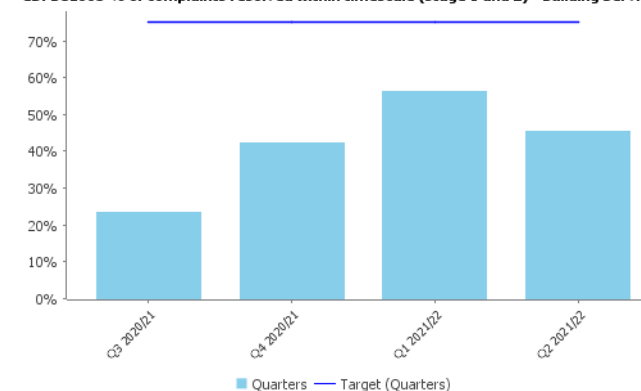
*All sickness absence data contained in this Appendix now reflects the 12-month rolling average of days lost per FTE

4. Finance & Controls – Building Services

% of complaints resolved within timescale (stage 1 and 2) - Building Services



CDPBUL003 % of complaints resolved within timescale (stage 1 and 2) - Building Services

**Why is this important?**

Complaint handling is a statutory requirement. Like all Local Authorities, we follow the Model Complaints Handling Procedure set out by the Scottish Public Services Ombudsman (SPSO). This includes the timescales for response which we aim to meet wherever possible. This SPI is most closely linked to the Prosperous People Theme within the Local Outcome Improvement Plan as the effective handling of complaints ensures that people are supported appropriately when and if necessary.

Benchmark Information:

No benchmarking from other Local Authorities is available.

Target:

The target for 2021/22 has been set as 75% of all complaints responded to within timescale (5 working days for stage 1 complaints and 20 working days for stage 2 complaints). There is no target set for the identification of lessons learnt or the percentage of upheld / not upheld complaints.

This is what the data is saying:

The data notes that in Q2, 45.6% of complaints relating to Building Services were responded to within the agreed timescale, representing 41 of the 90 received.

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This is the trend:

Following a significant improvement in Q1 of the current financial year, we again see a decrease in performance during Q2. This must in some way be attributable to the massive increase in the number of complaints received during that period, from 39 in Q1 to 90 in Q2.

This is the impact:

Some of the consequences of this performance are:

- An inconsistent customer experience
- Some customers 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 key reasons for the large increase in the number of complaints received during Q2 as compared to Q1 were the additional challenges presented by Covid which created a backlog of 2500 repairs over 2020/21. This has been compounded by an increased influx of repair requests following the easing of restrictions. The volume of complaints in Q2 and managing related workloads has proved challenging for responsible officers but in order to address this a Microsoft List has been developed to oversee allocation and assist Officers with responding within the agreed target time.

Responsible officer:

Graham Williamson

Last Updated:

Q2 2021/22

Environmental Services

1. Customer – Environmental Services

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - Environment	10		17		33		
% of complaints resolved within timescale (stage 1 and 2) - Environment	80%		100%		72.7%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Environment	40%		58.8%		27.3%		
Total No. of lessons learnt identified (stage 1 and 2) - Environment	0		2		1		

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Number of Partners / Community Groups with links to national campaigns - Green Thread	No activity Q4		107		93		







2. Processes - Environmental Services










Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
*Street Cleansing - LEAMS (Local Authority Environmental Audit Management System) (Conducted 3 times annually)	85.9%		85.9%		85.9%		80%
Grounds - LAMS (Land Audit Management System)	No activity						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	96.1%		100%		100%		100%

* LEAMS figure is an overall outcome for the period April to July. The next round of survey results are yet to be reported.

