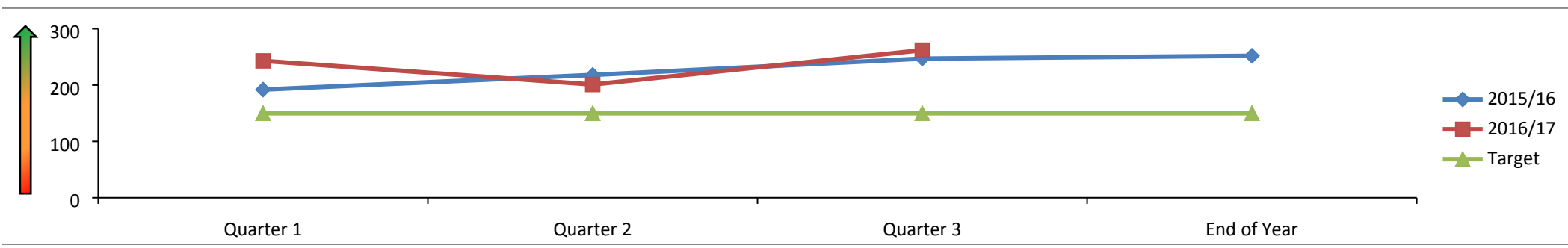# Community Leadership and Engagement – Key Performance Indicators 2016/17
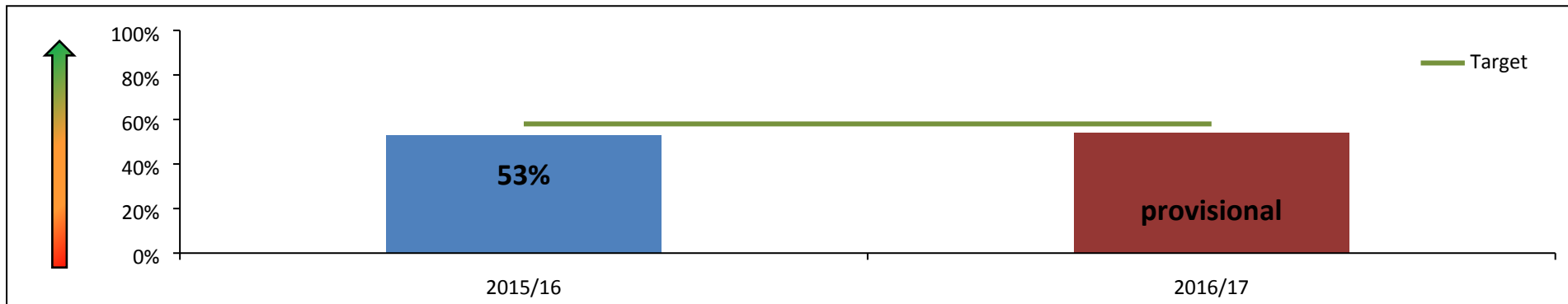
COMMUNITY LEADERSHIP AND ENGAGEMENT KPI 1 – The number of active volunteers			Quarter 3 2016/17
Definition	People who have actively volunteered their time in the previous 3 months within any area of Culture and Recreation or been deployed to volunteer by the volunteer coordinator Culture and Recreation.	**How this indicator works**	This indicator measures the average monthly number of active volunteers that support Culture and Recreation, Healthy Lifestyle and Adult Social Care activities.
What good looks like	We are working towards a continuous increase in the number of active volunteers within the borough.	**Why this indicator is important**	Volunteering not only benefits the individual volunteer by increasing their skills and experience, it also has a significant impact on the health and wellbeing on the community as a whole.
History with this indicator	Historically the number of active volunteers has been increasing. This is a result of increased awareness of volunteering opportunities, the diversity of roles on offer and the corporate shift to deliver some of the library offer to the community and volunteers at 2 sites.	**Any issues to consider**	Volunteering can be more frequent during Summer months particular in support of outdoor events programmes such as Summer of Festivals.

Monthly average	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from Qtr 3 2015/16
2016/17	243	201	262		↑
Target	150	150	150	150	
2015/16	192	218	247	252	

Performance Overview **G**	Across the 3 months of Quarter 3 (October to December) there was an average of 262 active volunteers. This exceeds the monthly target figure of 150 by 112 people and is 174.67% of the target. In addition, the figure is 30.35% (61 volunteers) higher than the end of Quarter 2 when the average was 201. Some of the increase can be attributed to volunteer work placements with Heritage services for new exhibitions and the implementation of Better Impact software to monitor volunteer activity. The figure is also 6.07% higher than the corresponding period in 2015-2016 when the average was 247 active volunteers. The volunteering recruitment programme is working well and the opportunities afforded are seeing regular numbers continue to give their time often after work placements have ended.	**Actions to sustain or improve performance**	The success in achieving and maintaining these figures is due to the wide range of volunteer opportunities across the Culture and Recreation portfolio around the borough and summer events programme. There are also a number of public health funded projects running including Healthy Lifestyles, Change for Life programme and Volunteer Drivers Scheme which are attracting regular volunteer numbers. In addition, 2 Libraries are also now community run providing volunteer opportunities and opportunities for volunteering across the branch library network and Heritage Service are also in place.
Benchmarking	No benchmarking data available – local measure only		

COMMUNITY LEADERSHIP AND ENGAGEMENT	End of Year 2016/17
KPI 2 – The percentage of respondents who believe the Council listens to concerns of local residents (Annual Indicator)	

Definition	Residents Survey question: 'To what extent does the statement "Listens to the concerns of local residents' apply to your local Council?" The percentage of respondents who responded with either 'A great deal' or 'To some extent'.	**How this indicator works**	Results via a telephone survey conducted by ORS, an independent social research company. For this survey, mobile sample was purchased by ORS, enabling them to get in contact with harder to reach populations. Interviews conducted with 1,101 residents (adults, 18+).
What good looks like	Good performance would see higher percentages of residents believing that the Council listens to their concerns.	**Why this indicator is important**	Results give an indication of how responsive the Council is, according to local residents.
History with this indicator	New performance indicator	**Any issues to consider**	Results were weighted to correct any discrepancies in the sample to better reflect the population of Barking & Dagenham, based on a representative quota sample. Quotas set on age, gender, ethnicity and tenure.

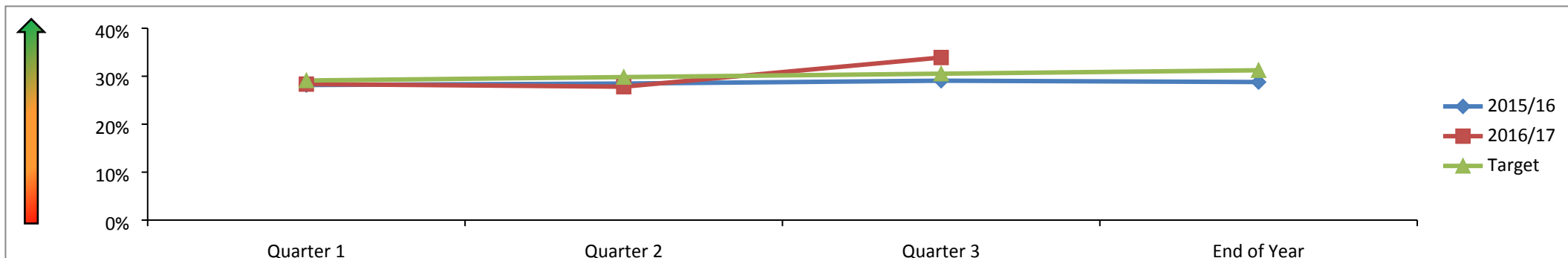|	Annual Result	DOT from 2015/16
2016/17	54% (provisional)	↑
Target	58%	
2015/16	53%	

Performance Overview	Performance for this indicator has improved slightly this year although it is still below the target of 58%. The Council has carried out a number of major consultations this year with residents and has made an effort to encourage residents to get involved. This may have contributed to helping ensure performance did not deteriorate over the last year. However, in order to see real improvements on this indicator the Council needs to better are responding to the concerns of residents through dealing effectively with service requests. A key part of this is also about setting clear expectations and service standards so that residents know what to expect.	Actions to sustain or improve performance	Results of the Residents' Survey will be analysed in detail and we will be working over the coming months to ensure the Council responds appropriately.
A			
Benchmarking	London Average 2015/16: 64% (Benchmarking data for 2016/17 not available)		

COMMUNITY LEADERSHIP AND ENGAGEMENT **KPI 3 – Impact / Success of events evaluation**			**Quarter 3 2016/17**
Definition	Survey of people attending the events to find out: • **Visitor profile:** Where people came from, Who they were, How they heard about the event • **The experience:** asking people what they thought of the event and how it could be improved. • **Cultural behaviour:** when they last experienced an arts activity; and where this took place.	How this indicator works	Impact / success is measured by engaging with attendees at the various cultural events running over the Summer. Results are presented in a written evaluation report.
History with this indicator	This is a new events evaluation for 2016.	Any issues to consider	The outdoor cultural events programme runs from June to September.

2016/17 Performance Results	We undertook a survey of people (409 responses) who attended three of the Summer of Festivals events (One Borough Community Day, Steam and Cider Fair, and the Roundhouse Music Festival) to develop a visitor profile, evaluate the quality of the experience and gain an understanding of cultural behaviour. The headline findings are as follows: • **100%** of respondents agreed that these events are worth doing every year and that they are a good way for people of different ages and backgrounds to come together. • **66%** of respondents live in the Borough • **43%** were first time attenders at the event • **56%** had attended an arts event in the previous 12 months • Roughly **25%** of respondents heard about the event from LBBD social media activity with a similar percentage for word of mouth or saw a poster, leaflet or banner.
Additional information	When we asked people what they particularly liked about the events and how they think they could be improved, a number of recurring themes were identified: positive comments – free entry, atmosphere, good day out, family friendly; areas for improvement – more seating, cost of rides, more variety of food on sale and more arts and crafts stalls.

Equalities and Cohesion – Key Performance Indicators 2016/17

EQUALITIES AND COHESION **KPI 4 – The percentage of Council employees from BME Communities**			**Quarter 3 2016/17**
Definition	The overall number of employees that are from BME communities.	**How this indicator works**	This is based on the information that employees provide when they join the Council. They are not required to disclose the information and many chose not to, but they can update their personal records at any time they wish.
What good looks like	That the workforce at levels is more representative of the local community (of working age).	**Why this indicator is important**	This indicator helps to measure and address under-representation and equality issues within the workforce and the underlying reasons.
History with this indicator	The overall percentage of Council employees from BME Communities has been on an upward trend for a number of years but the rate of increase does not match that of the local population and the Borough profile.	**Any issues to consider**	A number of employees are "not-disclosed", and the actual percentage from BME communities is likely to be higher. Completion of the equalities monitoring information is discretionary and we are looking at how to encourage new starters to complete this on joining the Council and employees to update personal information on Oracle.

| Monthly average	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from Qtr 3 2015/16
2016/17	28.36%	27.82%	33.9%		
Target	29.11%	29.82%	30.53%	31.24%	↑
2015/16	28.17%	28.47%	29.07%	28.79%	

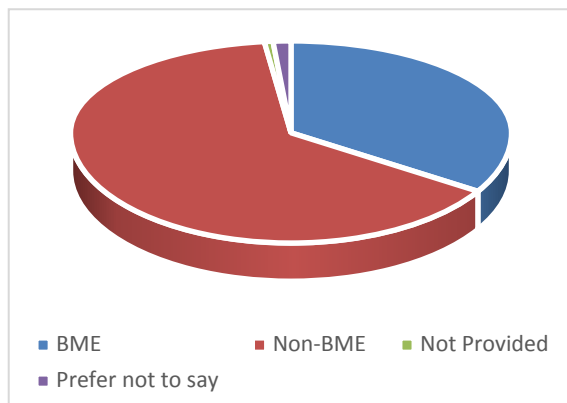| Performance Overview	The latest employee's figures show an increase from the last quarter in the percentage of employees from BME communities. There will be variations from quarter to quarter and many of the actions highlighted in the previous action plan are taking time to take effect. There has been a change in the overall numbers of the workforce since the last quarter.	Actions to sustain or improve performance	We continue to work with Business in the Community (BiC) to identify how other organisations have addressed under-representation within the workforce and non-disclosure. We should be able to report on the BiC benchmark for ethnicity, age and gender for the next quarter. Temperature Check results will be analysed by ethnicity to look for trends across the Council and for different services. We will be targeting those services where information on ethnicity has not been provided/prefer not to say, to encourage self-reporting. The implementation of the training plan for managers and staff (including Recruitment and Selection, Unconscious Bias and Dignity at Work) is continuing.
G			
Benchmarking	Not applicable		

KPI 4 – The percentage of employees from BME Communities

Breakdown by Directors (numbers)

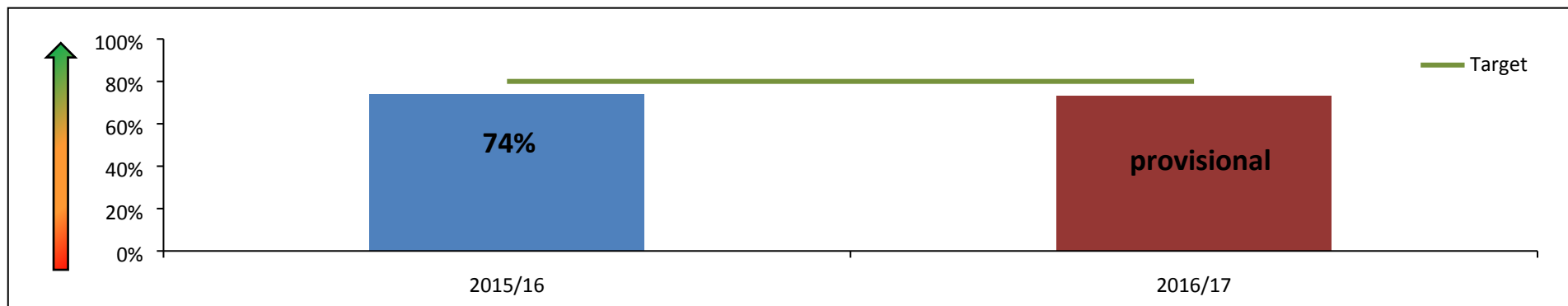|	BME	Non-BME	Not Provided	Prefer not to say
A2020 - Programme Director	2			
CD - Adults' Care & Support	22	36		
CD - Children's Care & Support	355	546	9	6
CD - Culture and Recreation	26	52	1	
CD - Education	113	224	1	1
Chief Executive		4		
Commissioning Programme Manager	95	319	3	2
Director Public Health	4	10		
Finance Director	22	32		
Director of Law and Governance	23	43		1
OD - Adults' Care Support	124	144	5	
OD - Children's Care & Support	98	98	3	1
OD - Clean & Green	35	272	2	2
OD - Enforcement	53	104		3
OD - Homelessness & Worklessness	44	106		
OD - Housing Management	169	195	3	2
Strat & Prog Director	8	45		2
Strategic Director CCSD	14	25		19
Strategic Director F&I	5	20		17
Strategic Director G&H		2		
Strategic Director SDI	1	5		
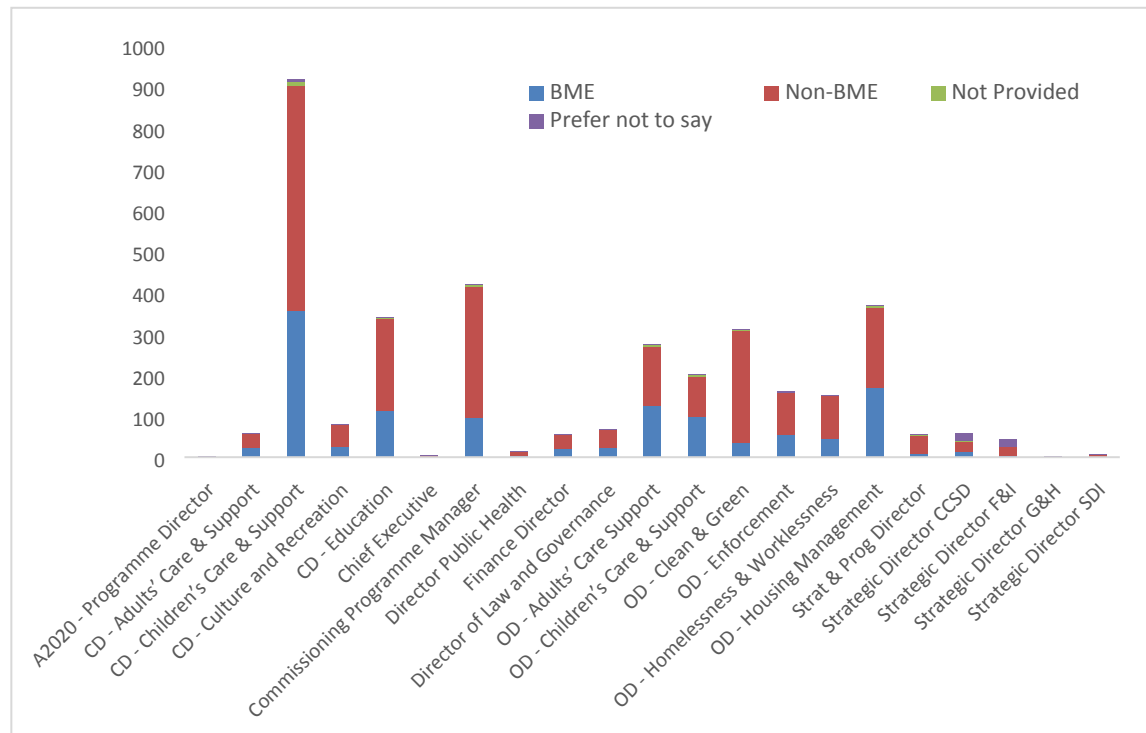
BME	Non-BME	Not Provided	Prefer not to say
1213	2282	27	56
33.9%	64%	1%	2%

- BME
- Non-BME
- Not Provided
- Prefer not to say

EQUALITIES AND COHESION		End of Year 2016/17

KPI 5 – The percentage of residents who believe that the local area is a place where people from different backgrounds get on well together

Definition	Residents Survey question: 'To what extent do you agree that this local area is a place where people from different backgrounds get on well together" The percentage of respondents who responded with either 'Definitely agree' or 'Tend to agree'.	How this indicator works	Results via a telephone survey conducted by ORS, an independent social research company. For this survey, mobile sample was purchased by ORS, enabling them to get in contact with harder to reach populations. Interviews conducted with 1000 residents (adults, 18+).
What good looks like	An improvement in performance would see a greater percentage of residents believing that the local area is a place where people from different backgrounds get on well together.	Why this indicator is important	Community cohesion is often a difficult area to measure. However, this perception indicator gives some indication as to how our residents perceive community relationships to be within the borough.
History with this indicator	Although this question was included in the historical Place Survey, due to the survey methodology, results are not comparable.	Any issues to consider	Results were weighted to correct any discrepancies in the sample to better reflect the population of Barking & Dagenham, based on a representative quota sample. Quotas set on age, gender, ethnicity and tenure.

