

# Northumberland County Council

## Outturn Performance Report 2016-17

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NCC Current Performance Report at 31 March 2017 for

Adult Services

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Proportion of eligible clients receiving self directed support	Percentage	99	95	99.7	Monthly	Green	Green	Following the introduction of the Care Act in April 2015 the CSP form is used by all Care Management Teams for the 'Client Needs Assessment' and therefore all clients receive self directed support. The result is calculated at month end, and therefore anyone with services put in place urgently, may not have received a completed needs assessment on that date.
2	Permanent admissions to residential and nursing care homes, per 100,000 population (18-64 younger people)	per 100,000	9.3	16.2	13.1	Quarterly	Red	Green	We perform very well on this indicator with a very low number of admissions to permanent care. There were a total of 24 admissions to permanent care throughout 2016-17. NB: The definition for this indicator changed in April 2015 and we now include 'full payers' in the number of admissions. Note - previous years exclude full payers.
3	Permanent admissions to residential and nursing care homes, per 100,000 population (65+ - older people)	per 100,000	633.9	843	796.2	Quarterly	Red	Green	We perform well on this indicator compared to other local authorities. We have various early intervention services and support systems in place which help prevent permanent admissions into care homes. These include:- *Direct Payments *Self Directed Support *Telecare *District Nurse led case management *Carer Assessments *Hospital to Home teams *Early Response teams *Short Term Support Service *Support Planners NB: The definition for this indicator changed in April 2015 and we now include 'full payers' in the number of admissions. i.e. previous years figures exclude full payers.
4	Delayed transfers of care from hospital (total delayed transfers) per 100,000 population	Percentage	2.6	4	3.3	Quarterly	Red	Green	Average number of delayed transfers of care based on the snapshots collected in the monthly situation report (SitRep) We do perform well on this indicator and compare favourably against other authorities. We have an excellent hospital to home team, as well as integration between health and social care.
5	Delayed transfers of care from hospital (attributable to social care) per 100,000 population	Percentage	0.7	2	1.1	Monthly	Red	Green	Average number of delayed transfers of care based on the snapshots collected in the monthly situation report (SitRep)

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6	Proportion of people who use services who say those services made them feel safe and secure	Percentage	94.6	80	93.1	Annually	Red	Green	This result is from the annual Adult Social Care User Survey. Although 1.5% lower than the previous year there has been an increasing trend since 2011-12.
7	Carers receiving needs assessment or review and a specific carer's service, or advice and information	Percentage	43.4	43	43	Quarterly	Red	Green	This indicator demonstrates our commitment to providing carers with a needs assessment under the Care Act, as well as information, advice and signposting to other services.
8	Percentage of care plans reviewed within 1 year	Percentage	92.7	90	98.6	Quarterly	Green	Green	National guidance is that all care plans should be reviewed at least every twelve months. A comprehensive action plan has been in place which has led to a significant improvement on this indicator compared to 92.7 last year.
9	Proportion of adults in contact with secondary mental health services in paid employment	Percentage	9.5	9	10.8	Quarterly	Green	Green	This is a commissioned service with Northumberland, Tyne and Wear NHS Trust. Source of data is the NTW client information system.
10	Proportion of adults with learning disabilities who live in their own home or with their family	Percentage	81.8	75	82.4	Quarterly	Green	Green	The continued improvements in the recording of accommodation information within the client needs assessment report a good outturn for this indicator.
11	Proportion of adults with learning disabilities in paid employment	Percentage	6.6	5	6.2	Quarterly	Red	Green	An action plan is in place to ensure that all eligible clients in employment are counted within this measure. Including; clients receiving support from Care Management, support from Seeds (the Supported Employment Service), and also new clients entering employment within Northumbria Healthcare, Adult Social Care. A total of 57 clients have been in paid employment during 2016-17.
12	Proportion of adults in contact with secondary mental health services living independently, with or without support	Percentage	75.2	55.5	76.1	Quarterly	Green	Green	This is a commissioned service with Northumberland, Tyne and Wear NHS Trust. Source of data is the NTW client information system.
13	Overall satisfaction of people who use services with their care & support	Percentage	68.3	65	70.3	Annually	Green	Green	This indicator is based on results from the annual Adult Social Care User Survey. This is the best result on record (since 2011-12).
14	In House client service reviews - % of clients reviewed (CQC Standard)	Percentage	94.6	92	98.5	Quarterly	Green	Green	We have achieved a high performance in this area. Heads of service meet quarterly to discuss performance and agree actions plans. Dates have been arranged for those reviews that are outstanding.

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15	Mandatory training - percentage of staff up to date	Percentage	93.3	92	96	Quarterly	Green	Green	This indicator relates to staff working across the in-house services. Performance outturn is the highest this year. Heads of service meet quarterly to discuss performance and agree actions plans. The staff must be up to date with up to 15 statutory and mandatory training courses, including First Aid, Medication, Food Hygiene, Health and Safety, Information Governance, etc.
16	Percentage of service users satisfied with their service	Percentage	99.5	95	100	Quarterly	Green	Green	Heads of service meet quarterly to discuss performance and agree actions plans. All in-house services produce their own user/carer surveys that assist in the development of the service. There is an excellent satisfaction percentage on those surveys returned across providers.
17	CQC Registration Compliance	Percentage	100	100	100	Quarterly	N/A	N/A	This indicator relates to our in-house services. All locations remain fully compliant against the standards of safety and quality set by the CQC.

NCC Current Performance Report at 31 March 2017 for

Children's Social Care

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Number of cases per full time equivalent (FTE) social worker	Number	24	21	22	Monthly	Green	Red	In real terms, this figure is calculated from a WTE of 94.7 and a total cohort of 2056 cases. The caseload average has increased this month from 21 to 22. <b>ACTIONS:</b> ASYE caseloads and inactive cases will continue to be monitored throughout the year. A sophisticated workload management system is to be developed as well as a rigorous analysis into the variation between teams as part of the evaluation of recruitment and retention processes.
2	Number of cases per full time equivalent (FTE) independent reviewing officer (IRO)	Number	75	70	67	Monthly	Green	Green	In real terms, this figure is calculated from a total WTE of 9.3 and a cohort of 620 IRO cases. In response to senior management priorities, capacity has increased in the IRO service, resulting in a reduction in their caseloads, which are now within the nationally-recommended range of 50-70.
3	Percentage of foster care children placed with Northumberland County Council foster carers	Percentage	72	75	81	Monthly	Green	Green	In real terms, the latest available figure works out as 254 out of a total cohort of 314.
4	Judgements of residential services: (percentage that are Good/Outstanding)	Percentage	100	100	100	Monthly	Green	Green	In real terms, the latest available figure works out as 5 out of a total cohort of 5. This PI has consistently been in the green during 2016/17. A new inspection framework will be implemented in April, focusing more on the young person's experience. Plans are in place to meet these new requirements.
5	Average time (days) between a child entering care & moving in with adoptive family	Days	687	620	597	Monthly	Green	Green	In real terms, the latest available figure works out as 33 (clients moving in with an adoptive family) out of a total cohort of 19712 (number of days). These timescales and pinch points where delays occur are considered in the bi-monthly performance report that goes to Corporate Parenting Committee.

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6	Average time between LA receiving court authority to place a child and deciding on a match	Days	211	210	193	Monthly	Green	Green	<p>In real terms, the latest available figure works out as 33 (clients) out of a total cohort of 6371 (total number of days). The average time taken has increased this month from 178 to 193 due to a child's case not being included in the cohort anymore.</p> <p><b>ACTIONS:</b> Children Waiting Meetings continue to take place regularly that allow robust tracking and monitoring of children that have an adoption plan. The Agency Decision Maker is receiving regular updates on children that are subject to an adoption plan this allowing for on-going monitoring and challenge in regard to progressing plans in a timely way. These timescales and pinch points where delays occur are considered in the bi-monthly performance report that goes to Corporate Parenting Committee.</p>
7	Average duration of care proceedings ending in the period (weeks)	Number	34	26	32	Monthly	Green	Red	<p>In real terms, the latest available figure is calculated from 192 cases ending, with a total of 6181.3 weeks. Timescales have remained stable for the last year, having improved significantly from a poor baseline 3 years ago. However, the average duration remains short of the 26 week year end target. There have been delays in progressing children's plans that have contributed to this plus the request for specialist assessments. CAFCASS data varies from Local Authority data; a document which explains the variances can be supplied on request.</p> <p><b>ACTIONS:</b> Greater focus on the quality and timeliness of pre-proceedings work in response to the findings of the SIF inspection. NCC to evaluate how well it can comply with the judiciary's request to make an application to the court within six weeks. Additional monitoring mechanism to be put in place in Family Placement to identify delay, or if the plan changes. Capacity in Legal Services has been reviewed, resulting in increased management capacity.</p>
8	% long term LAC in same placement for past 2 years	Percentage	72	70	67	Monthly	Red	Red	<p>In real terms, the latest available figure works out as 65 out of a total cohort of 97. This data is currently provisional until the statutory data returns are completed in June 2017.</p>
9	Referral decisions made within 1 day of receiving referral	Percentage	92.9	96	96.8	Monthly	Green	Green	<p>In real terms, the latest available figure works out as 273 out of a total cohort of 282.</p>
10	% of child protection plans ending that lasted two years or more where the plan has ended	Percentage	9.8	4	8.7	Monthly	Green	Red	<p>In real terms, the latest available figure works out as 43 out of a total cohort of 493. The latest position for the end of March shows that the percentage has decreased from 9.4 last month to 8.7. Whilst this is short of the March step target, it was expected as a result of plans that had been open for 2 years plus being closed and therefore now featuring in the statistics.</p>

