Operational Delivery Committee Performance Report Appendix A

Operations and Protective Services

Building Services

1. Customer - Building Services

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| The year to date percentage of repairs appointments kept | 99.44% | Ø | 99.29% | Ø | 99.27% | Ø | 96.3% | |
| Percentage of tenants who have had repairs or maintenance carried out in the last 12 months satisfied with the repairs and maintenance service (year to date). | 91.49% | Ø | 89.22% | Ø | 89.02% | Ø | 80% | |

| Performance Indicator | Q2 2020/2 | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|------------------------------------------------------------------------------------|-----------|------------|-------|------------|-------|------------|--------|
| | Value | Status | Value | Status | Value | Status | Target |
| Total No. complaints received (stage 1 and 2) - Building Services | 22 | | 47 | | 59 | | |
| % of complaints resolved within timescale stage 1 and 2) - Building Services | 50% | | 23.4% | | 42.4% | | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) - Building Services | 21.4% | | 31.9% | | 33.9% | | |
| *Total No. of lessons learnt identified (stage 1 and 2) - Building Services | 1 | | 0 | | 3 | ~ | |

^{*}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 | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|---------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target | |
| The year to date average length of time taken to complete emergency repairs (hrs) | 4.18 | ② | 4.19 | ② | 4.04 | ② | 4.1 | |
| The year to date average length of time taken to complete non-emergency repairs (days) | 6.17 | ② | 5.77 | ② | 5.18 | ② | 8.3 | |
| The year to date percentage of reactive repairs carried out in the last year completed right first time | 92.09% | ② | 92.07% | ② | 92.01% | ② | 93.6% | |
| The percentage of Repairs Inspections completed within 20 working day target (year to date) | 93.3% | | 94.4% | | 95.2% | Ø | 100% | |
| YTD % of ROUT Void Path Maintenance Completed Within Timescale | 14.1% | | 14.3% | | 14.2% | | 100% | |
| YTD % Death Voids Path Maintenance Completed within Timescale | 31.8% | | 31.1% | | 28% | | 100% | |
| YTD % Major Works Void Path Maintenance Completed within Timescales | 10.5% | | 14.3% | | 13% | | 100% | |

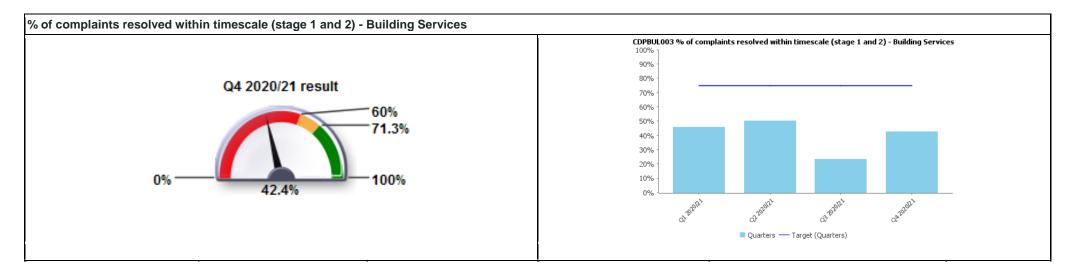
3. Staff - Building Services

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - Building Services) | 0 | | 0 | | 3 | | |
| Accidents - Non-Reportable - Employees (No in Quarter - Building Services) | 3 | | 1 | | 4 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|---------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| *Sickness Absence - Average Number of Days Lost - Building Services | 3.6 | Ø | 3.5 | Ø | 3.4 | Ø | 10 | |
| Establishment actual FTE | 421.99 | | 421.31 | - | 421.33 | 40 | | |
| Staff Costs - % Spend to Date (FYB) | 78.5% | ② | 86.6% | ② | 94.9% | ② | 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



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 2020/21 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 Q4, 42.4% of complaints relating to Building Services were responded to within the agreed timescale.

This is the trend:

The data indicates a 19% increase on the previous quarter targeting steady improvement.

This is the impact:

Some of the consequences of this performance are:

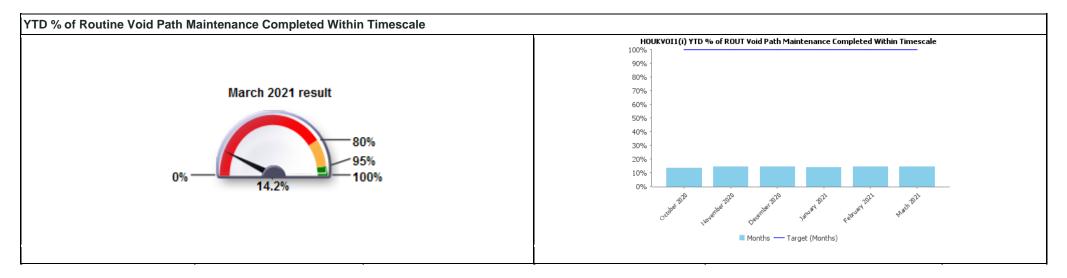
- An inconsistent customer experience
- Some customers are experiencing a longer wait than originally advised, potentially resulting in poorer customer satisfaction levels.

These are the next steps we are taking for improvement:

Necessary adjustments in 2020/21 created new challenges which had an impact on performance, but the commitment remains to achieve the agreed targets. Activities to improve performance are now in place to ensure we return our complaints handling to our previous performance levels and aim to achieve our target of 75%. This includes:-

- Reinforcing the importance of capturing complaints and providing response within timescale across all teams.
- Additional monitoring to identify poorer performing teams and support from the Customer Feedback Team and senior management provided to upskill and address any issues.

| Responsible officer: | Last Updated: |
|----------------------|---------------|
| Graham Williamson | Q4 2020/21 |



Why is this important?

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

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

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

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

Benchmark Information:

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

Target:

Targets 2020/21

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

This is what the data is saying:

The 2020/21 performance for those properties on a:

- Routine Void path is 14.2%
- Death Void path is 28%
- Major Works Void Path is 13.0%

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%
- Maior 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:

The Voids Improvement Plan was agreed in March 2020 and is led by Chief Officer (Early Intervention and Community Empowerment), supported by Corporate Landlord and Chief Officer (Operations and Protective Services). This is a corporate improvement project reporting to the new Improvement Board. Significant actions being implemented include:

- Maximise access to complete improvement works before the current tenant leaves, to achieve a reduction in time taken to repair major works during the void period.
- New digital procedure for undertaking property standards checks prior to offer being made to new tenant. This improves the understanding of the condition of properties at termination, therefore improving the planning of repairs required during void periods.
- Temporary reallocation of Building Services resource, to join the Voids Repairs team, to increase capacity to return void properties for re-let.
- Completion of procurement for external contractors with an expected start of early June 2021, to supplement in-house teams and to increase capacity to return void properties for relet
- The challenge of Covid-19 limits efficiency due to managing risks, changes to process, material availability etc. but the focus to return voids for re-let remains high priority within the service. There are regular reviews of the initiatives in place to manage social distancing to meet Covid interventions and these are adjusted as the situation and restrictions change. Review of procedures and processes to maximise work in progress viewings for quicker reletting on completion of repair work.