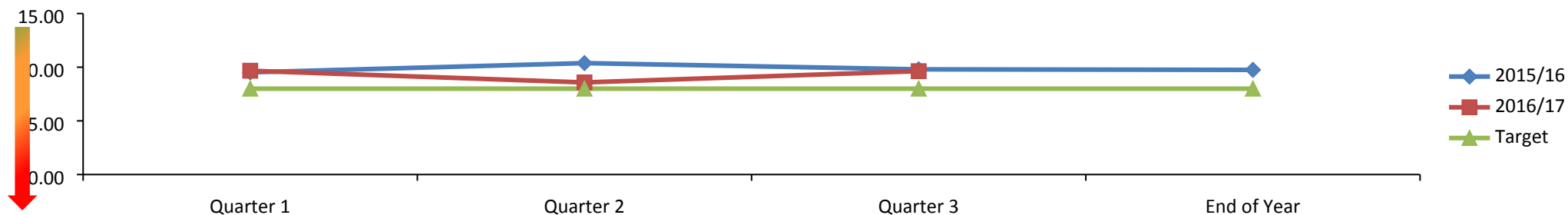|	Annual Result	DOT from 2015/16
2016/17	73% (provisional)	
Target	80%	↓
2015/16	74%	

Performance Overview	Results for this indicator have decreased slightly dropping from 74% to 73%. Given the circumstances, nationally as a result of Brexit and the reported rise in hate crime in places across the country it is positive to note that performance for this indicator is holding steady. The borough has not seen a huge increase a hate crime post Brexit. However, the performance for this indicator is still below the target of 80% and therefore RAG rated Amber.	Actions to sustain or improve performance	Results of the Residents' Survey will be analysed in detail and we will be working over the coming months to ensure the Council responds appropriately.
A			
Benchmarking	National Average 2015/16: 86% (Benchmarking data for 2016/17 not available)		

EQUALITIES AND COHESION   Quarter 3 2016/17

KPI 32 – The average number of days lost due to sickness absence

| Definition	The average number of days sickness across the Council, (excluding staff employed directly by schools). This is calculated over a 12-month rolling year, and includes leavers.	How this indicator works	The sickness absence data is monitored closely by the Workforce Board and a HR Project Group meets weekly to review this and identify "hot spots", to ensure that appropriate action is being taken. Managers also have a "dash board" on Oracle to monitor sickness in their areas.
What good looks like	That the target of 8 days by 31 December 2016 is achieved and maintained.	Why this indicator is important	This indicator is important because of the cost to the Organisation of sickness absence and for the well-being of its employees, which is why the emphasis is on early intervention wherever possible.
History with this indicator	Sickness absence rates have gone up and own, which may be for various reasons and changes to the workforce with groups of employees transferring in or out makes comparison difficult.	Any issues to consider	Mandatory briefings sessions are being held for managers, similar to when the Managing Attendance (Sickness Absence) Procedure was introduced in 2013, to ensure that they understand their responsibilities, and take appropriate action when employees hit the "trigger points".

Monthly average	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	9.67	8.58	9.63		
Target	8	8	8	8	↓
2015/16	9.52	10.38	9.80	9.75	

| Performance Overview	There has been an increase in the average sickness absence for Quarter 3. The sickness briefings have been completed. It will take some time for this to show a sustained reduction in absence. We have seen a reduction since last year, but it will take some time for the leavers to not have an impact on average absences. We also have staff with long term absence who have returned to work with good support, and are showing a sustained improvement in absence. However, it will be up to 12 months before this is reflected in their sickness record under the Best Value Performance Indicator calculation.	Actions to sustain or improve performance	Sickness briefings have been completed and all but a small number of managers attended. For those managers who were unable to attend, a range of alternative arrangements are in place - this includes practical dashboard sessions, mini-briefings and e-learning. We are confident that key messages will soon be fully understood by all managers and supervisors. This will be followed up by compliance reporting. Analysis shows that a significant number of staff – over 2000 have had no absence over the last 12 months, and our scrutiny of the data will ensure that we target resources on the areas where interventions are required. New hotspots have been agreed. A change to the absence procedure will enable managers to move quickly to absence review. A workplace flu immunisation programme has been completed and higher levels than in 2015/16 were achieved. The Council has been accredited with the Mayor of London Healthy Work Place award at commitment level. We are working on actions which should help us to reach achievement and excellence level. These actions will all continue to promote good health and wellbeing within the workplace.
R			
Benchmarking	The average performance in London is 7.9 days, (across 27 authorities which collect data through the London Authority Performance System (LAPS). This includes some Councils with small numbers of 'blue collar' staff and sickness levels tend to be lower in these authorities, which will influence the overall average.		

KPI 32 – The average number of days lost due to sickness absence (Additional Information)

Director	Short Term	Long Term	Total days per Directorate
A2020 - Programme Director	0	0	0
CD - Adults' Care & Support	112.75	241.5	354.25
CD - Children's Care & Support	2538.3	7409	9947.3
CD - Culture and Recreation	154.5	59	213.5
CD - Education	640.5	1599	2239.5
Chief Executive	0	0	0
Commissioning Programme Manager	386	449	835
Director Public Health	84	0	84
Finance Director	72	181	253
Director of Law and Governance	63.5	22	85.5
OD - Adults' Care Support	666.5	1631	2297.5
OD - Children's Care & Support	449	1351	1800
OD - Clean & Green	1268.5	3275	4543.5
OD - Enforcement	266.25	713	979.25
OD - Homelessness & Worklessness	310.5	293	603.5
OD - Housing Management	826	2869	3695
Strat & Prog Director	29.5	0	29.5
Strategic Director CCSD	98	278	376
Strategic Director F&I	99	496	595
Strategic Director G&H	7	0	7
Strategic Director SDI	6	0	6
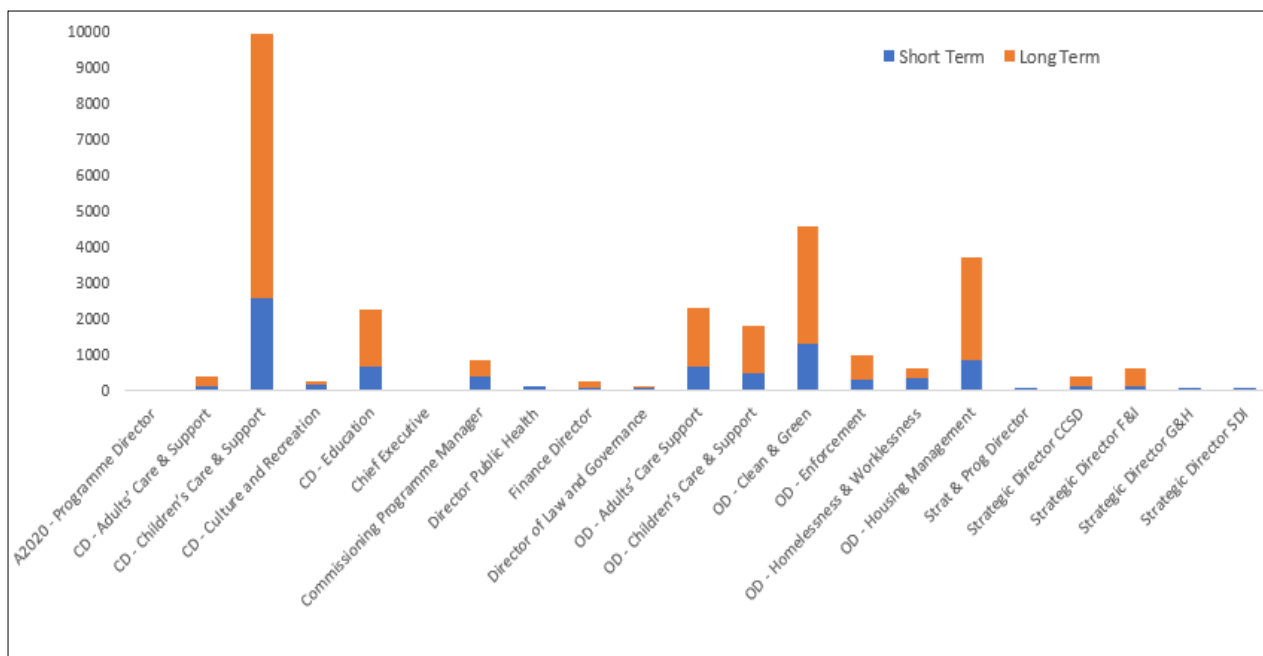
Director	Average Days Per Headcount
OD - Clean & Green	14.61
Strategic Director F&I	14.17
CD - Children's Care & Support	10.86

OD - Housing Management	10.01
OD - Children's Care & Support	9.00
OD - Adults' Care Support	8.42
CD - Education	6.61
Strategic Director CCSD	6.48
OD - Enforcement	6.12
CD - Adults' Care & Support	6.11
Director Public Health	6.00
Finance Director	4.69
OD - Homelessness & Worklessness	4.02
Strategic Director G&H	3.50
CD - Culture and Recreation	2.70
Commissioning Programme Manager	1.99
Strategic Director SDI	1.00
Director of Law and Governance	1.28
Strat & Prog Director	0.54
A2020 - Programme Director	0.00
Chief Executive	0.00
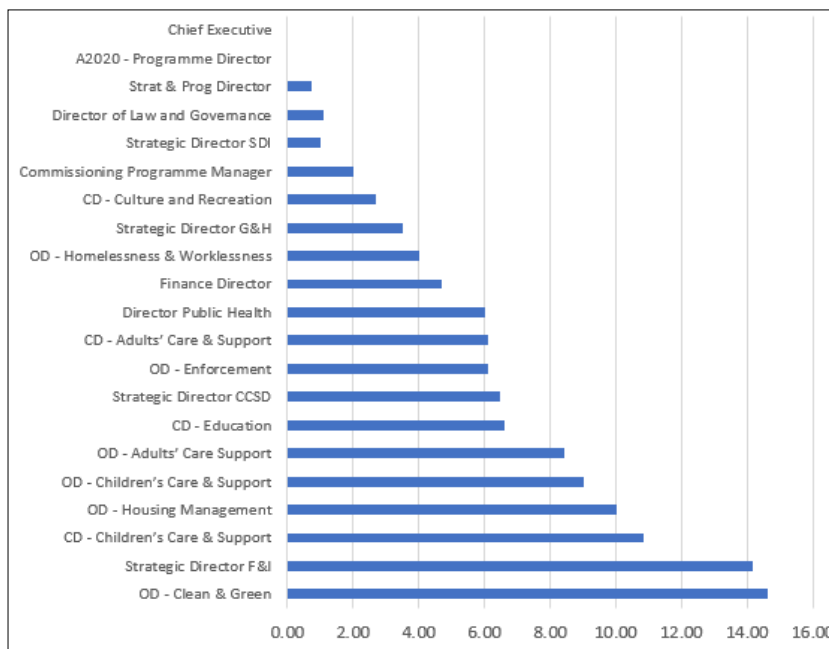
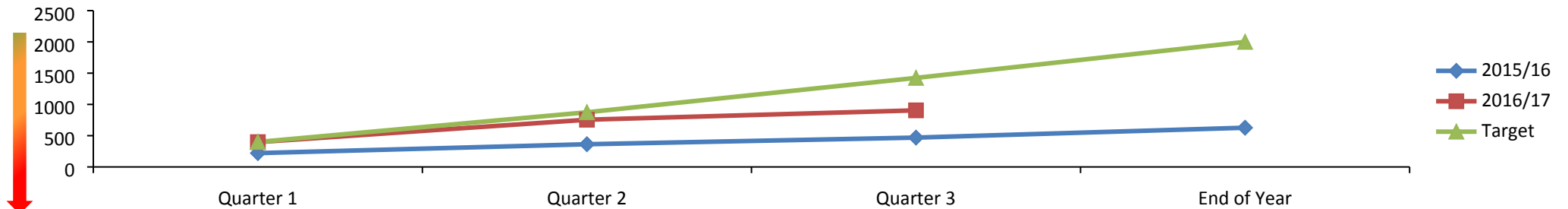| EQUALITIES AND COHESION			Quarter 3 2016/17
KPI 33 – The percentage of staff who are satisfied working for the Council			
Definition	The responses to questions in the Staff Temperature Check Survey on working for the Council.	**How this indicator works**	This is a survey of a representative cross section of the workforce and is followed by focus groups to explore the results. The results are reported to the Workforce Board, Members at the Employee Joint Consultative Committee, Trade Unions and Staff Networks and published on Intranet
What good looks like	That the positive response rate is maintained and continues to improve.	**Why this indicator is important**	Staff temperature checks are "statistically valid" and this indicator provides an important measure of how staff are engaged when going through major change; it gives them an opportunity to say how this is impacting on them.
History with this indicator	The Staff Temperature Check Survey is run two or three times a year and the questions are linked to those in the all Staff Survey to enable benchmarking with previous years back to 2006.	**Any issues to consider**	Depends on how changes and restructures continue to be managed locally and / or the impact on the individuals in those areas.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	75.52%	Survey not conducted	76%		
Target	70%	70%	70%	70%	↑
2015/16	73.20%	Survey not conducted	75.80%	Survey not conducted	

Performance Overview	The temperature check was circulated to all employees through an online survey, and a paper copy to those without regular access to PCs. The response rate for this survey has increased overall, and there were more paper copies returned than the previous quarter. The percentage of staff satisfied with working for the Council continues to be above target and has remained at the same level as Quarter 1. This is a positive measure, as the number of staff taking part in the survey increased, making the results more reliable. Maintaining high levels of satisfaction with working with the Council during a period of significant change is a very encouraging engagement measure.	Actions to sustain or improve performance	We continue to working with managers of staff without regular access to PCs. Their active involvement has led to an increase in the response rate from this group. In addition, Directors encouraged all staff to participate. We plan to run focus groups with staff to help us understand the temperature check results overall, and engage with them further. Service specific staff roadshows are planned between January and April, and a follow up temperature check will be run in April/May 2017.
G			
Benchmarking	No benchmarking data available – Local measure only		

Environment and Street Scene – Key Performance Indicators 2016/17

ENVIRONMENT AND STREET SCENE			
KPI 6 – The weight of fly tipped material collected (tonnes)			**Quarter 3 2016/17**
Definition	Fly tipping refers to dumping waste illegally instead of using an authorised method.	**How this indicator works**	(1) Fly-tip waste disposed at Material Recycling Facility and provided with weighbridge tonnage ticket to show net weight. The weights for all vehicles are collated monthly by East London Waste Authority (ELWA) and sent to boroughs for verification. (2) Following verification of tonnage data, ELWA sends the data to the boroughs and this is the source information for reporting the KPI.
What good looks like	In an ideal scenario fly tipping trends should decrease year on year and below the corporate target if accompanied by a robust enforcement regime.	**Why this indicator is important**	In order to show a standard level of cleanliness in the local authority, fly tipping needs to be monitored. This reflects civic pride and the understanding the residents have towards our service and their own responsibilities.
History with this indicator	2015/16 – 627 tonnes collected 2014/15 – 709 tonnes collected	**Any issues to consider**	During Christmas and New Year, fly-tipped waste tends to increase.

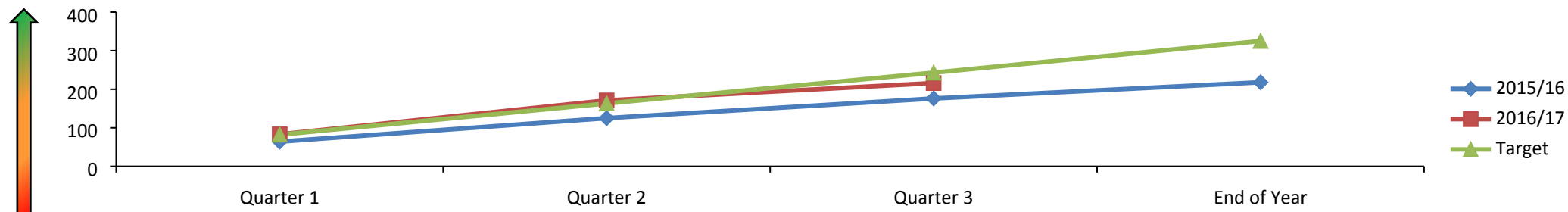|	Quarter 1	Quarter 2	Oct 16 and Nov 16	End of Year	DOT from Qtr 3 2015/16
2016/17	397 tonnes	755 tonnes	905 tonnes		
Target	399 tonnes	874 tonnes	1,424 tonnes	2,000 tonnes	↓
2015/16	221 tonnes	363 tonnes	469 tonnes	627 tonnes	

Performance Overview	*We are yet to receive the December 2016 actual figures for this indicator from East London Waste Authority (ELWA). It is anticipated that by the end of January, will received the actual figures for December 2016. Therefore, we are only able to report the actual figures for October – 83.92 tonnes and November – 66.56 tonnes, making the total for quarter 3 thus far to 905 tonnes. Based on these figures, the prediction is that the year-end actual tonnage for this indicator is likely to be below the target of 2000 tonnes.	Actions to sustain or improve performance	Work has also been carried out to monitor our waste tonnage data monthly to be more accurate and have found that there were some discrepancies where waste had been allocated to the wrong waste type. We are now confident that we measure fly-tipped waste separately from household bulky waste which has resulted in higher fly tipped waste when compared to last quarter. Fly-tipped waste correctly removed from the domestic waste stream also improves our recycling rates and residual waste per household indicators respective. Further work includes: • The continuing work of the area managers and enforcement team to pursue and prosecute fly-tippers. • Quick response to fly-tips stops them from building up and increasing the tonnage and may deter those who would add to existing fly-tips.
G			
Benchmarking	We benchmark our fly tipping waste on a monthly basis with other ELWA partners. However, figures do not necessarily compare due to individual borough characteristics (population, housing stock etc).		