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									<p><b>ACTIONS:</b> All cases have been analysed by a CSM and a full scale review by the IRO's has been prioritised and implemented by their new Senior Manager. This PI along with a similar one which simply measures the number of CP plans still open after 2 years are reported every week on the Safeguarding Unit dashboard.</p>
11	% of children becoming subject to a CPP for a 2nd or subsequent time	Percentage	9	12	7	Monthly	Green	Green	<p>In real terms, the latest available figure works out as 25 out of a total cohort of 364. We are comfortable with results that range between 7% and 12%. This PI has consistently been in the green.</p>
12	Reduction in first time entrants FTE to the Youth Justice System aged 10 - 17	Percentage	83.4	80	86.6	Quarterly	Green	Green	<p>This is the latest available cohort for First Time Entrants (FTE). It looks at the percentage reduction in the number of FTE in the Oct 15 - Sep 16 (85 FTE) time period against the Apr 08 - Mar 09 baseline (632 FTE). Northumberland FTE rate is well below the North East rate and slightly under the England rate.</p>
13	Rate of proven re-offending by young offenders	Number	34.8	40	38.9	Quarterly	Red	Green	<p>The binary rate measures the number of young people in the cohort who reoffended in a 12 month period. The latest available data is for the Apr 14 - Mar 15 cohort, 38.9% down from 42.6% in the last reporting period. In real terms, 84 young people from a cohort of 216 reoffended in a 12 month period. Northumberland has a higher reoffending rate than the England figure but lower than the North East region. Northumberland have the second lowest reoffending rate of all the YOTs in the Northumbria force region.</p> <p><b>ACTIONS:</b> In order to improve the performance of current cohorts, the YOT is using the live tracking tool to prompt remedial action when young people show signs of reoffending or actually reoffend.</p>
14	Use of custody	Number per 1000	0.18	0.2	0.22	Quarterly	Red	Red	<p>Northumberland has historically had very low custody numbers and has performed well against regional and national benchmarking. In the April 16-Mar 17 year, 6 young people from a population of 27,129 received a custodial sentence which has meant we have narrowly missed the 0.2 rate target for the year. A report looking at the circumstances around each episode of custody was taken to the last YOT Board meeting and has assured members that despite missing the target, the current figure does not represent any significant concerns.</p> <p><b>ACTIONS:</b> Continue to provide high quality of work in relation court, court reports. bail/remand and the supervision of community orders.</p>

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15	% of Young Offenders living in suitable accommodation	Percentage	98.5	97	98	Quarterly	Red	Green	In real terms 1 young person from a cohort of 43 was not in suitable accommodation. The young person did have a moving on placement but not in the area they wanted to live in. This has resulted in the young person living back with a parent which was deemed unsuitable. <b>ACTIONS:</b> Continue to monitor on a regular basis to ensure young people have access to suitable accommodation.
16	% of care leavers living in suitable accommodation	Percentage	88	95	86	Quarterly	Red	Red	In real terms, the latest available figure works out as 61 out of a total cohort of 71. <b>ACTIONS:</b> 14 plus team reviewing the accommodation care leavers are living in with regards its suitability and how often lead workers are keeping in touch with them.
17	% Young Offenders engagement in suitable education, employment or training (ETE)	Percentage	69.2	80	53	Monthly	Red	Red	Of the 19 interventions closed in March 2017, 10 young people were in full-time education, training or employment. 6 were recorded as NEET and one record had not been completed. Looking at the data for the whole quarter, 60% of young people were in full-time ETE at the end of their intervention. For the school age cohort this was 66% and above school age, 52%. <b>ACTIONS:</b> As recommended by the FACS scrutiny chair, this PI is now being reported monthly so that we can intervene at the earliest appropriate stage.
18	Average no. of Early Help Assessments initiated per month	Number	80	110	117	Monthly	Green	Green	In real terms, this number is calculated by averaging the total cohort of 1406 assessments over the previous 12 months. <b>ACTIONS:</b> The number of EHA's initiated has been fairly consistent over the past few months. The creation of locality teams and processes along with the use of the Early Help Module will improve the numbers of EHA's registered.
19	No. of Supported Families identified (from January 2015 until March 2020 through the expanded programme)	Number	613	590	949	Monthly	Green	Green	We are comfortable with numbers identified.
20	Supporting Families cases where there has been significant and sustained progress or continuous employment	Number	9	200	289	Quarterly	Green	Green	Previous claims under Phase 2 of the programme have been in single figures but the December claim was at 68, which was a significant increase. The March figure has increased significantly and was 289 at the end of March 2017. This improvement in the claims is down to agreeing and implementing a rationalised Outcome Plan and making better use of data.



NCC Current Performance Report at 31 March 2017 for

Education and Skills

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	% children taking up the Statutory entitlement to early education for all eligible 2 year olds	Percentage	77.6	70	82	Termly	Green	Green	In real terms, the latest available figure works out as 899 out of a total cohort of 1099. Major improvement over the last 6 terms. Now ahead of the national average.
2	Number of permanent exclusions from primary schools in previous 12 months	Number	3	0	2	Monthly	Green	Red	
3	% of fixed period exclusions from primary schools	Percentage	0.56	0.75	0.95	Monthly	Red	Red	
4	% of fixed period exclusions from secondary schools	Percentage	6.15	6.75	5.26	Monthly	Green	Green	
5	Good or better primary schools (Ofsted)	Percentage	88.2	87	82.6	Monthly	Red	Red	<p>There have been 17 published primary school inspection reports between 1.8.16 – 31.03.17. Of those, 0 were judged to be Outstanding, 9 to be good, 7 to be Requires Improvement and 1 to be Inadequate. 6 schools received Ofsted monitoring visits, All but 1 were deemed to be taking effective actions. Cumulatively, this means that at the end of the period, 83% of primary schools were judged as Good or Outstanding at their most recent Ofsted inspection, this is a slight decrease on the 2015/16 year. This is below the North east average of 93% and the national average of 90%.</p> <p><b>ACTIONS:</b> It is the prime responsibility of the governing bodies and head teachers of those schools to improve. The Council commissions School Improvement Partners to monitor and challenge those schools to improve, one of the products being a termly SIP visit report which includes what judgement they conclude the school would receive if they were inspected at that point. Members should note that periods between inspections range from 18 months to 3 years therefore statistics of this nature are slow to change and short term trend patterns difficult to identify.</p>

## Annexe to Performance Outturn report to Corporate Services and Economic Growth OSC 27 July 2017

6	Good or better Secondary schools (Ofsted)	Percentage	62.5	67	68.3	Monthly	Green	Green	<p>There have been 6 published inspection reports of secondary and middle schools between 1.8.16 – 31.03.17. Of those, 0 were judged to be Outstanding, 3 to be Good, 3 to be Requires Improvement and 0 to be Inadequate. Cumulatively, this means that at the end of the period, 68% of secondary and middle schools were judged as Good or Outstanding at their most recent Ofsted inspection. This remains below the national average of 78% (August 2016) and the regional average of 71%. 5 schools that had been judged to Require Improvement previously received a Section 8 monitoring visit. 3 of those schools were deemed to be “taking effective action”. The other 2, both academies, were deemed as “not taking effective action”. As more secondary schools convert to academies and therefore become new schools without an inspection rating, this will have a significant impact on these results.</p> <p><b>ACTIONS:</b> As well as the actions outlined in number 7, working with schools to improve this is a continuing priority for the Council. However, the task of turning round this pattern of under-achievement will take at least 3 years based upon Ofsted inspection schedules.</p>
7	Number of permanent exclusions from secondary schools in previous 12 months	Number	40	32	61	Monthly	Red	Red	
8	Number of pupils that are in schools that are not yet judged to be good (primary)	Number	1948	2300	2909	Monthly	Red	Red	<p>There have been 17 published primary school inspection reports between 1.8.16 – 31.03.17. Of those, 0 were judged to be Outstanding, 9 to be good, 7 to be Requires Improvement and 1 to be Inadequate. 6 schools received Ofsted monitoring visits, All but 1 were deemed to be taking effective actions. Cumulatively, this means that at the end of the period, 83% of primary schools were judged as Good or Outstanding at their most recent Ofsted inspection, this is a slight decrease on the 2015/16 year. This is below the North east average of 93% and the national average of 90%.</p> <p><b>ACTIONS:</b> It is the prime responsibility of the governing bodies and head teachers of those schools to improve. The Council commissions School Improvement Partners to monitor and challenge those schools to improve, one of the products being a termly SIP visit report which includes what judgement they conclude the school would receive if they were inspected at that point. Members should note that periods between inspections range from 18 months to 3 years therefore statistics of this nature are slow to change and short term trend patterns difficult to</p>

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									identify.
9	Number of pupils that are in schools that are not yet judged to be good (secondary)	Number	11367	10500	9047	Monthly	Green	Green	<p>There have been 6 published inspection reports of secondary and middle schools between 1.8.16 – 31.03.17. Of those, 0 were judged to be Outstanding, 3 to be Good, 3 to be Requires Improvement and 0 to be Inadequate. Cumulatively, this means that at the end of the period, 68% of secondary and middle schools were judged as Good or Outstanding at their most recent Ofsted inspection. This remains below the national average of 78% (August 2016) and the regional average of 71%. 5 schools that had been judged to Require Improvement previously received a Section 8 monitoring visit. 3 of those schools were deemed to be “taking effective action”. The other 2, both academies, were deemed as “not taking effective action”. As more secondary schools convert to academies and therefore become new schools without an inspection rating, this will have a significant impact on these results.</p> <p><b>ACTIONS:</b> As well as the actions outlined in number 7, working with schools to improve this is a continuing priority for the Council. However, the task of turning round this pattern of under-achievement will take at least 3 years based upon Ofsted inspection schedules.</p>
10	Number of schools on vulnerable list at risk of being Requires Improvement or Inadequate that are currently good or outstanding	Number	35	40	23	Monthly	Green	Green	The number of schools currently judged to be Good that are at risk of a poorer grade has reduced significantly in 2016-17.
11	Number of permanent exclusions from school of LAC in academic year	Number	0	0	0	Monthly	Green	Green	There have not been any permanent exclusions of LAC since November 2008.
12	Young people aged 16-18 who are NEET	Percentage	5.1	6	4.1	Monthly	Green	Green	
13	Young people aged 16-18 whose current EET status is Not Known	Percentage	2.9	5	0.7	Monthly	Green	Green	When combined with the NEET figure, Northumberland performs better than the national average.
14	Progression rates of completing apprentices moving into positive destinations	Percentage	91.9	84	90.2	Monthly	Red	Green	Performance continues to be strong.
15	% overall success of apprenticeships in NVQ, Technical Certificate & Functional Skills Framework	Percentage	86.6	84	84	Monthly	Red	Green	