Responsible officer: Last Updated:

Graham Williamson March 2021

Environmental Services

1. Customer – Environmental Services

| Performance Indicator | Q2 2020/21 | Q2 2020/21 | | | Q4 2020/21 | | 2020/21 | |
|------------------------------------------------------------------------------|------------|------------|-------|-----------|------------|----------|---------|--|
| | Value | Status | Value | Value | Status | Value | Target | |
| Total No. complaints received (stage 1 and 2) - Environment | 21 | | 14 | | 10 | | | |
| % of complaints resolved within timescale (stage 1 and 2) - Environment | 81% | ② | 71.4% | ② | 80% | ② | 75% | |
| % of complaints with at least one point upheld (stage 1 and 2) - Environment | 66.7% | | 42.9% | ** | 40% | ~ | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Environment | 0 | | 1 | | 0 | | | |

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 | | |
|---------------------------------------------------------------------------------------|----------------|--------|----------------|-------|------------|-------|---------|----------|--|
| | Value | Status | Value | Value | Status | Value | Target | | |
| Number of Partners / Community Groups with links to national campaigns - Green Thread | No activity Q2 | | No activity Q2 | | 168 | | No acti | ivity Q4 | |

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2019/20 |
|-------------------------------------------------------------------------------|---------|----------|---------|----------|---------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *% of adults satisfied with street cleaning (three year rolling figure) | 68% | | 65.3% | ② | 60% | ② | 62.6% |
| *% of adults satisfied with parks and open spaces (three year rolling figure) | 87.7% | ② | 89.0% | Ø | 88.0% | Ø | 83.5% |

^{*}Target and status based on Scottish national average

2. Processes - Environmental Services

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|----------------------------------------------------------------------------------------------------------------|-------------------------|----------|----------|-------------|----------|----------|---------|--|
| Performance indicator | Value | Status | Value | Status | Value | Status | Target | |
| *Street Cleansing - LEAMS (Local Authority Environmental Audit Management System) (Conducted 3 times annually) | 95% No activity Feb-Mar | | | | | | 80% | |
| Grounds - LAMS (Land Audit Management System) | No activity Jan-Mar | | | | | | | |
| Number of Complaints upheld by Inspector of Crematoria | 0 | ② | 0 | | 0 | | 0 | |
| % Outdoor play areas visited, inspected, and maintained to national standards on a fortnightly basis | 100% | Ø | 100% | Ø | 100% | Ø | 100% | |
| % Water safety equipment inspected within timescale | 100% | | 100% | > | 100% | | 100% | |

3. Staff - Environmental Services

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - Environment) | 0 | | 0 | | 0 | | |
| Accidents - Non-Reportable - Employees (No in Quarter - Environment) | 3 | | 2 | | 2 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|----------------------------------------------------------------|----------|-------------|----------|----------|----------|-----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| Sickness Absence - Average Number of Days Lost - Environmental | 7.1 | > | 7 | | 7.1 | ② | 10 | |
| Establishment actual FTE | 312.58 | | 314.82 | | 315.06 | ** | | |
| Staff Costs - % Spend to Date (FYB) | 82.4% | ② | 90.7% | Ø | 98.9% | Ø | 100% | |

4. Finance & Controls - Environmental Services

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2018/19 |
|--------------------------------------------------------|------------|----------|------------|----------|---------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *Cost of Parks and open spaces per 1,000 of population | £12,465.00 | ② | £11,764.00 | ② | £12,918 | ② | £20,103 |
| *Net Cost of street cleaning per 1,000 of population | £9,257.00 | ② | £9,571.00 | ② | £7,784 | Ø | £15,440 |

^{*}Target and status based on Scottish national average

N.B. Cost related data is published by the Local Government Benchmarking Framework group prior to completion of the validation auditing of Local Finance Return submissions and release of Scottish Local Government Finance Statistics for 2019-20 and is subject to the document revision policies of the data owners, the Scottish Government's Local Government and Communities Directorate (refers to all annual cost based measures in this Appendix).

Facilities Management

1. Customer - Facilities Management

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 | |
|-----------------------------------------------------------------------------|------------|----------|------------|-------|------------|-------|---------|--|
| | Value | Status | Value | Value | Status | Value | Target | |
| Total No. complaints received (stage 1 and 2) - Facilities | 7 | | 1 | | 1 | | | |
| % of complaints resolved within timescale (stage 1 and 2) - Facilities | 71.4% | ② | 100% | | 0% | | 75% | |
| % of complaints with at least one point upheld (stage 1 and 2) - Facilities | 5 | | 0 | | 0% | | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Facilities | 1 | | 0 | | 0 | | | |

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | Target |
|-------------------------------------------------------------|------------|--------|------------|--------|------------|--------|-----------|
| | Value | Status | Value | Status | Value | Status | 2020/21 |
| Number of school lunches served in the year - Primary (YTD) | 139,265 | | 460,774 | | 592,653 | | 1,047,651 |

Performance Indicator Current Status Current Status 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

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 | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 |
|----------------------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| % Fly tipping alerts at housing multi-storey blocks responded to within 48 hours | 95.5% | Ø | 98.3% | Ø | 97% | Ø | 95% |
| % Response cleaning alerts responded to within priority timescales | 100% | Ø | 95.2% | ② | 96.8% | ② | 95% |
| % Void cleaning alerts responded to within priority timescales | 100% | Ø | 85.7% | | 100% | ② | 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 | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Month - Quarter) | 0 | | 1 | | 1 | | |
| Accidents - Non-Reportable - Employees (No in Month - Quarter) | 3 | | 3 | | 3 | | |

| Performance Indicator | Jan 2021 | Jan 2021 | | Feb 2021 | | Mar 2021 | |
|-------------------------------------------------------------|----------|----------|--------|----------|--------|----------|--------|
| Performance indicator | Value | Status | Value | Status | Value | Status | Target |
| Sickness Absence - Average Number of Days Lost - Facilities | 9.1 | ② | 8.7 | ② | 8.4 | ② | 10 |
| Establishment actual FTE | 485.11 | | 481.7 | | 482.31 | | |
| Establishment actual FTE (Cleaning) | 223.53 | | 222.19 | | 222 | | |
| Establishment actual FTE (Janitorial) | 52.16 | | 51.14 | | 51.36 | | |
| Staff Costs - % Spend to Date (FYB) | 85.5% | | 93.9% | | 99.7% | ② | 100% |

4. Finance & Controls - Facilities Management

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 |
|-----------------------------------------------------------------------------|----------|--------|----------|--------|----------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *Inspection - Number of overdue corrective actions requests as at month end | 1 | | 1 | | 0 | ② | 0 |

Fleet and Transport

1. Customer – Fleet and Transport

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|------------------------------------------------------------------------|------------|----------|------------|-------|------------|-------|---------|
| renormance indicator | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received (stage 1 and 2) - Fleet | 1 | | 0 | | 0 | | |
| % of complaints resolved within timescale (stage 1 and 2) - Fleet | 100% | ② | No | 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 | Q2 2020/2° | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|---------------------------------------------------|------------|------------|-------|------------|--------|------------|--------|
| renormance mulcator | Value | Status | Value | Value | Status | Value | Target |
| % HGV's achieving first time MOT pass | 83.3% | | No te | sts Q3 | 87.5% | | 100% |
| % Light Vehicles achieving first time MOT pass | 87.5% | | 90.9% | | 94.7% | | 100% |
| % of Council fleet - alternative powered vehicles | 7.6% | | 7.8% | | 8.2% | | 100% |
| % of Council fleet lower emission vehicles (YTD) | 96.8% | Ø | 85.2% | | 85.5% | | 100% |

