



Brighton & Hove City Council

Appendix 1: 2018-19 Council Corporate KPIs - annual results

Period: Apr-18 - Mar-19

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
2018-19 Economy Environment & Culture - Council (Corporate) Quarterly				
% of household waste sent for reuse, recycling and composting (3 month lag) [Corporate - council]	%	37.70	28.90	 Improving

Position:

Between April and December 2018 28.9% of the household waste in the city was sent by the Authority for reuse, recycling, composting or anaerobic digestion (source Waste Data Flow reports).

The trend of this result on a quarterly basis were:

2017/18: Q1 - 29.1%, Q2 - 28.7%, Q3 - 28.5% and Q4 - 28%

2018/19: Q1 - 30.4%, Q2 - 28.9%, Q3 - 28.1%

The target for 2018/19 has been set at 37.7% this is the CIPFA comparator average.

The annual trend for the performance indicator is:

2010/11 = 27.7%

2011/12 = 28.1%

2012/13 = 26.8%

2013/14 = 25.8%

2014/15 = 25.2%

2015/16 = 24.6%

2016/17 = 27.8%

2017/18 = 28.6%

Commentary

The City Environment Modernisation Programme is developing a sustainable future for the service in the context of reducing council budgets, increases in customer demand and an expanding service offer. Many projects within the Programme will have an impact on the percentage of waste sent for reuse, recycling and composting:

- The Increasing Recycling Project is improving how the council communicates with and educates the city on recycling. Through collaboration with stakeholders, activities and resources will be designed to improve the city's recycling rates.
- The rollout of more recycling wheelie bins will enable residents to recycle more
- The Round Restructure Project will ensure the service is reliable and resilient to ensure collections are made on the scheduled day, removing the need for recycling materials to be placed in refuse containers if the collection is missed

The levels of recycling in the city have increased by just over 1% from the last financial year. This is likely to be in part due to the roll out of wheeled recycling bins which operatives report are leading to some people recycling who have not done so before. In addition the recent national publicity on the negative impact of plastics may have led to an increase in recycling.

Actions

1. Improve the collections of domestic recycling through the Round Restructure Project (Head of Operations, Jun 19)
2. Deliver the Increasing Recycling Project (Head of Service Improvement & Modernisation, Sep 19)
3. Rollout more recycling wheelie bins (Head of Service Improvement & Modernisation, Jun 19)
4. Begin taking on new garden waste customers (Head of Service Improvement & Modernisation, Mar 19)

Missed refuse collections per 100,000 collections [Corporate - council]	No.	75.00	171.00	 Declining
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INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Position:

This is calculated as: Total Missed Collections/(Total Number of Expected Collections/100000).

The year to date performance trend is:

Apr to Jun 2017 = 40 per 100,000

Apr to Sep 2017 = 62 per 100,000

Apr to Dec 2017 = 57 per 100,000

Apr to Mar 2018 = 79 per 100,000

Apr to Jun 2018 = 215 per 100,000

Apr to Sep 2018 = 195 per 100,000

Apr to Dec 2018 = 171 per 100,000

Apr 18 to Mar 19 = 171 per 100,000

The target was set at 75 to represent a modest improvement in the 2017/18 performance levels to reflect the potential impact of the changes being implemented. The changes have made reporting missed collections easier and more reliable than it has been as the trend shows.

Commentary

There has been a significant increase in the number of missed collections, this includes difficulty in retaining and recruiting drivers; access issues to certain areas of the city due to increased density of parking in some areas where there are no controlled parking zones; fleet which is too large to access some streets; lack of management and operative capacity. In addition to this there has been a change to the way that data on missed collections is captured, having made it easier for residents to report when collections are missed. This provides a more accurate reflection of the service. Results show a continuing improvement following a spike in missed collections figures earlier in the year.

The City Environment Modernisation Programme is developing a sustainable future for the service in the context of reducing council budgets, increases in customer demand and an expanding service offer.

Activities within the Programme will have an impact on the number of missed collections. For example:

- Improving the information flow between the Contact Centre and operations means missed work will be communicated better
- Identifying persistent missed collections means changes can be made to stop it happening
- The Round Restructure Project will ensure the service is reliable and resilient to ensure collections are made on the scheduled day

Next Steps:

1. Implement new Management Framework (Assistant Director and Head of Operations, Jun 19)
2. Restructure Rounds (Head of Operations, Mar 20)
3. Review Fleet (Head of Fleet and Head of Operations, Sep 19)
4. Review Access issues with Highways (Head of Operations, Dec 19)
5. Deliver the Customer Experience Project (Head of Service Improvement & Modernisation, Sep 19)

Missed recycling collections per 100,000 collections [Corporate - council]

No.