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3. Staff - Environmental Services

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Environment)	0		1		0		
Accidents - Non-Reportable - Employees (No in Quarter - Environment)	2		0		6		













Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/2022 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Environmental	9.7		10.1		10.2		10
Establishment actual FTE	309.62		307.67		312.72		
Staff Costs - % Spend to Date (FYB)	49.5%		54.8%		66.8%		100%




4. Finance & Controls - Environmental Services

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Facilities Management

1. Customer – Facilities Management

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - Facilities	1		3		2		
% of complaints resolved within timescale (stage 1 and 2) - Facilities	0%		100%		100%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Facilities	0%		66.7%		100%		
Total No. of lessons learnt identified (stage 1 and 2) - Facilities	0		1		0		










Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		Q2 2021/22 Target
	Value	Status	Value	Status	Value	Status	
Number of school lunches served in the year - Primary (YTD)	592,653		264,525		402,093		*437,000


*The target shown for this measure is cumulative. Target at end of Q3 will be 682,000 and at end Q4 1,000,000. These targets are proportionate, based on the number of school trading days in each quarter.

Performance Indicator	Current Status	2021/22 Target
All meals served to children and young people in our schools will meet the Nutritional requirements for Food and Drink in Schools (Scotland) Regulations		100%
The Nutritional Requirements for Food and Drink in Schools (Scotland) Regulations were updated in 2020, with changes coming into effect from April 2021. Our School Catering service aims for 100% compliance with the regulations to ensure that whilst in school, our children and young people are receiving the nutrition they require to be effective learners. We have set this as a service standard particular to Aberdeen City Council's school catering service and there is no comparative 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 received on nutritional non-compliance from Education Scotland's school inspection visits.		







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2. Processes – Facilities Management

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% Fly tipping alerts at housing multi-storey blocks responded to within 48 hours	92.8%		100%		98.6%		80%
% Response cleaning alerts responded to within priority timescales	92.9%		100%		95.7%		80%
% Void cleaning alerts responded to within priority timescales	94.1%		100%		100%		80%

Performance Indicator	Current Status	2021/22 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 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter)	1		0		0		
Accidents - Non-Reportable - Employees (No Quarter)	3		7		5		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Facilities	9.1		9.2		9.4		10
Establishment actual FTE	486.22		492.54		492.11		

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Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Establishment actual FTE (Cleaning)	219.11		220.59		223.12		
Establishment actual FTE (Janitorial)	58.68		59.42		59.99		
Staff Costs - % Spend to Date (FYB)	49.9%		58,5%		66.8%		100%

4. Finance & Controls - Facilities Management

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Inspection - Number of overdue corrective actions requests as at month end	0		0		0		0













Fleet and Transport

1. Customer – Fleet and Transport







Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - Fleet	0		1		0		
% of complaints resolved within timescale (stage 1 and 2) - Fleet	No complaints Q4		100%		No complaints Q2		75%
% of complaints with at least one point upheld (stage 1 and 2) - Fleet			0%				
Total No. of lessons learnt identified (stage 1 and 2) - Fleet			2				










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2. Processes – Fleet and Transport

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% HGVs achieving first time MOT pass	87.5%		96.8%		96.9%		100%
% Light Vehicles achieving first time MOT pass	94.7%		94.7%		91.9%		100%
% of Council fleet - alternative powered vehicles	8.2%		8.4%		8.7%		
% of Council fleet lower emission vehicles (YTD)	85.5%		85.8%		87.7%		100%

3. Staff – Fleet and Transport

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Fleet)	1		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Fleet)	1		1		0		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Fleet	6		5.9		5.9		10
Establishment actual FTE	40.27		40.56		40.51		
Staff Costs - % Spend to Date (FYB)	49.7%		58%		66.2%		100%

4. Finance & Controls – Fleet Transport

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		Q2 2021/22 Target
	Value	Status	Value	Status	Value	Status	
Fleet Management - First Use Check Exceptions (Environmental) – Year to date	39		3		11		15
Fleet Management - First Use Check Exceptions (Fleet) – Year to date	0		1		1		2
Fleet Management - First Use Check Exceptions (Roads) – Year to date	6		6		7		2
Fleet Management- First Use Check Exceptions (Waste) – Year to date	12		3		7		18
Unreported Vehicle, Plant and Equipment Accidents (Environmental) - Year to date	3		0		1		8
Unreported Vehicle, Plant and Equipment Accidents (Roads) - Year to date	1		0		0		2
Unreported Vehicle, Plant and Equipment Accidents (Waste) - Year to date	4		0		2		15