3. Staff – Fleet and Transport

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - Fleet) | 0 | | 0 | | 1 | | |
| Accidents - Non-Reportable - Employees (No in Quarter - Fleet) | 1 | | 0 | | 1 | | |

Appendix A

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 Target | |
|--------------------------------------------------------|----------|----------|----------|----------|----------|----------|----------------|--|
| Performance indicator | Value | Status | Value | Status | Value | Status | 2020/21 Target | |
| Sickness Absence - Average Number of Days Lost - Fleet | 1.9 | | 2.4 | ② | 3.1 | | 10 | |
| Establishment actual FTE | 35.6 | <u>~</u> | 35.6 | | 35.6 | | | |
| Staff Costs - % Spend to Date (FYB) | 82.7% | ② | 91% | ② | 99.2% | ② | 100% | |

4. Finance & Controls – Fleet Transport

| Dayformone Indicator | Q2 2020/ | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|----------------------------------------------------------------------------------|----------|------------|-------|------------|-------|------------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| Fleet Management - First Use Check Exceptions (Environmental) - Year to date | 19 | | 34 | | 39 | | 30 |
| Fleet Management - First Use Check Exceptions (Fleet) - Year to date | 0 | ② | 0 | Ø | 0 | Ø | 4 |
| Fleet Management - First Use Check Exceptions (Roads) – Year to date | 0 | ② | 2 | Ø | 6 | | 4 |
| Fleet Management- First Use Check Exceptions (Waste) – Year to date | 6 | ② | 10 | Ø | 12 | ② | 35 |
| Unreported Vehicle, Plant and Equipment Accidents (Environmental) - Year to date | 3 | ② | 3 | Ø | 3 | ② | 16 |
| Unreported Vehicle, Plant and Equipment Accidents (Roads) - Year to date | 0 | ② | 0 | Ø | 1 | ② | 4 |
| Unreported Vehicle, Plant and Equipment Accidents (Waste) - Year to date | 4 | ② | 4 | ② | 4 | ② | 30 |

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|-----------------------------------------------------------------------------|------------|--------|------------|--------|------------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Fleet Services - % of LGV/ Minibuses/ Small Vans Vehicles under 5 years old | 74.21% | | 65.54% | | 78.33% | ② | 80% |
| Fleet Services - % of large HGV vehicles under 7 years old | 70.63% | | 62.69% | | 69.57% | | 80% |

Integrated Children's Services (excluding Education)

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

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------------|------------|--------|------------|-------|------------|-------|---------|
| Performance mulcator | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received (stage 1 and 2) - CSW | 7 | | 11 | | 10 | | |
| % complaints resolved within timescale (stage 1 and 2) - CSW | 42.9% | | 63.6% | | 70% | | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) - CSW | 14.3% | | 16.7% | | 10% | | |
| Total No. of lessons learnt identified (stage 1 and 2) - CSW | 0 | | 0 | | 0 | | |

| Desferonce to director | Q2 2020/2 | Q2 2020/21 Q3 20 | | | 1 | 2020/21 | |
|------------------------------------------------------------------------------------------------------------------------|-----------|------------------|-------|----------|-------|----------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| % Care provided in Council children's homes, fostering and adoption services achieve a care standard of good or better | 100% | Ø | 100% | Ø | 100% | ② | 100% |
| LAC looked after in a residential placement in Aberdeen City (%) | 3.9% | ② | 4.2% | ② | 4.7% | ② | 5% |
| LAC looked after in a residential placement out with Aberdeen City (%) | 6.6% | | 6.6% | | 6.4% | | 6% |
| Looked After Children looked after at home (%) | 21.2% | > | 19.3% | | 19.7% | | 26% |
| Looked After Children looked after in Kinship (%) | 18.0% | | 19.4% | | 20.3% | | 28% |
| Looked After Children looked after in Foster Care (%) | 47% | | 46.7% | | 44.8% | | 34% |

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

| Professional Indicators | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/2 ⁻ | I | 2020/21 |
|----------------------------------------------------------------------------------------------------------------|------------|----------|--------------|----------|------------------------|----------|---------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| % Child Protection joint interviews completed within 5 days | | Data no | ot available | | 89.5% | | 100% |
| % Initial child protection conferences held within 21 days | 70% | | 64% | | 60% | | 100% |
| % Child Protection Case Conference decisions issued to families within 24 hours | 98.7% | ② | 98.8% | ② | 100% | ② | 95% |
| % Child Protection Plans issued within 5 calendar days | 46.2 | | 40.2% | | 42.6% | | 95% |
| % Care experienced children and young people with 2 or more consecutive placements away from home in 12 months | 17% | Ø | 19% | ② | 16% | Ø | 30% |
| % Care experienced children and young people with a pathway plan by age 15 | 100% | Ø | 100% | Ø | 100% | ② | 100% |
| % Foster carers and adopters approved within a timescale of 6 months from application | 100% | Ø | 25% | • | 4.35% | • | 100% |

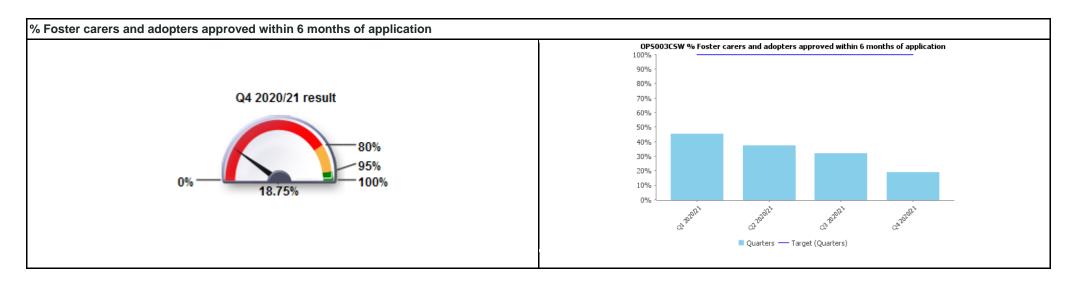
3. Staff - Integrated Children's Services (ex-Education)

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | 2020/21 | |
|--------------------------------------------------------------|------------|--------|------------|--------|------------|---------|--------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - CSW) | 0 | | 0 | | 0 | | |
| Accidents - Non-Reportable - Employees (No in Quarter - CSW) | 0 | | 0 | | 0 | | |

| | Jan 2021 | | Feb 2021 | | Mar 2021 | 2020/21 | |
|------------------------------------------------------|----------|----------|----------|----------|----------|----------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| Sickness Absence - Average Number of Days Lost - CSW | 3.7 | ② | 3.9 | Ø | 4.3 | Ø | 5 |
| Establishment actual FTE | 352.59 | | 350.93 | | 347.55 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | 2020/21 | |
|-------------------------------------|----------|-------------|----------|--------|----------|----------|--------|
| | Value | Status | Value | Status | Value | Status | Target |
| Staff Costs - % Spend to Date (FYB) | 83.3% | > | 91.7% | | 100% | ② | 100% |

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



Why is this important?

The recruitment of foster carers and adopters is important to ensure that we enable children, who cannot be looked after by their families, to remain local to their communities and relationships that are important to them and to minimise the cost to the Local Authority.

Benchmark Information:

There is no local or national benchmarking data to be drawn on.