ENVIRONMENT AND STREET SCENE
KPI 7 – The weight of waste recycled per household (kg)
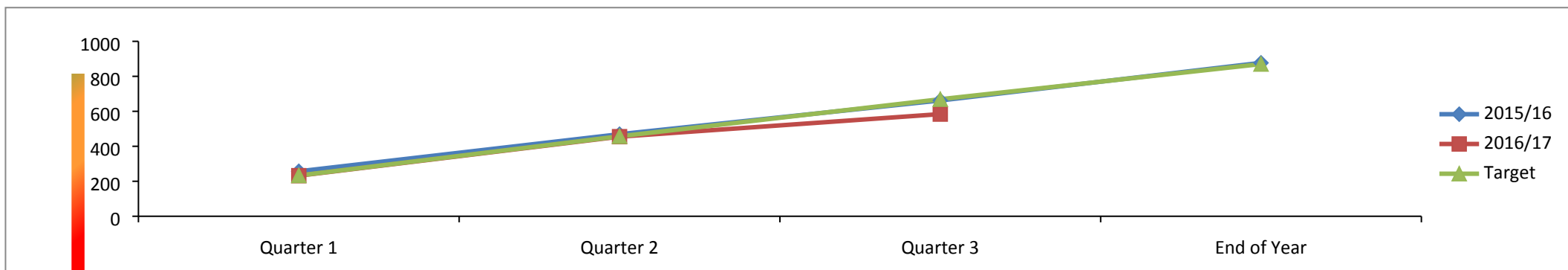**Quarter 3 2016/17**

Definition	Recycling is any recovery operation by which waste materials are reprocessed into products, materials or substances whether for the original or other purposes.	How this indicator works	This indicator is the result of all recyclate collected through our brown bin recycling service, brink banks, RRC (Reuse & Recycling Centre) and 'back-end' recycling from the Mechanical and Biological Treatment (MBT) Plant. The total recycled materials weight in kilograms is divided by the total number of households in the borough (74,344 households 2016/17).
What good looks like	An increase in the amount of waste recycled per household.	Why this indicator is important	It helps us understand public participation. It is also important to evaluate this indicator to assess operational issues and look for improvements in the collection service.
History with this indicator	2015/16 – 218kg per household 2014/15 – 291kg per household	Any issues to consider	August recycling low due to summer holidays.

	Quarter 1	Quarter 2	Oct 16 and Nov 16	End of Year	DOT from Qtr 3 2015/16
2016/17	83 kg	171 kg	216 kg		
Target	82 kg	163 kg	243 kg	325kg	↑
2015/16	64 kg	125 kg	176 kg	218kg	

Performance Overview **G**	*We are yet to receive the December 2016 actual figures for this indicator from East London Waste Authority (ELWA). It is anticipated that by the end of January, will received the actual figures for December 2016. Therefore, we are only able to report the actual figures for October – 23.23 kg per household and November – 21.42 kg per household, making the total for quarter 3 thus far to 216 kg. It is anticipated that the recycling rate at year-end will hold strong when compared to last year.	**Actions to sustain or improve performance**	The Waste Minimisation Team continue to tackle the issue of contamination as part of the kerbside collection. Addressing this issue will be crucial to maintain LBBD's recycling rate. The Waste Minimisation Team are currently completing a request for funding from Resource London, for a substantial review of contamination in LBBD's recycling collection to better target the issue. The team also responds to direct reports of contamination from crews and supervisors and directly engaging the residents, instructing and educating to resolve contamination from households.
Benchmarking	We benchmark our recycling waste on a monthly basis with other ELWA partners. LBBD is ranked third out of the four ELWA boroughs (1st Havering; 2nd Redbridge; 3rd LBBD and 4th Newham). However, figures do not necessarily compare due to individual borough characteristics (population, housing stock etc.)		

ENVIRONMENT AND STREET SCENE
KPI 8 – The weight of waste arising per household (kg)

Quarter 3 2016/17

Definition	Waste is any substance or object which the holder discards or intends or is required to discard and that cannot be recycled or composted.	**How this indicator works**	This indicator is a result of total waste collected through kerbside waste collections, Frizlands RRC (Reuse & Recycling Centre), bulky waste and street cleansing minus recycling and garden waste collection tonnages. The residual waste in kilograms is divided by the number of households in the borough (74,344 households 2016/17).
What good looks like	A reduction in the amount of waste collected per household.	**Why this indicator is important**	It reflects the council's waste generation intensities which are accounted on a monthly basis. It derives from the material flow collected through our grey bin collection, Frizlands RRC residual waste, bulk waste and street cleansing collections services.

History with this indicator	2015/16 – 877kg 2014/15 – 952kg		Any issues to consider	Residual waste generally low in month of August due to summer holidays and high during Christmas/New Year and Easter breaks.

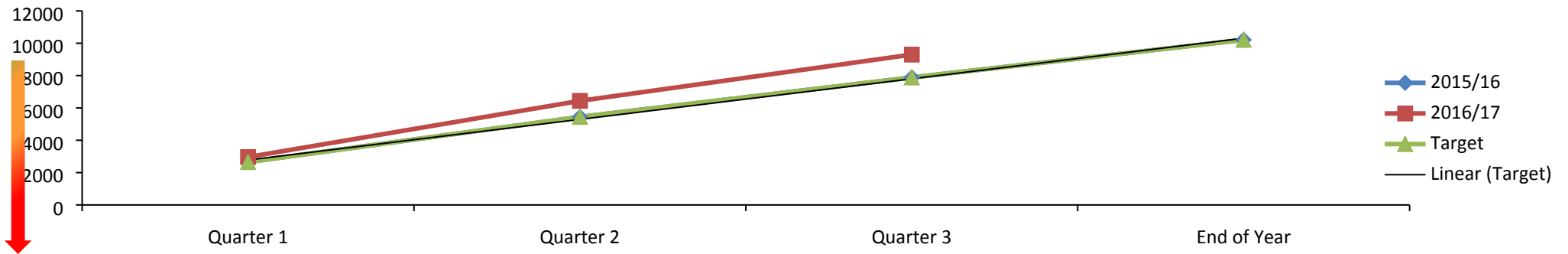|	Quarter 1	Quarter 2	Oct 16 and Nov 16	End of Year	DOT from Qtr 3 2015/16
2016/17	232 kg	455 kg	584 kg		↑
Target	233 kg	457 kg	669 kg	870 kg	
2015/16	257 kg	469 kg	662 kg	877 kg	

Performance Overview	*We are yet to receive the December 2016 actual figures for this indicator from East London Waste Authority (ELWA). It is anticipated that by the end of January, will received the actual figures for December 2016. Therefore, we are only able to report the actual figures for October – 62.32 kg per household and November – 66.97 kg per household, making the total for quarter 3 thus far to 584 kg. this good performance is due in part to the increase in the levels of recycling this year when compared to last year. Among other things, the more we recycle, the lower the residual waste per household.	Actions to sustain or improve performance	Work is being continued to police the number of large bins being delivered. Increased communications campaigns such as the one tonne tour and the slim your bin campaign are also ramping up through the winter. Corrections to waste reporting have started to have any impact on high household waste levels with waste being correctly categorised and removed from the household waste stream.
G			
Benchmarking	We benchmark our fly tipping waste on a monthly basis with other ELWA partners. However, figures do not necessarily compare due to individual borough characteristics (population, housing stock etc.).		

Enforcement and Community Safety – Key Performance Indicators 2016/17

ENFORCEMENT AND COMMUNITY SAFETY	Quarter 3 2016/17
KPI 9 – The number of ASB incidents reported in the Borough (ASB Team, Housing, Environmental and Enforcement and Police)	

Definition	Anti-social behaviour (ASB) includes Abandoned Vehicles, Vehicle Nuisance, Rowdy/Inconsiderate Behaviour, Rowdy /Nuisance Neighbours, Malicious/Nuisance Communications, Street Drinking, Prostitution Related Behaviour, Noise and Begging.	**How this indicator works**	Simple count of ASB incidents reported to the following ASB services: The Council ASB Team, Environmental and Enforcement Services, Housing Services, Police
What good looks like	Ideally we would see a year on year reduction in ASB calls reported to the Police and Council.	**Why this indicator is important**	ASB is a Community Safety Partnership priority.
History with this indicator	2015/16: 10,208 calls 2014/15: 11,828 calls	**Any issues to consider**	Corporate reporting measures the combined number of ASB incidents reported to the Police and Council. Police only figures are also reported separately within the organisation.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from Qtr 3 2015/16
2016/17	2,962	6,436	9,297		
Target	2,651	5,442	7,883	10,207	
2015/16	2,652	5,443	7,884	10,208	

Performance Overview	Overall combined reports to ASB services is up 10% (+869 incidents) year to date at December 2016 compared to the previous year. ASB calls to the Police are up by 620 incidents (+14%). Overall there has been a 17% increase (up 529 incidents) in ASB reported to both the Council's ASB team and Environmental and Enforcement services ASB incidents reported to Housing was down by 58% compared to the same point last year although this is mainly due to recording issues.	Actions to sustain or improve performance	There is a plan in place to address ASB in the main hotspot areas of Abbey / Gascoigne and Academy Way. This plan includes: 1. Operation Avarice targeting antisocial behaviour and disorder in Barking Town Centre. 2. Action is being taken against key individuals who are believed to be involved in antisocial behaviour to manage their behaviour in the longer term.
R			
Benchmarking	There is currently no mechanism to benchmark ASB incidents across London Councils.		

KPI 9 – The number of ASB incidents reported in the Borough (Additional information)

Breakdown of ASB categories and types to partnership services

1.1 Breakdown of ASB reported to the police

Asb Type	Asb Category	2015/16 YTD to Dec 2015	2016/17 YTD to Dec 2016	% change	Difference	% of ASB type YTD at Dec 2016	% of overall ASB YTD at Dec 2016
ASB Environmental	Animal Problems	1	2	100.0%	1	1.4%	0.0%
	ASB Nuisance	1		-100.0%	-1	0.0%	0.0%
	Begging / Vagrancy	7	1	-85.7%	-6	0.7%	0.0%
	Fireworks	1	5	400.0%	4	3.5%	0.1%
	Littering / Drugs Paraphernalia	24	21	-12.5%	-3	14.7%	0.4%
	Noise	21	20	-4.8%	-1	14.0%	0.4%
	Not Mapped	15	16	6.7%	1	11.2%	0.3%
	Prostitution Related Activity	1	3	200.0%	2	2.1%	0.1%
	Rowdy / Nuisance Neighbours	14	16	14.3%	2	11.2%	0.3%
	Rowdy Or Inconsiderate Behaviour	22	16	-27.3%	-6	11.2%	0.3%

Asb Type	Asb Category	2015/16 YTD to Dec 2015	2016/17 YTD to Dec 2016	% change	Difference	% of ASB type YTD at Dec 2016	% of overall ASB YTD at Dec 2016
	Trespass	8	17	112.5%	9	11.9%	0.3%
	Vehicle Abandoned - Not stolen	7	9	28.6%	2	6.3%	0.2%
	Vehicle Nuisance / Inappropriate Use	10	17	70.0%	7	11.9%	0.3%
ASB Environmental Total		**132**	**143**	**8.3%**	**11**	**100.0%**	**2.8%**
ASB Nuisance	Animal Problems	23	14	-39.1%	-9	0.3%	0.3%
	ASB Environmental	1	5	400.0%	4	0.1%	0.1%
	ASB Nuisance		1	100.0%	1	0.0%	0.0%
	ASB Personal	5	3	-40.0%	-2	0.1%	0.1%
	Begging / Vagrancy	146	231	58.2%	85	5.1%	4.5%
	Fireworks	87	147	69.0%	60	3.3%	2.9%
	Littering / Drugs Paraphernalia	20	21	5.0%	1	0.5%	0.4%
	Noise	306	321	4.9%	15	7.1%	6.3%
	Not Mapped	255	360	41.2%	105	8.0%	7.1%
	Nuisance Calls	8		-100.0%	-8	0.0%	0.0%
	Prostitution Related Activity	28	24	-14.3%	-4	0.5%	0.5%
	Rowdy / Nuisance Neighbours	507	502	-1.0%	-5	11.1%	9.8%
	Rowdy Or Inconsiderate Behaviour	1654	1926	16.4%	272	42.7%	37.8%
	Street Drinking	21	16	-23.8%	-5	0.4%	0.3%
	Trespass	109	136	24.8%	27	3.0%	2.7%
	Veh Abandoned - Not stolen	77	91	18.2%	14	2.0%	1.8%
	Veh Nuisance / Inappropriate Use	606	716	18.2%	110	15.9%	14.0%
ASB Nuisance Total		**3853**	**4514**	**17.2%**	**661**	**100.0%**	**88.5%**
ASB Personal	Animal Problems	4	5	25.0%	1	1.1%	0.1%
	ASB Environmental	2	1	-50.0%	-1	0.2%	0.0%
	ASB Nuisance	5	2	-60.0%	-3	0.5%	0.0%

Asb Type	Asb Category	2015/16 YTD to Dec 2015	2016/17 YTD to Dec 2016	% change	Difference	% of ASB type YTD at Dec 2016	% of overall ASB YTD at Dec 2016
	Begging / Vagrancy	5	2	-60.0%	-3	0.5%	0.0%
	Fireworks	1	2	100.0%	1	0.5%	0.0%
	Littering / Drugs Paraphernalia	2	1	-50.0%	-1	0.2%	0.0%
	Noise	9	12	33.3%	3	2.7%	0.2%
	Not Mapped	35	49	40.0%	14	11.1%	1.0%
	Nuisance Calls	1		-100.0%	-1	0.0%	0.0%
	Prostitution Related Activity		6	600.0%	6	1.4%	0.1%
	Rowdy / Nuisance Neighbours	206	149	-27.7%	-57	33.8%	2.9%
	Rowdy Or Inconsiderate Behaviour	171	166	-2.9%	-5	37.6%	3.3%
	Street Drinking		1	100.0%	1	0.2%	0.0%
	Trespass	7	3	-57.1%	-4	0.7%	0.1%
	Vehicle Abandoned - Not stolen	3	2	-33.3%	-1	0.5%	0.0%
	Vehicle Nuisance / Inappropriate Use	42	40	-4.8%	-2	9.1%	0.8%
ASB Personal Total		**493**	**441**	**-10.5%**	**-52**	**100.0%**	**8.7%**
Grand Total		**4478**	**5098**	**13.8%**	**620**		**100.0%**

1.2 Breakdown of number of ASB reports to Police per ward using 2016/17 YTD figures at Dec 2016

Ward	2015/16 YTD to Dec 2015	2016/17 YTD to Dec 2016	% Change	Difference
Abbey	662	954	44.1%	292
Alibon	110	179	62.7%	69
Becontree	226	349	54.4%	123
Chadwell Heath	180	175	-2.8%	-5
Eastbrook	213	174	-18.3%	-39
Eastbury	233	294	26.2%	61
Gascoigne	221	258	16.7%	37

Goresbrook	204	238	16.7%	34
Heath	307	256	-16.6%	-51
KG Not Mapped	44	79	79.5%	35
Longbridge	205	211	2.9%	6
Mayesbrook	289	253	-12.5%	-36
Parsloes	127	197	55.1%	70
River	250	254	1.6%	4
Thames	503	515	2.4%	12
Valence	151	227	50.3%	76
Village	295	226	-23.4%	-69
Whalebone	258	259	0.4%	1
Grand Total	**4478**	**5098**	**13.8%**	**620**

1.3 ASB reported to Council ASB Team and Environmental Enforcement Services as recorded on Flare

ASB reported to the Council's ASB Team and Environmental and Enforcement Services combined (Taken from Flare Database)					
CATEGORY	2015/16 YTD at Qtr 3	2016/17 YTD at Qtr 3	% Change	Difference	% of 2016/17 YTD Total
(ASB) Criminal damage / vandalism	11	9	-18.2%	-2	0.2%
(ASB) Drug Related	27	10	-63.0%	-17	0.3%
(ASB) Environmental	28	21	-25.0%	-7	0.5%
(ASB) General Harassment	48	50	4.2%	2	1.3%
(ASB) Vehicle related nuisance	16	13	-18.8%	-3	0.3%
(ENF) ASB	0	3	300%	3	0.1%
(EYE) *Eyesore garden	1682	1963	16.7%	281	49.3%
(FR) Noise - Animals	1	1	0.0%	0	0.0%
(FR) Noise - People, DIY, music	8	18	125.0%	10	0.5%
(GRAF) *Graffiti - Non Offensive	498	273	-45.2%	-225	6.9%
(GRAF) *Graffiti - Offensive	201	146	-27.4%	-55	3.7%
(Noise/ASB) *Noise	93	117	25.8%	24	2.9%

(NSE) CIEH - Other Animals and	23	19	-17.4%	-4	0.5%
(NSE) CIEH - People Noise (e.g	813	1335	64.2%	522	33.6%
Grand Total	3449	3978	15.3%	529	100.0%

