Commentary on RED RAG KPIs End of Year 2015/2016

| Performance Indicator | Indicator 7 - Number of Ageing Well (over 60's) memberships |
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| Reasons for poor performance/decline | At the end of the year there are 1,943 Ageing Well memberships. This equates to 77.42% of the target of 2,500. However there was an improvement over the Quarter 3 figure by 4.52% (84 members) when the membership level was 1,859. |
| | A policy decision to introduce a membership charge for the programme was introduced in April 2015, which equates to £1 per week. Members can choose how to pay for the service either annually, twice a year or quarterly. |
| | The data is more accurate than previously as the membership reflects only active members and users of the services omitting lapsed users |
| | Although the number of members is lower than before the membership charge was introduced and below the target figure, the number of overall visits to the programme is higher. This suggests that there were a lot of people holding memberships who were not using the service. The introduction of a charge has rectified this position and the current membership level is a true reflection of active members. |
| Actions being taken to improve | More accurate and robust data of actual members is now available and reported. |
| performance | The visit target of 96,720 was exceeded. 114,195 visits were made to the programme by the end of the year, 118.07% of the target. This indicates that the subscribing members of the programme are actively using their membership across the Ageing Well programme |
| Improvements in performance that are anticipated as a result of the actions taken | It is anticipated that performance will be in line with profiled target over 1st year of charging |

| Performance Indicator | Indicator 12 – Number of successful smoking quitters aged 16 and over through cessation service |
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| Reasons for poor performance/decline | Between April and March 2015/16, 1,194 people set a quit date, which is a 9.8% increase on the 2014/15 figure of 1,087 people. However, between April and March 2015/16, 507 people have successfully quit, which is a 12.8% decrease on the same period in 2014/15, when 572 people quit. Quarter 4 has seen fewer quitters than in the same quarter last year, with 169 quitters this |

year compared with 183 last year, although this figure is likely to increase as we are less than six weeks from the end of the quarter, meaning that further quitters are expected to be confirmed until mid June.

Although the number of people setting a quit date has increased compared to the previous financial year, the number of successful four-week quitters has decreased.

This reflects the downward trend in the number of successful quitters in Barking and Dagenham. This is mirrored to some degree nationally and across London.

Actions being taken to improve performance

In September 2015 an improvement plan was implemented to improve uptake in both Level 2 and 3 services, with proactive measures to identify and support GPs with the highest number of registered smokers and unplanned hospital admissions for chronic obstructive pulmonary disease (COPD), as well as targeted approaches for high-risk groups including young people, pregnant women, routine and manual workers and those with mental health problems. The outcomes of the actions outlined below will be monitored over the next year.

- Increase service capacity within the community to deliver stop smoking services to priority groups (by October 2016). Leisure services started delivering Level 3 smoking cessation services from 1 October 2015. Six advisors have been recruited to operate the telephone helpline and coordinate community-based smoking cessation activities. The number of community venues offering face-to-face support to quitters will be increased, with the advisors being based in Barking Learning Centre, Queens Hospital, tenancy support services, mental health and other community venues. This includes delivery of peer-led support groups via the Community Health Champions, local faith/community leaders and voluntary organisations.
- Refresh of the tobacco control strategy and implement delivery plan (by June 2016). A local Tobacco Alliance was established in 2015, bringing together Public Health, leisure services, environmental health, licensing, planning, mental health services, primary and acute care, fire services, stop smoking providers and community organisations. The Alliance has refreshed the local tobacco control action plan (including actions to reduce the import and local distribution of illegal cigarettes) and development of smoke-free policies (in vehicles, homes, work places and public places). A tobacco control coordinator was recruited in January 2016 and is overseeing the delivery of the local tobacco control strategy action plan.
- Increase the number of primary care providers delivering tier 2 services (by March 2017). To drive smoking quit performance, a survey was conducted in August 2015 to