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Fleet Services - % of LGV/ Minibuses/ Small Vans Vehicles under 5 years old	78.33%		64.94%		64.03%		80%
Fleet Services - % of large HGV vehicles under 7 years old	69.57%		67.83%		76.98%		80%

Integrated Children's Services (excluding Education)

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

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received (stage 1 and 2) - CSW	10		15		13		
% complaints resolved within timescale (stage 1 and 2) - CSW	70%		46.7%		61.5%		75%
% of complaints with at least one point upheld (stage 1 and 2) - CSW	10%		20%		30.8%		
Total No. of lessons learnt identified (stage 1 and 2) - CSW	0		0		0		

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Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 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 (%)	4.7%		5%		4.6%		5%
LAC looked after in a residential placement out with Aberdeen City (%)	6.4%		5.9%		6.1%		5%
Looked After Children looked after at home (%)	19.7%		18.9%		19.2%		25%
Looked After Children looked after in Kinship (%)	20.3%		20.2%		20.3%		31%
Looked After Children looked after in Foster Care (%)	44.8%		46.2%		46.7%		33%

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

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% Child Protection joint interviews completed within 5 days	89.5%		92.8%		88.6%		90%
% Initial child protection conferences held within 21 days	60%		93.8%		91.7%		80%
% Child Protection Case Conference decisions issued to families within 24 hours	100%		100%		100%		90%
% Child Protection Plans issued within 5 days	42.6%		67.9%		79.1%		80%
% Care experienced children and young people with 3 or more consecutive placements away from home in 12 months	New measure		5%		5%		10%
% Care experienced children and young people with a pathway plan by age 15	100%		100%		100%		100%
% Foster carers and adopters approved within a timescale of 6 months from application	4.35%		45%		33.3%		75%

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

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 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		3		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - CSW	4.2		4.2		4.2		5
Establishment actual FTE	354.11		353.56		346.43		
Staff Costs - % Spend to Date (FYB)	49.1%		58.3%		74.4%		100%













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




Protective Services

1. Customer – Protective Services

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received - Protective Services	1		8		5		
% of complaints resolved within timescale - Protective Services	100%		87.5%		60%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Protective Services	0%		0%		20.0%		
Total No. of lessons learnt identified (stage 1 and 2) - Protective Services	0		0		0		

2. Processes - Protective Services

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Non-Domestic Noise % responded to within 2 days	95.1%		100%		100%		100%
High Priority Pest Control % responded to within 2 days	96.4%		100%		100%		100%
High Priority Public Health % responded to within 2 days	100%		100%		98.3%		100%
Dog Fouling - % responded to within 2 days	77.4%		88.9%		100%		100%







Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% of Samples reported within specified turnaround times (Aberdeen Scientific Services Laboratory)	84.3%		75.4%		88.3%		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.

**Trading Standards ordinarily report on a quarterly basis the work carried out in respect of their advisory and enforcement work to regulate the retail sale of tobacco and e-cigarettes to person under the age of 18. The associated performance indicators are set by the Scottish Government and reported to them on an annual basis. However, due to the ongoing Covid response and concerns for officer welfare, it was not possible to carry out this work in the first half of 2021-22. This work has recommenced in Q3 with officers carrying out Business Advisory visits. Also, officers are in the process of carrying out Integrity Testing of premises selling tobacco and e-cigarettes to ensure they have in place an Age Verification Policy, as required by law. A report on this work will be submitted at the end of Q4 as it will be completed during that quarter, Covid restrictions permitting. Under-age sales test purchasing programmes remain problematic, but we will restart as soon as circumstances allow. The intention is that we will report on this work at the end of 2021-22




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3. Staff - Protective Services

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 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)	1		0		0		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Protective Services	0.5		0.6		0.8		10
Establishment actual FTE	64.43		64.74		64.04		
Staff Costs - % Spend to Date (FYB)	49.7%		58.2%		66.5%		100%

4. Finance & Controls - Protective Services

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% of External Quality Assurance reported results that were satisfactory (Aberdeen Scientific Services Laboratory)	100%		97.8%		98.8%		95%

Appendix A

Road and Infrastructure Services

1. Customer - Roads

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received - Roads	70		18		37		
% of complaints resolved within timescale - Roads	82.9%		66.7%		32.4%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Roads	15.7%		44.4%		48.6%		
Total No. of lessons learnt identified (stage 1 and 2) - Roads	1		2		0		