1.4 ASB reported to the Councils Housing Services as recorded on Capita

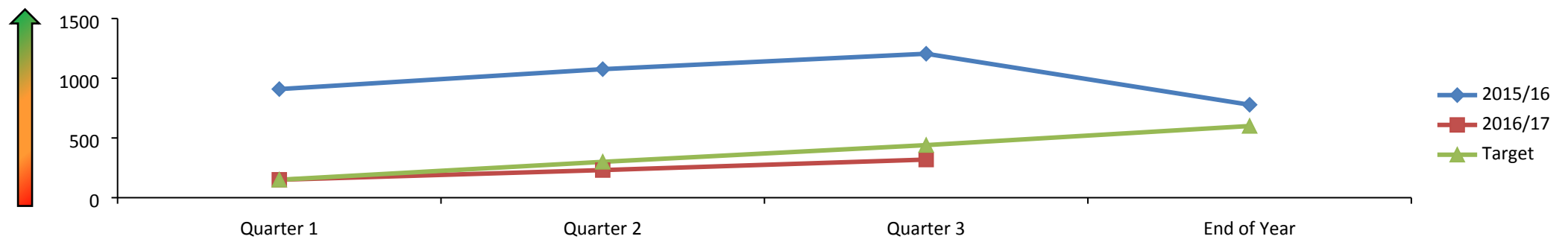|	2015/16 YTD at Qtr 3	2016/17 YTD at Qtr 3	% Change	Difference	% of 2016/17 YTD total at Dec 2016
ASB ABANDONED NUISANCE VEHICLE	1	1	0.0%	0	0.5%
ASB ALCOHOL MISUSE	2	3	50.0%	1	1.4%
ASB BULK WASTE REMOVAL	5	0	-100.0%	-5	0.0%
ASB CRIMINAL BEHAVIOUR	17	11	-35.3%	-6	5.0%
ASB DOMESTIC VIOLENCE	11	5	-54.5%	-6	2.3%
ASB DRUG MISUSE OR DEALING	31	19	-38.7%	-12	8.6%
ASB HARASSMENT OR INTIMIDATION	100	70	-30.0%	-30	31.7%
ASB HATE CRIME	9	6	-33.3%	-3	2.7%
ASB LITTER REFUSE FLY-TIPPING	49	6	-87.8%	-43	2.7%
ASB MISUSE OF COMMUNAL AREAS	95	24	-74.7%	-71	10.9%
ASB NOISE NUISANCE	128	59	-53.9%	-69	26.7%
ASB PHYSICAL VIOLENCE	5	6	20.0%	1	2.7%
ASB SEXUAL ACTS OR SEX TRADE	2	2	0.0%	0	0.9%
ASB VANDALISM OR DAMAGE	30	10	-66.7%	-20	4.5%
MARAC	16	0	-100.0%	-16	0.0%
Total	**501**	**221**	**-55.9%**	**-280**	**100.0%**

Definition	The number of the 7 neighbourhood crimes (burglary, criminal damage, robbery, theft from a motor vehicle, theft from a person, theft of a motor vehicle and violence with injury) that occur in the borough	How this indicator works	The Mayor's Office for Policing and Crime (MOPAC) introduced London's first Police and Crime Plan which set out what the Mayor wanted to achieve by 2016 – reducing the 7 priority neighbourhood crimes.
What good looks like	The Police and Crime Plan set out MOPAC's challenge to the Metropolitan Police Service to cut 7 neighbourhood crimes by 20% on the 2011/12 baseline to the end of 2015/16.	Why this indicator is important	The MOPAC 7 have been identified as priority neighbourhood crime.
History with this indicator	Barking and Dagenham met the MOPAC challenge to reduce priority crimes by 20% by March 2016 from the 2011/12 baseline (10549), so performance was good. The London average during this period was 18.9% which means the target for London was not met but we achieved our contribution.	Any issues to consider	There will be seasonal variations for the individual crime types. The Mayor's office is reviewing the Mayor priorities and new targets will be issued in January 2017.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from Qtr 3 2015/16
2016/17	8,390	8,418	8,252		
Target	8,439	8,439	8,439	8,439	
2015/16	7,915	8,147	8,241	8,129	

Performance Overview	Using rolling 12 month figures to (3rd January 2017) (8252) the average across the year is -21.8% against the 2011/12 baseline (10,549). The partnership continues to achieve the 20% reduction against the 2011/12 baseline.	Actions to sustain or improve performance	Burglary - Target hardening through the work of the Community Safety Team in crime prevention road shows. Robbery - Robust targeting of offenders and visible policing in areas identified through crime mapping. Criminal Damage - The Police's proactive response to criminal damage has increased, leading to an increase in the number of arrests for going equipped to commit criminal damage Theft from person: In order to continue to tackle theft from person, the police are currently working on an initiative with the Safer Transport Command aimed at identifying and targeting known 'dippers'.
G			
Benchmarking	The average across the Metropolitan Police is -16.5%.		

ENFORCEMENT AND COMMUNITY SAFETY

Quarter 3 2016/17

KPI 11 – The number of properties brought to compliance by private rented sector licensing

Definition	The number of unlicensed non-compliant properties brought to licence by the private sector.	How this indicator works	This indicates the activities relating to the number of unlicensed properties brought to licence through the licensing scheme.
What good looks like	An increase in the number of unlicensed properties brought to licence	Why this indicator is important	We are aware of 2000 properties that are currently unlicensed and are required to be licensed under the Housing Act 2004. As an enforcement service, we need to ensure those properties are brought into compliance through enforcement licensing intervention.
History with this indicator	The scheme has been live since September 2014, and compliance visits have now peaked, from the estimated 16,000 properties in the borough targeted for compliance.	Any issues to consider	Compliance visits are generally low during Christmas and year end due to staff taking holidays.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from Qtr 3 2015/16
2016/17	150	231	319		
Target	150	300	440	600	↓
2015/16	909	1,985	3,190	909	

| Performance Overview | Approximately 16,000 properties licensable properties where identified at the beginning of the private rented licensing scheme on 2014. To date around 12,700 have applied for a licence. A further 2,000 are not eligible for a licence. As a result, the focus of the service is to target the outstanding 1,400 properties who have failed to register. As a result, the target for the number of properties brought to compliance is low when compared to the previous quarter. Officers have been set a target of visiting 100 unlicensed properties per month, and through enforcement intervention aims to bring to licence 50 unlicensed properties. All landlords that fail to licence will be prosecuted. | Actions to sustain or improve performance | There are approximately 1,400 properties left to inspect, these are licensed and require a compliance visit. It is anticipated that these will likely be made compliant through informal or enforcement action. We will continue to inspect properties that become licensed.

Whilst the compliance rate is strong, this indicator doesn't reflect the level of enforcement intervention taken to regulate those that were non-compliant and are unlicensed.

We anticipated that the properties that licence in year 1&2 would be compliant. |
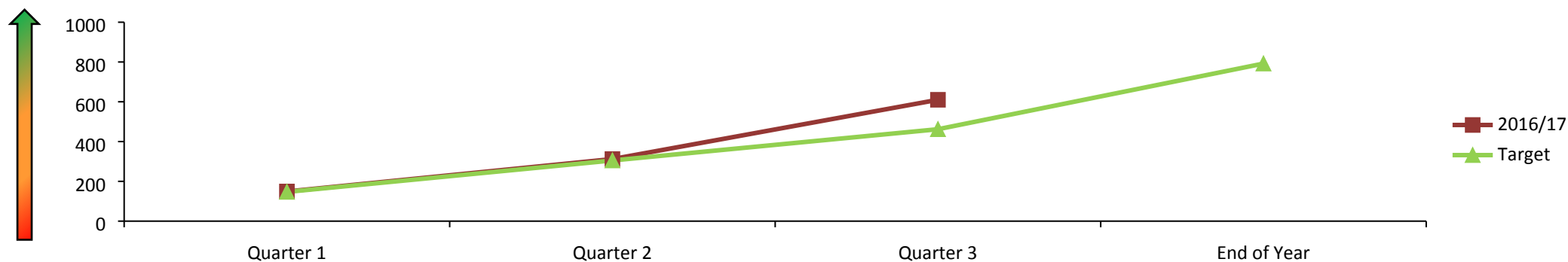| --- | --- | --- | --- |
| **R** | | | |
| Benchmarking | There is no national comparison but provisional benchmarking indicates that 6 visits a day per compliance officer would be reasonable. LBBD is the only borough that requires an inspection prior to licensing. Other Boroughs do not have direct targets for compliance visits. However, a working group for the LB of Waltham Forest and the LB of Enfield is now on-going and this is expected to show some constituency and comparison between boroughs. | | |

ENFORCEMENT AND COMMUNITY SAFETY   **Quarter 3 2016/17**
KPI 12 – The number of fixed penalty notices paid / collected

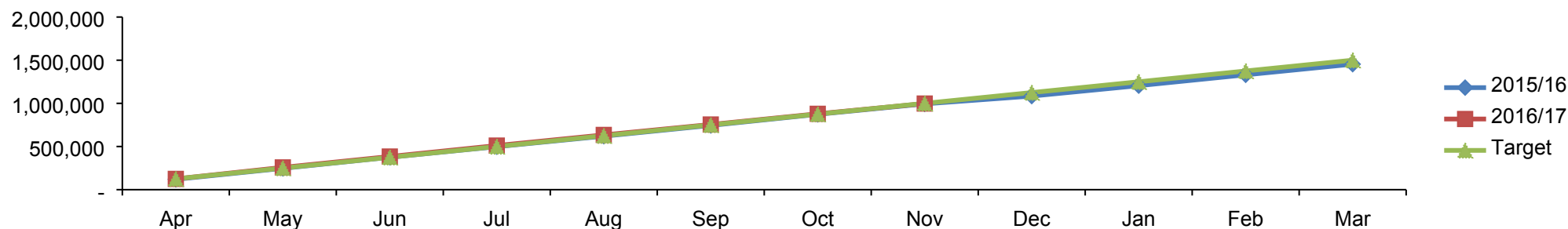| Definition	There is a target to issue 1,056 fixed penalty notices (FPNs) within the financial year. Of those issued a target collection rate of 75% has been set.	Why this indicator is important	This indicator shows how many FPNs are issued by the team on a monthly basis. This indicator allows Management to see if team outputs are reaching their minimum levels of activity which allows managers to forecast trends. It also allows the management team to track the % of FPNs that are recovered within the month.

What good looks like	This is a new indicator with no historical data for comparison. The direction of travel for this indicator could only be compared from quarter to quarter in this financial year 2016/17.	**Any issues to consider**	Enforcement activities are generally low during Christmas and year end due to staff taking holidays.
History with this indicator	There is a target to issue 1,056 FPNs within the financial year. Of those issued a target collection rate of 75% has been set.	**Why this indicator is important**	This indicator shows how many FPNs are issued by the team on a monthly basis. This indicator allows Management to see if team outputs are reaching their minimum levels of activity which allows managers to forecast trends. It also allows the management team to track the % of FPNs that are recovered within the month.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from Qtr 3 2015/16
2016/17	149	312	610		**n/a**
Target	147	305	462	792	
2015/16	New performance measure for 2016/17				

Performance Overview **G**	A new service target of 1,056 fixed penalty notices (FPN's) per year has been set for 2016/17. This equates to 88 FPN's per month. The target for the percentage of fixed penalty notice paid/collected is set at 75%. Being a new indicator, this will be reviewed quarterly and the in-year adjustments made accordingly.	**Actions to sustain or improve performance**	The service has gone through a restructure. Agency staff have been replaced with permanent officers. It is expected that the number of FPNs will rise steadily.
Benchmarking	It is difficult to benchmark at present as the Team is developing its skills and working practices. Also, the service is currently going through a restructure. Due to this the overall performance of the team is low due to this transitional period.		

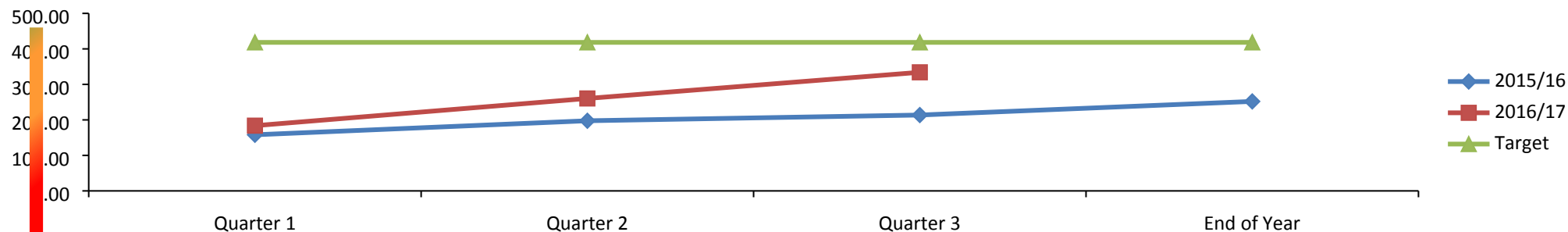# Social Care and Health Integration – Key Performance Indicators 2016/17

SOCIAL CARE AND HEALTH INTEGRATION KPI 13 – The number of leisure centre visits			Quarter 3 2016/17
Definition	The number of visits to Abbey and Becontree leisure centres.	**How this indicator works**	The indicator shows the number of visits to Becontree and Abbey leisure centres.
What good looks like	The target for Leisure Centre Visits is 1,490,000	**Why this indicator is important**	Low levels of physical activity are a risk factor for ill health and contribute to health inequality. This indicator supports the council in successfully delivering the physical activity strand of the Health and Well Being Strategy. Meeting the target also supports the financial performance of the leisure centres.
History with this indicator	**Total Leisure Centre Visits:** 2013/14 = 1,244,668, 2014/15 = 1,282,430, 2015/16 = 1,453,925	**Any issues to consider**	Performance for July and August 2016 only. Performance for all the entire Quarter 2 period will be available at Quarter 3.

	Quarter 1	Quarter 2	Oct	Nov	Dec	End of Year	DOT from Qtr 3 2015/16
2016/17	383,895	754,935	878,952	997,736	tbc		↑
Target	367,500	735,000	1,117,500			1,490,000	
2015/16	375,388	744,287	1,084,465			1,453,925	

Performance Overview	• There were 123,325 visits across both leisure centres in August 2016; a **1.2%** increase compared to August 2015. • To date there have been a total of 634,133 visits to both centres between April and August 2016. This figure compares to 619,990 between April and August 2015. This is an annual increase of 14,143 visits or **2.28%.** • Abbey has seen a slight reduction in numbers attending compared to the previous year for August and YTD with a 8.4%		• The One Borough Show was attended by the leisure centre's active team to help promote the centres and memberships. A number of leads were generated which have been followed up. • A 'Summer Sizzler' health and fitness membership promotion was launched on 18 July and runs until 31 August 2016. The promotion is for a six week membership for £75.00. After six
G		**Actions to sustain or improve**	

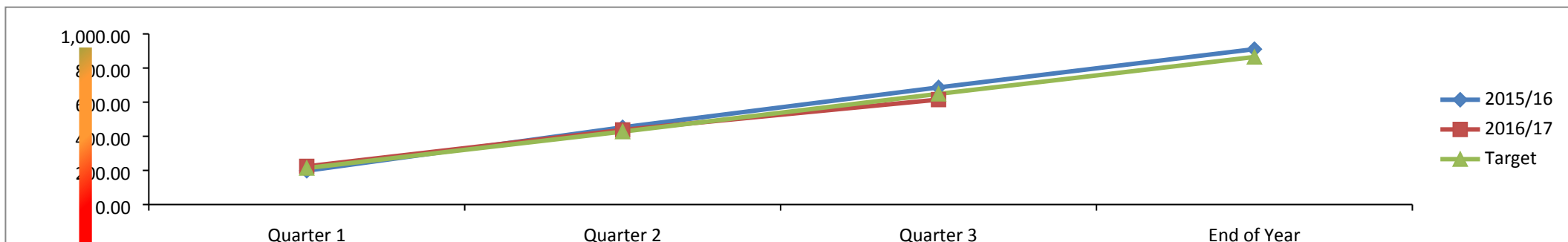|		
■	and 7.7% reduction respectively. • Becontree Heath has an increase of attendance for the month compared to the previous year (1.9%) however the YTD figure has remained similar to the previous year.	weeks there is a further offer of switching on to a direct debit membership without a joining fee. • A 'Summer Play Pass' soft play membership promotion was also launched on 25 July and runs until 31 August 2016. The promotion is for unlimited 2 hour play sessions on weekdays throughout the summer holidays.
Benchmarking	No benchmarking data available - local measure only	

SOCIAL CARE AND HEALTH INTEGRATION   **Quarter 3 2016/17**
KPI 14 - The total Delayed Transfer of Care Days (per 100,000 population)

Definition	Delayed transfers of care (delayed days) per 100,000 population aged 18 and over (attributable to either NHS, social care or both) per month. A delayed transfer of care occurs when a patient is ready for transfer from a hospital bed, but is still occupying such a bed. A patient is declared medically optimised and ready to transfer by the clinician(s) involved in their care. The hospital setting can be acute, mental health or non-acute.	**How this indicator works**	This indicator measures the total number of delayed days recorded in the month regardless of the responsible organisation (social care/ NHS). The figures shown below are per 100,000 18+ residents. Lower is better, in terms of performance, as it indicator that people are transferred as soon as they are able to do so.
What good looks like	Good performance would be under the Better Care Fund (BCF) target of 418.32 delayed days per month (per 100,000 pop).	**Why this indicator is important**	This indicator is important to measure as the average number of delayed days per month (per 100,000 pop) is included in the Better Care Fund performance monitoring.
History with this indicator	The 2014/15 yearly average for the number of delayed days per month was 129.31	**Any issues to consider**	Please note that these figures are taken from the Department of Health website and have **not** been verified by Barking and Dagenham Adult Social Care.