understand gaps in service and gain expressions of interest from new primary care providers. The result of this action was that two additional, GP practices were recruited bringing the total number of GP Providers for the 15/16 year to 11recruited though activity has been variable between these practices. Proposed changes to the smoking tariff for 2016/17 is likely to be a motivating factor and an incentive for practices to join already for the 16/17 year, 20 practices have returned their contracts to undertake smoking cessation. In addition, all primary care providers with reported smoking activity (29 pharmacies and 11 GPs) have been visited by the Public Health Primary Care Engagement Officer over the last four months. Action plans to improve performance (number of CO validated quits) have been developed and agreed with each provider, and areas of underperformance are addressed in subsequent visits. Going forward all practices signed up to the smoking LES will be visited, performance will be monitored on a monthly basis for numbers of guits and success rates. They will be supported to improve performance with a variety of measures that will include mail shots to smokers and failed quitters that emphasise an e-cigarette friendly stop smoking service, as the e cigarette phenomenon is one that has hugely impacted on smokers accessing the stop smoking services.

Improvements in performance that are anticipated as a result of the actions taken

The actions being taken to improve performance should help increase uptake of smoking cessation services, particularly amongst groups that are known to have a higher smoking prevalence.

There will be increased service provision within the local community which will result in increased numbers of people setting a quit date.

The coordination of local and national promotional campaigns will also increase the awareness of stop smoking services.

Reasons for poor performance/decline Actions being taken to improve performance

Performance

Indicators 13 & 14 – Percentage uptake of MMR2 vaccination (2 doses) at 5 years old & percentage uptake of DTaP/IPV vaccination at age 5

Achieving high levels of immunisation coverage has been challenging both in the borough and across London.

Implementation of the action plan to improve performance is ongoing. In line with this action plan, NHS England has undertaken GP practice visits to almost all practices in the borough over the last 6 months; there is just one remaining practice to visit.

During these visits discussions took place on the processes by which practices manage their 0-5 years' immunisations, with a particular focus on MMR2 vaccinations. A standard checklist was followed for visits and where areas of improvement were identified, these were highlighted to the practice, with a request

| | for them to amend their processes. |
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| | To improve the Child Health Information Service (CHIS) North East London NHS Foundation Trust (NELFT) are working with local Clinical Commissioning Groups, Health Analytics (patient care database which links primary, secondary, social and community care) and the relevant hospitals to monitor a move from a paper-based and manual system to an electronic system for all section 7a programmes. |
| | NHS England contract meetings with NELFT CHIS are ongoing. |
| Improvements in | It may take a few quarters to see an impact from the practice |
| performance that | visits due to the time-lags in vaccinating children and the |
| are anticipated as a | reporting of these vaccinations being published. |
| result of the actions | |
| taken | However, in due course it is anticipated that there will be improved immunisation coverage both in the borough and across London. A reduction in inequalities in immunisation uptake between GP practices, wards and population groups is also anticipated. |

| Performance Indicator | Indicators 15 & 16 – The number of tier 2 child weight management referrals, and the number of tier 2 child weight management referrals that completed. |
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| Reasons for poor performance/decline | The number of tier 2 courses on offer has not been as high as planned due to a number of tutors not committing to continuing to |
| periormance/decime | running courses due to other work commitments, and the starting |
| | of university courses. Also, numbers for quarter 4 completers are |
| | not yet available due to courses running through into 2016/17 Q1. |
| Actions being taken | The data capture of referral sources was improved in October and |
| to improve | some of those recorded as parent referrals were actually from |
| performance | professionals. Processes have been put in place to ensure that all referrers are documented and referrers are fed back to with regards to the individual referred. |
| | Session content is being re-written with more emphasis on behaviour change to look at improving the outcomes on the programme. |
| | All delivery staff will be trained on the session content and facilitation skills in Q1 2016. |
| | Ensuring that programme delivery is staggered so that there are not long gaps between programmes starting. |
| | Everyone on the Schools out programme database (over 1,000 families) will be emailed about the programme. |
| Improvements in | Processes have been put in place to ensure that all referrers are |
| performance that | documented and referrers are feedback to with regards to the |
| are anticipated as a | individual referred. |
| result of the actions taken | 113 are still attending child weight management courses and will |

| be included in 2016/17 Q1 reporting. |
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| The other actions will increase awareness of the programme and |
| should result in increased numbers of referrals. The improved |