**Annexe to Performance Outturn report to Corporate Services and Economic Growth OSC 27 July 2017**

16	% of new Education and Health Care Plans successfully completed within statutory 20 week time scale (monthly figures)	Percentage	87	75	100	Monthly	Green	Green	<p>The annual figure has improved from 26% to 65% in 2016. In the most recent quarter, performance has improved significantly. The 2016 national average for new plans is currently 63%. We are facing a constant challenge of recruiting and retaining appropriately skilled staff and this impacts directly on performance in this area.</p> <p><b>ACTIONS:</b> There has been increased staffing in the SEN team (5 new members) and appointment of a new manager. Co-ordinators are taking more of a lead role on new EHC plans, giving them capacity as they are not having to focus on transfers. This indicator is discussed every week at the Director's meeting as constant management oversight is required. We have a plan, it is dependent on recruiting skilled staff, training them, and retaining them.</p>
17	% of SEN Statements and Learning Difficulty Assessments transferred to Education and Health Care Plans within statutory 18 week time scale (monthly figures)	Percentage	88	90	95	Monthly	Green	Green	<p>699 transfers completed since September 2014 (previous month was 650) 96% transfers completed within time scale in calendar year to date, so currently performing above target. The big challenge is to complete all transfers by March 2018. There are 41% of transfers left to complete as of April 2017, equal to 582 in real terms. We are facing a constant challenge of recruiting and retaining appropriately skilled staff and this impacts directly on performance in this area.</p>

## NCC Current Performance Report at 31 March 2017 for

## Public Health

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Newly diagnosed cases of Chlamydia Rate per 100,000 population (aged 15 to 24)	Rate per 100,000	1646.09	2178	1525.94	Quarterly	Red	Red	This indicator is a reflection of the number of positive diagnoses for chlamydia in our 15 - 24 year old population for Quarter 3 of STI monitoring. Nationally and regionally the diagnostic rate is falling. The positivity rate should be between 5-12% and in the quarter the rate was 7.47% <b>ACTIONS:</b> The provider has recently launched a new website enhancing digital access to testing kits. This has been advertised through the NCC comms, local health trust and all GP practices.
2	Number of clients in alcohol treatment who successfully completed treatment as a proportion of all in treatment	Percentage	35.92	38	39.69	Monthly	Green	Green	This target measures the numbers of individuals who have entered and successfully left treatment for their problematic alcohol use in year against the total number of individuals who have accessed treatment services some of whom will have left prematurely and some of whom will remain in service.
3	Number of new workplaces joining the Better Health at Work Award scheme	Number		7	13	Quarterly	N/A	Green	The North East Better Health at Work Award is a regional scheme which encourages and recognises action in workplaces to develop a sustainable culture of wellbeing and health. Workplaces sign up to the scheme and work through levels of achievement, including measures to reduce sickness absence and promote health in the workplace. This target is set annually and measures the number of new workplaces joining in the scheme per year. The target for this indicator is usually achieved early in the year (8 new businesses joined the Better Health at Work scheme in Q1 2016/17 and 5 joined the Better Health at Work scheme in Q2 2016/17); this allows the organisation supporting and administering the scheme to then spend the rest of the year helping those new businesses along their journey to achieving the Bronze level award within the scheme.

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4	People in secondary healthcare who receive an alcohol intervention, as a proportion of those who are identified as needing one	Percentage		99	99.24	Quarterly	N/A	Green	Routinely carrying out alcohol screening and brief interventions in a health or social care setting has been shown to reduce alcohol consumption among risky drinkers and avoid the harmful consequences of their drinking. An intervention may be a motivational conversation, provision of additional information or, in the minority of cases, a referral to a specialist alcohol service. This indicator measures the number of alcohol brief interventions delivered as a proportion of those cases where an intervention is suggested by an alcohol misuse screening tool.
5	Percentage of Children aged 0 to 5 who are registered with a Sure Start Children's Centre	Percentage	93.3	90	94.4	Quarterly	Green	Green	This indicator challenges the Health Visiting service to ensure they promote the SSCC throughout the county (including areas where there is less deprivation but still contains residents who would benefit from resources offered) <b>ACTIONS:</b> This indicator has ensured the promotion of registration with SSCC are now embedded into the Health Visiting core offer.
6	Percentage of children in Reception and Year 6 with height and weight recorded	Percentage	95.92	96	95.92	Annually	Green	Red	Comments. The participation rate in reception was above the threshold at 97.4 however below in Year 6 (94.4). 136 children were absent in both cohorts, however whilst only 16 parents declined permission for their children to take part in the programme in reception (opt out process), the number was far higher in Year 6 (96 opt outs). This is the latest data for the 2015/16 cohort. <b>ACTIONS:</b> Actions: Data has been interrogated to obtain further insight into the drop. An action plan will be developed on the basis of findings in preparation for 2017 measuring. The provider will be exploring a greater level of proactive mop for those who were absent
7	Percentage of children in Reception with height and weight recorded who are obese	Percentage	9.76	9	9.76	Annually	Green	Red	Comments: This indicator is derived from the National Child Measurement Programme (NCMP). The measuring is carried out in March/April each year but not reported on nationally until Dec. This local increase follows the national trend. The figure is higher than that for England but lower than that for the NE. This is the latest data for the 2015/16 cohort.

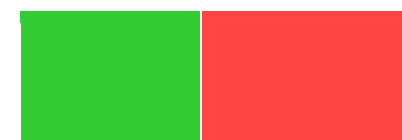
## Annexe to Performance Outturn report to Corporate Services and Economic Growth OSC 27 July 2017

									<p><b>ACTIONS:</b> Local action plans around early identification of potential problematic weight is being addressed through the 30 month universal health check. Universal public health promotion is offered to parents includes reducing sugar intake, only drinking milk or water as well as promotion of exercise. Maximise promotion of the Sugar Swap and Change 4 Life materials</p>
8	Percentage of children in Year 6 with height and weight recorded who are obese	Percentage	19.59	17	19.59	Annually	Green	Red	<p>Comments: This indicator is derived from the National Child Measurement Programme (NCMP). The measuring is carried out in March/April each year but not reported on nationally until Dec. The figure for Northumberland is below that for England overall and significantly lower than that for the NE. This is the latest data for the 2015/16 cohort.</p> <p><b>ACTIONS:</b> Public Health promotion of universal healthy eating, lower intake of sugar and increase in physical activity to prevent childhood obesity in the first instance. Additional targeted support for those identified as being overweight. Support for a NE Physical Activity Charter mark. Maximise promotion of the Sugar Swap and Change 4 Life materials</p>
9	Percentage of infants being breastfed at 6-8 weeks (breastfeeding prevalence)	Percentage	36.13	38.85	36.98	Quarterly	Green	Red	<p>Breastfeeding is important for both babies and mothers through increasing bonding. Breastfeeding also reduces the prevalence of breast cancer in the mother and breastfed babies are less likely to suffer from stomach upset, breathing problems, middle ear infections and other infections. Although numbers breastfeeding have remained steady the numbers partially breastfeeding increased from 48 in Q2 to 66 in Q3. The latest available data for the North East value at Q2 was 31.4% and the England average of 43.2%.</p> <p><b>ACTIONS:</b> The new appointment of a peer breastfeeding buddy in the Blyth locality has now been established and is beginning to have an impact</p>
10	Percentage of users of non-opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a percentage of the total number of non-opiate users in treatment.	Percentage	22.57	21.5	26.97	Monthly	Green	Green	<p>This target measures re-presentations to drugs services by individuals who have completed a treatment pathway. If an individual routes back into services within 6 months we would not see their treatment episode as meriting a successful completion. Individuals not accessing services again within the 6 month window are seen to have a better overall outcome in terms of their recovery.</p>

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11	Percentage of users of opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a percentage of the total number of opiate users in treatment.	Percentage	5.73	6	3.69	Monthly	Red	Red	This target measures re-presentations to drugs services by individuals who have completed a treatment pathway. If an individual routes back into services within 6 months we would not see their treatment episode as meriting a successful completion. Individuals not accessing services again within the 6 month window are seen to have a better over all outcome in terms of their recovery. <b>ACTIONS:</b> We have discussed a programme of targeted work in relation to this target with NRP who are scrutinising their patient population on sub optimal doses of substitute opioids and initiating new ways of working with them to optimise outcomes. They will also continue to review the treatment plan for re-presentations ensuring that the treatment pathway agreed with the service user does not prematurely move them out of treatment before they are ready. It is worth noting that, on average, a person with dependencies will present to services 7 times before they are successful in sustaining their recovery. We are currently reviewing the performance of other areas with similar characteristics to Northumberland's treatment population in order to identify any opportunities for learning.
12	Percentage of women not smoking at time of delivery	Percentage	84.43	85.47	85.78	Quarterly	Green	Green	Smoking during pregnancy can cause serious pregnancy-related problems such as increased risk of miscarriage, premature birth, still-birth, low birth weight, and sudden unexpected death in infancy. Collecting data on women's smoking status at the time of delivery (SATOD) is designed to provide a measure of the prevalence of smoking among women at the time of giving birth at a local level. We are reporting the number of women known to not smoke at the time of delivery.
13	Percentage who received an NHS Health Check of those offered	Percentage	38.78	42.5	40.81	Quarterly	Green	Red	The NHS Health Check programme targets people aged 40 to 74 years and aims to identify those at risk of developing heart disease, stroke, kidney disease, type 2 diabetes or certain types of dementia. Northumberland performs well on the number of people offered a check but is slightly below the England average for the number of people who have received one.





**ACTIONS:** Public Health has facilitated support sessions to GP practices to highlight a potential data reporting anomaly.