Target:

The target of 100% was identified to reflect agreed National Standards. The Standards recognise that for some the assessment timeframe will need to reflect their lived experiences and current circumstances. As such there will always be circumstances which necessitate an assessment exceedingly the 6-month time frame. Such instances should be kept to a minimum and agreed on an individual basis with the prospective carers. Accordingly, and having reviewed this target it is proposed to vary the target to 75%.

Locally given the implications of working in the Oil and Gas sector this can mean individuals working away from home for extended periods of time. This impacts on their availability to undertake the assessment. The service has increasingly embraced the use of technology over the course of the past year to engage with prospective carers to limit the impact of such working arrangements.

The undertaking of an assessment requires input from medical professionals. Due to the COVID pandemic many of the medical staff involved in such have been moved to other roles. The delays in completing medical assessments have contributed to noted performance. Similarly, the restrictions imposed by lockdown have limited the ability of social work staff to undertake aspects of the assessment which require to be done in person and by visiting the prospective carers home.

The service has and continues to experience staffing challenges, which has impacted on the services capacity to complete the assessments within the noted timescale. While there has been some limited success in addressing this recruitment challenge, it will take time for these new staff members to be supported to grow and develop into this role. The recruitment of suitably qualified social work staff however remains a challenge and something we are working with RGU to address.

The staff who undertake adoption and fostering assessments are also responsible for completing Court mandated adoption reports. These often have a tight legal deadline and as such require to be prioritised impacting on other work.

This is what the data is saying:

The data is reflecting performance for past quarter has, for the reasons noted above dropped. While there have been some positive steps taken to mitigate these, it is acknowledged that it will take some time to work through the delays and complete the delayed assessments.

This is the trend:

The trend is not a positive one and one the Service Manager is actively tracking with the relevant managers. Where it is identified delays are at risk of arising and the responsibility for such sits with the Service then exploration is given to the flexible use of staff/resources to address this. However, where the delay is due to the circumstances of the prospective carers there are limits as to what the service can do.

This is the impact:

The impact of the delay in completing these assessments placed increased risk of children being placed out with the city and further from their communities and relationships that are important to them. It also potentially places financial pressures on the service of either children remaining within the "system" longer than necessary or adding to the financial costs experienced.

These are the next steps we are taking for improvement:

The service is currently undertaking 17 assessments of prospective adopters or foster carers. Many remain on track for completion within the agreed timescale. There are others where delays are anticipated. The team manager and service manager are working closely to track each assessment to understand the reasons for potential delay and what further mitigation can be put in place to address.

Responsible officer: Last Updated:

Graeme Simpson Q4 2020/21

Protective Services

1. Customer - Protective Services

| Performance Indicator | Q2 2020/2 | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|--------------------------------------------------------------------------------------|-----------|------------|-------|------------|--------|------------|--------|
| Performance indicator | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received - Protective Services | 5 | | 2 | | 1 | | |
| % of complaints resolved within timescale - Protective Services | 80% | ② | 50% | | 100% | ② | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) - Protective Services | 0% | | 0% | | 0% | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Protective Services | 0 | | 0 | | 0 | | |

2. Processes - Protective Services

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 |
|----------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|
| Performance indicator | Value | Status | Value | Status | Value | Status | Target |
| Non-Domestic Noise % responded to within 2 days | 97.7% | | 100% | | 95.1% | ② | 100% |
| High Priority Pest Control % responded to within 2 days | 100% | ② | 100% | ② | 100% | Ø | 100% |
| High Priority Public Health % responded to within 2 days | 96.4% | ② | 98% | ② | 98.4% | ② | 100% |
| Dog Fouling - % responded to within 2 days | 100% | ② | 100% | ② | 100% | ② | 100% |

| Deufenmen en la dicetor | Q2 2020/2 | 1 | Q3 2020/21 | | Q4 2020/2 | 2020/21 | |
|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------|--------------|-------|-----------|---------|--------|
| Performance Indicator | Value | Status | Value | Value | Status | Value | Target |
| % of registered tobacco retailers visited to give Business Advice on compliance with tobacco legislation - Year to Date | No activity in Q2/3 | | | | 3.75% | | |
| % of registered tobacco retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date | No activity | | | | | | |
| % of registered Nicotine Vapour Products retailers visited to give Business Advice on compliance with legislation - Year to Date | | No activ | rity in Q2/3 | 7.9% | | | |
| % of registered Nicotine Vapour Products retailers subjected to Test Purchasing for retailer compliance with age restrictions - Year to Date | No activity | | | | | | |
| % of Samples reported within specified turnaround times (Aberdeen Scientific Services Laboratory) | 85.2% | Ø | 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 | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | 2020/21 | |
|-------------------------------------------------------------------------------|------------|--------|------------|--------|------------|---------|--------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No. In Quarter - Protective Services) | 0 | | 0 | | 0 | | |
| Accidents - Non-Reportable - Employees (No. In Quarter - Protective Services) | 2 | | 0 | | 1 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|----------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| Sickness Absence - Average Number of Days Lost - Protective Services | 1.4 | Ø | 1.2 | ② | 1 | ② | 10 | |
| Establishment actual FTE | 62.41 | | 63.51 | | 63.2 | | | |
| Staff Costs - % Spend to Date (FYB) | 82.7% | ② | 91% | ② | 97.9% | ② | 100% | |

4. Finance & Controls - Protective Services

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|-------------------------------------------------------------------------------------------------------------------|------------|----------|------------|----------|------------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| % of External Quality Assurance reported results that were satisfactory (Aberdeen Scientific Services Laboratory) | 95.2% | Ø | 92.8% | Ø | 100% | Ø | 95% |

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2019/20 |
|---------------------------------------------------------------------------------|---------|--------|---------|----------|---------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *Cost of trading standards, money, and citizen's advice per 1,000 of population | £6,316 | _ | £5,229 | ② | £5,103 | ② | £5,952 |
| *Cost of environmental health per 1,000 of population | £20,411 | | £15,231 | ② | £16,307 | | £13,771 |

^{*}Target and status based on Scottish national average

1. Customer - Roads

| Performance Indicator | Q2 2020/2° | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|------------------------------------------------------------------------|------------|------------|-------|------------|--------|------------|--------|
| | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received - Roads | 34 | | 40 | | 70 | | |
| % of complaints resolved within timescale - Roads | 61.8% | _ | 50% | | 82.9% | ② | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) - Roads | 52.6% | | 65% | | 15.7% | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Roads | 1 | | 2 | | 1 | | |

2. Processes - Roads

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|---------------------------------------------------------------------|----------|--------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| Percentage of all streetlight repairs completed within 7 days | 64.77% | | 87.8% | ② | 91.45% | Ø | 90% | |
| Number of Street Light Repairs completed within 7 days | 114 | | 288 | | 556 | 4 | | |
| Potholes Category 1 and 2 - % defects repaired within timescale | 49.74% | | 67.28% | | 91.79% | ② | 95% | |
| Potholes Category 1 and 2 - No of defects repaired within timescale | 568 | | 728 | | 1,085 | | | |

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | 2019/20 | |
|---------------------------------------------------------------------------------|---------|----------|---------|--------|---------|---------|--------|
| | Value | Status | Value | Status | Value | Status | Target |
| Percentage of A class roads that should be considered for maintenance treatment | 22.6% | Ø | 24.8% | | 23.4% | | 30.6% |