100.00

337.00



Declining

Position

This is calculated as: Total Missed Collections/(Total Number of Expected Collections/100000)

The target was set at 100 to represent a modest improvement in the 2017/18 performance levels to reflect the potential impact of the changes being implemented. The changes have made reporting missed collections easier and more reliable than it has been as the trend shows.

Year to date performance trend:

Apr to Jun 2017 = 53

Apr to Sep 2017 = 131

Apr to Dec 2017 = 136

Apr to Mar 2018 = 175

Apr to Jun 2018 = 319

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Apr to Sep 2018 = 452

Apr to Dec 2018 = 370

Apr 18 to Mar 19 = 337

Commentary

There has been a significant increase in the number of missed collections, this includes difficulty in retaining and recruiting drivers; access issues to certain areas of the city due to increased density of parking in some areas where there are no controlled parking zones; fleet which is too large to access some streets; a lack of management and operative capacity.

It is now easier for residents to report missed collections which may account for the significant increase and provides a more accurate reflection of the service.

Results show a continuing improvement following a spike in missed collections figures earlier in the year.

The results for recycling are worse than refuse because missed refuse is prioritised over recycling due to the greater environmental risks of uncollected refuse. Plus, recycling trucks are larger than refuse trucks meaning they suffer more from narrow access.

The City Environment Modernisation Programme is developing a sustainable future for the service in the context of reducing council budgets, increases in customer demand and an expanding service offer.

Activities within the Programme will have an impact on the number of missed collections. For example:

- Improving the information flow between the Contact Centre and operations means missed work will be communicated better
- Identifying persistent missed collections means changes can be made to stop it happening
- The Round Restructure Project will ensure the service is reliable and resilient to ensure collections are made on the scheduled day

Next Steps:

1. Implement new Management Framework (Assistant Director and Head of Operations, Jul 19)

2. Restructure Rounds (Head of Operations, Jun 19)

3. Review Fleet (Head of Fleet and Head of Operations, Jun 19)

4. Review Access issues with Highways (Head of Operations, Dec 19)

5. Deliver the Customer Experience Project (Head of Service Improvement & Modernisation, Sep 19)

% of streets inspected which are found to have widespread or heavy levels of litter [Corporate - council]	%	4.00	3.20	 GREEN
				Improving

Position:

Latest data available is up to December 2018, spot checks were not carried out January-March 2019 due to work pressures and staff absence. This indicator is under review.

Between October and Dec 2018, 3.2% of the streets checked had litter levels which were below grade B using the national measure 'Street and environmental cleanliness: Litter'. This process grades streets and other areas of land on the following scale for litter:

- Grade A – no litter or refuse
- Grade B – predominantly free of litter and refuse except for some small items
- Grade C – widespread distribution of litter and refuse, with minor accumulations
- Grade D – heavily littered, with significant accumulations.

The target has been set at 4% which is a modest improvement on the 17/18 outturn as there is no comparative information available.

The quarterly trend for this result is:

Apr to Jun 2017 = 4.1%

Jul to Sep 2017 = 4.2%

Oct to Dec 2017 = 4.1%

Jan to Mar 2018 = 4.3%

Apr to Jun 2018 = 6.5%

Jul to Sep 2018 = 3.8%

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Oct to Dec 2018 = 3.2%

Commentary

The City Environment Modernisation Programme is developing a sustainable future for the service in the context of reducing council budgets, increases in customer demand and an expanding service offer.

Activities within the Programme will have an impact on the cleanliness of the city's streets. For example:

- Bringing the environmental enforcement service in-house will enable resources to be targeted at particular hotspots across the city.
- Improvements to the website content about what constitutes environmental crimes means more people will understand the implications of littering
- Improving litter bin provision will discourage people to throw rubbish on the ground

Actions

1. Continue the delivery of the #StreetsAhead anti-littering campaign (Head of Service Improvement & Modernisation, ongoing)
2. Review options for measuring street cleanliness (Head of Operations, Aug 19)

The speed of determining applications for major development [Corporate - council]	%	93.70	92.19	 Declining
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Position:

This indicator measures the 24 month rolling result for the percentage of Major application types being processed within 13 weeks, or agreed time limit via a planning performance agreement (PPA) or extension of time (EOT).