DTOC per 100,000	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	183.74	260.35	334.03		
Target	418.32	418.32	418.32	418.32	↑
2015/16	158.03	197.53	213.66	252	

Performance Overview	National guidance on recording a delayed transfer of care, revised in 2015, noted that a patient could be declared medically fit and ready for transfer whilst awaiting further care and assessments, which the guidance suggests may be carried out in a non-acute setting. Recording against the revised guidance began in August 2016, across BHR (Barking, Havering and Redbridge. The overall number of delayed days increased significantly from Q2 but as expected there has been little impact on social care's delayed days. Throughout October 473 days were lost due to delayed transfers. Of the days lost; 344 were the responsibility of the NHS, 76 were attributable to Social Care and 53 joint responsibility. When the 473 days lost is converted to a 'per 100,000' figure it becomes 334.03. Performance is good compared with both the target and the current average for England.	Actions to sustain or improve performance	There is currently a Delayed Transfers of Care Plan in place to reduce the number of delayed days. This is being monitored by the Joint Executive Management Committee who oversee the Better Care Fund.
G			

Benchmarking	Redbridge		Havering		England	
	Total = 495	Per 100,000 = 223.36	Average = 479	Per 100,00 = 245.79	Average = 200,008	Per 100,00 = 463.96

SOCIAL CARE AND HEALTH INTEGRATION			Quarter 3 2016/17
KPI 15 - The number of permanent admissions to residential and nursing care homes (per 100,000)			
Definition	The number of permanent admissions to residential and nursing care homes, per 100,000 population (65+)	**How this indicator works**	This indicator looks at the number of admissions into residential and nursing placements throughout the financial year, using a population figure for older people. A lower score is better as it indicates that people are being supported at home or in their community instead.
What good looks like	The Better Care Fund annual target has been revised to 170 admissions. This equates to 864.88 per 100,000 population	**Why this indicator is important**	The rate of permanent admissions to residential and nursing care homes is a good indication that people are supported in their own homes or in the community rather than being placed into long term residential care.

History with this indicator	2014-15 - 177 admissions, 905.9 per 100,000 2015-16 - 179 admissions, 910.0 per 100,000.		Any issues to consider	Not applicable		

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	223.7	437.24	615.18		
Target	213.67	427.34	648.66	864.88	↑
2015/16	198.28	452.49	686.36	910.7	

Performance Overview G	In the year to date there have been 121 admissions to care homes, equivalent to 615.18 per 100,000 people. The number and rate of admissions is lower than the same period last year when 135 people had been permanently admitted to a care home (686.36 per 100,000). This represents a significant improvement in performance, and we are currently on track to achieve the target.	Actions to sustain or improve performance	Integrated Care Group Managers monitor admissions to ensure that they are appropriate and no alternative provision is available in the community. Admissions are also monitored on a monthly basis through Activity and Budget meetings led by the Operational Director for Adult Care and Support.
Benchmarking	2015-16 Adult Social Care Outcomes Framework (ASCOF) comparator group average - 600.10 per 100,000		National average - 628.20 per 100,000

KPI 16 – The percentage of people who received a short-term service that went on to receive a lower level of support or no further service

Definition	The proportion of new clients who received a short-term service during the year where the sequel to service was either no on-going support or support of a lower level.	**How this indicator works**	It includes the number of new clients who had short-term support to maximise their independence (known locally as Crisis Intervention) and then went on to receive low level support or no further support. A higher score is better as it indicates the success of Crisis Intervention
What good looks like	A higher proportion of clients with no ongoing care needs indicates the success of Crisis Intervention in supporting people who have a crisis and helping them to remain living independently.	**Why this indicator is important**	The aim of short-term services is to re-able people and promote their independence. This measure provides evidence of a good outcome in delaying dependency or supporting recovery - short-term support that results in no further need for services.
History with this indicator	It is being reported in year for the first time in 2016-17. The previous annual values were: 2014-15 - 55% 2015-16 – 78.5%	**Any issues to consider**	Since 2014-15 this indicator had been calculated annually based on figures submitted in the Short and Long Term statutory return. 2016-17 is the first year it is reported in-year.

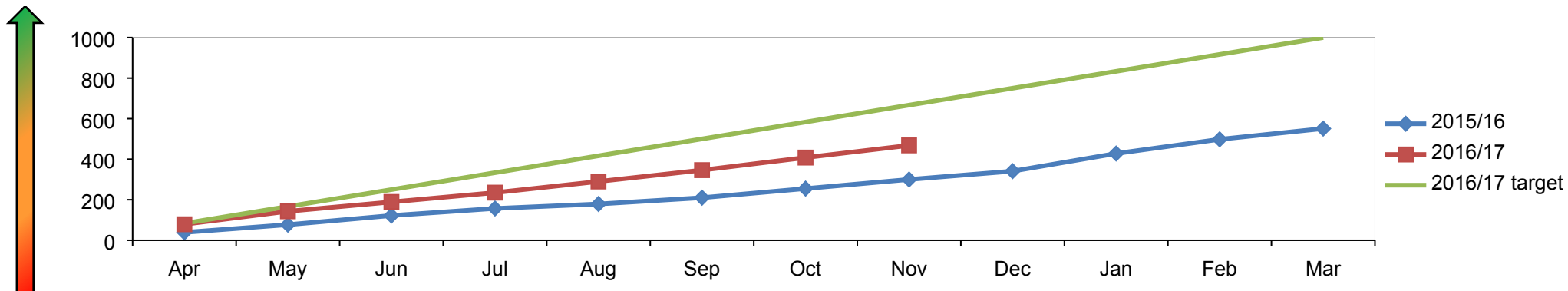|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	58.9%	59.8%	64.9%		↑
Target	65%	65%	65%	65%	
2015/16	67.7%	65.0%	61.1%	77.5%	

Performance Overview	In Q3 174 episodes of Crisis Intervention came to an end. Of these 64.9% (113) went onto have a low-level service, were signposted to other services or had no ongoing service. Performance has improved since the last quarter and is now 0.1% away from the target of 65%.	Actions to sustain or improve performance	Adult Social Care Group Managers closely monitor service length and the outcomes for people using the service. This indicator also monitored through Adult Social Care Performance Callover.
A			
Benchmarking	Adult Social Care Outcomes Framework (ASCOF) comparator group average – 70.8%		National average – 75.8%

SOCIAL CARE AND HEALTH INTEGRATION — Quarter 3 2016/17

KPI 17 – The number of successful smoking quitters aged 16 and over through cessation service

Definition	The number of smokers setting an agreed quit date and, when assessed at four weeks, self-reporting as not having smoked in the previous two weeks.	How this indicator works	A client is counted as a 'self-reported 4-week quitter' when assessed 4 weeks after the designated quit date, if they declare that they have not smoked, even a single puff of a cigarette, in the past two weeks.
What good looks like	For the number of quitters to be as high as possible and to be above the target line.	Why this indicator is important	The data allows us to make performance comparisons with other areas and provides a broad overview of how well the borough is performing in terms of four week smoking quitters.
History with this indicator	2012/13: 1,480 quitters 2013/14: 1,174 quitters 2014/15: 635 quitters 2015/16: 551 quitters	Any issues to consider	Due to the nature of the indicator, the quit must be confirmed at least 4 weeks after the quit date. This means that the data will likely increase upon refresh next month. Data is released with a time lag, so performance up to August is presented.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	189	346	468		↑
Target	250	500	750	1,000	
2015/16	122	210	341	551	

| Performance Overview | From April to November there have been 468 quitters. This is 47% achievement of yearly target; however, November figures are not yet complete.

Although the indicator is still RAG rated as Red, the figures continue to show an improvement in performance on the previous year; at this point in time, we are ahead by 153 quitters relative to November 15/16. | Actions to sustain or improve performance | Pharmacy are now the highest performing element of the services (192 quits), followed by Tier 3 (184) and then General Practice (92). Since Nov 1st, Tier 3 have been engaged in visiting and supporting the poorest performers in General Practice and pharmacy and will contribute to support areas of highest prevalence. The status of below target is largely due to the performance of GPs, actions are in place to address this. A full evaluation of the effectiveness of all the Stop Smoking programme has recently been completed by Public Health. Findings and recommendations are currently being considered with a view to redesigning the programme to ensure that it has a much stronger prevention focus on Children & Young People and that specialist interventions are more tightly tailored and targeted towards key vulnerable groups. Further detail on actions to improve this indicator is included in the RAG red additional commentary. |
|---|---|---|---|
| **R** | | | |
| Benchmarking | Between April and June 2016/17 there were 186 quitters, during the same period the following boroughs within the North-East London Region achieved the following number of quitters: Redbridge (44), Havering (2), Newham (20), Hackney (183), City of London (283), Waltham Forest (60) and Tower Hamlets (95). Quarter 2 data for Benchmarking will be available at the end of January. | | |

SOCIAL CARE AND HEALTH INTEGRATION
Quarter 3 2016/17

KPI 18 – The percentage uptake of MMR (Measles, Mumps and Rubella) vaccination (2 doses) at 5 years old

Definition	Percentage of children given two doses of MMR vaccination by their fifth birthday.	How this indicator works	MMR 2 vaccination is given at 3 years and 4 months to 5 years. This is reported by COVER based on RIO/Child Health Record.
What good looks like	Quarterly achievement rates to be above the set target of 95% immunisation coverage.	Why this indicator is important	Measles, mumps and rubella are highly infectious, common conditions that can have serious, potentially fatal, complications, including meningitis, swelling of the brain (encephalitis) and deafness. They can also lead to complications in

				pregnancy that affect the unborn baby and can lead to miscarriage.
History with this indicator	2011/12: 82.8%, 2012/13: 85.5%, 2013/14: 82.3%, 2014/15: 82.7%, 2015/16: 80.3%	**Any issues to consider**		Quarter 3 data 2016/17 is expected to be available March 2017.

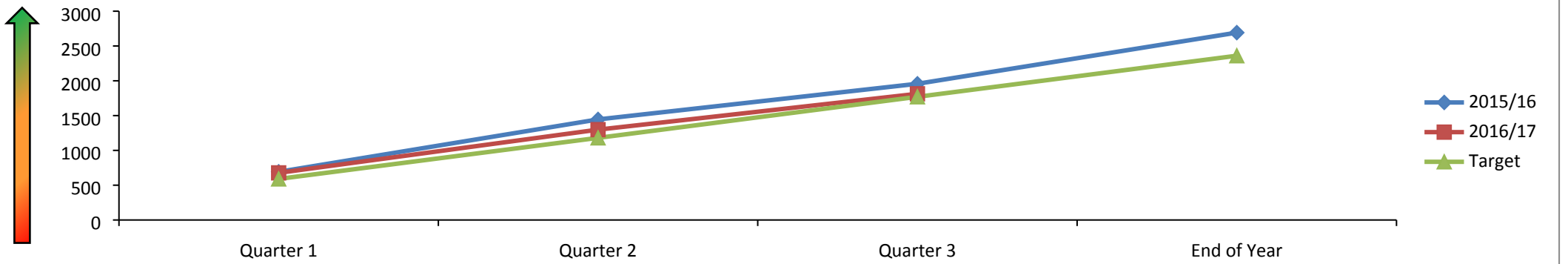|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	80.5%	82.5%	Data due March 2017		↑
Target	90%	90%	90%	90%	
2015/16	81.0%	81.2%	80.3%	78.6%	

Performance Overview	Poor performance is seen across the whole of London with this indicator, and the borough's performance is similar to the London average but is below the national average for England. Low immunisation coverage is a risk to unimmunised children who are at risk of infection from the vaccine-preventable diseases against which they are not protected.	**Actions to sustain or improve performance**	Ensure Barking and Dagenham GP Practices have access to I.T. support for generating immunisation reports. Children who persistently miss immunisation appointments followed up to ensure they are up to date with immunisations. Identifying what works in the best performing practices and share. Practice visits are being carried out to allow work with poor performing practices in troubleshooting the barriers to increasing uptake. Encourage GP practices to remove ghost patients.
R			
Benchmarking	In Quarter 2 2016/17, Barking and Dagenham's MMR2 coverage at 5 years was 82.5%, this is marginally above London rate 79.1% and below England coverage levels at 87.3%.		

KPI 19 – The number of children and adult referrals to healthy lifestyle programmes

Definition	The number of children and adult referrals to healthy lifestyle programmes	How this indicator works	The number of referrals to the Child Weight Management scheme.
What good looks like	Achieving the 2016/17 target of 2,360 referrals.	Why this indicator is important	The Child Weight Management programme allows the borough's GPs and health professionals to refer individuals who they feel would benefit from physical activity and nutrition advice to help them improve their health and weight conditions.
History with this indicator	2015/16: 2,692 referrals against a target of 3,301	Any issues to consider	

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	677	1,298	1,813		
Target	590	1,180	1,770	2,360	↓
2015/16	692	1,445	1,957	2,692	

Performance Overview	As of the end of Q3 December 2016, the service has achieved 1,813 referrals,102% of the YTD target of 1,770 for the year.	Actions to sustain or improve performance	Officers attend the Healthy Weight Alliance and work with partners to promote and refer to the programme. Following discussions with North East London Foundation Trust (NELFT) a direct referral to the Child Weight Management service from NCMP will now (from Jan 17) be provided where a child is found to be overweight or obese. Pre-diabetes clinics are being set up at local GP surgeries, where a lifestyle coach will be carrying our lifestyle assessments and referring patients to the programmes. To date, 5 GP practices have signed up. An application has been sent to the CCG requesting a time slot at the GP's and Practice nurses PTI meetings. PTI meeting to be attended to promote the new referral software. Work is continuing to strengthen the link between HL programmes and the NHS Health Check programme. Retention is low on all programmes and measures are being explored to improve this position. A full evaluation of the effectiveness of all the Healthy Lifestyle programmes has recently been completed by Public Health and findings and recommendations are currently being considered.
G			
Benchmarking	No benchmarking data available – local measure only.		

SOCIAL CARE AND HEALTH INTEGRATION			Quarter 3 2016/17
KPI 20 –Those aged 40-74 who receive Health Check			
Definition	The NHS Health Check is a 5-year programme offered to people between the ages of 40 – 74yrs who have not previously been diagnosed with long term conditions, particularly - **heart disease, stroke, diabetes, chronic kidney disease** and certain types of **dementia** (eligibility criteria). Depending on the results of the risk score following the assessment, some patients may need to be referred to the relevant lifestyle programme or potentially included on a disease register. **Data reporting**: Performance as a percentage of the 5-year programme. **Time period**: April 2016 to March 2017.	How this indicator works	The programme is a 5-year rolling programme that intends to invite 100% of its eligible population to receive a Health Check. Evidence suggests that for the programme to be truly cost effective nationally, 75%of those offered should receive a NHS Health Check. Number offered Health Check- maximum 20% of the population annually Number received Health Check – aspirational* 75% of those offered *PHE requests that this figure should at least be better than the previous year data.
What good looks like	• Improvement on the previous year's performance. • Increased numbers of patients diagnosed with long term conditions.	Why this indicator is important	The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes, and kidney disease. It is a key approach for new patients to be identified and

	• Increased numbers of referrals made to existing lifestyle programmes.			clinically managed with long term conditions to prevent premature deaths; also to influence lifestyle choices of patients to improve their overall health and wellbeing.
History with this indicator	2012/13*: 10.0%, 2013/14*: 11.4% received 2014/15*: 16.3%, 2015/16*: 11.7% received *Please note this is a fraction of the 5-year programme*		**Any issues to consider**	There is sometimes a delay between the intervention and data capture- this means that the data is likely to increase upon refresh next month.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	2.63%	5.4%	7.7%* - quarter not complete		
Target	3.75%	7.50%	11.25%	15.0%	↓
2015/16	2.56%	5.45%	8.63%	11.83%	

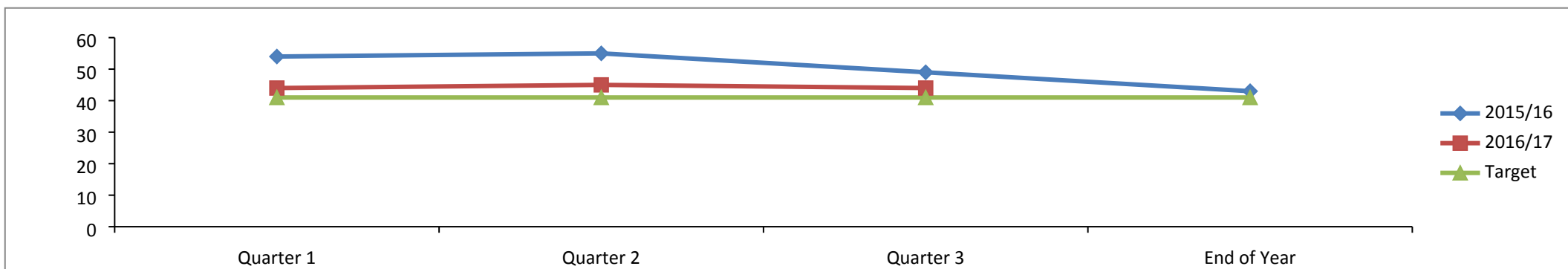

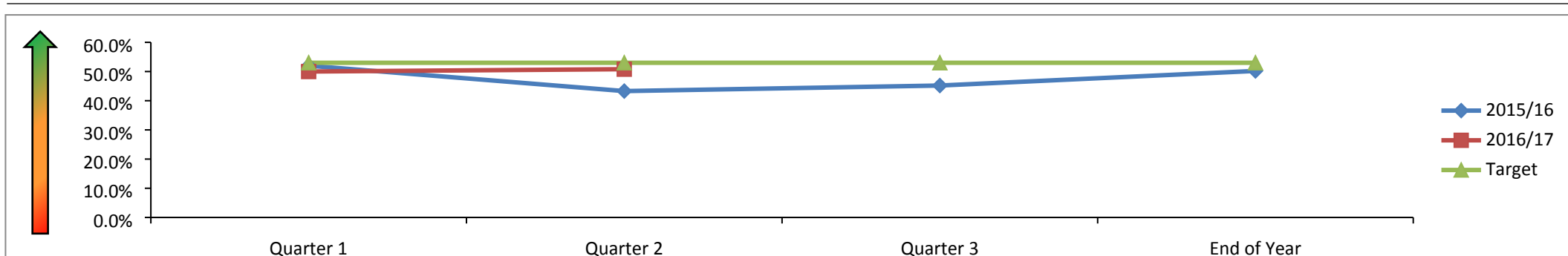|			
Performance Overview	The service needs to deliver 518 health checks a month to stay on trajectory for meeting the target. April to December has delivered an average of 402 health checks per month. This means that the monthly target has not been met.	**Actions to sustain or improve performance**	A recent evaluation of the programme by Public Health made several recommendations which are now being implemented. As noted from the Q3 figures activity across the practices has subsequently improved and regular engagement with each practice is being undertaken to ensure activity does not decline. We are currently working on improving the marketing and communications of health checks, by producing posters and leaflets. The posters are intended to be used in the GP practice to prompt patients to request a health check. They will also be displayed in the pharmacy. Additionally, flyers are to be distributed through the GP surgery, pharmacy, and the community health champions engagements. We are targeting residents who have not previously received a health check and hope to prompt them to request a health check from their respective GP or local pharmacy. Further detail on actions to improve this indicator is included in the RAG red additional commentary.
R			
Benchmarking	In 2015/16 LBBD completed eligible health checks on 11.8% of the eligible population. This is above the England and London rates of 9% and 10.7% respectively.		