2. Processes - Roads










Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Percentage of all streetlight repairs completed within 7 days	86.01%		79.49%		64.53%		90%
Number of Street Light Repairs completed within 7 days	166		155		333		
Potholes Category 1 and 2 - % defects repaired within timescale	81.73%		85.96%		95.02%		95%
Potholes Category 1 and 2 - No of defects repaired within timescale	255		251		286		

3. Staff - Roads

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Roads)	0		0		0		

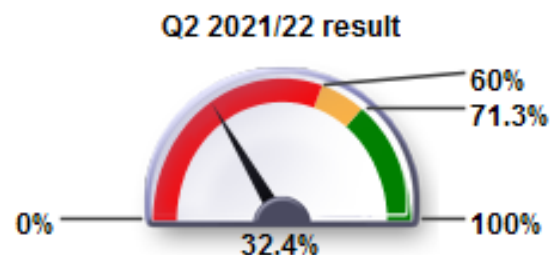
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Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Non-Reportable - Employees (No in Quarter - Roads)	3		3		1		

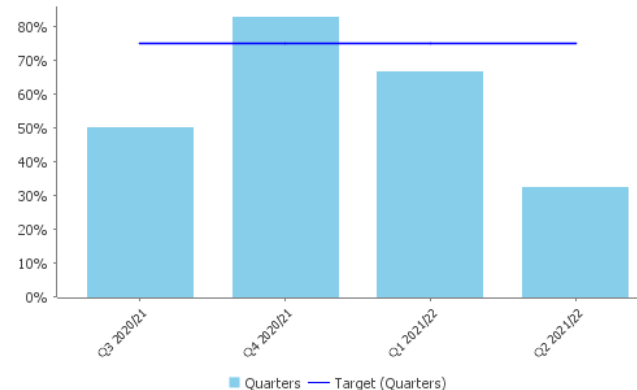
Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Roads	4.8		5.4		5.9		10
Establishment actual FTE	160.58		157.73		155.92		
Staff Costs - % Spend to Date (FYB)	44.5%		51.1%		58.5%		100%

4. Finance & Controls - Roads

% of complaints resolved within timescale (stage 1 and 2) - Roads



CDPRD5003 % of complaints resolved within timescale (stage 1 and 2) - Roads



Why is this important?

Complaint handling is a statutory requirement. Like all Local Authorities, we follow the Model Complaints Handling Procedure set out by the Scottish Public Services Ombudsman (SPSO). This includes the timescales for response which we aim to meet wherever possible. This SPI is most closely linked to the Prosperous People Theme within the Local Outcome Improvement Plan as the effective handling of complaints ensures that people are supported appropriately when and if necessary.

Benchmark Information:

No benchmarking from other Local Authorities is available.

Target:

The target for 2021/22 has been set as 75% of all complaints responded to within timescale (5 working days for stage 1 complaints and 20 working days for stage 2 complaints). There is no target set for the identification of lessons learnt or the percentage of upheld / not upheld complaints.

This is what the data is saying:

The data notes that in Q2, 32.4% of complaints relating to Roads services were responded to within the agreed timescale, representing 12 of the 37 received. The number of complaints received during the quarter more than doubled on the previous one, a reflection of the huge amount of Capital works which were ongoing. Officer workload as a result of this huge work programme is also a factor and has clearly impacted on their ability to prioritise other areas of service delivery such as complaints processing.

Appendix A

This is the trend:

After reaching a high of 82.9% during Q4 of the previous financial year, performance has gradually fallen during the first 2 quarters of 2021/22, first to 66.7% (12 of 18) in Q1, then 32.4% (12 of 37) in Q2.

This is the impact:

Some of the consequences of this performance are:

- An inconsistent customer experience
- Some customers 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 Q3 figures have already seen a slight improvement from Q2. However, officers are still having to prioritise the Capital programme, Spaces for People and the recent storm damage during the summer and autumn period to deliver their extensive programme. It is hoped that figures will improve during Q4.