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2019/20 |
|--------------------------------------------------------------------------------------|---------|----------|---------|-------------|---------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Percentage of B class roads that should be considered for maintenance treatment | 22.45% | Ø | 20.9% | > | 23.27% | | 35.7% |
| Percentage of C class roads that should be considered for maintenance treatment | 27.42 | Ø | 26.37% | Ø | 22.97% | Ø | 35.14% |
| Percentage of unclassified roads that should be considered for maintenance treatment | 31.86% | Ø | 31.8% | ② | 37.83% | | 31.92% |

^{*}Target and status based on Scottish national average

3. Staff - Roads

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - Roads) | 1 | | 0 | | 0 | | |
| Accidents - Non-Reportable - Employees (No in Quarter - Roads) | 3 | | 0 | | 3 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|--------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| Sickness Absence - Average Number of Days Lost - Roads | 2.8 | Ø | 2.8 | Ø | 2.9 | Ø | 10 | |
| Establishment actual FTE | 158.46 | | 161.96 | | 162.6 | | | |
| Staff Costs - % Spend to Date (FYB) | 77.1% | Ø | 86.1% | ② | 95.2% | Ø | 100% | |

4. Finance & Controls - Roads

Waste Services

1. Customer - Waste

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 | |
|------------------------------------------------------------------------|------------|--------|------------|----------|------------|-------|---------|--|
| | Value | Status | Value | Value | Status | Value | Target | |
| Total No. complaints received - Waste | 75 | | 52 | | 28 | | | |
| % of complaints resolved within timescale - Waste | 76% | | 78.8% | Ø | 85.7% | | 75% | |
| % of complaints with at least one point upheld (stage 1 and 2) - Waste | 48.1% | | 63.5% | | 92.9% | | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Waste | 1 | | 6 | | 2 | | | |

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2019/20 |
|----------------------------------------------------------------------------|---------|----------|---------|----------|---------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *% of adults satisfied with refuse collection (three year rolling figure) | 81.67% | Ø | 83.03% | ② | 80.37% | ② | 74.30% |

^{*}Target and status based on Scottish national average

2. Processes - Waste

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|--------------------------------------------------|------------|----------|------------|----------|------------|----------|---------|
| | Value | Status | Value% | Value | Status | Value | Target |
| % Waste diverted from Landfill | 81.8% | ② | 86.9% | Ø | 87.6% | Ø | 85% |
| Percentage of Household Waste Recycled/Composted | 48.2% | Ø | 46% | | 44.5% | | 50% |

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

3. Staff - Waste

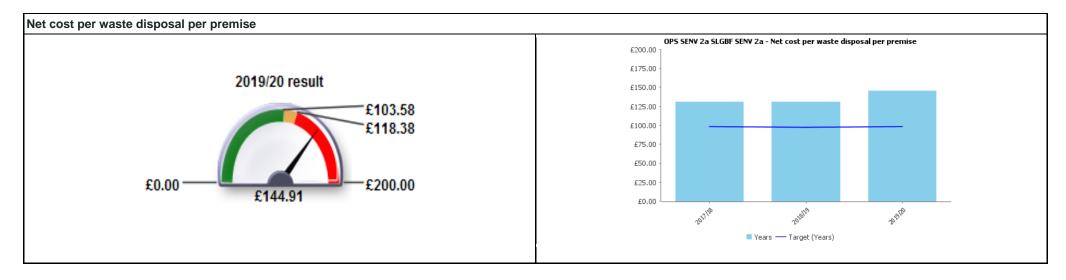
| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - Waste) | 0 | | 0 | | 2 | | |
| Accidents - Non-Reportable - Employees (No in Quarter - Waste) | 0 | | 2 | | 7 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|--------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| Sickness Absence - Average Number of Days Lost - Waste | 9.1 | | 9.5 | ② | 9.9 | Ø | 10 | |
| Establishment actual FTE | 191.97 | | 189.77 | | 186.85 | | | |
| Staff Costs - % Spend to Date (FYB) | 83.4% | Ø | 92% | Ø | 100.3% | Ø | 100% | |

4. Finance & Controls – Waste

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2019/20 |
|--------------------------------------------|---------|----------|---------|----------|---------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *Net cost per waste collection per premise | £55.61 | ② | £56.53 | ② | £48.87 | ② | £68.77 |
| *Net cost per waste disposal per premise | £130.39 | • | £130.86 | • | £144.91 | • | £98.65 |

^{*}Target and status based on Scottish national average



Why is this important?

Aberdeen City Council has a statutory function as Waste Disposal Authority meaning it is responsible for arranging the disposal of all controlled waste collected by the Waste Collection Authority (which is also ACC) in its area. This figure gives an overall indication of the cost of waste disposal per household for the authority.

Benchmark Information:

This is an extremely difficult area to benchmark. Waste disposal costs and activities vary greatly from area to area, for example, some authorities run waste disposal entirely as an in-house operation, others may contract it out, or partially contract it out. Similarly, what is included and defined as "waste disposal" may vary greatly – for example Aberdeen has two closed landfill sites within its area which it is responsible for ongoing monitoring and maintenance, some authorities may not have any. The costs of running Household Waste & Recycling Centres are included in this figure – level of provision of these, both in number and in quality, varies greatly from area to area depending on the geographical area, population and level of service provision of an authority. The figure is currently calculated by taking the waste disposal budget (which includes but is not limited to the Suez contract costs) and dividing it by the number of households.

Target:

The target figure given is the national average for 2019/20 taken from the Local Government Benchmarking Framework. This is not a target set locally and does not take account of Aberdeen's particular situation. It should be noted that the range of cost of disposal per premise nationally was between £44.57 and £198.21.

This is what the data is saying:

Aberdeen City Council sits towards the upper end of the table in terms of cost of waste disposal. Waste disposal in Aberdeen is contracted out to Suez Recycling & Recovery Ltd as part of a 25-year contract which is due to end in 2025. The fees for this contract include many investments and services that have been provided across this contract, including the £16 million restoration of Ness landfill site, the £27 million Altens East Materials Recovery Facility and Refuse Derived Fuel facility, and the development of the Hazlehead Household Waste & Recycling

Centre. Another contributions to cost is that of transporting waste from the North East – both for residual wastes and recyclable wastes. These costs are higher than for those authorities located closer to the end destination facilities. The level of capital investment in waste infrastructure also varies massively across the country.

This is the trend:

The net cost of waste disposal in Aberdeen has overall been reasonably stable over the past few years, whilst costs of disposal generally continue to increase, including the cost of landfill tax. However, the amount of residual waste being disposed of in Aberdeen has continued to drop with recycling continuing to increase. This helps to offset the continuing rise in the cost of disposing of waste.

This is the impact:

Waste disposal is an expensive activity and increasing regulation and requirements coupled with the desire and need to move to more sustainable waste management practices means that this is likely to continue to be the case. Not least of all is the impending landfill ban which takes effect in 2025. The most effective way to reduce the cost of waste disposal is to reduce waste. Waste disposal and recycling are both volatile marketplaces and prices can fluctuate greatly. It should be noted that whilst some recyclables do command an income stream, this is not the case for all and other materials, whilst perhaps costing less than disposal, still have a cost. Therefore, the only truly sustainable way to deal with waste is to not produce it in the first place. In addition, the impending Deposit Return Scheme (DRS) due to come in in 2022 is likely to remove some of the high value recyclables (aluminium cans, PET bottles) from our waste stream which will result in a loss of some of the income received for recycling, however, it is also true that the DRS may result in pulling out more recyclables from the general waste stream which may result in a decrease in disposal costs.