The trend of the 24 month rolling result is a positive one as shown below:

- Mar 2017 = 91.18% (62 applications determined in time, 68 applications determined)
- Jun 2017 = 92.06% (58 applications determined in time, 63 applications determined)
- Sep 2017 = 92.54% (62 applications determined in time, 67 applications determined)
- Dec 2017 = 95.77% (68 applications determined in time, 71 applications determined)
- Mar 2018 = 96.83% (61 applications determined in time, 63 applications determined)
- Jun 2018 = 96.61% (57 applications determined in time, 59 applications determined)
- Sep 2018 = 93.44% (57 applications determined in time, 61 applications determined)
- Dec 2018 = 93.44% (57 applications determined in time, 61 applications determined)
- Mar 2019 = 92.19% (59 applications determined in time, 64 applications determined)

The target was set at 93.70% which was the CIPFA Comparator average

The government minimum standard for the speed of determining applications for major development is 60%. Authorities performing below this are at risk of intervention from central government with applicants having the option of having decisions made by the Secretary of State.

Commentary:

The local target is set significantly higher than the national target to reflect CIPFA comparators. The recent dip in performance is attributed to the number of majors being small so one or two applications can have a greater impact on the performance outcome. Additionally this not considered to be a trend but a dip in performance. So for example when considered across the 24 month this represents an improvement across the two year period, e.g. 91.55% in December 2016. The Service is comfortably meeting nationally set KPI (60%) and has been consistently exceeding this target, both by determining applications within 13 weeks or by agreeing extensions of time or Planning Performance Agreements (PPAs) with applicants.

Actions:

- 1) Continue current working practices and agreeing extensions of time or Planning Performance Agreements (PPAs) with applicants (Planning Manager, ongoing)
- 2) Continue to monitor performance (Planning Manager, ongoing)
- 3) With assistance from the Business Development Manager appointed Jan 19, implement project

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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management approach to dealing with major applications to assist with processing of applications and reflection on how to improve to ensure performance is maintained. (Planning Manager, Sep 19)

The speed of determining applications for non-major development [Corporate - council]	%	89.20	74.24	 Declining
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Position:

This indicator measures the 24 month rolling result for the percentage of Minor and Other application types being processed within 8 weeks, or agreed time limit via a planning performance agreement (PPA) or extension of time (EOT). Only applications for householder developments and change of use are included under Other applications.

The trend for the rolling 24 months is a positive one and is shown below:

Mar 2017 = 68.26% (2766 applications in time, 4052 applications determined)

Jun 2017 = 74.02% (3074 applications in time, 4153 applications determined)

Sep 2017 = 80.15% (3363 applications in time, 4196 applications determined)

Dec 2017 = 85.28% (3546 applications in time, 4158 applications determined)

Mar 2018 = 85.63% (3431 applications in time, 4007 applications determined)

Jun 2018 = 81.32% (3152 applications in time, 3876 applications determined)

Sep 2018 = 77.01% (2800 applications in time, 3636 applications determined)

Dec 2018 = 74.85% (2803 applications in time, 3745 applications determined)

Mar 2019 = 74.24% (2795 Applications in time, 3765 applications determined)

The target of 89.2% has been set using the average of our CIPFA nearest neighbours.

The government minimum standard for the speed of determining applications for non-major development is 70%.

Authorities performing below this are at risk of intervention from central government with applicants having the option of having decisions made by the Secretary of State.

Commentary:

At the end of December 2018, the service achieved 74.24% for the determination of non-major applications. Though this exceeds the Government set target of 70% (for 2019 as outlined in Improving planning performance - Criteria for designation (revised 2018) issued November 2018), it is reduced compared to the 85.63% achieved at the end of March 2018 and is below the target of 84.7% set using the average of our CIPFA nearest neighbours. Furthermore since March 2018 there has been a consistent reduction in the performance. In addition, looking ahead as the exceptionally high months of 2017 drop off from the rolling 24 month the average performance will potentially reduce further.

This is a consequence of a number of factors including challenges with staff recruitment with vacancies at Principal Planning Officer/Senior and Planning Officer and the difficulty in recruiting experienced staff.

Discussions are now focused on tackling the difficult and challenging recruitment of more senior officers and the head of service is now looking at market supplements.