Responsible officer:

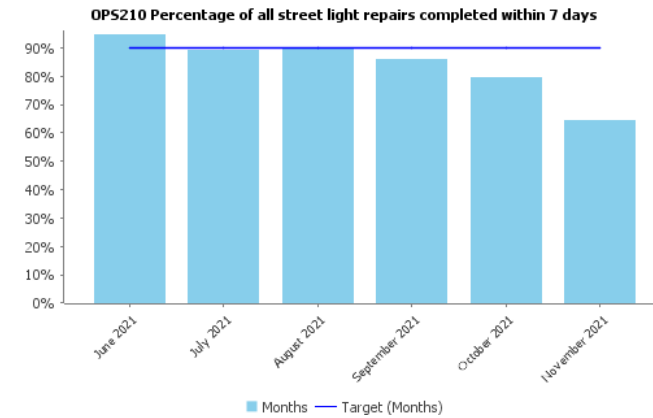
Doug Ritchie

Last Updated:

Q2 2021/22

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Percentage of all streetlight repairs completed within 7 days



Why is this important?

This indicator, along with others, monitors whether we are achieving our desired outcome of 'Improving Customer Experience', as outlined in the Shaping Aberdeen programme.

Benchmark Information:

Benchmarking against the figure of 77.27% for the same period in November of 2020, initially the figure of 64.5% appears slightly disappointing. There has been a large rise in numbers of faults reported from 195 in Oct to 516 in Nov which has unfortunately coincided with a combination of extreme weather and restricted numbers of vehicles available to our operatives. This however is perceived as a temporary setback and figures are expected to return to their projected levels over the next few months.

Target:

The target for this indicator for 2020/21 was set at 90% and has been maintained at that level for 2021/22.

This is what the data is saying:

There has been solid performance of 80% or above since the start of the financial year, with the average being 81% of repairs completed within timescale for the year to date.

This is the trend:

The overall trend continues to move in a positive direction and is projected to stabilise at or above the target figure of 90% in the coming months.

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This is the impact:

Over the last year, there has been a noticeable decrease in the number of reports coming through the Firmstep system regarding outstanding faults and additionally a decrease in the number of complaints this department has received which is highly encouraging. Unfortunately, during November, however, there was a significant peak in the number of reported faults, up to 516, when compared to the monthly average of 230. This uptick in the number of faults reported combined with ongoing issues around the availability of your fleet of Mobile Elevated Work Platforms has resulted in a lower than anticipated performance result. In addition to this, winter maintenance has understandably taken precedence over street lighting repairs on 19 available days through the month. Finally, on the 25th November, Storm Arwen hit Aberdeen and it was therefore not possible to carry out repairs due to high winds for 4 consecutive days.

These are the next steps we are taking for improvement:

A number of meetings have been held with the Fleet service to improve the availability of fleet items which will assist with maintaining performance. Fleet are actively sourcing alternative suppliers of the vehicle types required to support the delivery of this service. If fault numbers remain high in January consideration will be given to employing additional resources to maintain the level of service expected and this will be reviewed weekly.

Responsible officer:

George Collie

Last Updated:

November 2022

Waste Services

1. Customer - Waste

Performance Indicator	Q4 2020/21		Q1 2021/22		Q1 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received - Waste	28		19		46		
% of complaints resolved within timescale - Waste	85.7%		73.7%		80.4%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Waste	92.9%		63.2%		67.4%		
Total No. of lessons learnt identified (stage 1 and 2) - Waste	2		1		5		

2. Processes – Waste










Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
*% Waste diverted from Landfill	87.6%		88.5%		85.3%		85%
*Percentage of Household Waste Recycled/Composted	44.5%		46.3%		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	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - Waste)	2		0		0		
Accidents - Non-Reportable - Employees (No in Quarter - Waste)	7		0		6		

Appendix A






















Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence - Average Number of Days Lost - Waste	11.2		11.1		11		10
Establishment actual FTE	188.52		188.2		188.98		
Staff Costs - % Spend to Date (FYB)	50.9%		58.8%		66.9%		100%