KPI 21 – The number and rate per 10,000 of children subject to child protection plans

Definition	The number and rate of children subject to Child Protection Plans per 10,000 of the under 18 population (60,324).	How this indicator works	This indicator counts all those children who are currently subject to a Child Protection plan, and this is divided by the number of children in the borough aged 0-17 to provide a rate per 10,000.
What good looks like	To be in line with population change and rate per 10,000 to be in line with benchmark data and in particular in line with London rate.	Why this indicator is important	This is monitored to ensure that children who are at significant risk are identified and monitored in accordance to law and threshold of the borough.
History with this indicator	Child Protection numbers and rates have fluctuated over the last few years – Rate per 10,000 was 55 in 2011, before falling to 36 in 2013. The rate rose to 60 in 2015, but has since fallen back to 45 per 10,000 as at Q2 2016/17.	Any issues to consider	No current issues to consider.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17 Number	259	271	266		
2016/17 Rate	44	45	44		
Target Rate	41	41	41	41	**n/a**
2015/16 Number	320	323	292	253	
2015/16 Rate	54	55	49	43	

Performance Overview	As at end of Q3 2016/17, Barking and Dagenham had 266 children subject to child protection plans, representing a rate of 44 per 10,000 children aged 0-17. This is lower than the Q2 figure of 271 and child protection numbers are much lower than this time last year (323). The rate per 10,000 is 44 is in line with national (43), above the London rate (38) but lower than the Local Authority's statistical neighbours (49).	Actions to sustain or improve performance	Local weekly and monthly monitoring is in place.
A			
Benchmarking	Based on the borough's rate per 10,000, performance is close to the local target set at 41 per 10,000.		

SOCIAL CARE AND HEALTH INTEGRATION   Quarter 3 2016/17

KPI 22– The percentage of Care Leavers in employment, education, or training (EET)

Definition	The number of children who were looked after for a total of 13 weeks after their 14th birthday, including at least some time after their 16th birthday and whose 17th, 18th, 19th, 20th or 21st birthday falls within the collection period and of those, the number who were engaged in education, training or employment on their 17th, 18th, 19th, 20th or 21st birthday	How this indicator works	This indicator counts all those in the definition and of those how many are in EET either between 3 months before or 1 month after their birthday. This is reported as a percentage.
What good looks like	Higher the better	Why this indicator is important	The time spent not in employment, education or training leads to an increased likelihood of unemployment, low wages, or low quality work later on in life.
History with this indicator	The cohort for this performance indicator has been expanded to include young people formally looked after whose 17th, 18th, 19th, 20th or 21st birthday falls within the collection period i.e. the financial year.	Any issues to consider	Care leavers who are not engaging with the Council i.e. we have no contact with those care leavers so their EET status is unknown; or in prison or pregnant/parenting are counted as NEET.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	50.0%	50.8%	52.3%		
Target	53%	53%	53%	53%	↑
2015/16	52.0%	43.3%	45.2%	50.2%	

Performance Overview	In Q3 2016/17, 52.3% of care leavers were in EET (101 out of 193 care leavers), higher than the 2015/16-year end figure and 6% higher than Q3 last year. Performance is above London and statistical neighbours, but just below London average of 53%. The 2016/17 target has been set to bring us in line with the London position and currently performance is RAG rated Amber based on progress to target.	Actions to sustain or improve performance	The L2L service has developed a detailed action plan to address EET. In January 2017, a member officer workshop is being held to develop a shared understanding of the current position and consider together how we might tackle this with a view to getting more young people on a positive path.
A			
Benchmarking	London average 53%, National average 48%, Statistical Neighbour Average 48%.		

SOCIAL CARE AND HEALTH INTEGRATION			Quarter 3 2016/17
KPI 23 – The number of turned around troubled families (rolling figure)			
Definition	Number of families turned around - have met all the outcomes on their outcome plan and have shown significant and sustained improvement (rolling figure) (TF2)	How this indicator works	The term turned around family refers to a family who have met all the outcomes of their action plan, and sustained these outcomes for a sustained period of between 3 months – 12 months as per the Troubled Families Programme.
What good looks like	The higher the better.	Why this indicator is important	TF2 is a pay by results (PbR) programme set out by the Department for Communities and Local Government (DCLG). LBBD are committed to turn around 500 families in 2016/17, which is set out by the funding arrangements for the programme until 2020. DCLG are encouraging front loading the programme to enable successful outcomes in 2020. LBBD are committed to turn around 2,515 families by April 2020.
History with this indicator	Please see table below.	Any issues to consider	No current issues to consider.

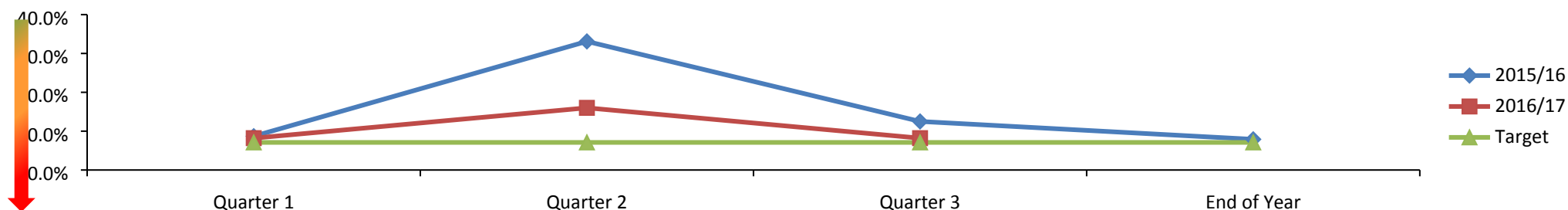|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	100	219	296		
Target	125	250	375	500	↑
2015/16	n/a	23	48	175	

Performance Overview	Since TF2 programme commenced (September 2015), 471 claims have been authorised (175 in 2015/16 and 296 in 2016/17 up to Q3). The DCLG is extremely positive about our TF2 progress. LBBD is the highest for submitted claims in London and is in the top quartile nationally. Based on progress to the local target of 500, performance is RAG rated Red only because we are more than 10% away from local target as at Q3. Claims need to increase to around 14-15 per week in Q4 to reach target of 500.	**Actions to sustain or improve performance**	Claims can be submitted for sustained progress and improved outcomes against any combination of the problems listed; getting a family member into work 'trumps' all other criteria. The DCLG Troubled family's claims window is also now open continuously with payments being made quarterly. A DCLG spot check on claims/process undertaken in June 2016 produced very positive comments.
R			
Benchmarking	Benchmark data is not available to date.		

Educational Attainment and School Improvement – Key Performance Indicators 2016/17

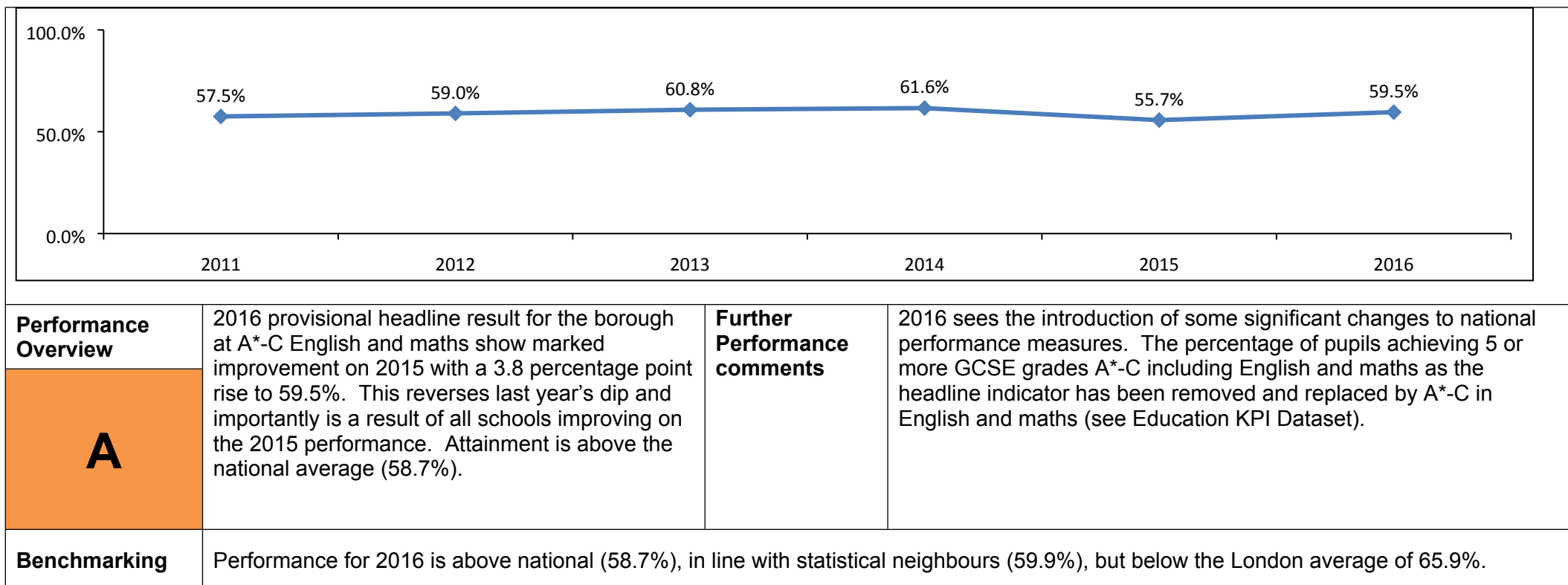| EDUCATIONAL ATTAINMENT AND SCHOOL IMPROVEMENT		Quarter 3 2016/17
KPI 24 – The percentage of 16 to 18 year olds who are not in education, employment, or training (NEET) or who have Unknown Destinations (new measure replacing 16-18 NEET KPI)		

Definition	The percentage of resident young people academic age 16 – 17 who are NEET or Unknown according to Department for Education (DfE) National Client Caseload Information System (NCCIS) guidelines.	**How this indicator works**	Data is taken from monthly monitoring information figures published by our regional partners and submitted to DfE in accordance with the NCCIS requirement.
What good looks like	A lower number of young people in education, employment, or training (not NEET) a lower number of young people- the lower the better.	**Why this indicator is important**	The time spent not in employment, education, or training leads to an increased likelihood of unemployment, low wages, or low quality work later in life. Those in Unknown destinations may be NEET and in need of support.
History with this indicator	The new indicator of NEETs + Unknowns was introduced on 1 September 2016. The annual measure is an average taken between November and January (Q3/4).	**Any issues to consider**	Although NEET and Unknown figures are taken monthly, figures for September and October are not counted by DfE for statistical purposes. This is due to all young people's destination being updated to unknown on 1 September until re-established in destinations. The main annual indicator is an average taken between November and January and published in the NEET and Unknown Scorecard.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	8.2%	16%	8.2%		
Target	7.1%	7.1%	7.1%	7.1%	↑
2015/16	8.7%	33.1%	12.5%	7.9%	

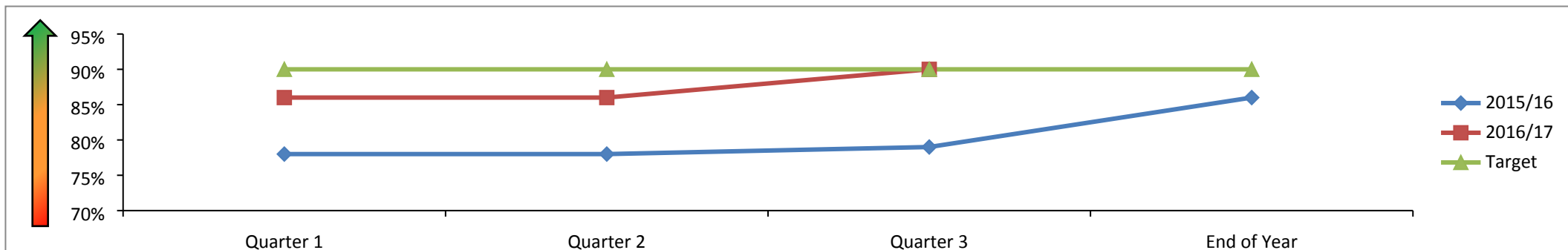| Performance Overview	Comparative historical data has been included and reports improvements in each quarter on last year. Q3 2016/17 performance has improved to 8.2% compared to 12.5% as at Q3 last year. The target set is to be in line with national at 7.1% (Nov-Jan average 2015). The Nov-Jan NEET + Unknown average is the key DfE published national measure. Our November 2016 figure was 7.8% and our December 2016 figure was 7.2%. January will match or improve on this figure further, placing performance well within 10% of the national figure of 7.1% - this will take us from Red to Amber.	Actions to sustain or improve performance	Several ESF programmes targeting our NEETs have begun and contact details of our NEET young people have been shared with all contracted providers under a data sharing agreement. To reduce unknowns, we have signed Data sharing agreements with the National Apprenticeship Service and are taking part in a programme to match our unknowns with the national FE database of Individual Learning Records (ILRs). In January 2017, a member officer workshop is being held to develop a shared understanding of the current position and consider together how we might tackle this with a view to getting more young people on a positive path.
R			
Benchmarking	National Average – 7.1% for the benchmark Nov-Jan average in 2015 (i.e. between the final 2 months of Q3 and the first month of Q4).		

EDUCATIONAL ATTAINMENT AND SCHOOL IMPROVEMENT			Summer 2016
KPI 25 – The percentage of pupils achieving A* - C in GCSE English and Maths (New Annual Indicator)			
Definition	This indicator shows the percentage of pupils at the end of Key Stage 4 achieving grades A*-C in both English and maths GCSEs.	**How this indicator works**	To be counted in the indicator, pupils must have achieved the equivalent of grade C or above in both English and mathematics GCSEs.
What good looks like	For the percentage of pupils achieving this standard to be as high as possible, improving each year to above national and our target is to reach London standards.	**Any issues to consider**	This education measure is important because it improves the life chances of our young people in the borough, enabling them to stay on in sixth form and choose the right A Levels or to access other appropriate training. Please note from 2016 new education measures are going to be reported and published e.g. Attainment 8 and Progress 8.

History with this indicator	2011	2012	2013	2014	2015	2016	DOT from 2015
	57.5%	59.0%	60.8%	61.6%	55.7%	59.5%* (provisional)	↑

Performance Overview **A**	2016 provisional headline result for the borough at A*-C English and maths show marked improvement on 2015 with a 3.8 percentage point rise to 59.5%. This reverses last year's dip and importantly is a result of all schools improving on the 2015 performance. Attainment is above the national average (58.7%).	**Further Performance comments**	2016 sees the introduction of some significant changes to national performance measures. The percentage of pupils achieving 5 or more GCSE grades A*-C including English and maths as the headline indicator has been removed and replaced by A*-C in English and maths (see Education KPI Dataset).
Benchmarking	Performance for 2016 is above national (58.7%), in line with statistical neighbours (59.9%), but below the London average of 65.9%.		

EDUCATIONAL ATTAINMENT AND SCHOOL IMPROVEMENT			Quarter 3 2016/17
KPI 26 – The percentage of borough schools rated as good or outstanding			
Definition	Percentage of Barking and Dagenham schools rated as good or outstanding when inspected by Ofsted. This indicator includes all schools.	**How this indicator works**	This indicator is a count of the number of schools inspected by Ofsted as good or outstanding divided by the number of schools that have an inspection judgement. It excludes schools that have no inspection judgement. Performance on this indicator is recalculated following a school inspection. Outcomes are published nationally on Ofsted Data View 3 times per year (end of August, December and March).
What good looks like	The higher the better.	**Why this indicator is important**	This indicator is important because all children and young people should attend a good or outstanding school in order to improve their life chances and maximise attainment and success. It is a top priority set out in the Education Strategy 2014-17 and we have set ambitious targets.