The other actions will increase awareness of the programme and should result in increased numbers of referrals. The improved data capture and feedback to referrers should also ensure that those being referred are more likely to complete.

| Performance Indicator | Indicator 17 - The percentage of land that has unacceptable levels of litter |
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| Reasons for poor performance/decline | The yearend of 3% is above the target of 2% of land that has unacceptable levels of litter. The result of Tranche 3 surveys reported in quarter 4 also shows that 6% of land surveyed has unacceptable levels of litter. This is above the previous Tranche 2 result of 2%. A recent independent survey by Keep Britain Tidy (KBT) undertaken |
| | between December 2015 to March 2016 also shows much higher levels of litter and detritus. It is clear from the report that litter and detritus is a big problem in industrial areas such as River Road in Barking. Both surveys/reports have highlighted this as the main reason for poor performance. |
| | (These surveys are carried out in 3 tranches; April-July, August-November & December-April). |
| Actions being taken to improve performance | As part of redesigning street cleansing new tactics is being explored to overcome these issues. Firstly, the types of machinery that are being used in the area are struggling to deal with the high levels of detritus, so as part of the procurement exercise for the purchase of new mechanical sweepers dedicated machines will be deployed in these areas to keep the levels down to a minimum. |
| | However, it is not just the cleaning of the area that needs to improve; the causes of the problem also need to be addressed. This must be explored if we are to sustain a high level of cleansing in this area and across the rest of it. Environmental Services are working on a project with Enforcement Team that will see many agencies get around the table to look at a long term solution. This will include Street Enforcement, Environment Agency, VOSA, the London Fire Brigade and the Police. We will also be looking at un-sheeted vehicles causing loads to be spilt onto the highway and footpaths. |
| | Moving forward, plans are underway for these Tranche surveys to be undertaken independently from the service provider. |
| | The supervisors are also constantly monitoring litter hot spot areas and cleansing schedules to ensure that good standards are maintained across the borough. |
| Improvements in performance that are anticipated as a result of the actions taken | With the use of new mechanical sweeping and multi-agency approach to the problems, we anticipate to see some mark improvements to performance from next financial year. |

| Performance | Indicator 21 - Number of fixed penalty notices issued for |
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| Indicator | environmental crime |
| Reasons for poor | We are slightly lower than the targets by 335 notices due to the |
| performance/decline | fact that we commenced work on the Dog DNA registration |
| | scheme week commencing 18th January, which diverted some of |

| | the resources. There remain a number of staff who are off with illness and this being addressed through the council's procedures. However, the direction of travel for this indicator is very positive when compared to the same period last year. |
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| Actions being taken to improve performance | Recently recruited agency staff to bringing the service up to full staffing level will improve performance. |
| Improvements in performance that are anticipated as a result of the actions taken | It is hoped that staff training and recently recruited agency staff will improve performance for this indicator moving forward and will have a positive impact on output. It should be noted that the service is on target in meeting its income target of £154k. |

| Performance Indicator | Indicator 23 - The weight of waste recycled per household |
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| Reasons for poor performance/decline | The weight of waste recycled per household in yearend is 218kg, which is below the target of 325kg. |
| | The reduction of recycling among other things is attributed to: i) the shift in season and the reduced tonnage of green waste collected in the third and fourth quarters. ii) The industrial action by drivers of the GMB Union in March, April, May and June 2015 had a significant impact on performance. During the strike all waste was collected in the same vehicles. After the strike action, some customer behaviour to separate their waste become very challenging, leading to high levels of contaminations of the recycled material. iii) As a result of the fire in August 2015, no recycling was delivered out of the Frog Island BioMRF, resulting in reduced recycling performance for both London Boroughs of Barking & Dagenham and Havering. |
| Actions being taken to improve performance | The Frog Island BioMRF is back in operation and there is a slight increase in recycling performance, but unfortunately it did not help LBBD meet its recycling target at year end. However, the Waste Minimisation Team will continue to support residents to reduce waste, promote recycling and address the issue of contamination of the recycling brown bins. |
| Improvements in performance that are anticipated as a result of the actions taken | It is expected that in 2016/17 performance for this indicator will improved compared to this challenging year. |