## NCC Current Performance Report at 31 March 2017 for

### Housing

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	% Homefinder Applications registered within 10 working days	Percentage	88.89	90	89.88	Monthly	Green	Red	
2	% of Homeless Applications Processed within 28 days	Percentage	100	90	100	Monthly	Green	Green	Increased work in preventing homelessness before it occurs has reduced the overall number of applications that have been made have been enabling all to be actioned and a statutory decision issued with the 28 day service standard.
3	% of Homes for Northumberland homes with current gas certificates	Percentage	100	100	100	Monthly	Green	Green	Performance is good and continues to achieve target.
4	% of Homes for Northumberland homes with current solid fuel certificates	Percentage	100	100	100	Monthly	Green	Green	Performance is good and continues to achieve target.
5	% of Routine Repairs Completed in 30 days	Percentage	95.19	97	99.26	Monthly	Green	Green	The total number of routine repairs completed within the 30 day target time was 19,507 out of a total of 20,289 routine repairs logged. This provides an end of year result of 96.15% which is just slightly outside the year end target of 97.00%. The Repairs and Maintenance Service has recently gone live with an automated scheduling system as part of the Total Mobile Works Order Management System and it is expected that this will have a positive impact on current performance going forward as it should reduce both the waiting and travel time taken by operatives between jobs.
6	% Rent lost through vacant dwellings	Percentage	1.25	1	1.36	Monthly	Red	Red	For the year 2016/17 we allocated 749 properties in total with an average re-let of 33.53 days per property which takes us 3.53 days over our end of year target of 30 days. This then impacted on the level of rent loss accrued and our end of year target which was set at 1% rent loss, but overall it was 1.36%. which equates to £443,808, approximately £100,000 over target. Factors contributing to this included: Properties with “no demand”, including some sheltered

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									accommodation and 3 bed maisonettes "Low demand" properties, including flats with communal entrances "Capitalised Properties", which whilst overall the 90 day target was met there were 26 voids that took over 100 days to allocate
7	% Repairs Fixed First Time	Percentage	99.74	97	95.87	Monthly	Red	Red	The total number of repairs fixed first time was 37,589 out of a total of 38,848 repairs logged. This provides an end of year result of 96.76% which is outside the year end target of 98.00%. Reasons for jobs not being completed included: Required materials not been carried as part imprest van stock. Actual amount of time required to carry out the works or the need for non-standard materials. A review of the Stores is currently being undertaken to identify how we can become more efficient and effective in the provision of materials to the trades operatives across the service.
8	Average number of days to re-let housing	Days	26.1	30	38.73	Monthly	Red	Red	
9	Current tenant arrears as a % of the annual rent debit	Percentage	1.64	1.65	1.75	Monthly	Red	Red	The end of year result was 1.75% against a target of 1.64% of the total debit. This constitutes an increase of £38,098 in the level of rent arrears from the same time last year. Reasons for this included the impact arising of the introduction of Universal Credit which has resulted in arrears of £42,000 and the benefit Cap, which is also having an adverse affect on the number of tenants in debt and the levels of debt. We are developing a working group and action plan for the full introduction of Universal Credit to mitigate some of the risks and support out tenants. The Introduction of the new Housing management I.T System in April 2018 will seek to enhance the management and collection rate of Housing rent.
10	Former tenant arrears as a % of the annual rent debit	Percentage	2.41	1.65	3.03	Monthly	Red	Red	The target was 1.9% but end year result was 3.03% Current NCC Finance & Contract Rules covering write offs don't include HfN/Housing debts, therefore the former tenant rent arrears include an amount (from 2013 onwards) that otherwise may have been written off as irrecoverable. Whilst former tenant arrears have increased significantly since 2012, during the 2016-17 year there has been some success with £90,000 of former debt collected but regrettably an additional £203,000 of debt was accrued. Work is being carried out with Audit to review all outstanding accounts, profiling of debt and streamlining of enforcement and administrative processes. A comprehensive Action Plan, arising from an audit of "Housing Income Collection Arrangements" is currently being developed which will be implemented in 2017.
11	Number of private sector	Number	25	40	5	Monthly	Red	Red	Proactive work by the Private Sector team working with

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	dwellings vacant for more than 6 months returned into occupation								home owners has ensured that the target for 2016/17 of 160 has been exceeded, with a total of 181 being returned to use, ensuring that additional New Homes Bonus has been secured for the Council.
12	Percentage of Priority Unauthorised Encampments moved on within 7 working days of arrival <i>Cumulative</i>	Percentage	75	90	88.06	Monthly	Green	Red	The overall target of 90% has been exceed with 91.67% of unauthorised encampments being moved on within 10 working days of arrival. Toleration of unauthorised encampments with negotiated move-ons has worked successfully during 2016/17. Proposals and recommendations are being developed to enhance service delivery and outcomes during 2017/18.

NCC Current Performance Report at 31 March 2017 for

Neighbourhood Services

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Number of accidents reported (NCC Employees)	Number		0	16	Quarterly	N/A	Red	There were 16 accidents in Neighbourhood Services during quarter 3, 1 of which was HSE reportable. Data is provided by Health & Safety.
2	Number of missed collections per 100,000 collections of household waste	Number	95	35	49	Quarterly	Green	Red	We have set a challenging target in recognition of the high priority given to this key front line service. We continue to experience significant increases in garden waste customers, increases in commercial waste customers and numbers of new housing developments all of which mean that we are undertaking more bin collections year on year. Whilst we have up to now accommodated this growth in demand without the need for additional resources, this has reduced the capacity of the service to deal with occurrences such as staff vacancies, sickness and vehicle breakdowns. In year actions have resulted in improvements and that in turn has resulted in improved performance this year, when compared to last <b>ACTIONS:</b> We have sought to improve the reliability of the service by continuing to refine collection routes, making changes to management and staffing arrangements and this has secured the recent improvement. We shall continue to aim for further improvements whilst being mindful of the significant numbers of new housing that is being built in Northumberland. We also expect the reliability of the refuse fleet to improve going into the next financial year as we re-start the cycle of refuse vehicle replacement, with those vehicles reaching the end of their 7 year life being due for replacement.
3	Number of parks achieving 'green flag' status across the county	Number	9	5	9	Annually	Green	Green	Nine Green Flags have been awarded covering 10 parks in total: Carlisle Park, Hexham Park, Hirst Park, Dr Pit Park, Ridley Park, Astley Park, Bolam Lake Country Park, Plessey Woods Country Park, Castle Vale and Coronation Parks (in Berwick).
4	Percentage of bulky waste collections undertaken on the agreed day of collection	Percentage	99.3	99	98.5	Monthly	Red	Red	Performance remains slightly below target, with another small improvement in March. <b>ACTIONS:</b> Operational teams were asked to monitor closely with a view to bringing it back on target.
5	Percentage of household waste sent for reuse, recycling and composting	Percentage	38.3	41.5	39.3	Quarterly	Green	Red	Performance has slightly deteriorated (-0.4%) compared to the previous year. Volumes of comingled materials collected at the kerbside have continued to fall, and textiles collected by voluntary groups has fallen compared to previous years.

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6	Percentage of municipal waste land filled	Percentage	14.8	5	16	Quarterly	Red	Red	The proportion of waste delivered to landfill is higher than 11% delivered the previous year. Scheduled maintenance was undertaken at the Energy from Waste plant throughout April and May to repair the super heater pipework, during which time waste was diverted to landfill. The Council has continued to allow local authorities to utilise the EfW in order to minimise the environmental impact associated with road haulage and deliver a financial saving to the authority. The EfW plant has been available for 89% of maximum number of hours achievable in quarter 3.
7	Percentage of recycling, reuse, and composting at Household Waste Recovery Centres	Percentage	72	77.5	68.4	Quarterly	Red	Red	The year end recycling and composting rate of 68% is below the 72% achieved the previous year. Charging residents to deposit rubble has reduced the volume delivered and recovered and the cold spring has suppressed the amount of green waste produced. This has lowered the diversion rate and reduced payments to the contractor. <b>ACTIONS:</b> Outlets for recycling carpets and mattresses are unreliable and have not been available over the previous 12 months. Discussions will continue with the contractor to ensure all recycling routes are considered.
8	Proportion of fly-tips removed from public areas within 3 days	Percentage	91	85	88	Monthly	Red	Green	Performance remains above target.
9	Proportion of sites falling below grade B- (some minor instances) Detritus	Percentage	2.34	6	2.17	Quarterly	Green	Green	Note - This result is for Quarter 1 as no LEQ surveys were undertaken during Quarter 2 and 3, During quarter 2 and 3, there have been significant changes made to the process for conducting and reporting LEQ survey's, which includes moving from paper based surveys to electronic systems, and inspectors undertaking specialist Keep Britain Tidy Training. Though there have undoubtedly been benefits to moving inspectors to a new way of capturing inspections there have also been unintended consequences Inspectors are now undertaking significantly more inspections but unfortunately the distribution of these inspections is not in line with the planning methodology for LEQ surveys and this means that the results are not comparable with previous returns. We intent to now evaluate the large data set we have from the inspections and identify if it is possible to extract results in line with the survey planning methodology.