History with this indicator	Please see below. Performance has risen from 78% in Q1 15/16, to 86% as at 31st August 2016.	Any issues to consider	No current issues to consider.		
	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from Qtr 3 2015/16**
2016/17	86%	86%	90%		
Target	90%	90%	90%	90%	
2015/16	78%	78%	79%	86%	↑

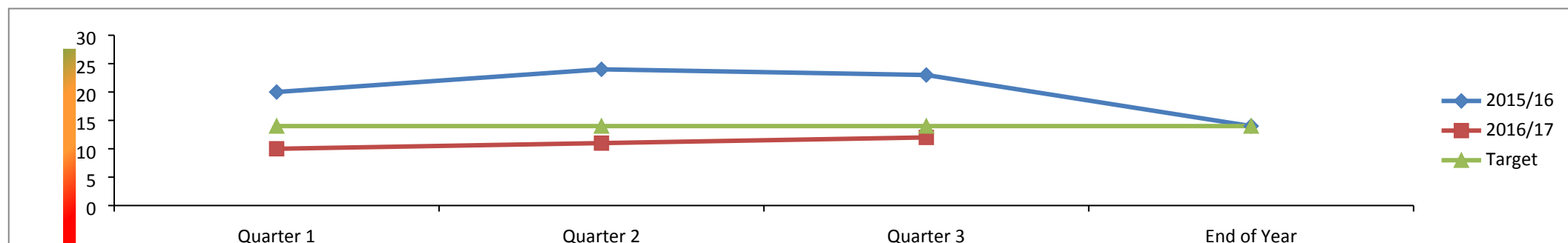Legend: 2015/16, 2016/17, Target

Performance Overview	The % of schools in LBBD judged 'outstanding' or 'good' has improved to 90% as at the end at 31st December 2016. Ofsted carried out 7 inspections during the Autumn, including two towards the end of term which have not yet been published. We have an ambitious ultimate target of 100% with a 2016/17 target of 90% representing a milestone on the way to this. During the Spring and Summer terms, impending inspections will be of schools which are currently judged to be good rather than of those requiring improvement. There are also 2 academies due for their first inspection, which we judge to be vulnerable. Of the remaining 5 Requires Improvement schools, 3 schools have monitoring boards in place, 1 is being supported by a school with outstanding leadership, while the remaining RI school is having additional support from a National Leader of Education.	**Actions to sustain or improve performance**	Inspection outcomes for schools remains a key area of improvement to reach the London average and then to the council target of 100% as outlined in the Education Strategy 2014-17. Intensive Local Authority support, the brokering of school to school support from outstanding leaders and Teaching School Alliances and the increasing capacity of school clusters is being provided to vulnerable schools.
G			
Benchmarking	London Average – 93% National Average – 89% (as at 31st August 2016).		

Finance, Growth and Investment – Key Performance Indicators 2016/17

FINANCE, GROWTH AND INVESTMENT	Quarter 3 2016/17
KPI 30 – The average number of days taken to process Housing Benefit / Council Tax Benefit change events	

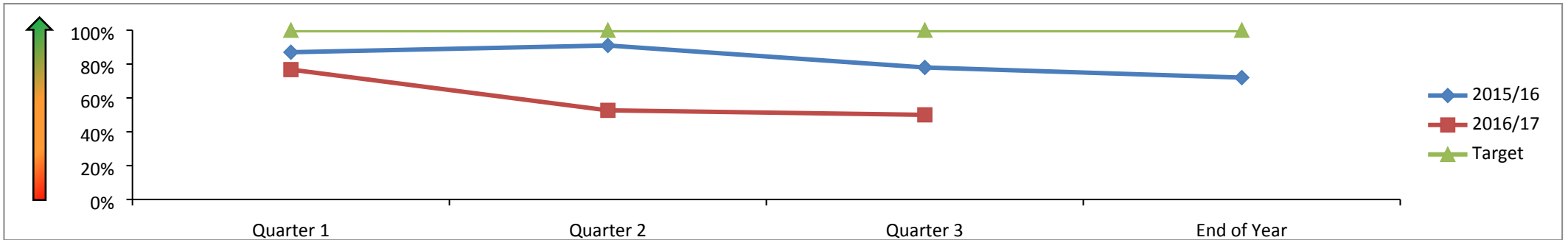|				
Definition	The average time taken in calendar days to process all change events in Housing Benefit and Council Tax Benefit	**How this indicator works**	The indicator measures the speed of processing	
What good looks like	To reduce the number of days it takes to process HB/CT change events	**Why this indicator is important**	Residents will not be required to wait a long time before any changes in their finances	
History with this indicator	2014/15 End of year result – 9 days 2015/16 End of year result – 14 days	**Any issues to consider**	There are no seasonal variances, but however government changes relating to welfare reform, along with Department for Work and Pensions (DWP) automated communications pertaining to changes in household income impact heavily on volumes and therefore performance.	

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	10	11	12		↑
Target	14	14	14	14	
2015/16	20	24	23	14	

Performance Overview	Performance has increased slightly from last quarter by one day but has remained below the target. This relates to an increase in Automated updates from DWP pertaining to Tax Credits requiring more physical intervention from back office staff to implement.	Actions to sustain or improve performance	Whilst volumes remain high due to various welfare reform impacts, the service has now stabilised the processing times, and is consistently now achieving or exceeding this target.
G			
Benchmarking	London Family Group (as per Elevate contract) 2015/16 – Lower quartile 8.5 days, Upper quartile 4.5 days, Average 7 days		

FINANCE, GROWTH AND INVESTMENT — Quarter 3 2016/17
KPI 31 – The percentage of Member enquiries responded to within deadline

Definition	The percentage of Member enquiries responded to in 10 working days	How this indicator works	Of the total number of Member enquiries received, the percentage that are responded to within the timescale.
What good looks like	Comparable with London and National	Why this indicator is important	The community often request support from members on issues important to them. A quick response rate will assist with Council reputation.
History with this indicator	2015/16 end of year result – 72% 2014/15 end of year result – 88%	Any issues to consider	Quality of response must also be taken into account.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17 Quarter	76.74%	52.66%	50%		
2016/17 YTD	76.74%	64.7%	59%		↓
Target	100%	100%	100%	100%	
2015/16	87%	91%	78%	72%	

Performance Overview	Performance on the last quarter has declined. This is because service areas are failing to respond within the deadlines.	Actions to sustain or improve performance	Completion of the restructure and the training programme for the new roles will enable staff to support the service areas in answering enquires.
R			
Benchmarking	No benchmarking data available – local measure only.		

KPI 31 – The percentage of Member enquiries responded to within deadline (Additional Information)

The following shows member's casework performance by area for Quarter 3

Directorate	Member enquiry	MP Enquiry
Adult Social Care	63% (12/19)	69% (9/13)
Chief Executives Unit	75% (3/4)	100% (1/1)
Children's Services	56% (23/41)	18% (3/17)
Community Services	44% (170/386)	40% (87/219)
Elevate	78% (25/32)	90% (55/61)
Finance & Resources	53% (10/19)	60% (9/15)
Growth & Homes	0% (0/0)	0% (0/0)
Housing Services	54% (161/296)	52% (219/422)
Customer, Commercial and Service Delivery	0% (0/3)	0% (0/1)
Finance, Investment, Strategy & Programmes	0% (0/1)	0% (0/0)

Percentage financial year so far

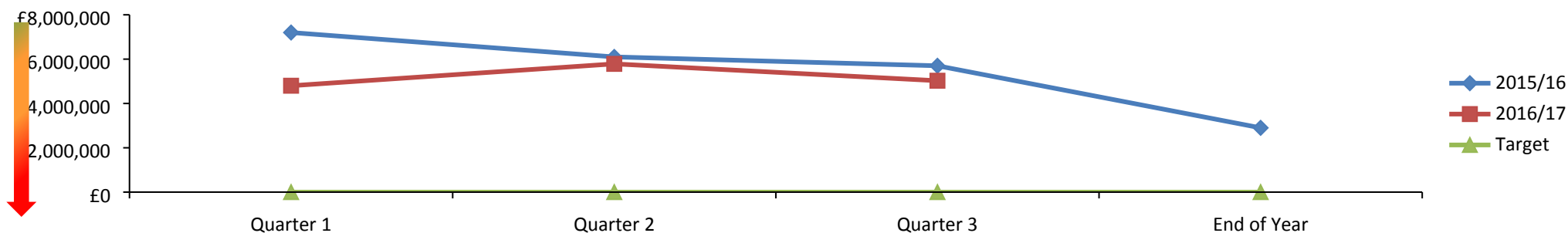| Directorate	Member enquiry	MP Enquiry
Adult Services	42% (5/12)	20% (2/10)
Adult Social Care	70% (46/66)	58% (14/24)
Chief Executives Unit	50% (5/10)	100% (2/2)
Children's Services	54% (77/142)	27% (10/37)
Community Services	54% (424/789)	47% (202/426)

Community Services (Adult Social Care)	76% (153/201)	0% (0/0)
Customer, Commercial and Service Delivery	62% (195/314)	63% (167/267)
Elevate	80% (103/128)	86% (76/88)
Finance, Investment, Strategy & Programmes	75% (6/8)	67% (2/3)
Finance & Resources	60% (41/68)	66% (25/38)
Growth & Homes	61% (27/44)	53% (41/77)
Housing Services	68% (610/891)	56% (389/693)
Law & Governance	0% (0/1)	100% (1/1)
Service Development & Integration	50% (1/2)	50% (1/2)

Percentage answered timeframe

	0-5 days	6-10 days	10+ days	Outstanding	Total
Total for year to date	1,043	1,391	1,491	226	4,151
% answered	25%	34%	36%	5%	
Total for Q3	273	434	690	16	1,413
% answered	19%	31%	49%	1%	

KPI 34 – The current revenue budget account position (over or under spend)

Definition	The position the council is in compared to the balanced budget it has set to run its services.	How this indicator works	Monitors the over or under spend of the revenue budget account
What good looks like	In line with projections, with no over spend.	Why this indicator is important	It is a legal requirement to set a balanced budget.
History with this indicator	2015/16 end of year result - £2.9m overspend 2014/15 end of year result - £0.07m overspend	Any issues to consider	No current issues to consider.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	£4,800,000	£5,796,000	£5,026,000		↑
2015/16	£7,200,000	£6,100,000	£5,700,000	£2,900,000	

Performance Overview	At the end of quarter 3, there are still overspends reported on Children's Care and Support and Homelessness of around £4.5m. This has reduced from the Quarter 2 figure of circa £6m. Improvements in both the Children's Care and Support and the Elevate Client Unit have reduced the forecast. There are still pressures in a number of other service areas but all are currently forecast to be managed.	Actions to sustain or improve performance	Pressures include £1.4m in Adults Care and Support, will be mitigated as planned through the drawdown of an earmarked reserve created to smooth pressures on the service pending the additional Better Care Fund monies, £0.6m income risk in Enforcement with £0.66m possible mitigations identified and £0.4m in Passenger Transport against which there is a mitigation plan for the full amount.
n/a			
Benchmarking	No benchmarking data available – Local measure only		

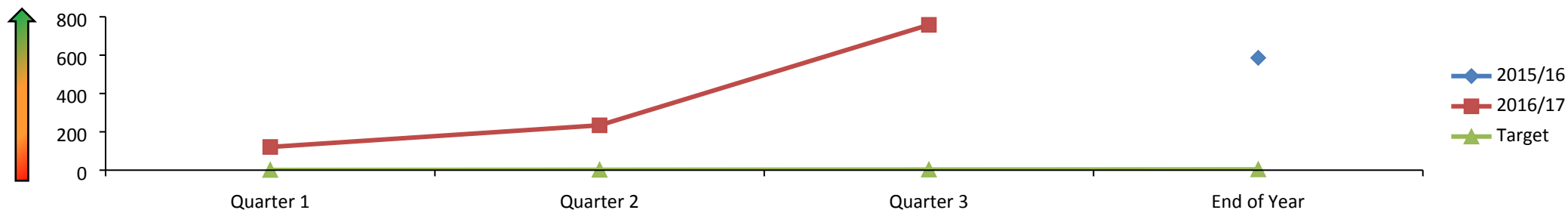# Economic and Social Development – Key Performance Indicators 2016/17

ECONOMIC AND SOCIAL DEVELOPMENT			2016/17
KPI 27- The number of new homes completed (Annual Indicator)			
Definition	The proportion of net new homes built in each financial year	**How this indicator works**	Each year the Council updates the London Development Database by the deadline of August 31. This is the London-wide database of planning approvals and development completions.
What good looks like	The Council's target for net new homes is in the London Plan. Currently this is 1236 new homes per year.	**Why this indicator is important**	It helps to determine whether we are on track to deliver the housing trajectory and therefore the Council's growth agenda and the related proceeds of development, Community Infrastructure Levy, New Homes Bonus and Council Tax.
History with this indicator	14/15- 512 13/14 – 868 12/13 – 506 11/12 – 393 10/11 - 339	**Any issues to consider**	The Council has two Housing Zones (Barking Town Centre and Barking Riverside Gateway) which are charged with the benefit of GLA funding to accelerate housing delivery in these areas. There are 13,000 homes with planning permission yet to be built and planning applications currently in the system for another 1,000. The Housing Trajectory for the Local Plan identifies capacity for 27,700 by 2030 and beyond this a total capacity for 40,000 new homes. This translates into a target of 1925 homes per year. The Mayor of London will shortly publish his timetable for updating the London Plan and as part of this will undertake a Strategic Housing Land Availability Assessment in partnership with the London Councils. Out of this exercise will come the Council's new net housing supply target which is likely to be around 1925 net new homes per year. This is clearly a significant increase on the Councils current target but reflects the Council's ambitious growth agenda and commitment to significantly improving housing delivery. Completions for 16/17 and 17/18 are forecast to be similar to 18/19. However as set out in KPI 29 a number of large housing schemes have been approved recently and these will deliver significant higher completion rates in 18/19 onwards.
Annual Result			
2016/17	Available September 2017		
Target	1236 net new homes a year		
2015/16	746		

ECONOMIC AND SOCIAL DEVELOPMENT			2016/17
KPI 28- The number of new homes completed that are sub-market (Annual Indicator)			
Definition	The proportion of net new homes built in each financial year that meet the definition of affordable housing in the National Planning Policy Framework	**How this indicator works**	Each year the Council updates the London Development Database by the deadline of August 31. This is the London-wide database of planning approvals and development completions.
What good looks like	The Mayor of London is likely to set out a target of 35-50% of all new homes as affordable across London in Supplementary Planning Guidance due to be issued in November. Good would be anything within this range. Anything over 50% and anything below 35% would not be good. Anything below 35% would indicate the Council has not been successful in securing affordable housing on market housing schemes but equally anything above 50% would suggest an overreliance on supply of housing from Council and RSL developments and lack of delivery of homes for private sale or rent on the big private sector led developments. This has historically been an issue in Barking and Dagenham and explains why the proportion of new homes which are affordable is one of highest in London over the last five years.	**Why this indicator is important**	This indicator is important for the reasons given in the other boxes.
History with this indicator	LBBD is one of best performing boroughs . The London Annual Monitoring Report shows that 49% of all new homes built between 2011/12 and 2013/14 were affordable. This was the highest proportion in London and in terms of numbers the 10th highest of the 33 London Councils. In 14/15 68% of new homes were affordable. Data will shortly be available for 15/16 when the London Development Database is updated. As explained above though the target should be to keep the proportion of new affordable homes within the 35%-50% range.	**Any issues to consider**	The Growth Commission was clear that the traditional debate about tenure is less important than creating social justice and a more diverse community using the policies and funding as well as the market to deliver. At the same time the new Mayor of London pledged that 50% of all new homes should be affordable and within this a commitment to deliver homes at an affordable, "living rent". This chimes with the evidence in the Council's Joint Strategic House Market Assessment which identified that 52% of all new homes built each year in the borough should be affordable to meet housing need and that the majority of households in housing need could afford nothing other than homes at 50% or less than market rents. This must be balanced with the Growth Commission's focus on home ownership and aspirational housing and what it is actually viable to

		deliver. The Council will need to review its approach to affordable housing in the light of the Mayor's forthcoming guidance and take this forward in the review of the Local Plan.
	Annual Result	
2016/17	Available September 2017	
Target	The Council does not have an annual target for net new homes completed that are sub-market. London-wide the London Plan aims for 40% of all new homes as affordable but this is not expressed as a target.	
2015/16	19 social rented (gross 86), 83 intermediate/SO and 223 affordable rent. Net total 325 (43% of total housing completions)	

ECONOMIC AND SOCIAL DEVELOPMENT					Quarter 3 2016/17
KPI 29 – The number of new homes that have received planning consent					

Definition	Number of new homes that received planning permission.		**How this indicator works**	The data is recorded on the London Development Database	
What good looks like	To determine this requires an analysis of the pipeline of supply against the housing trajectory. From consent to build is roughly 18 months to two years therefore for the housing trajectory to be maintained the schemes on it should be approved 18 months to two years before we anticipate units starting to be completed. Therefore, there is not a numerical target for this indicator.		**Why this indicator is important**	It helps to determine whether we are on track to deliver the housing trajectory and therefore the Council's growth agenda and the related proceeds of development, Community Infrastructure Levy, New Homes Bonus and Council Tax.	
History with this indicator	There are currently permissions for 13,000 homes in the borough that have not been built. This includes Barking Riverside, 10,000 homes, Gascoigne 1575, Freshwharf 911 Cambridge Road 274 and Trocoll House 198.		**Any issues to consider**	The impact of the Mayor of London's emerging affordable housing policy on sites coming forward.	

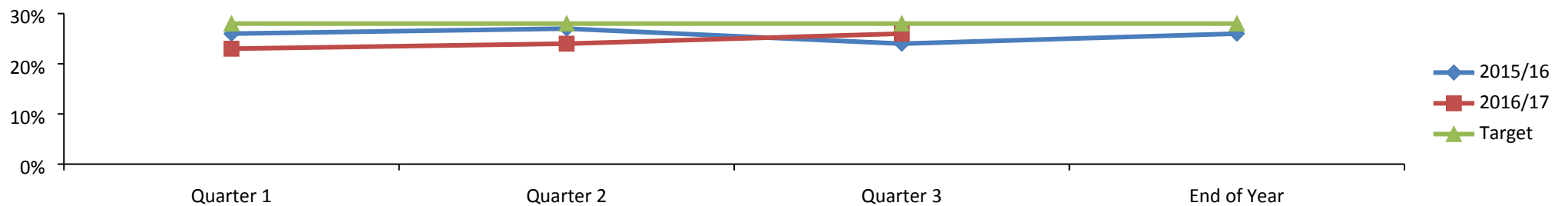|	**Quarter 1**	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from Qtr 3 2015/16**
2016/17	163	234	758		**n/a**
Target	This is annual net housing completions target in London Plan. This is being reviewed in development of Local Plan in line with the ambition to complete 35,000 net new homes by 2035. We do not have a target for approval. We will consider how to go about setting a target taking into account the backlog of unimplemented approvals that exist.				
2015/16	Previously reported annually				586

Performance Overview	In the last two quarters a number of housing zone sites have been approved including Cambridge Road 274, Abbey Industrial Park 118 and Trocoll House 198. In addition, in the first and second quarters 16/17 the Council's planning committee has approved the Abbey Retail Park scheme 597 and Barking Riverside 10800. The decision was issued for Abbey Retail Park in Q3 and Barking Riverside's will be issued in Q4. Planning applications have also been received for the Abbey Sports Centre 150 and Vicarage Fields sites 850 which will be determined within this financial year. Finally Beam Park, Gascoigne West, Ford Stamping Plant and Crown House schemes are due in this year for approximately an additional 6000 homes.	Actions to sustain or improve performance	Set up BE-FIRST to improve delivery. Delivering agreed Housing Zone outputs with GLA. Recruitment and retention remains a significant issue in the Council's Development Management Team. Two posts are covered by agency staff and a further recruitment exercise will begin shortly to try and fill these posts with permanent staff. Planning Performance Agreements are now used on all major sites so that developers and the Council agree on the timeline for their decision and the resources required to achieve this.
n/a			
Benchmarking	The Benchmark is the Council's Housing Trajectory and the recent approvals, submissions and planning submissions are in line with its forecast of housing completions.		