| Performance Indicator | Indicator 27 - 16 to 18 year olds who are not in education, employment or training (NEET) |
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| Reasons for poor performance/decline | The NEETs adjusted figure for March 2016 has increased to 6.8% (510 young people) compared to 6% last year and 5.1% in Q3 2015/16. Performance remains above London and national averages, but it is important to note that a rise NEETs has been reported across East London. |
| | The proportion of unknowns, which is being tackled as a priority in the borough, has impacted on NEET figures. In Barking and |

| | Dagenham, the proportion of unknowns continues to fall and is currently at its lowest level since current records began (half of the number reported 4 years ago). As at March 2016, 6.4% were unknown compared to 6.8% in February 2016 and 6.7% one year ago. There is also some indication that the rise in NEETs is linked to a rise in Year 12 pupils being NEET, due to fall in GSCE results and young people not getting onto preferred courses. |
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| Actions being taken | 14-19 Participation Plan to be reviewed to provide support to |
| to improve performance | actions that have made a difference and to include new actions to drive down NEETs. Additional youth work resource transferred across to team. Year 11 mentoring programme established, including specific Year 11 mentoring programme for LAC to ensure transition to Year 12. NEET/ Careers Adviser to be present at every school on GCSE and A Level results days to ensure early signposting for support. |
| | Data sharing agreement now signed with Job Centre Plus to allow for better data sharing around Year 14s. Work with Barking and Dagenham College is ongoing regarding more comprehensive early leaver information for early follow up. |
| | Access Europe Programmes (ESF) to result in large extra investment into NEET prevention and reduction from May 2016 across 8 different strands for two years. LBBD closely engaged with potential programme providers to ensure optimum local delivery, and may well be a delivery partner for some strands, resulting in income for the Local Authority. Careers Cluster ESF bid submitted alongside Barking and Dagenham College to develop education-business partnerships in the borough. |
| | Providers Forum established, bringing together a network of 25 providers of NEET and pre-NEET services. Links being made with and between specific providers e.g. promotion of Logistics Apprenticeships through South Essex college. NEET Provider directory to be published. |
| Improvements in performance that are anticipated as a result of the actions taken | NEET figures to fall below 5% whilst sustaining stable Unknown figures over the next 6 months. |

| Performance | Indicator 28 - Percentage of primary schools rated as good or |
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| Indicator | outstanding |
| Reasons for poor | An increased percentage of children are attending good or better |
| performance/decline | schools in Barking and Dagenham and school inspection outcomes at primary have improved. In Q4, 80% of primary schools are currently |
| | rated as good or outstanding compared to 67% as at end of August |

| | 2014. There are indications that a recent inspection should take this to 83%. |
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| | Despite improvement, we are RAG rated red due to progress against our ambitious target set at 100% by December 2015. |
| | After 2 years of very heavy inspections, there were only 7 primary schools inspected during 2014/15 academic year and as Ofsted has implemented the Common Inspection Framework from September 2015 inspections have further decreased with only two full inspections since September 2015. |
| | Of the remaining 6 RI schools, we are confident 4 of these schools would be judged as good taking us to the London average of 88%. The 2 remaining schools have monitoring boards in place and are all being strongly supported by schools with outstanding leadership. |
| Actions being taken to improve performance | Barking and Dagenham primary school inspection outcomes are closing on national average of 85%, but this remains a key area of improvement as outlined in the Education Strategy 2014-17. |
| | Intensive Local Authority support is being provided to vulnerable schools and supporting the new Requires Improvement monitoring processes. |
| | The Education Strategy 2014-17 sets out the key actions to improve primary school inspection outcomes – please refer to |
| | https://www.lbbd.gov.uk/council/priorities-and-strategies/corporate-plans-and-key-strategies/education-strategy/overview/ |
| Improvements in performance that are anticipated as a result of the actions taken | Primary schools move from requires improvement to good. |