These are the next steps we are taking for improvement:

Construction of the energy from waste facility at East Tullos (Ness Energy Project) is well underway with the facility due to open in 2022. This will mean that the Council will have a secure, long term outlet for its residual waste and is protected from market fluctuations for the cost of disposing of its residual waste for the next 20 years. Work is also ongoing to review the options for the replacement of the current waste management contract to seek a best value solution for 2025 onwards for the remaining waste disposal and treatment services including the operation of Altens East Materials Recovery Facility and operation of the Household Waste & Recycling Centres

| Responsible officer: | Last Updated: |
|----------------------|---------------|
| Pamela Walker | 2019/20 |

Customer

Customer Experience

1. Customer – Customer Experience

| Berfanssen and Berken Community | Q2 2020/2 | 1 | Q3 2020/2 ² | Q3 2020/21 | | Q4 2020/21 | |
|--------------------------------------------------------------------------------------------------------------------|-----------|----------|------------------------|------------|----------|------------|--------|
| Performance Indicator – Corporate | Value | Status | Value | Value | Status | Value | Target |
| Total number of Stage 1 complaints | 263 | | 273 | | 251 | | |
| The number of complaints closed at Stage 1 within 5 working days as % of total no of Stage 1 complaints | 71.86% | ② | 66.67% | | 74,5% | ② | 75% |
| Total number of Stage 2 complaints | 32 | | 24 | | 36 | | |
| The number of complaints closed at Stage 2 within 20 working days as % of total no of Stage 2 complaints | 40.63% | | 75% | ② | 63.89% | | 75% |
| Total number Escalated Stage 2 complaints | 24 | | 28 | | 26 | | |
| The number of complaints closed at Escalated Stage 2 within 20 working days as % of total no of Stage 2 complaints | 66.67% | _ | 71.43% | ② | 80.77% | ② | 75% |
| No. of Non-complex Subject Access Requests received | 43 | | 54 | | 24 | | |
| % Non-complex Subject Access Requests responded to within 1 month | 86% | ② | 83.3% | ② | 66.7% | | 80% |
| No. of Complex Subject Access Requests received | 10 | | 13 | 4 | 5 | | |
| % Complex Subject Access Requests responded to within 3 months | 10% | | 15.4% | | 40% | | 70% |
| No. of Environmental Information Regulation requests received | 96 | | 78 | | 52 | | |
| % of Environmental Info Requests replied to within 20 working days - Corporate | 67.7% | | 38.8% | | 84.6% | | 90% |
| No. of Freedom of Information requests received | 210 | | 281 | | 253 | | |
| % of Freedom of Information requests replied to within 20 working days - Corporate | 69.5% | | 52% | | 80.6% | | 90% |
| No. of Access to School Records requests received | 0 | | 0 | | 3 | | |
| % Access to School Records requests responded to within 15 school days | | No reque | ests received | 100% | ② | 100% | |

Appendix A

| Performance Indicator – Corporate | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|--------------------------------------------------------------|------------|----------|------------|----------|------------|-------|---------|
| | Value | Status | Value | Value | Status | Value | Target |
| No. of Data Protection Right requests received | 4 | | 3 | | 6 | | |
| % Data Protection Right requests responded to within 1 month | 100% | ② | 100% | ② | 83.3% | | 100% |

| Performance Indicator – Service | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|--------------------------------------------------------------------------------------|------------|--------|------------|----------|------------|----------|---------|
| renormance mulcator – Service | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received – Customer Experience | 73 | | 83 | | 65 | | |
| % of complaints resolved within timescale – Customer Experience | 90.4% | | 81.9% | ② | 86.2% | Ø | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) - Customer Experience | 53.4% | | 65.1% | | 61.5% | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Customer Experience | 8 | | 12 | | 8 | | |

2. Processes – Customer Experience

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|--------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| | Value | Status | Value | Status | Value | Status | Target | |
| Average time taken in calendar days to process all new claims and change events in Housing Benefit (monthly) | 8.04 | Ø | 8.26 | Ø | 8.5 | Ø | 12 | |
| Correct amount of Housing Benefit paid to customer (monthly) | 97.48% | ② | 97.44% | | 97.48% | | 95% | |
| % Customer Contact Centre calls answered within 60 seconds | 72.97% | ② | 71.96% | ② | 71.3% | | 70% | |
| Percentage of invoices sampled and paid within 30 days | 77.58% | | 86.57% | ② | 92.04% | | 90% | |

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|----------------------------------------------------------------------|------------|--------|------------|----------|------------|--------------|---------|
| | Value | Status | Value | Value | Status | Value | Target |
| % Crisis Grant applications processed within 2 working days | 96.37% | | 94.93% | ② | Data no | ot available | 90% |
| % Community Care Grant applications processed within 15 working days | 82.53% | | 56.15% | ② | | | 50% |

| Performance Indicator | 2018 | | 2019 | | 2020 | | 2020/21 |
|----------------------------------------------------------------|-------|--------|-------|----------|--------|----------|---------|
| | Value | Status | Value | Value | Status | Value | Target |
| No. of Births, Marriages and Deaths registered | 5,582 | | 5.464 | | 4,842 | <u>~</u> | |
| % Accuracy Rate - Registration of Births, Marriages and Deaths | 99% | | 98.6% | Ø | 98.8% | Ø | 90% |

3. Staff – Customer Experience

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|------------------------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter – Customer Experience) | 0 | | 0 | | 1 | | |
| Accidents - Non-Reportable - Employees (No in Quarter – Customer Experience) | 0 | | 0 | | 0 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|----------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--------|
| | | Value | Status | Value | Status | Value | Status | Target |
| Sickness Absence – Average Number of Days Lost – Customer Experience | 2.6 | Ø | 2.5 | Ø | 2.4 | Ø | 5 | |
| Establishment actual FTE | 301.56 | 4 | 298.41 | | 296.02 | 20 | | |
| Staff Costs - % Spend to Date (FYB) | 84% | Ø | 92.2% | Ø | 100.1% | Ø | 100% | |

4. Finance & Controls – Customer Experience

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | 2020/21 | |
|------------------------------------------------|----------|----------|----------|--------|----------|---------|--------|
| | Value | Status | Value | Status | Value | Status | Target |
| Council Tax Cash Collected (In Year) - monthly | £115.1m | ② | £117.7m | | £119.4m | | £82.5 |

| Performance Indicator | 2017/18 | | 2018/19 | | 2019/20 | | 2019/20 |
|----------------------------------------------|---------|--------|---------|--------|---------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| *Cost of collecting council tax per dwelling | £7.92 | | £7.20 | | £7.28 | | £6.58 |

^{*}Target and status based on Scottish national average

Data and Insights

1. Customer – Data and Insights

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|------------------------------------------------------------------------------------|---------------------|--------|------------|-------|------------|-------|---------|
| renormance indicator | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received – Data and Insights | 0 | | 0 | | 0 | | |
| % of complaints resolved within timescale – Data and Insights | No complaints Q2-Q4 | | | | | | 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 | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|---------------------------------------------------------------------------------------------|------------|--------|------------|----------|------------|----------|---------|
| | Value | Status | Value | Value | Status | Value | Target |
| % Reported Data Protection incidents receiving an initial response within 24 business hours | 100% | | 100% | ② | 100% | ② | 100% |