ECONOMIC AND SOCIAL DEVELOPMENT		Quarter 3 2016/17
KPI 35 – Repeat incidents of domestic violence (MARAC)		
Definition	Repeat Incidents of Domestic Violence as reported to the Multi Agency Risk Assessment Conference (MARAC)	**How this indicator works**	Victims of domestic violence referred to a MARAC will be those who have been identified (often by the police) as high or very high risk (i.e. of serious injury or of being killed) based on a common risk assessment tool that is informed by both victim and assessor information. Repeat victimisation refers to a violent incident occurring within 12 months of the original incident coming to the MARAC
What good looks like	The local target recommended by Safelives is to achieve a repeat referrals rate of between 28-40%.

The target is based on the level of DV in the borough and rate of referral to MARAC. This target was set during the first study of MARACs where Amanda Robinson from former Coordinated Action Against | **Why this indicator is important** | Safelives recommends a rate of 28-40% because domestic violence is rarely a one off incident. It is a pattern of behaviour that escalates over time. Therefore, for high risk cases even where a support plan has been put into action, it would be normal for other incidents of DV to occur. So in order to manage high risk cases, if another incident occurs within a 12 month period, the case should be referred back to MARAC and is counted as a repeat. |

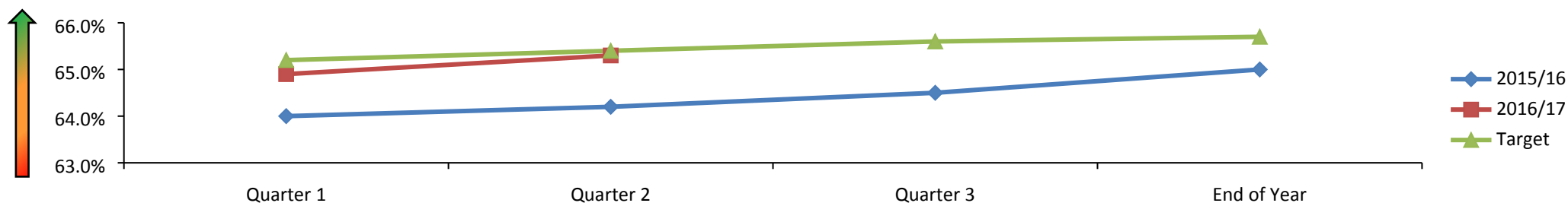|			
	Domestic Abuse (CAADA now Safelives) observed repeat rates of around 40% with some variance. A lower than expected rate usually incidents that not all repeat victims are being identified and referred back to MARAC. All agencies should have the capacity to 'flag and tag' MARAC cases in order to identify any further incidents within a year of the last referral and re-refer the cases to MARAC. A low repeat rate often indicates that these systems are not or only partially in place		Where MARACs are not receiving the recommended levels of repeat referrals Safelives recommend that the MARAC review information flows from partnership services to the MARAC to ensure MARAC is well informed about all incidents and developments in the case, that these changes are being assessed and that the victims are receiving ongoing support.
History with this indicator	2015/16: 86 (25%) 2014/15: 58 (20%)	**Any issues to consider**	Safelives guidance states that to manage high risk cases if another incident were to occur within a 12 month period the case should be referred back to MARAC and counted as a repeat. We note locally that we have some clients return to MARAC but they are outside of the 12 month time-frame and therefore are not counted as a repeat. If the same clients return to MARAC but with another perpetrator these are not counted as a repeat. This is standard practice amongst all boroughs.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	23%	24%	26%		
Target	28% - 40%	28% - 40%	28% - 40%	28% - 40%	↔
2015/16	26%	27%	24%	26%	

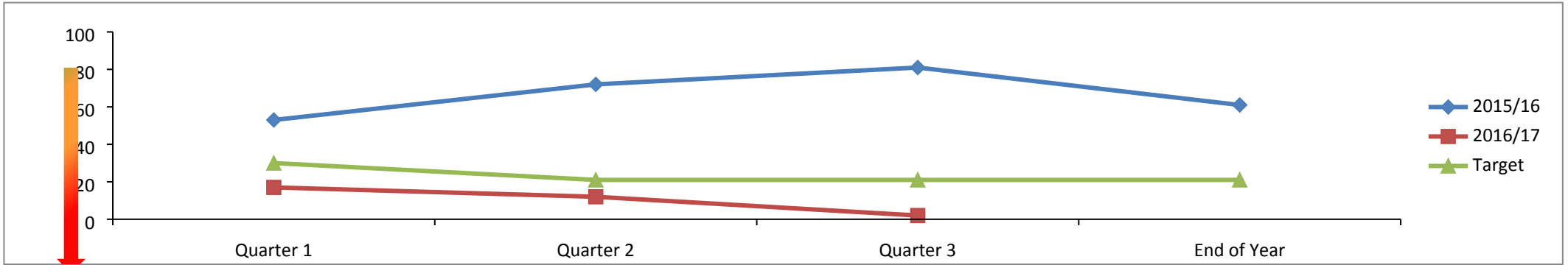|			
Performance Overview **A**	In Qtr 3 we are 26%, the target for 2016/17 is 28 – 40 %. This is below the local target set by Safelives is 28-40%.	**Actions to sustain or improve performance**	The Community Safety Partnership successfully bid for MOPAC funding to conduct a MARAC Review. An independent consultancy was commissioned to undertake the review, which has now concluded. A number of recommendations were made and improving the boroughs identification of repeat victims to MARAC will be included in the action plan to deliver recommendations of the MARAC review.
Benchmarking	Benchmarking data is available from Safelives on the level of repeat referrals to MARAC. The latest data is for 1st April 2015 – 31st March 2016 where there averages for London, our Most Similar Group (MSG) and national was 20%, 26% and 25% respectively. Safelives have produced a comparison of all 32 boroughs repeat rates. Barking and Dagenham are had the 6th highest rate of repeat referrals to the MARAC in 2015/16.Taking this and the corporate performance teams guidance on RAG rating into consideration we have updated the performance to Amber (performance is within 10% of the target)		

ECONOMIC AND SOCIAL DEVELOPMENT	Quarter 3 2016/17
KPI 36 – The percentage of economically active people in employment	

Definition	"The employed are defined as those aged 16 or over, who are in employment if they did **at least one hour of work** in the reference week (as an employee, as self-employed, as unpaid workers in a family business, or as participants in government-supported training schemes), and those who had a job that they were temporarily away from (for example, if they are on holiday)."	**How this indicator works**	The figures presented for Barking & Dagenham are a rolling average of the last three years (e.g. Q1 figures are an average of July 13-June 14, July 14-June 15 and July 15-June 16). The reason for this is that the figure is derived from a sample survey (the Annual Population Survey).
What good looks like	An increase in the percentage of our economically active residents who are in employment.	**Why this indicator is important**	Employment is important for health and wellbeing of the community and reducing poverty
History with this indicator	The employment rate for the borough is principally driven by London and economy-wide factors. The figure for the borough has shown steady growth over the last year.	**Any issues to consider**	Each 1% for the borough is equivalent to a little over 1,200 borough residents.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	64.9%	65.3%	Available 12 April 2017	Available 12 July 2017	↑
Target	65.2%	65.4%	65.6%	65.7%	
2015/16	64.0%	64.2%	64.5%	65.0%	

| Performance Overview | | | The Barking & Dagenham Employability Partnership brings together a range of partners, including Department for Work and Pensions (DWP) and Work Programme Providers who are collaborating to reduce the claimant count and the numbers claiming income support or employment & support allowance. The next meeting takes place on 25 January 2017 and the Partnership is listed as a thematic sub-group of the B&D Delivery Partnership.

ESF-funded provision is now coming on stream and is being integrated into the work of local programmes and services (e.g. DWP Troubled Families & DWP over 50s). The Job Shop Service is delivering sessions in both JCP offices in the borough to support those affected by the benefit cap as well as seeking to recruit economically inactive residents claiming income support or employment and support allowance as part of the Council's own ESF-funded provision. |
|---|---|---|---|
| **A** | The published figure for the borough is 66.4%, with the rolling average figure 65.3%. | **Actions to sustain or improve performance** | |
| **Benchmarking** | The gap with the London-wide figure (73.6%) remains at 8.3%. Around 10,600 additional residents would need to move into work to match the London employment rate. | | |

ECONOMIC AND SOCIAL DEVELOPMENT	Quarter 3 2016/17
KPI 37 – The average number of households in Bed and Breakfast	

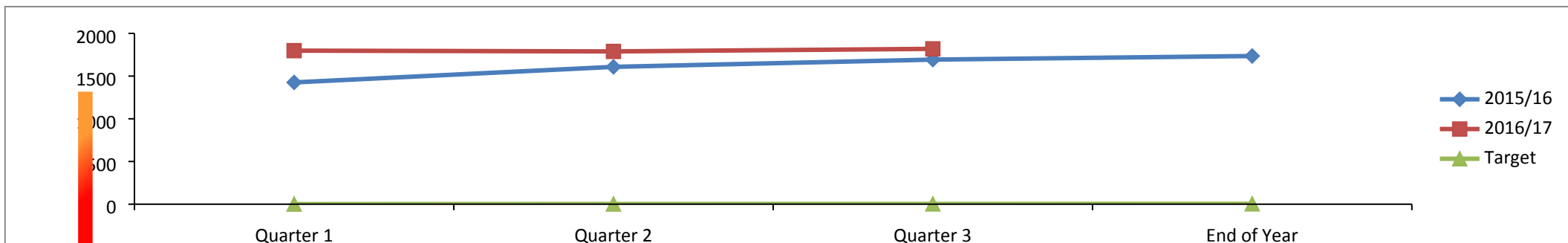| **Definition**	Number of homeless households residing in B & B including households with dependent children or household member pregnant	**How this indicator works**	Snapshot of households occupying B & B at end of each month.
What good looks like	In order to satisfy budget pressures, end of year average of 21 households in B & B would be considered excellent	**Why this indicator is important**	Statutory requirement and financial impact on General Fund
History with this indicator	Historically target was not met	**Any issues to consider**	Increasing demand on homelessness, impact of welfare reform, impact of housing market and regeneration programme.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	17	12	2		↑
Target	30	21	21	21	
2015/16	53	72	81	61	

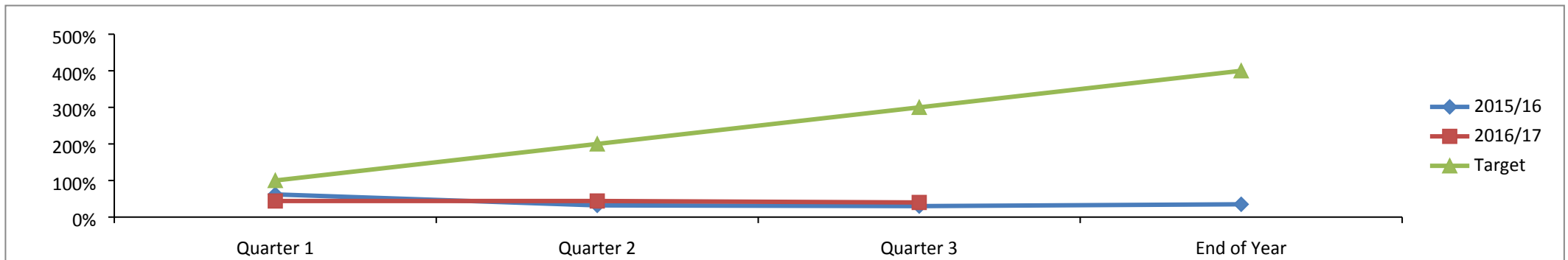| Performance Overview	Numbers of households within B & B continue to decrease. No families were accommodated in B & B at the end of December 2016, with the average across the quarter lower than 2. In addition, families placed in B & B accommodation have been provided with alternative Housing within 6 weeks in line with legal requirements.	Actions to sustain or improve performance	Alternative Hostel sites are being sought to reduce dependency upon bed and breakfast. There are ongoing initiatives to increase the supply of PSL accommodation and there has been a price reduction negotiated with the local bed and breakfast provider. Case management and homeless prevention options are under constant review to limit the number of households placed in temporary accommodation.
G			
Benchmarking	No benchmarking data available.		

KPI 38 – The average number of households in Temporary Accommodation

Definition	Number of households in all forms of temporary accommodation, B&B, nightly Let, Council decant, Private Sector Licence (PSL) (in borough and out of borough)	How this indicator works	Snapshot of households in temporary accommodation at end of each month
What good looks like	Increase in temporary accommodation / PSL supply however with a reduction in the financial loss to the Council leading to a cost neutral service	Why this indicator is important	Financial impact on General Fund
History with this indicator	PSL accommodation was considered cost neutral. Due to market demands, landlords/agents can now request higher rentals exceeding LHA rates	Any issues to consider	Increasing demand on homelessness, impact of welfare reform, impact of housing market and regeneration programme.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	1,798	1,789	1,819		↓
2015/16	1,426	1,608	1,693	1,735	

Performance Overview	Increase in trend of acquiring good quality self-contained accommodation to meet homelessness demands. There is a reluctance to set a target for the average number of households, although there is an ambition to reduce the reliance of procuring temporary accommodation. This will need to be balanced with the ongoing demands to provide Housing at a time when market trends show that house prices are rising both in the private rented and buyers' market coupled with concerns of the impact of Welfare Benefit Reform.	Actions to sustain or improve performance	Hostel expansion programme. Collaborative working within Housing Options and delivering new ways of working in line with Andy Gale critical analysis report of service.
n/a			
Benchmarking	No benchmarking data available		

ECONOMIC AND SOCIAL DEVELOPMENT	Quarter 3 2016/17
KPI 39 – The percentage of complaints upheld	

Definition	The percentage of complaints upheld	How this indicator works	Of the total number of complaints received the number that are deemed to be upheld
What good looks like	Comparable with London and National	Why this indicator is important	Lower number of complaints upheld indicates that the Council is providing an adequate or good service.
History with this indicator	2015/16 End of year result – 35%	Any issues to consider	Quality of response must also be taken into account.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17 Quarter	44%	41%	40%		
2016/17 YTD	44%	44%	40%		**n/a**
2015/16	62%	32%	30%	35%	

Performance Overview	Overall, when looking at the year to date figures, performance has remained static over the past 6 months.	Actions to sustain or improve performance	A restructure of the complaints team has been undertaken alongside a review of the complaints process.
n/a			
Benchmarking	Local Government Ombudsman Annual Review of Local Government Complaints 2015/16 showed that the number of complaints upheld by them in Barking and Dagenham has gone down.		

ECONOMIC AND SOCIAL DEVELOPMENT			Quarter 3 2016/17
KPI 40 – The percentage of people affected by the benefit cap now uncapped			
Definition	Percentage of people affected by welfare reform changes now uncapped / off the cap	How this indicator works	For a resident to be outside of the benefit cap (off the cap), they either need to find employment (more than 16 hours) and claim Working Tax Credit or be in receipt of a benefit outside of the cap; Personal Independence Payment, Disability Living Allowance, Attendance Allowance, Employment Support Allowance (care component) and (up-coming in September 2016) Carers Allowances or Guardians Allowance.
What good looks like	Moving residents from a position of being in receipt of out-of-work benefit (Income Support / Employment Support Allowance or Job Seekers Allowance) to working a minimum of 16 hours (if a single parent) or 24 hours (if a couple) or receiving a disability benefit which moves residents outside of the cap.	Why this indicator is important	Welfare reform changes impact on resident's income which will affect budgets, choices and lifestyle. Financial impact on General Fund

History with this indicator	This is a new indicator introduced in 2016/17.	Any issues to consider	The Capped/Uncapped status of a resident is not solely down to the Welfare Reform (WR) team work but includes both Housing Benefit (HB) and the Department of Works & Pension (DWP). If the DWP do not confirm the uncapped status of a resident then HB do not removed this status on academy. All our information comes from the DWP, via HB.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from Qtr 3 2015/16
2016/17	3.9%	16.07%	53.47%		**n/a**
Target	3.9%	18.9%	33.9%	48.9%	
2015/16	New indicator for 2016/17				

Performance Overview	The baseline for this KPI is 890 people of whom 290 were capped and 600 that the DWP informed us were likely to be capped when the threshold was lowered. This happened on 7th November and it shows that the number of people expected to be capped was overstated by the DWP to err on cautions side. The team now work only from a list only containing people who have been capped and with the lower cap thresholds going live customers are now more likely to engage.	Actions to sustain or improve performance	The team is now working closely with the Job Shop and DHP services to incentivise customers to engage with the Council. The letters and scripts have been amended to strengthen the message and are undergoing further review. Links have been established with Housing Management, Rents team and Temporary Accommodation who will carry out visits to get customers to engage.
G			
Benchmarking	No benchmarking data available – Local measure only		