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10	Proportion of sites falling below grade B (some minor instances) Litter	Percentage	3.91	8	2.17	Quarterly	Green	Green	Note - This result is for Quarter 1 as no LEQ surveys were undertaken during Quarter 2 and 3, During quarter 2 and 3, there have been significant changes made to the process for conducting and reporting LEQ survey's, which includes moving from paper based surveys to electronic systems, and inspectors undertaking specialist Keep Britain Tidy Training. Though there have undoubtedly been benefits to moving inspectors to a new way of capturing inspections there have also been unintended consequences Inspectors are now undertaking significantly more inspections but unfortunately the distribution of these inspections is not in line with the planning methodology for LEQ surveys and this means that the results are not comparable with previous returns. We intent to now evaluate the large data set we have from the inspections and identify if it is possible to extract results in line with the survey planning methodology.
11	Proportion of sites falling below grade B for Dog Fouling	Percentage	2.34	6	2.17	Quarterly	Green	Green	Note - This result is for Quarter 1 as no LEQ surveys were undertaken during Quarter 2 and 3, During quarter 2 and 3, there have been significant changes made to the process for conducting and reporting LEQ survey's, which includes moving from paper based surveys to electronic systems, and inspectors undertaking specialist Keep Britain Tidy Training. Though there have undoubtedly been benefits to moving inspectors to a new way of capturing inspections there have also been unintended consequences Inspectors are now undertaking significantly more inspections but unfortunately the distribution of these inspections is not in line with the planning methodology for LEQ surveys and this means that the results are not comparable with previous returns. We intent to now evaluate the large data set we have from the inspections and identify if it is possible to extract results in line with the survey planning methodology.
12	Reduce kg of household waste generated per household	Kg	1015	768	787	Quarterly	Green	Red	Waste arisings are static compared to the same period the previous year.

## NCC Current Performance Report at 31 March 2017 for

## Property Services

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	% statutory tests carried out within planned period	Percentage	97.66	95	97.5	Monthly	Red	Green	There are still issues with accessing closed buildings but overall a very good performance from new contractors in their first year..
2	Capital receipts from disposal of property	£	8414388.2	8000000	10092836	Monthly	Green	Green	Accelerated estate transformation programme has delivered capital receipts above target
3	Financial Delivery against profile of Repair & Maintenance expenditure budget allocated to Corporate Estate	Percentage		97	106.7	Monthly	N/A	Green	Overspend of £100k due to to an increase in remedial works required as a result of Statutory Tests & increased maintenance spend at Leisure Centres to start to address backlog maintenance.
4	Financial Delivery against profile of the Capital Programme as detailed in the MTFP	Percentage		94	100	Monthly	N/A	Green	Capital Programme spend of £122m for the full year achieved in line with target.

## NCC Current Performance Report at 31 March 2017 for

## Technical Services

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	% of hazardous potholes made safe within 24 hours	Percentage	96.75	95	98.26	Monthly	Green	Green	Performance is good and has continued to improve following significant work on systems and processes. 3115 out of 3170 hazardous potholes made safe within 24 hours during 2016/17.
2	% of street lighting faults attended within 4 working days	Percentage	84.4	91	94.94	Monthly	Green	Green	Extensive work with the street lighting team to focus on fault repair times has led to improvement in performance exceeding target. 4690 out of 4940 street lighting faults attended within 4 working days during 2016/17.
3	Average time taken to repair street lighting faults (Countywide) that are under the control of NCC	Days	5.58	5	4.79	Monthly	Green	Green	Extensive work with the street lighting team to focus on fault repair times has led to improvement in performance exceeding target.
4	Average time taken to repair street lighting faults (Countywide) where the response time is under the control of the DNO (regional Electricity Supply Company)	Days	27.39	30	25.39	Monthly	Green	Green	Performance remains good and better than target.
5	Non-principal classified roads where maintenance should be considered	Percentage	8	9	7	Annually	Green	Green	Data is measured annually and current performance is better than target
6	Percentage reduction of Children killed or seriously injured in road traffic accidents	Percentage	7.07	4	0	Annually	Red	Red	In the three year average 2014-16, there has been no change in child KSIs from the previous three year 2013-15 average, against a target of 4% annual reduction. Numbers of child KSI are relatively small and there can therefore be some volatility in the performance indicator, with a 7% reduction reported the previous year. The methodology used by the Police to identify serious injuries has also changed for the 2016 data, and it has been identified that this is increasing the number of serious injuries reported. However the number of casualties remains of concern and action is being taken to carry out detailed analysis of the accident data and trends and to review the Northumberland Road Safety Strategy to work to reduce casualties going forward.



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7	Percentage reduction of People killed or seriously injured in road traffic accidents	Percentage	2.82	4	-11.13	Annually	Red	Red	In the three year average 2014-16, there has been an increase in KSI of 11.13% from the previous three year 2013-15 average, against a target of 4% annual reduction. The methodology used by the Police to identify serious injuries has also changed for the 2016 data, and it has been identified that this is increasing the number of serious injuries reported. However the increase of serious injuries is of concern and action is being taken to carry out detailed analysis of the accident data and trends and to review the Northumberland Road Safety Strategy to work to reduce casualties going forward.
8	Principal roads where maintenance should be considered	Percentage	4	4	3	Annually	Green	Green	Performance has improved by 1% this year and is now better than target
9	Workforce accident incidence rate	Percentage	2.2	2	2.44	Quarterly	Red	Red	There were 7 accidents in Technical Services during Quarter 4. The outturn for 2017/18 is 11.14% - 32 accidents in Technical Services during 2017/18. This is above the target of 8% set previously. However, during the year soft facilities management staff transferred out of the service, leaving the higher risk highways activities which are likely to have a higher AIR and therefore further work is to be carried out to review accident data and benchmark performance / targets for these activities.

## NCC Current Performance Report at 31 March 2017 for

## Corporate Resources

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Arrears of Council Tax Retrieved (£Millions)	£	4.4	4.0	4.4	Quarterly	Green	Green	Implementation of Council Tax Technical Reforms 1.4.13 Northumberland County Council 2014-15 precept increased by 1.98% Northumberland County Council 2015-16 precept increased by 1.99% Police And Crime Commissioner 2015-16 precept increased by 1.99% Northumberland County Council 2016-17 precept increased by 1.99% Adult Social Care precept introduced 2016-17 - 2.0% Police And Crime Commissioner 2016-17 precept increased by 5.7% (£5) 31.3.17 target is £4.0m as the overall arrears are reducing year on year and it is not anticipated that the same level of write offs will be achieved in year.
2	Average time for changes of circumstance (days)	Days	4.35	5	3.39	Monthly	Green	Green	Performance better than target <b>ACTIONS:</b> none required other than to maintain performance
3	Average time for new claims to benefit (days)	Days	16.22	16	15.53	Monthly	Green	Green	Performance better than target <b>ACTIONS:</b> None required other than to maintain performance
4	Complaints answered within the specified timescale	Percentage		100	48.59	Quarterly	N/A	Red	Average confidence in data as there are continuing problems with data entry. End of year results show 52% of stage 1 and stage 2 complaints were answered in the specified timescale during 2016/17. <b>ACTIONS:</b> Staff are working with services to continue to improve data quality.
5	Conveyancing timescales	Days	16	56	16	Annually	Green	Green	This figure is for period ending 31/03/2016. Data for period ending March 2017 will be available by the end of June.
6	Cost per creditor invoice paid (CIPFA Benchmarking)	£s	0.72	0.85	0.86	Quarterly	Red	Red	Information derived from our CIPFA benchmarking exercise however represents the 15-16 year. The 16-17 actual performance will not be known until July/August 2017
7	LGPS Admin costs per member from CIPFA Benchmarking	£s	23	23	25.39	Annually	Red	Red	Increase in member costs. A more comprehensive review was undertaken for the 15-16 review coupled with increased FTE within the Investment Team has contributed to increase. <b>ACTIONS:</b> More detailed work will be required for the 16-17 review.
8	Number of red risks that have remained red on the register for 6 months	Number	23	35	24	Monthly	Red	Green	

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9	Overpayments made to employees as a percentage of the number actually paid	Percentage	0.05	0.05	0.03	Quarterly	Green	Green	234,439 salary payments have been made during Q1 and Q4 2016-2017 for which 80 invoices for overpayments have been raised. Employee Services have detailed analysis. The main reason being the employing department fails to inform Payroll in a timely manner. <b>ACTIONS:</b> Reported via Workforce committee
10	Payment of supplier invoices within 30 days of receipt of the invoice	Percentage	96.27	97.5	97.62	Monthly	Green	Green	Work continues targeting services and individuals whose invoice payment performance falls short of the required levels. This data is compiled monthly and is provided to the Chief Executive.
11	Payroll cost per employee paid (weighted) form CIPFA Benchmarking	£s	26.01	25	26.01	Annually	Green	Red	This figure is derived from our annual CIPFA benchmarking return for Payroll Services. The 2015-2016 submission is due for completion 31st May 2016 with the outturn data due towards the end of June/July 2016.
12	Payroll payments made by electronic means including Pensioners	Percentage	99.9	99.5	99.89	Quarterly	Red	Green	During 2016-2017 (Q1 to Q4) 234,439 payments have been made to employees and Pensioners via BACS (electronic means). The cheque payments continue to be made to pensioners despite a request for bank details. <b>ACTIONS:</b> Employee Services are writing to all pensioners who receive payment via cheque to obtain bank details.
13	Percentage of answered calls to the contact centre within 120 seconds	Percentage	44.1	75	50.7	Monthly	N/A	N/A	Whilst the target of answering 75% of calls in 120 seconds has not been achieved, the average time to answer across 2016/17 was 126 seconds. This is a reasonable wait time for call answering particularly in light of the fact that the Contact Centre takes more calls and call types than ever before as well as offering a more rounded service to the customer in as many cases as this is possible. Targets and resourcing overall will be reviewed during 2017/18 as part of an overall Customer Contact Strategy for the Council.
14	Percentage of Council Tax collected in-year	Percentage	97.8	97.8	97.9	Quarterly	Green	Green	Northumberland County Council 2016-17 precept increased by 1.99% Adult Social Care precept introduced 2016-17 - 2.0% Police And Crime Commissioner 2016-17 precept increased by 5.7% (£5) The amount collectable is increasing year on year with the biggest increase to date in 2016-17 - £9.1m (in cash terms, however, we've collected £6.7m more in 2016-17 than at the same point in 2015-16). The tax base continues to grow An increase in the number of customers paying over 12 instalments instead of 10 The level of outstanding processing work due to the volume of changes increasing (being addressed). Impact of Google and poor system performance. Current staffing issues in that we currently have higher than normal levels of sickness in the team and 2 experienced Officers are training new staff.