3. Staff – Data and Insights

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|------------------------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Month Quarter – Data and Insights) | 0 | | 0 | | 0 | | |
| Accidents - Non-Reportable - Employees (No in Quarter – Data and Insights) | 0 | | 0 | | 0 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | 2020/21 | | |
|--------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|--------|--|
| Performance indicator | Value | Status | Value | Status | Value | Status | Target | |
| Sickness Absence – Average Number of Days Lost – Data and Insights | 0.3 | Ø | 0.3 | Ø | 0.2 | Ø | 5 | |
| Establishment actual FTE | 31.09 | | 30.09 | | 30.99 | | | |
| Staff Costs - % Spend to Date (FYB) | 83.1% | Ø | 91.1% | Ø | 98.4% | Ø | 100% | |

4. Finance & Controls – Data and Insights

Digital and Technology

1. Customer – Digital and Technology

| Performance Indicator | Q2 2020/2 | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|-----------------------------------------------------------------------------------------|-----------|------------|-------|------------|--------|------------|--------|
| renormance indicator | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received – Digital and Technology | 2 | | 4 | | 1 | | |
| % of complaints resolved within timescale – Digital and Technology | 50% | | 75% | | 0% | | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) – Digital and Technology | 66.7% | | 15.8% | | 0% | | |
| Total No. of lessons learnt identified (stage 1 and 2) – Digital and Technology | 0 | | 0 | | 0 | | |

| | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 |
|--------------------------------------|----------|--------|----------|--------|----------|--------|----------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| Average Call Wait Time (IT Helpdesk) | 427 sec | | 295 | | 151 | | 120 sec. |
| Abandonment Rate % (IT Helpdesk) | 36.12% | | 27.97% | | 15.24% | | 10% |

2. Processes – Digital and Technology

| | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 | |
|------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|--|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target | |
| Percentage of Critical system availability - average (monthly) | 99.9% | Ø | 99.9% | Ø | 99.9% | Ø | 99.5% | |
| % Incidents logged by IT Helpdesk (including Self-Serve) resolved right first time | 83% | Ø | 78.8% | Ø | 81.2% | Ø | 65% | |
| % Priority 1 and 2 incidents closed in timescale | 60% | | 52.9% | | 70% | | 99.5% | |
| % Priority 3 – 5 incidents closed in timescale | 82.5% | | 79.1% | | 77.5% | | 95% | |

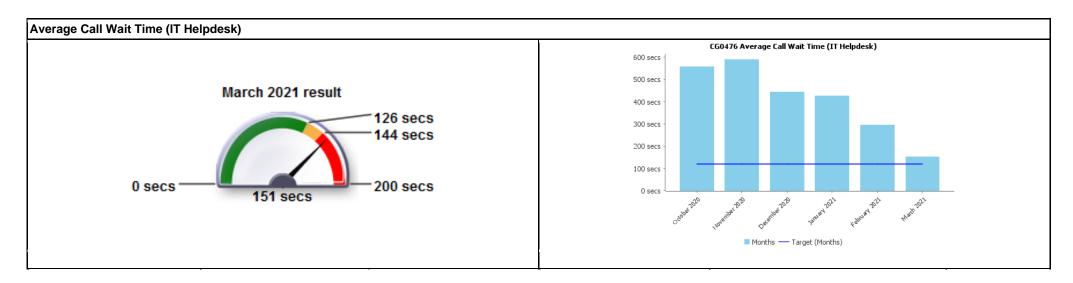
3. Staff – Digital and Technology

| Performance Indicator | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | | 2020/21 |
|---------------------------------------------------------------------------------|------------|--------|------------|--------|------------|--------|---------|
| renormance indicator | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter – Digital and Technology) | 0 | | 0 | | 0 | | |
| Accidents - Non-Reportable - Employees (No in Quarter – Digital and Technology) | 0 | | 0 | | 0 | | |

| | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 |
|-------------------------------------------------------------------------|----------|----------|----------|----------|----------|----------|---------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| Sickness Absence – Average Number of Days Lost – Digital and Technology | 1.3 | Ø | 1.3 | Ø | 1.4 | ② | 5 |
| Establishment actual FTE | 87.52 | | 85.07 | | 84.59 | | |

| Performance Indicator | Jan 2021 | | Feb 2021 | | Mar 2021 | | 2020/21 |
|-------------------------------------|----------|----------|----------|----------|----------|----------|---------|
| | Value | Status | Value | Status | Value | Status | Target |
| Staff Costs - % Spend to Date (FYB) | 91% | Ø | 100.4% | ② | 100.7% | ② | 100% |

4. Finance & Controls - Digital and Technology



Why is this important?

This indicator shows the monthly average call wait time for customers contacting the IT Service Desk and demonstrates whether the service has met the target time set .

Benchmark Information:

This measure is not currently benchmarked.

Target:

The 2020/21 target for Average Call Wait time is currently 120 seconds.

This is what the data is saying:

Reporting of this measure showed an average call wait time ranging between 698 and 121 seconds over the past 12-month period, sitting at 151 seconds during March 2021.

This is the trend:

The trend shows a continuing reduction in the average call wait time over recent months as causal issues have been addressed.

This is the impact:

Steps were put in place in February to increase staff resources at the Service Desk, which had been depleted due to long-term illness and vacancy. The Service Desk has moved from 60% to 100% of full strength, including the temporary reassignment of our IT apprentice to the vacant position.

These are the next steps we are taking for improvement:

Permission has been received to recruit a permanent replacement for the Service Desk vacancy. This is currently underway through the new Re.cr.uit process. Additional measures are also being introduced to improve the service that will have a positive impact on average call wait times, including extending self-service options to many more customers.

Responsible officer: Last Updated:

Alastair Beaton March 2021

Early Intervention and Community Empowerment

1. Customer - Early Intervention and Community Empowerment

| | | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|---------------------------------------------------------------------------------------------------------------|-------|------------|-------|------------|--------|------------|--------|
| Performance Indicator | Value | Status | Value | Value | Status | Value | Target |
| Total No. complaints received – Early Intervention and Community Empowerment | 41 | | 33 | | 62 | | |
| % of complaints resolved within timescale - Early Intervention and Community Empowerment | 56.1% | | 77.1% | | 80.6% | | 75% |
| % of complaints with at least one point upheld (stage 1 and 2) - Early Intervention and Community Empowerment | 29.3% | | 33.3% | | 29% | | |
| Total No. of lessons learnt identified (stage 1 and 2) - Early Intervention and Community Empowerment | 2 | | 1 | | 0 | | |

| Deute um en en la diseateu | Jan 2021 | | Feb 2021 | | Mar 2021 | 2020/21 | |
|------------------------------------------------------------------------------------|----------|----------|----------|--------|----------|-----------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| Percentage of tenants satisfied with the standard of their home when moving in YTD | 56.8% | | 59.4% | | 60.3% | | 75% |
| Satisfaction of new tenants with the overall service received (Year To Date) | 72.6% | | 74.5% | | Data un | available | 85% |
| Financial Inclusion - No of open cases and enquiries per month | 277 | | 277 | | 267 | | |
| Number of visits to libraries - person | 1,085 | | 1,492 | | 1,800 | | |
| Number of visits to libraries - virtual | 98,136 | | 98,804 | | 99,996 | | |
| *% Libraries open during agreed opening hours | 100% | ② | 100% | | 100% | | 98% |