It is important that the benefits of the Business Process Improvement (BPI) are realised. The service has introduced Public Access and is continuing to work on additional modules, including report writing, consultee access and electronic working, which will help to increase throughput and performance. In December, the service rolled out phase 1 of Enterprise, a workflow module connected to uniform. This sets tasks to assist Officers with their work and has been designed to help officers work to sooner in the process so there is a greater opportunity to meet the 8 week target. In February, the service rolled out phase 2 of Enterprise tasks, which will assist with processing applications in time. In November 2018, the service introduced a Performance Action Plan, which is aimed at improving performance and this is been revised and updated in April 2019. In January, we introduced a monthly target which has set achievable targets per month to achieve 75% by the end of September, the monthly target was achieved in both January and March. Principal Planning Officers are working with case officers on an individual basis to improve performance.

The reliance on EOTs does need to reduce overall moving into 2019, however these will need to continue as an interim measure to ensure performance targets are met. The average length of time to determine

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applications also needs to improve.

Actions:

1. Revise and update the Performance Action Plan which aims to introduce a more streamlined and efficient service that is more customer focused. (Planning Managers & Principal Planning Officers, August 2019)
2. Work on measures to assist recruitment to vacant posts (Head of Planning, September 2019)
3. Continue work to implement electronic working and introduce electronic work flow - Enterprise (Information Manager and Planning Managers, August 2019)
4. Complete review of planning decisions (Planning Managers, September 2019) and implement recommendations (December 2019)
5. Management training to support managers with developing and performance managing staff (Planning Managers & Principal Planning Officers, training February & March 19, implemented August 2019)
6. Agreement has been given by ELT to seek an external resource to assist with the processing of approximately 160 applications. This is intended to free up case officers so that we can implement many of the other measures identified to assist with performance in a more effective manner. Procurement is to commence in April 2019. (Business Development Manager, September 2019)
7. Ensure staff are working towards quantitative and qualitative measures identified in Performance Development Plans (PDPs) 2018, continual review in 121s and PDP in Spring/Summer 2019 which will support staff to increase throughput of applications (Planning Managers, on-going)

% major planning application decisions that are overturned at appeal [Corporate - council]	%	1.80	3.13	 RED
				Declining

Position:

This indicator measures the 24 month rolling result for the percentage of the total number of decisions made by the authority on applications for major development that are then subsequently overturned at appeal, once nine months have elapsed following the end of the assessment period.

The nine months specified in the measure enables appeals to pass through the system and be decided for the majority of decisions on planning applications made during the assessment period.

The trend of the 24 month result is:

- Mar 2017 = 4.29% (Overturned at appeal = 3, Total decisions = 70)
- Jun 2017 = 6.15% (Overturned at appeal = 4, Total decisions = 65)
- Sep 2017 = 5.80% (Overturned at appeal = 4, Total decisions = 69)
- Dec 2017 = 5.48% (Overturned at appeal = 4, Total decisions = 73)
- Mar 2018 = 3.08% (Overturned at appeal = 2, Total decisions = 65)
- Jun 2018 = 1.64% (Overturned at appeal = 1, Total decisions = 61)
- Sep 2018 = 3.17% (Overturned at appeal = 2, Total decisions = 63)
- Dec 2018 = 3.28% (Overturned at appeal = 2, Total decisions = 61)
- Mar 2019 = 3.13% (Overturned at appeal = 2, Total decisions = 64)

The target is set at the average for our CIPFA comparator group at 1.80%

The government minimum standard (Designation threshold) for this KPI is 10%, we are well within this minimum. Authorities performing below this standard are at risk of designation which means intervention from central government with applicants having the option of having decisions made by the Secretary of State.

Commentary:

Performance on this indicator continues to exceed the Government minimum standard.

The service recently introduced customer service standards, which includes feedback and offering the opportunity to amend applications. This coupled with an enhanced package of pre-application discussions keeps the number of appeals low.

Actions:

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
1) Continue to invest in pre-application discussions to ensure schemes are submitted which are likely to result in a favourable recommendation to reduce the number of appeals (Planning Manager, ongoing); 2) Decision review project commenced. Analyse background to/reasons for current % of applications refused, including appeal decisions as part of the Modernisation Programme. (Planning Manager, Sep 19). 3) Monitor appeal decisions for trends to allow adaptation and flexibility in policy and decision making (Planning Manager, ongoing).				