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15	Percentage of National Non Domestic Rates collected in-year	Percentage	98.1	98.1	98.1	Quarterly	Green	Green	Localisation of Business Rates - Business Rates Retention from 1.4.13. Business Rates Growth. NNDR collection has dropped in 2016-17 Q3 but is very difficult to predict due to a number of factors, including rateable value fluctuations and the total RV has increased by over £400k since April. The drop can also be attributable to the ending of Retail Relief (resulting in over 1400 ratepayers faced with an increase of up to £1,500) and an increase in the number of customers paying over 12 instalments instead of 10. The amount collectable has increased by £2.3m in 2016-17.
16	Percentage of public liability claims forms responded to within 5 working days of receipt	Percentage	100	100	100	Quarterly	Green	Green	The target of responding to all Public Liability (PL) claims within 5 working days is an internal measure that we aspire to meet. The actual timeline for dealing with PL claims in accordance with insurance pre-action protocol is 21 days. 158 were received between Q1 and Q4
17	Percentage of registrations on time	Percentage	92	90	96	Monthly	Green	Green	
18	Proportion of all AP payments made by electronic means	Percentage	96.4	95	96.31	Quarterly	Red	Green	The majority of cheques produced are outside of Accounts Payable control ie Benefits & Council Tax refunds.
19	Proportion of local spend	Percentage	62.08	0	70.17	Quarterly	Green	Green	
20	Savings achieved by the corporate fraud team	£s	1996995	1500000	2512500	Quarterly	Green	Green	Performance above target for the year. Some focused vetting work on right to buy applications meant that applications that previously may have benefited from discount were stopped
21	Time taken to process Housing Benefit/Council Tax Benefit new claims and change events	Days	6.18	6	4.1	Quarterly	Green	Green	Performance better than target <b>ACTIONS:</b> None required other than to maintain performance

## NCC Current Performance Report at 31 March 2017 for Human Resources

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Average FTE days lost per FTE	Number		7.5	10.55	Monthly	N/A	Red	
2	Equality & Diversity completed within last 3 years	Percentage		85	76	Monthly	N/A	Red	
3	Fire Safety completed within last 12 months	Percentage		85	78	Monthly	N/A	Red	
4	FOI & Subject Access - one off course	Percentage		85	74	Monthly	N/A	Red	
5	Health & Safety Awareness - one off course	Percentage		85	81	Monthly	N/A	Red	
6	Information Security & Data Protection completed within last 12 months	Percentage		85	71	Monthly	N/A	Red	
7	Manual Handling completed within last 3 years	Percentage		85	77	Monthly	N/A	Red	
8	Number of Education Visits submitted for approval and percentage approved/processed prior to visit leaving date	Percentage	262	0	50	Monthly	Red	Green	50 education visits submitted for approval and all approved/processed prior to visit leaving date.
9	Percentage of days lost to sickness absence	Percentage		3.5	4.75	Monthly	N/A	Red	
10	Performance Appraisal completed between April 2016 and March 2016	Percentage		85	71	Monthly	N/A	Red	
11	Period from OH referral to appointment	Days	18	13	18	Quarterly	Green	Red	Longer waiting times due to an influx of referrals along with staff shortages in Occupational Health and cancelled clinics.
12	PREVENT or WRAP - one off course	Percentage		85	75	Monthly	N/A	Red	
13	Safeguarding Adults completed within the last 3 years	Percentage		85	72	Monthly	N/A	Red	
14	Safeguarding Children completed within last 3 years	Percentage		85	75	Monthly	N/A	Red	

NCC Current Performance Report at 31 March 2017 for

Northumberland Fire & Rescue

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	% of service requests responded to within three working days	Percentage	93	90	96	Monthly	Green	Green	1970 Combined Total Complaints and Service Requests - This total includes 347 Animal Welfare and 188 Pest Control.
2	Accidental Dwelling Fires	Number	147	160	162	Monthly	Red	Red	Accidental dwelling fires are fires in dwellings where the cause is recorded as either accidental or not known. Performance is just outside of target.
3	Automatic False Alarms Attended from Non-domestic premises	Number	321	319	376	Monthly	Red	Red	An automatic false alarm originates from fire detection equipment or from a person responding to the fire detection equipment. Performance is outside of target. <b>ACTIONS:</b> As part of the unwanted fire signals policy each automatic false alarm call is followed up and challenged.
4	Deliberate Primary Fires excluding vehicles	Number	94	50	89	Monthly	Green	Red	Primary fires include fires in buildings and vehicles which are not derelict or involve casualties or rescues or five or more fire appliances. Performance is outside of target. <b>ACTIONS:</b> NFRS continue to monitor incidents to try and identify any emerging trends and attend Community Safety Hub (CoSH) meetings, working with Northumbria Police and other partners to prevent incidents of this type occurring.
5	Deliberate Primary Fires in vehicles	Number	54	37	76	Monthly	Red	Red	Primary fires include fires in buildings and vehicles which are not derelict or involve casualties or rescues or five or more fire appliances. Performance is outside of target. <b>ACTIONS:</b> Northumberland Fire and Rescue service will continue to work with partners, attending Community Safety Hub meetings, identifying any emerging trends and preventative opportunities to help prevent incidents of this nature from occurring.
6	Deliberate Secondary Fires	Number	548	410	557	Monthly	Red	Red	Secondary fires are any fires which are not categorised as a primary fire. These tend to be smaller fires which may include tree scrub, wasteland, grass, refuse and roadside vegetation. Performance is outside of target. <b>ACTIONS:</b> Northumberland Fire and Rescue service will continue to work with partners, attending Community Safety Hub meetings, identifying any emerging trends and preventative opportunities to help prevent incidents of this nature. Other proactive initiatives include schools education and direct interaction when in attendance at incidents.

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7	Fatalities from Primary Fires	Number	0	0	3	Monthly	Red	Red	There has been an incident in Belford where two fire fatalities have occurred and a further incident in Allendale where a fatality occurred. <b>ACTIONS:</b> Both incidents are subject to appropriate internal investigation.
8	Fires in Non-domestic premises	Number	87	60	77	Monthly	Green	Red	Non-domestic fires include primary fires where the property is not a dwelling and is subject to the Regulatory Reform Order (RRO). There are some property types such as private garden sheds which are excluded. Performance is outside of target. Analysis of the incident data identifies premises which have a significant contribution to performance being outside of target. These incidents also impact upon other indicators such as the Primary Fires performance indicator. <b>ACTIONS:</b> The Emergency Response and Fire Safety teams are working together with the identified premises to help implement a solution to reduce the number of incidents occurring and will continue to monitor the situation.
9	Injuries from Primary Fires	Number	19	16	18	Monthly	Green	Red	Performance is outside of target at the end of 2016/17. <b>ACTIONS:</b> Northumberland Fire and Rescue Service undertakes Safe and Well Being visits, providing home fire safety advice and fits smoke alarms to help prevent fires and associated injuries occurring. These visits are ongoing and incidents examined to help determine any emerging trends.
10	Inspect and assess high risk animal health premises	Percentage	98	95	99.3	Quarterly	Green	Green	Performance is better than target. One premises was not visited as it is currently being investigated for alleged criminal offences.
11	Land Charges, percentage of responses replied to within 10 working days	Percentage	62.7	95	74.9	Monthly	Green	Red	Continued improvement from previous months, most likely due to fewer issues with IT software and improved turnaround times for Con29 answering departments, in particular the Planning Department.
12	Malicious False Alarms Attended	Number	37	25	41	Monthly	Red	Red	Performance is outside of target. <b>ACTIONS:</b> Fire Control continue to challenge callers where it is suspected the incident may not be genuine. Incidents are closely monitored by the area teams for specific intervention where required and appropriate. The issue is raised with partners at Community Safety Hubs (CoSH) and our Fire Control will continue to ensure NFRS adopt a robust call challenge procedure.
13	Number (%) of responses to Planning Consultations made within 21 days (85% Target)	Percentage	60	80	91.3	Monthly	Green	Green	The total for April cannot be calculated until 21 days after the last consultation is received for that month. Performance was better than target at the end of March resulting in 79 percent of planning consultations being responded to within time during 2016/17.

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14	Number of accidental dwelling fire deaths	Number	0	0	3	Monthly	Red	Red	There has been an incident in Belford where two fire fatalities have occurred and a further incident in Allendale where a fatality occurred. <b>ACTIONS:</b> Both incidents are subject to appropriate internal investigation.
15	Number of accidental dwelling fire injuries	Number	6	15	7	Monthly	Red	Green	Performance is much better than target at the end of 2016/17.
16	Number of fixed penalty notices issued for offences under Dog Control Orders	Number	13	0	21	Monthly	Green	Green	There were 21 fixed penalty notices issued in March.
17	Number of pest control treatments received	Number	187	0	188	Monthly	Red	Red	The team carried out a further 270 revisits during March
18	Number of reported and recorded Hate Crimes	Number	16	16	23	Monthly	Red	Red	There is some significant impact on crime figure due to changes in Crime recording standards within Northumbria Police. a change from 72% compliance to 93% compliance
19	Number of serious housing hazards dealt with	Number	42	15	11	Monthly	N/A	N/A	There were 11 serious housing hazards dealt with in February.
20	Number of service requests received	Number	2366	0	1970	Monthly	Red	Green	1970 Combined Total Complaints and Service Requests - This total includes 347 Animal Welfare and 188 Pest Control.
21	Percentage of dwelling fires with smoke alarm fitted	Percentage	69.28	70	89.27	Monthly	Green	Green	Performance is better than target with 158 out of 177 dwelling fires known to have had a smoke detector fitted at the time of the fire.
22	Percentage of food plan visits achieved against % expected in plan	Percentage	99	98	98	Monthly	Red	Green	The team has completed this years food service plan, not only achieving the plan, but in many cases exceeding the target. <b>ACTIONS:</b> The current PI target was incorrectly based on the high risk % not the overall plan, this is due to be changed for the 2017-18 work plan.
23	Percentage of food premises with a hygiene rating of 3 and above	Percentage	98.4	94.1	98.6	Monthly	Green	Green	Out of a total of 3012 rated establishments, there are currently 2970 establishments with a hygiene rating of 3 or above. Performance is better than both the North East Region (96.7%) and National (94.1%) averages
24	Percentage of high priority premises inspections completed in line with annual programme	Percentage	100	100	100	Monthly	Green	Green	The Commercial Team achieved its target and carried out 100% of its high risk inspection.
25	Percentage of stray dogs collected within 1 working day	Percentage		100	100	Monthly	N/A	Green	There were 70 stray dogs collected within 1 working day in March