4. Finance & Controls – Waste


































Customer













Customer Experience

1. Customer – Customer Experience

Performance Indicator – Corporate	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total number of Stage 1 complaints	251		208		345		
The number of complaints closed at Stage 1 within 5 working days as % of total no of Stage 1 complaints	74.5%		75%		65.8%		75%
Total number of Stage 2 complaints	36		36		36		
The number of complaints closed at Stage 2 within 20 working days as % of total no of Stage 2 complaints	63.89%		55.56%		30.56%		75%
Total number Escalated Stage 2 complaints	26		28		36		
The number of complaints closed at Escalated Stage 2 within 20 working days as % of total no of Stage 2 complaints	80.77%		75%		55.56%		75%
No. of Non-complex Subject Access Requests received	24		81		56		

Appendix A

Performance Indicator – Corporate	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% Non-complex Subject Access Requests responded to within 1 month	66.7%		75.3%		75%		80%
No. of Complex Subject Access Requests received	5		4		3		
% Complex Subject Access Requests responded to within 3 months	40%		100%		100%		70%
No. of Environmental Information Regulation requests received	52		91		107		
% of Environmental Info Requests replied to within 20 working days - Corporate	84.6%		93.4%		92.5%		85%
No. of Freedom of Information requests received	253		234		226		
% of Freedom of Information requests replied to within 20 working days - Corporate	80.6%		92.7%		88.5%		85%
No. of Access to School Records requests received	3		2		3		
% Access to School Records requests responded to within 15 school days	100%		100%		100%		100%
No. of Data Protection Right requests received	6		4		6		
% Data Protection Right requests responded to within 1 month	83.3%		100%		50%		100%

Performance Indicator – Service	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received – Customer Experience	65		77		94		
% of complaints resolved within timescale – Customer Experience	86.2%		90.9%		75.5%		75%
% of complaints with at least one point upheld (stage 1 and 2) – Customer Experience	61.5%		39%		43.6%		
Total No. of lessons learnt identified (stage 1 and 2) – Customer Experience	8		6		4		

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2. Processes – Customer Experience

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 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)	8.86		9.05		Data not available		12
Correct amount of Housing Benefit paid to customer (monthly)	97.98%		97.7%				95%
% Customer Contact Centre calls answered within 60 seconds	75.64%		76.36%		76.55%		70%
Percentage of invoices sampled and paid within 30 days	92.54%		86.97%		Data not available		90%

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% Crisis Grant applications processed within 2 working days	90.82%		92.73%		93.16%		90%
% Community Care Grant applications processed within 15 working days	50.24%		58.44%		83.22%		50%

3. Staff – Customer Experience

Performance Indicator	Q4 2020/21		Q1 2020/21		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter – Customer Experience)	1		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Customer Experience)	0		1		1		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost – Customer Experience	2		1.9		2		5
Establishment actual FTE	306.26		314.79		324.91		

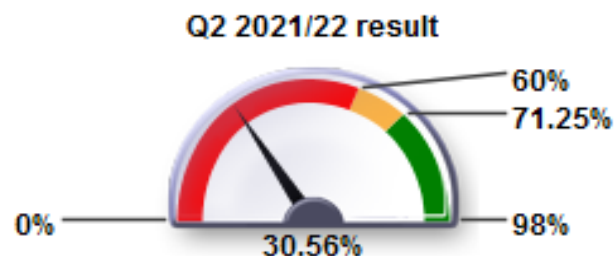
Appendix A

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Staff Costs - % Spend to Date (FYB)	49.8%		58.2%		64.3%		100%

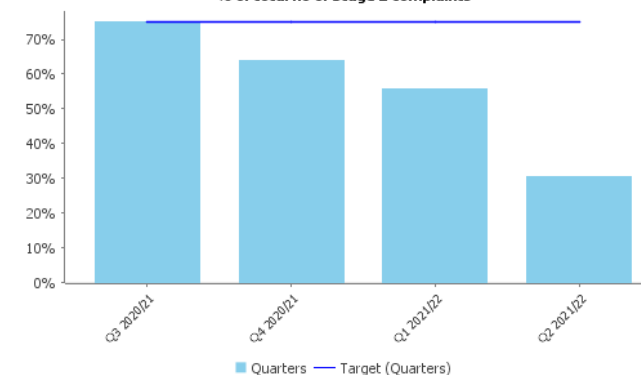
4. Finance & Controls – Customer Experience

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Council Tax Cash Collected (In Year) - monthly	£72.3m		£83.5m		£94.9m		£96m

The number of complaints closed at Stage 2 within 20 working days as % of total no of Stage 2 complaints



Com010.001 Corp The number of complaints closed at Stage 2 within 20 working days as % of total no of Stage 2 complaints



Why is this important?