% non-major planning application decisions that are overturned at appeal [Corporate - council]	%	1.10	1.68	 Improving
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Position:

This indicator measures the 24 month rolling result for the percentage of the total number of decisions made by the authority on applications for non-major development that are then subsequently overturned at appeal, once nine months have elapsed following the end of the assessment period.

The nine months specified in the measure enables appeals to pass through the system and be decided for the majority of decisions on planning applications made during the assessment period.

The trend of the 24 month result is:

Mar 2017 = 3.14% (Overturned at appeal = 128, Total decisions = 4070)

Jun 2017 = 2.96% (Overturned at appeal = 123, Total decisions = 4151)

Sep 2017 = 2.99% (Overturned at appeal = 126, Total decisions = 4221)

Dec 2017 = 2.75% (Overturned at appeal = 115, Total decisions = 4185)

Mar 2018 = 2.65% (Overturned at appeal = 107, Total decisions = 4032)

Jun 2018 = 2.51% (Overturned at appeal = 98, Total decisions = 3904)

Sep 2018 = 2.48% (Overturned at appeal = 91, Total decisions = 3661)

Dec 2018 = 2.07% (Overturned at appeal = 78, Total decisions = 3776)

Mar 2019 = 1.68% (Overturned at appeal = 64, Total decisions = 3805)

The target is set at the average for our CIPFA comparator group at 1.10%

The government minimum standard (Designation threshold) for this KPI is 10%, we are well within this minimum. Authorities performing below this standard are at risk of designation which means intervention from central government with applicants having the option of having decisions made by the Secretary of State.

Commentary:

Performance on this indicator continues to exceed the Government minimum standard and shows a reduction in the percentage in the last quarter, although this performance level continues to be higher than the average of our CIPFA comparator group.

The service introduced customer service standards in October 2017, which includes feedback and offering the opportunity to amend applications. This coupled with continuing to improve and promote pre-application discussions and other work strands within the modernisation strands and work on moving towards a positive planning service will reduce the number of appeals in the future.

In the Autumn of 2018, managers in the DM service started work on a new modernisation work strand, which includes a review of refusals to ensure we are making quality and consistent decisions and appeal decisions. This will identify areas to work with to change practices or to work directly with applicants to address persistent areas of refusal, therefore reducing the number of applications at appeal. Work on this project

In addition, increased efficiencies introduced through improved uniform packages and continuing to implement measures identified in the BPI review will improve the service offer and allow greater opportunities to maximise negotiation during the course of the application and enhance the pre-application advice service with timely and quality responses.

Actions:

1) Continue to invest in pre-application discussions to ensure schemes are submitted which are likely to

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result in a favourable recommendation to reduce the number of refusals and appeals (Planning Managers, July 2019);

2) Timeliness and quality of pre-application advice to be improved through a working group reviewing the process and how officers manage this work alongside applications (Planning Managers & Principal Planning Officers, July 2019)

3) Implement the 'creating a positive planning service' strand of the Modernisation Programme which includes increasing efficiencies and measures to negotiate to reduce the number of refused schemes (Planning Managers, July 2019)

4) Monitor appeal decisions for trends to allow adaptation and flexibility in policy and decision making (Planning Managers, ongoing)

5) Review of decisions project (Planning Managers, September 2019, implementation roll out of project, December 2019)

6) Review the SPD Householder Extensions (working group of DM and Policy officers, September 2019)

2018-19 Families Children & Learning - Council (Corporate)

% of schools that are judged good or outstanding by Ofsted [Corporate - council]	%	85.30	92.80	 GREEN
				Declining

Position:

As at the end of March 2019, 92.8% of schools in Brighton and Hove were judged to be good or outstanding. No schools were judged as inadequate. Since the last quarter eight schools were inspected; six primary schools, one secondary school and one special school. Judgements remained the same. They were 'good' for the primary schools and the secondary school and 'outstanding' for the special school. This reporting excludes independent and non-maintained special schools.

The quarter by quarter trend is:

Jan to Mar 2017 93.2%

Jan to Mar 2018 93.1%

Apr to Jun 2018 90.3%

Jul to Sep 2018 93.1%

Oct to Dec 2018 92.8%

Jan to Mar 2019 92.8%

The target is the national average judged to be good or outstanding as at the end of March 2019, which is currently 85.3%. These figures exclude new schools awaiting their first ever inspection, independent settings and non-maintained special schools, which Ofsted has a duty to inspect. When there is a conversion to an academy Ofsted now uses the judgement of the predecessor school.