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26	Percentage of waste accumulations removed from private land, following environmental enforcement team action within 28 days	Percentage		80	85.42	Monthly	N/A	Green	Performance is better than target with 41 out of 48 reported complaints completed within timescale.
27	Primary Fires	Number	499	431	499	Monthly	Green	Red	<p>Primary fires include fires in buildings and vehicles which are not derelict or involve casualties or rescues or five or more fire appliances. Performance is outside of target. Accidental dwelling fires and deliberate fires in road vehicles have made up up approximately half of the primary fires in 2016/17.</p> <p><b>ACTIONS:</b> As part of the Safe and Wellbeing Strategy NFRS provides home fire safety advice and fits smoke alarms to help prevent fires and associated injuries occurring. NFRS continue to monitor deliberate fire incidents to try and identify any emerging trends and attend CoSH meetings to work with Northumbria Police and other partners to prevent incidents of this type occurring.</p>
28	Reported dangerous structures inspected within 1 working day of notification.	Percentage	100	100	100	Monthly	Green	Green	5 Dangerous structures were made safe within 24 hours giving a 100% success rate.

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	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	% Enforcement Cases where there has been an agreed course of action within 13 weeks <i>Cumulative from 01/04/2016</i>	Percentage		60	76.7	Monthly	N/A	Green	The cumulative performance for the year 2016/17 75.8% This is a positive result and indicates that the improvements made during the service review are working well. We have set a challenging target in recognition to the priority we are giving to this frontline service which has been underperforming significantly in recent years. <b>ACTIONS:</b> We will continue to aim for further improvements
2	% of all decisions overturned on appeal <i>Cumulative</i>	Percentage	1	20	0	Monthly	Green	Green	The cumulative performance is 0% which demonstrates the high quality of our planning decisions. Previously the service had poor performance in this area with appeals being determined against us and costs awarded. Changes to the delegation scheme and management within the service has allowed us to make this achievement <b>ACTIONS:</b> Continued commitment to monitor consistent decision making
3	% of appeals allowed where the committee decision was contrary to Officer recommendation <i>Cumulative</i>	Percentage	91	10	100	Quarterly	Red	Green	PLEASE NOTE: This Indicator should show as Green as the cumulative performance is 0% and for this indicator, lower is better. It demonstrates the quality of our officer recommendations. Changes to the delegation scheme and management within the service has allowed us to make this improvement <b>ACTIONS:</b> Continue to work closely with our members of Planning Committee.

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4	% of minor applications determined within 8 weeks <i>Cumulative</i>	Percentage	71.74	65	78.52	Monthly	Green	Green	<p>The cumulative performance Apr to Mar is 78.4% with a target of 65% which aligns with national targets. Whilst our target is in line with the national target we have consistently overachieved as timely decision making is a key priority to the service. We are also mindful that the government are considering introducing a special measures target for non major applications as set out in the Governments White Paper 'Fixing our broken Housing Market' and in recognition of this we have introduced a new target for next financial year.</p> <p><b>ACTIONS:</b> Continued monitoring</p>
5	% of other applications determined within 8 weeks <i>Cumulative</i>	Percentage	92.06	80	87.97	Monthly	Red	Green	<p>The cumulative performance Apr to Mar is 87.96%The cumulative performance Apr to Mar is 78.4% with a target of 65% which aligns with national targets. Whilst our target is in line with the national target we have consistently overachieved as timely decision making is a key priority to the service. We are also mindful that the government are considering introducing a special measures target for non major applications as set out in the Governments White Paper 'Fixing our broken Housing Market' and in recognition of this we have introduced a new target for next financial year.</p>
6	% of planning applications determined under scheme of delegation <i>Cumulative</i>	Percentage	95.55	95	95.43	Monthly	Red	Green	<p>The cumulative performance Apr to Mar is 95.2% which is just over target. We have set ourselves a very challenging target in recognition that this is a key area for improvement. Working closer with the Chairs of our planning committees has ensured that more of our planning applications have been determined under the scheme of delegation in an open an transparent manner.</p> <p><b>ACTIONS:</b> To continue work closely with the Chairs of all our Planning Committees.</p>
7	% of pre-application enquiries responded to in accordance with targets in pre-application protocol <i>Cumulative</i>	Percentage	52	82	46	Monthly	Red	Red	<p>The cumulative performance for the financial year is 45.80% This is a disappointing result however following a review of the pre application service which was implemented in February 2017 it is clear to see that from this time there has been noticeable improvement. We have set ourselves an ambitious target to drive up the quality of planning applications submitted following the pre application process. This should ensure that less applications are invalid first time and that the planning process is more streamlined giving a</p>

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										timely and a higher quality outcome <b>ACTIONS:</b> Performance in this area continues to improve although it is recognised that we need to carefully monitor.
8	Area designation applications determined within time limits prescribed in the Neighbourhood Planning (General) Regulations 2012	Percentage	100	100	100	Quarterly	Green	Green		No applications received in this quarter therefore none to determine.
9	Employment Rate	Percentage	74.2	75	74.8	Quarterly	Green	Red		Q3 result from 12 month period - October 2015 to September 2016
10	Minerals and waste monitoring - % of active mineral & waste sites inspected in accordance with approved annual inspection programme	Percentage	80	80	48	Quarterly	Red	Red		Currently no dedicated officer for monitoring minerals sites. <b>ACTIONS:</b> New appointment of dedicated monitoring officer by early June 2017.
11	Net additional homes provided	Unknown	991	1216	991	Annually	Green	Red		Numerator - 991 Denominator - 1216 (81%) The 2015/16 outturn of net additional homes falls below the target of 1216 houses by 225 units. This indicator reports a missed target. A number of large site consents that commenced in the previous financial period 14/15 have suffered site specific issues which have delayed delivery of the anticipated number of units in the 15/16 financial period. Developer sales offices indicate that latent demand emerging from a period of recession remains to drive the sale of units and this is expected to be evident in the 16/17 financial build rate as sites have overcome their issues. Improved mortgage availability, access to finance and incentivised schemes for the buyer are assisting to drive the sales rate upwards on sites which will continue to drive the build rate upwards. The target has been changed to reflect the housing requirement in the Core Strategy pre-submission document. Oct 2015.
12	Preparation of Core Strategy	Percentage	100	100	100	Quarterly	Green	Green		During quarter 4, the Core Strategy was approved by Council on 22 February 2017 for submission to the Secretary of State for independent examination. The initial Core Strategy documents were submitted on 31 March 2017 followed by the additional documents which made up the formal submission the following week.
13	Speed of decision making on planning applications - % of county matter applications determined within 13* wks (*unless EIA development) <i>Cumulative</i>	Percentage	100	65	100	Monthly	Green	Green		The cumulative performance Apr to Mar is 100% This is another key priority area which we continue to over achieve in. <b>ACTIONS:</b> Continue to closely monitor

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14	Speed of decision making on planning applications - % of major applications determined within 13* wks or within timescales agreed with the applicant (* unless EIA development) <i>Cumulative</i>	Percentage	79.31	65	81.94	Monthly	Green	Green	The cumulative performance Apr to Mar is 83.1% and the national target for this indicator is 60%. Major applications are a key priority for central and local government and failure to hit national targets carries the risk of special measures being introduced. We continue to overachieve in this area despite in the past being close to falling below target. <b>ACTIONS:</b> Continue to closely monitor
15	Threshold: % of all County matter application decisions made on time in the period from July 2015 to June 2017 <i>Cumulative from 01/07/2015</i>	Percentage	100	50	100	Monthly	Green	Green	This indicator is to monitor our performance against government targets for designation and our performance in this indicator is above target.
16	Threshold: % of all Non Major application decisions made on time in the period from July 2015 to June 2017 <i>Cumulative from 01/07/2015</i>	Percentage	86.1	65	84.4	Monthly	Red	Green	This is a new indicator which we have introduced for the period 2015 - 2017 in recognition of the governments proposals to introduce new designation targets to non major applications. Already performance in this area is well above the anticipated government target.
17	Threshold: % of County Matter planning decisions made between January 2016 – December 2017 which were overturned on appeal <i>Cumulative from 01/01/2016</i>	Percentage	100	20	100	Monthly	Green	Green	This indicator is to monitor our performance against government targets for designation and our performance in this indicator is above target.
18	Threshold: % of Major application decisions made on time in the period July 2015 to June 2017. <i>Cumulative from 01/07/2015</i>	Percentage	80.7	50	81.5	Monthly	Green	Green	This indicator is to monitor our performance against government targets for designation and our performance in this indicator is above target.
19	Threshold: % of major planning decisions made between January 2016 – December 2017 which were overturned on appeal <i>Cumulative</i>	Percentage	3.45	20	1.94	Monthly	Green	Green	This indicator is to monitor our performance against government targets for designation and our performance in this indicator is above target.
20	Weekly Pay - Residents	£	479.6	520.8	487.1	Annually	Green	Red	Median gross weekly pay of all full-time residents within the County. Target is regional average excluding London.
21	Weekly Pay - Workers	£	447.7	511.1	460	Annually	Green	Red	Median gross weekly pay of full-time workers within the County. Target is regional average excl London.