| Performance Indicator | Indicator 36 - Average time taken to re-let local authority housing (calendar days) |
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| Reasons for poor performance/decline | Although below target, the Q4 performance reflects a steady improvement when compared to the first two quarters: Q1 average of 46.6 days Q2 average of 44.75 days Q3 average of 42.29 days Q4 average of 43.32 days It must also be noted that in 2015, LBBD were operating a much higher void standard than usual (Decent homes ++) whereby properties would be totally refurbished up to a standard far above decent homes and many void properties still receive a level of work which far exceeds those carried out in other London authorities, namely kitchens and bathrooms. |

| Actions being taken to improve performance | We continue to identify areas for improvement such as: Fluctuations in workload – consider demand with process for additional resources via subcontracting and / or additional work via internal refurbishment works. Make better use of Housing Management visits, such as pre-termination visits, to make sure that work is carried out as part of the tenancy and that any unauthorised adaptations are corrected by the tenant. To improve the consistency of monitoring the Void standard it is proposed that next financial year, all voids are measured against the widely used government standard BVPI 212 which takes into account major works which would not be possible while the tenant is in situ. |
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| Improvements in performance that are anticipated as a result of the actions taken | By applying a consist and widely used void standard, BVPI 212, we are already seeing performance which takes us below within the 30 day target and we are confident that this is sustainable long-term. |

| Performance Indicator | 39. Number of families in Bed & Breakfast accommodation for over 6 weeks (DCLG Criteria) |
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| Reasons for poor performance/decline | The number of people approaching as homeless and that were placed in TA has increased in the last 6 months, which has resulted in a slower turnaround time in B&B. Although the performance for this quarter is Red and above target the performance has improved from Quarter 3 where numbers have halved, and in March the total number of families over 6 weeks was in fact Zero and well below the target. |
| Actions being taken to improve performance | Butler Court Hostel has opened with 78 rooms for homeless families and this has resulted in no families being over 6 weeks for the month of March. It is hoped that we will be able to use this building to continue with this level of performance. |
| Improvements in performance that are anticipated as a result of the actions taken | As above, due to these actions performance has improved to well below the target. |

| Performance Indicator | Indicator 45 - The time taken to process Housing Benefit / Council Tax benefit new claims |
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| Reasons for poor | Due to varying reasons Benefits entered the 2015/2016 Financial |
| performance/decline | year with a backlog of outstanding work which impacted |
| | processing speed and Local Authority Error. |
| Actions being taken | Additional resources were deployed to the Benefits Service in |
| to improve | order to clear the backlog, the work was planned to ensure KPI |
| performance | reduction but also to ensure that LA Error was not compromised. |
| • | Officer performance statics were reviewed to ensure stability and |
| | consistency going forward. Work Streams reviewed for any |
| | potential additional automation of work. |

| Improvements in |
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| performance that |
| are anticipated as a |
| result of the actions |
| taken |

New Claims reduced from 72 days processing at the start of the year to 49 days by year end. This decrease in times has continued into the new financial year. All outstanding old work has been cleared and advance planning to ensure stability going forward.

| | 47. The percentage of Stage 1 complaints responded to within |
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| Performance | deadline |
| Indicator | 48. The percentage of Stage 2 complaints responded to within |
| | deadline |
| | 51. The percentage of member enquiries responded to within deadline |
| Reasons for poor | Current performance is unsatisfactory. A major re-modelling of the |
| performance/decline | complaints process and that of member casework is currently underway. |
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| Actions being taken | The remodelling will introduce new governance; revised targets; a new |
| to improve | software system; better insight through improved reporting; and a |
| performance | performance dashboard and a new officer working group. |
| | The new Software System went live on 13th January 2016 and System |
| | configuration and user training may have affected response times. It is not |
| | expected to have an ongoing negative effect after the initial bedding in |
| | period of 3 months. |
| | The new governance structures currently being introduced across the |
| | council are designed, in part, to ensure that a more customer focused |
| | approach to resolving complaints and casework will be embedded within |
| | the organisation. |
| Improvements in | A clear improvement in the percentage of complaints and member |
| performance that are | enquiries responded to within deadline. Going forward, a renewed focus on |
| anticipated as a | lessons learned will ensure that performance improves. |
| result of the actions | |
| taken | |