Complaint handling is a statutory requirement. Like all Local Authorities, we follow the Model Complaints Handling Procedure set out by the Scottish Public Services Ombudsman (SPSO). This includes the timescales for response which we aim to meet wherever possible. This SPI is most closely linked to the Prosperous People Theme within the Local Outcome Improvement Plan as the effective handling of complaints ensures that people are supported appropriately when and if necessary.

Benchmark Information:

No benchmarking from other Local Authorities is available.

Target:

The target for 2021/22 has been set as 75% of all complaints responded to within timescale (5 working days for stage 1 complaints and 20 working days for stage 2 complaints). There is no target set for the identification of lessons learnt or the percentage of upheld / not upheld complaints.

This is what the data is saying:

During quarter 3 of 2021/22 36 stage 2 complaints were received. Of these, just 12 were responded to within the set timescale of 20 days, resulting in an outcome of 30.56% for the period.

Appendix A

This is the trend:

Following a high of 75% during Q3 of 2020/21, performance for this measure has fallen in every quarter to its current level (63.89% in Q4 of 20/21 and 55.56% in Q1 of 21/22). During the past 12 months, there have been an average of 33 stage 2 complaints in each quarter with an average of 18 responded to on time, or 54.54%.

This is the impact:

Some of the consequences of this performance are:

- An inconsistent customer experience
- Some customers 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 and addressed with services. Please refer to the drill downs for specific service areas for analysis on this matter and service improvement plans.

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.

The data for Q3 to date indicates that performance has improved to around 53% which is a significant improvement although still below target.

Responsible officer:







Lucy McKenzie

Last Updated:




Q2 2021/22

Data and Insights







1. Customer – Data and Insights

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received – Data and Insights	0		1		0		
% of complaints resolved within timescale – Data and Insights	No complaints Q4		100%		No complaints Q2		75%
% of complaints with at least one point upheld (stage 1 and 2) – Data and Insights			0%				
Total No. of lessons learnt identified (stage 1 and 2) – Data and Insights			0				










2. Processes – Data and Insights

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
% Reported Data Protection incidents receiving an initial response within 24 business hours	100%		100%		100%		95%

3. Staff – Data and Insights

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 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		













Appendix A







Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost – Data and Insights	0.03		0.03		0.06		5
Establishment actual FTE	28.09		28.09		28.62		
Staff Costs - % Spend to Date (FYB)	42.4%		49.5%		56.6%		100%

4. Finance & Controls – Data and Insights













Digital and Technology

1. Customer – Digital and Technology







Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2020/21		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received – Digital and Technology	1		1		5		
% of complaints resolved within timescale – Digital and Technology	0%		100%		100%		75%
% of complaints with at least one point upheld (stage 1 and 2) – Digital and Technology	0%		0%		0%		
Total No. of lessons learnt identified (stage 1 and 2) – Digital and Technology	0		0		1		










Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Average Call Wait Time (IT Helpdesk)	232secs		176secs		131secs		150 sec.
Abandonment Rate % (IT Helpdesk)	37.36%		29.78%		29.93%		30%

2. Processes – Digital and Technology

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Percentage of Critical system availability - average (monthly)	99.5%		99.5%		99.5%		99.5%
% Incidents logged by IT Helpdesk (including Self-Serve) resolved right first time	75.3%		72.2%		79.9%		65%
% Priority 1 and 2 incidents closed in timescale	60%		100%		60%		99.5%
% Priority 3 – 5 incidents closed in timescale	76%		73.8%		78.2%		95%

3. Staff – Digital and Technology

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 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	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost – Digital and Technology	0.9		0.9		0.8		5
Establishment actual FTE	88.48		88.48		88.55		
Staff Costs - % Spend to Date (FYB)	49.8%		58.2%		66.5%		100%