*On 24 December 2020 8 reinstated libraries closed to public access. Two permissible services, Click & Collect and Home Service, continued in line with government advice from 28 December 2020. On 22 March 2021 limited Public PC access was reinstated by appointment only in the 8 libraries delivering Click & Collect and Home Service.

| Parformance Indicator | 2017/18 | | 2018/19 2019/20 | | | 2019/20 | |
|------------------------------------------------------------------------------------------------------------------------|---------|----------|-----------------|----------|-------|----------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| *% of adult population expressing satisfaction with library services within Aberdeen City (Three year rolling average) | 72.3% | Ø | 73% | Ø | 72.7% | Ø | 72% |

^{*}Target and status based on Scottish national average

2. Processes – Early Intervention and Community Empowerment

| | | Jan 2021 | | Feb 2021 | | | 2020/21 | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|-------|----------|-------|----------|---------|--|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target | |
| YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed. (Data Provided by Scottish Government on a Quarterly Basis) | 3.7% | ② | 3.7% | Ø | 3.7% | Ø | 4.5% | |
| YTD % of statutory homeless decisions reached within 28 Days (Unintentional & Intentional) | 100% | Ø | 100% | Ø | 100% | Ø | 100% | |
| YTD Average length of journey in weeks for statutory homeless cases (Unintentional & Intentional) closed in the year | 143.8 | | 143.5 | | 143 | | | |
| YTD Percentage of anti-social behaviour cases reported which were resolved | 97.8% | Ø | 97.9% | Ø | 97.8% | Ø | 100% | |

Appendix A

| | Jan 2021 | | Feb 2021 | | Mar 2021 | 2020/21 | |
|-----------------------------------------------------------------------------------------|----------|-------------|----------|----------|----------|----------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| YTD % of calls attended to by the ASBIT Team within 1 hour | | No activity | | | | | |
| Number of Households Residing in Temporary Accommodation at Month End | 356 | | 341 | | 317 | * | |
| 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% | ② | 100% | Ø | 100% | ② | 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 s | service | 71.3% | | 71.8% | | 85% |

3. Staff – Early Intervention and Community Empowerment

| Performance Indicator | | Q2 2020/21 | | Q3 2020/21 | | Q4 2020/21 | |
|---------------------------------------------------------------|-------|------------|-------|------------|-------|------------|--------|
| renormance mulcator | Value | Status | Value | Status | Value | Status | Target |
| Accidents - Reportable - Employees (No in Quarter - EICE) | 0 | | 1 | | 0 | | |
| Accidents - Non-Reportable - Employees (No in Quarter – EICE) | 1 | | 1 | | 1 | | |

Appendix A

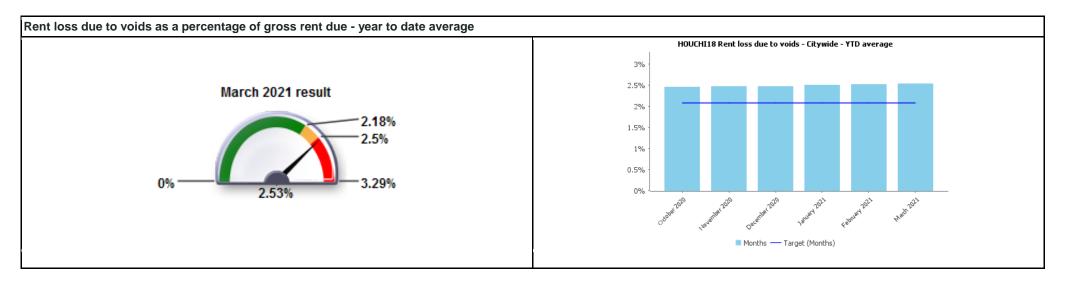
| Ja Performance Indicator | | Jan 2021 F | | Feb 2021 | | Mar 2021 | |
|-------------------------------------------------------|--------|------------|--------|----------|--------|----------|--------|
| Performance indicator | Value | Status | Value | Status | Value | Status | Target |
| Sickness Absence – Average Number of Days Lost - EICE | 5.7 | ② | 6 | ② | 6.2 | Ø | 8 |
| Establishment actual FTE | 386.91 | - | 393.05 | | 389.72 | | |
| Staff Costs - % Spend to Date (FYB) | 75.2% | Ø | 82.7% | ② | 86.9% | Ø | 100% |

4. Finance & Controls – Early Intervention and Community Empowerment

| Ja Performance Indicator | | Jan 2021 F | | Feb 2021 | | Mar 2021 | |
|----------------------------------------------------------------|----------|------------|----------|----------|----------|----------|--------|
| Performance indicator | Value | Status | Value | Status | Value | Status | Target |
| Financial Inclusion - Total Financial Gains Achieved per month | £299,805 | * | £392,935 | | £256,602 | - | |
| Gross rent Arrears as a percentage of Rent due | 11.59% | | 12.17% | | 11.31% | | 11.5% |
| Rent loss due to voids - Citywide - YTD average | 2.51% | | 2.52% | | 2.53% | | 2.08% |

| Danfarman a Indiantar | 2017/18 2 | | 2017/18 2018/19 2019/20 | | | 2019/20 | |
|-------------------------|-----------|--------|-------------------------|--------|-------|---------|--------|
| Performance Indicator | Value | Status | Value | Status | Value | Status | Target |
| *Cost Per Library Visit | £2.82 | | £2.67 | | £2.17 | | £2.00 |

^{*}Target and status based on Scottish national average



Why is this important?

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

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

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

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

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

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

Benchmark Information:

2020/21

• Rent Loss due to Voids was **2.53%** the Scottish Local Authority Average for 2019/20 was **1.1%** The 2020-21 Scottish Local Authority average is currently not available.

Target:

Targets 2020/21

Rent Loss due to Voids was set at 2.08%

2021-22 Targets will be set following submission of our annual figures to the Scottish Housing Regulator and all Scottish LA figures are available.

This is what the data is saying:

The Void Rent Loss figure for the 2020/21 financial year was £2,306,569, this equates to 2.53% of the gross debit (rent due) for the financial year, the target being 2.08%. 2.53% of rent lost due to voids is an increase on 2019/20 figure of 1.86% (£1,623,519).

This is the trend:

Void Rent Loss has steadily increased year on year from 1.47% in 2018-19, 1.86% in 2019-20 to 2.53% in 2020-21

The lengthy relet times of void properties has resulted in the substantial increase in void rent loss.

The 3-year trend shows the increase year on year from 53.8 days in 2018-19, 69.5 days in 2019-20 to 113.9 days in 2020-21.

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 resulting in overall poorer satisfaction levels.
- Homeless people are spending long periods of time in temporary accommodation.

These are the next steps we are taking for improvement:

The Chief Officer – Early Intervention and Community Empowerment and the Chief Officer – Operations and Protective Services are leading a corporate improvement project aiming to transform void property management performance with reporting to the Performance Board. Key actions to reduce void periods are:

- Commissioning of an external contractor to undertake repair work on 200 void properties on a rolling programme. This is a significant additional resource which is intended to rapidly numbers of void properties and in turn void periods.
- Building Services to continue to prioritise deployment of its workforce to void repair work which is also contributing to the anticipated performance transformation.

The improvement plan contains numerous further improvement actions which will streamline and strengthen processes including for property viewings, allocations, and property inspections.

Responsible officer: Last Updated:

|--|

Appendix A

Traffic Light Icons Used

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