| Performance Indicator | 52. The average number of days lost due to sickness absence |
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| Reasons for poor performance/decline | The Quarter 4 sickness levels have seen for the second quarter a decrease in average sickness levels. Although we are not meeting our target, it is an encouraging improvement, reflecting the impact of a range of interventions. It will take some additional time for the target to be met and maintained. |
| Actions being taken to improve performance | An HR project group meets weekly to review data, highlight issues and review improvements in absence levels. Work continues with the hotspot areas. Bradford Factor monitoring and costs of absence have been provided to help managers to prioritise. Plans are underway for a programme of mandatory briefing sessions for all managers. This is being piloted in May, and will run from June – October 2016. The briefings will focus on the Firm but Fair sickness absence procedure, roles and expectations, tools for monitoring absence, and |

| | support and prevention measures. As a result of the mandatory briefings in 2013 there was a significant reduction in average absence levels, leading to the achievement of the council's target. It is expected that the briefings will see a reduction in levels by December 2016. |
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| | Monitoring reports have been provided to Strategic Directors showing the top 20 absences. The purpose of this is to specifically review long-term, or frequent but high number of absence cases. |
| | Plans are well underway for the roll out of trigger related mandatory health and wellbeing checks 242 appointments have been arranged, and 101 checks have been carried out so far. This has been targeted at those who have recently reached the trigger of more than three occasions, rather than those with longer term absence. This provides a one-to-one consultation with occupational health to explore a number of health and wellbeing issues and concerns, leading to an individual action plan. |
| | A project looking at issues surrounding muscular-skeletal absence will be undertaken shortly. |
| | A review of escalation routes "star chamber" is being undertaken and should be agreed and in place shortly. |
| Improvements in performance that are anticipated as a result of the actions taken | It is expected that average absence will reduce to 9 days or less by the next quarter. |

| Performance Indicator | 54. The percentage of staff who believe change is managed well in the Council |
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| Reasons for poor performance/decline | There has been a small increase on the previous survey results. This response is the highest so far, albeit it is still below our target. Very high numbers of staff are saying that they understand the need and reason for change in the Council (93.7%) which demonstrates the improvements in communication approaches. |
| Actions being taken to improve performance | This is a key priority for us and the staff focus groups will provide a greater opportunity to understand whether the low scores for managing change relate to large organisational change, restructures/reviews or smaller scale individual changes. This work will inform our change management plans. change in the Council (93.7%) which demonstrates the improvements in communication approaches. |
| | This is a key priority for us and the staff focus groups will provide a greater opportunity to understand whether the low scores for managing change relate to large organisational change, restructures/reviews or smaller scale individual changes. This work will inform our change management plans. |

| Performance | 55. The percentage of staff who believe our IT systems meet the |
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| Indicator | needs of the business |

Reasons for poor This is the lowest percentage since this question was introduced in performance/decline the All Staff Survey in April 2014. The percentage of staff that 'agree' has reduced from 37% in Q1 2014/14 to 28.94%, whilst those that 'disagree' rose from 34% to 60.43%. This may in part be due to respondents now being more willing to express a view i.e. the percentage of 'don't knows' has reduced from 28% to 10.64% over the same period. Note: The level of satisfaction for IT self-service, (such as booking leave on Oracle and finding information on the intranet), increased to 73.73% this period, the highest since this question was introduced in 2015 from 64.6%. Staff focus groups will be used to identify and understand some of Actions being taken to improve the specific causes for this. There are significant opportunities to communicate and engage with staff on our ICT plans this year and it performance is anticipated that as a result there should be a marked improvement

seen in the next survey results.