4. Finance & Controls – Digital and Technology

Early Intervention and Community Empowerment

1. Customer – Early Intervention and Community Empowerment

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Total No. complaints received – Early Intervention and Community Empowerment	62		53		67		
% of complaints resolved within timescale - Early Intervention and Community Empowerment	80.6%		88.7%		70.1%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Early Intervention and Community Empowerment	29%		15.1%		32.8%		
Total No. of lessons learnt identified (stage 1 and 2) - Early Intervention and Community Empowerment	0		4		3		

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2020/21 Target
	Value	Status	Value	Status	Value	Status	
Percentage of tenants satisfied with the standard of their home when moving in YTD	71.6%		68.9%		70.1%		75%
Satisfaction of new tenants with the overall service received (Year To Date)	80.2%		77.8%		77.3%		85%
Financial Inclusion - No of open cases per month	119		116		133		
Financial Inclusion - No of enquiries per month	145		132		126		
Number of visits to libraries - person	16,899		16,899		16,785		
Number of visits to libraries - virtual	99,556		99,888		Data not available		
*% Libraries open during agreed opening hours	100%		100%		100%		98%

*Reinstatement of services has continued to progress throughout the quarter with Cults and Cornhill libraries opening two days per week from 6 October. Bucksburn Library reinstated face-to-face services on 9 November, three days per week. Torry and Ferryhill Libraries opened for Click and Collect two days per week from 6 October. The first in person event outside Bookbug was held safely on 15 November.

2. Processes – Early Intervention and Community Empowerment

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 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)	3.1%		3.1%		3.1%		4.0%
YTD % of Unintentional homeless decisions reached within 21 Days	96%		94%		94%		100%
YTD Average length of journey in days for applicants assessed as unintentionally homeless	113.2		112.1		108.7		100
YTD Percentage of anti-social behaviour cases reported which were resolved	93.2%		94.1%		92%		100%
YTD % of calls attended to by the ASBIT Team within 1 hour	98.1%		98.4%		98.4%		100%
Number of Statutory Homeless Households Residing in Temporary Accommodation at Month End	237		240		229		
The YTD number of Legal reposessions following decree (Arrears) - Citywide	0		2		18		
Applications processed 28 days YTD %	100%		100%		100%		100%
Statutory Customer Service Actions - Decisions/Outcomes within statutory timescale	90.4%		91.2%		91%		100%
New Tenants Visits YTD – Outcomes completed within locally agreed timescales (Citywide)	85.3%		85.1%		85.2%		93.5%
*The YTD Average time taken to re-let all properties (Citywide - days)	101.7		102.2		98.8		100.9
*Voids Available for Offer Month Number - Citywide	680		785		900		
Welfare Rights - % of Successful Appeals	50%		100%		100%		
HMO License Applications Pending	177		166		146		
HMO Licenses in force	1,072		1,070		1,086		
% Library item requests satisfied within 21 days	74.7%		65.7%		76.5%		85%

3. Staff – Early Intervention and Community Empowerment

Performance Indicator	Q4 2020/21		Q1 2021/22		Q2 2021/22		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Accidents - Reportable - Employees (No in Quarter - EICE)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – EICE)	1		1		0		





Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Sickness Absence – Average Number of Days Lost - EICE	7		6.9		7.1		8
Establishment actual FTE	368.38		367.59		372.28		
Staff Costs - % Spend to Date (FYB)	33.8%		39.4%		45.7%		100%

4. Finance & Controls – Early Intervention and Community Empowerment

Performance Indicator	Sept 2021		Oct 2021		Nov 2021		2021/22 Target
	Value	Status	Value	Status	Value	Status	
Financial Inclusion - Total Financial Gains Achieved per month	£277,259		£270,389		£259,694		
Gross rent Arrears as a percentage of Rent due	12.33%		12.95%		13.34%		11.5%
*Rent loss due to voids - Citywide - YTD average	2.95%		3.02%		3.19%		2.08%

*For all measures related to voids, please see relevant Void Properties Report CUS/22/002 for further detail

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