## NCC Current Performance Report at 31 March 2017 for

## Pulse Baskets Customers

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Percentage of foster care children placed with Northumberland County Council foster carers	Percentage	72	75	81	Monthly	Green	Green	In real terms, the latest available figure works out as 254 out of a total cohort of 314.
2	In House client service reviews - % of clients reviewed (CQC Standard)	Percentage	94.6	92	98.5	Quarterly	Green	Green	We have achieved a high performance in this area. Heads of service meet quarterly to discuss performance and agree actions plans. Dates have been arranged for those reviews that are outstanding.
3	% of hazardous potholes made safe within 24 hours	Percentage	96.75	95	98.26	Monthly	Green	Green	Performance is good and has continued to improve following significant work on systems and processes. 3115 out of 3170 hazardous potholes made safe within 24 hours during 2016/17.
4	% of other applications determined within 8 weeks <i>Cumulative</i>	Percentage	92.06	80	87.97	Monthly	Red	Green	The cumulative performance Apr to Mar is 87.96%The cumulative performance Apr to Mar is 78.4% with a target of 65% which aligns with national targets. Whilst our target is in line with the national target we have consistently overachieved as timely decision making is a key priority to the service. We are also mindful that the government are considering introducing a special measures target for non major applications as set out in the Governments White Paper 'Fixing our broken Housing Market' and in recognition of this we have introduced a new target for next financial year.
5	% of street lighting faults attended within 4 working days	Percentage	84.4	91	94.94	Monthly	Green	Green	Extensive work with the street lighting team to focus on fault repair times has led to improvement in performance exceeding target. 4690 out of 4940 street lighting faults attended within 4 working days during 2016/17.
6	Automatic False Alarms Attended from Non-domestic premises	Number	321	319	376	Monthly	Red	Red	An automatic false alarm originates from fire detection equipment or from a person responding to the fire detection equipment. Performance is outside of target. <b>ACTIONS:</b> As part of the unwanted fire signals policy each automatic false alarm call is followed up and challenged.
7	Average time for changes of circumstance (days)	Days	4.35	5	3.39	Monthly	Green	Green	Performance better than target <b>ACTIONS:</b> none required other than to maintain performance

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8	Average time for new claims to benefit (days)	Days	16.22	16	15.53	Monthly	Green	Green	Performance better than target <b>ACTIONS:</b> None required other than to maintain performance
9	Complaints answered within the specified timescale	Percentage		100	48.59	Quarterly	N/A	Red	Average confidence in data as there are continuing problems with data entry. End of year results show 52% of stage 1 and stage 2 complaints were answered in the specified timescale during 2016/17. <b>ACTIONS:</b> Staff are working with services to continue to improve data quality.
10	Number of missed collections per 100,000 collections of household waste	Number	95	35	49	Quarterly	Green	Red	We have set a challenging target in recognition of the high priority given to this key front line service. We continue to experience significant increases in garden waste customers, increases in commercial waste customers and numbers of new housing developments all of which mean that we are undertaking more bin collections year on year. Whilst we have up to now accommodated this growth in demand without the need for additional resources, this has reduced the capacity of the service to deal with occurrences such as staff vacancies, sickness and vehicle breakdowns. In year actions have resulted in improvements and that in turn has resulted in improved performance this year, when compared to last <b>ACTIONS:</b> We have sought to improve the reliability of the service by continuing to refine collection routes, making changes to management and staffing arrangements and this has secured the recent improvement. We shall continue to aim for further improvements whilst being mindful of the significant numbers of new housing that is being built in Northumberland. We also expect the reliability of the refuse fleet to improve going into the next financial year as we re-start the cycle of refuse vehicle replacement, with those vehicles reaching the end of their 7 year life being due for replacement.
11	Number of red risks that have remained red on the register for 6 months	Number	23	35	24	Monthly	Red	Green	
12	Number of serious housing hazards dealt with	Number	42	15	11	Monthly	N/A	N/A	There were 11 serious housing hazards dealt with in February.
13	Payment of supplier invoices within 30 days of receipt of the invoice	Percentage	96.27	97.5	97.62	Monthly	Green	Green	Work continues targeting services and individuals whose invoice payment performance falls short of the required levels. This data is compiled monthly and is provided to the Chief Executive.

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14	Percentage of answered calls to the contact centre within 120 seconds	Percentage	44.1	75	50.7	Monthly	N/A	N/A	Whilst the target of answering 75% of calls in 120 seconds has not been achieved, the average time to answer across 2016/17 was 126 seconds. This is a reasonable wait time for call answering particularly in light of the fact that the Contact Centre takes more calls and call types than ever before as well as offering a more rounded service to the customer in as many cases as this is possible. Targets and resourcing overall will be reviewed during 2017/18 as part of an overall Customer Contact Strategy for the Council.
15	Proportion of fly-tips removed from public areas within 3 days	Percentage	91	85	88	Monthly	Red	Green	Performance remains above target.
16	Time taken to process Housing Benefit/Council Tax Benefit new claims and change events	Days	6.18	6	4.1	Quarterly	Green	Green	Performance better than target <b>ACTIONS:</b> None required other than to maintain performance



## NCC Current Performance Report at 31 March 2017 for Pulse Baskets Regulatory and Statutory

	Measure	Unit	2015/16 Performance	2016/17 Target	Mar 2017 Performance	Frequency	Direction of Travel	Performance	Comments
1	Permanent admissions to residential and nursing care homes, per 100,000 population (65+ - older people)	per 100,000	633.9	843	796.2	Quarterly	Red	Green	We perform well on this indicator compared to other local authorities. We have various early intervention services and support systems in place which help prevent permanent admissions into care homes. These include:- *Direct Payments *Self Directed Support *Telecare *District Nurse led case management *Carer Assessments *Hospital to Home teams *Early Response teams *Short Term Support Service *Support Planners NB: The definition for this indicator changed in April 2015 and we now include 'full payers' in the number of admissions. i.e. previous years figures exclude full payers.
2	Delayed transfers of care from hospital (attributable to social care) per 100,000 population	Percentage	0.7	2	1.1	Monthly	Red	Green	Average number of delayed transfers of care based on the snapshots collected in the monthly situation report (SitRep) This figure is currently an estimate as the figures are not yet published by the DoH.
3	Percentage of care plans reviewed within 1 year	Percentage	92.7	90	98.6	Quarterly	Green	Green	National guidance is that all care plans should be reviewed at least every twelve months. A comprehensive action plan has been in place which has led to a significant improvement on this indicator compared to 92.7 last year.
4	CQC Registration Compliance	Percentage	100	100	100	Quarterly	N/A	N/A	This indicator relates to our in-house services. All locations remain fully compliant against the standards of safety and quality set by the CQC.
5	Good or better primary schools (Ofsted)	Percentage	88.2	87	82.6	Monthly	Red	Red	There have been 17 published primary school inspection reports between 1.8.16 – 31.03.17. Of those, 0 were judged to be Outstanding, 9 to be good, 7 to be Requires Improvement and 1 to be Inadequate. 6 schools received Ofsted monitoring visits, All but 1 were deemed to be taking effective actions. Cumulatively, this means that at the end of the period, 83% of primary schools were judged as Good or Outstanding at their most recent Ofsted inspection, this is a slight decrease on the 2015/16 year. This is below the North east average of 93% and the national average of 90%.



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									Ofsted inspection, this is a slight decrease on the 2015/16 year. This is below the North east average of 93% and the national average of 90%. <b>ACTIONS:</b> It is the prime responsibility of the governing bodies and head teachers of those schools to improve. The Council commissions School Improvement Partners to monitor and challenge those schools to improve, one of the products being a termly SIP visit report which includes what judgement they conclude the school would receive if they were inspected at that point. Members should note that periods between inspections range from 18 months to 3 years therefore statistics of this nature are slow to change and short term trend patterns difficult to identify.
8	Number of pupils that are in schools that are not yet judged to be good (secondary)	Number	11367	10500	9047	Monthly	Green	Green	There have been 6 published inspection reports of secondary and middle schools between 1.8.16 – 31.03.17. Of those, 0 were judged to be Outstanding, 3 to be Good, 3 to be Requires Improvement and 0 to be Inadequate. Cumulatively, this means that at the end of the period, 68% of secondary and middle schools were judged as Good or Outstanding at their most recent Ofsted inspection. This remains below the national average of 78% (August 2016) and the regional average of 71%. 5 schools that had been judged to Require Improvement previously received a Section 8 monitoring visit. 3 of those schools were deemed to be “taking effective action”. The other 2, both academies, were deemed as “not taking effective action”. As more secondary schools convert to academies and therefore become new schools without an inspection rating, this will have a significant impact on these results. <b>ACTIONS:</b> As well as the actions outlined in number 7, working with schools to improve this is a continuing priority for the Council. However, the task of turning round this pattern of under-achievement will take at least 3 years based upon Ofsted inspection schedules.

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9	% of all decisions overturned on appeal <i>Cumulative</i>	Percentage	1	20	0	Monthly	Green	Green	The cumulative performance is 0% which demonstrates the high quality of our planning decisions. Previously the service had poor performance in this area with appeals being determined against us and costs awarded. Changes to the delegation scheme and management within the service has allowed us to make this achievement <b>ACTIONS:</b> Continued commitment to monitor consistent decision making
10	Number of accidental dwelling fire deaths	Number	0	0	3	Monthly	Red	Red	There has been an incident in Belford where two fire fatalities have occurred and a further incident in Allendale where a fatality occurred. <b>ACTIONS:</b> Both incidents are subject to appropriate internal investigation.
11	Number of accidental dwelling fire injuries	Number	6	15	7	Monthly	Red	Green	Performance is much better than target at the end of 2016/17.
12	Percentage of high priority premises inspections completed in line with annual programme	Percentage	100	100	100	Monthly	Green	Green	The Commercial Team achieved its target and carried out 100% of its high risk inspection.
13	Speed of decision making on planning applications - % of major applications determined within 13* wks or within timescales agreed with the applicant (* unless EIA development) <i>Cumulative</i>	Percentage	79.31	65	81.94	Monthly	Green	Green	The cumulative performance Apr to Mar is 83.1% and the national target for this indicator is 60%. Major applications are a key priority for central and local government and failure to hit national targets carries the risk of special measures being introduced. We continue to overachieve in this area despite in the past being close to falling below target. <b>ACTIONS:</b> Continue to closely monitor