Below is a breakdown of the percentage of schools judged good or outstanding by phase and comparison figures for England as at the end of March 2019:

All schools: 92.8% (England 85.3%, statistical neighbours 82.5%)

Nursery Schools: 100% (England 97.9%)

Primary: 92.3% (England 86.7%)

Secondary: 100% (England 75.0%)

Special: 66.7% (England 91.5%)

Pupil Referral Units: 100% (England 83.5%)

Colleges: 100% (Please note this is not included in the overall figure.)

Non maintained special schools 100% (Please note this is not included in the overall figure.)

Below is a breakdown of the percentage of pupils in good or outstanding schools as at the end of March 2019:

All schools: 94.1% (England 84.7%, statistical neighbours 82.7%)

Nursery Schools: 100% (England 98.1%)

Primary: 90.5% (England 87.4%)

Secondary: 100% (England 80.2%)

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Special: 83.7% (England 94.1%)
Pupil Referral Units: 100% (England 77.1%)

Commentary:

The Standards and Achievement Team are focusing on all RI schools and 4 schools which are vulnerable to downgrading. The number of 'Requires Improvement' (RI) schools has reduced to 5. The high number of good and outstanding schools in the city is a reflection of the strong partnership working between the schools and between schools and the LA. Each school is categorised according to historic performance and a programme of intervention is devised to improve outcomes in each school. A new categorisation process has been established for primary schools and is in use to enable the identification of and interventions needed to address issues in a decisive and timely manner.

Actions:

1. Support all Requires Improvement schools and ensure they have robust improvement plans and support. These are monitored through School Improvement Boards. (Head of Education, Standards and Achievement, August 2019)
2. All schools will be monitored carefully and any schools that become vulnerable to RI will be supported and challenged through a School Improvement Board. (Head of Education, Standards and Achievement, August 2019)
3. Continue school improvement boards for 2 new RI school that support and challenge the new leadership and governance in their journey to good. (Head of Education, Standards and Achievement, August 2019)

The average Progress 8 score of all pupils attending state funded schools at the end of Key Stage 4 [Corporate - council]	No.	-0.02	-0.02	 GREEN
				Not comparable to 2017/18

Position:

The Progress 8 score in Brighton and Hove was -0.02 in the 2017/18 academic year. This result is not directly comparable to last years because new GCSEs awarded 9-1 grades have been introduced for 20 subjects, including sciences and modern foreign languages. The national Progress 8 score was -0.02, the statistical neighbour average was -0.01, and the south east coastal strip average -0.12. The bottom scoring 25% of local authorities scored lower than -0.15. The target shown is the national result. The target for 2017/18 was to be above both national and stat neighbour performance.

Progress 8 is key measure that shows how well schools are performing with the cohort of children they are working with. A positive result shows better than expected progress and a negative result shows worse than expected progress; when comparing KS4 results with other schools whose pupils achieved similar results for KS2 attainment. The target is to be above the national result.

Attainment 8 is separate measure which better measures the outright attainment of pupils. It is a single number which represents average performance of all pupils across 8 GCSEs and equivalent qualifications at the end of secondary school, with extra weightings given to English, and Maths.

The 2017/18 Attainment 8 score for Brighton & Hove was 48.0. This result is not directly comparable to last years because new GCSEs awarded 9-1 grades have been introduced for 20 subjects, including sciences and modern foreign languages. The target was to be higher than both the national result and the average of Brighton and Hove's statistical neighbour authorities. The national result for 2017/18 was 46.6, the statistical neighbour average was 47.6, and the south east coastal strip average was 45.0. The 'South East coastal strip' comparator group comprises of Medway, Kent, West Sussex, Brighton & Hove, East Sussex, Portsmouth, Southampton, Hampshire and Isle of Wight.

The percentage of pupils that achieved a strong pass (grade 5 and above) in English and maths for Brighton & Hove was 46.7% for the 2017/18 academic year. National was 43.5%, the statistical neighbour average 45.8% and the coastal strip average 41.1%. For Brighton & Hove in 2016/17 the percentage of pupils achieving a strong pass (grade 5 and above) in English and maths was 47.2%. All data is final release data as published by the DfE.

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Commentary:

Performance in Brighton and Hove is good in terms of being above the national average for most attainment measures. This is a reflection of the ongoing commitment to school improvement within the LA and across Brighton and Hove's Education Partnership.

Any schools where standards are low or pupils have 'below average' progress, that carries statistical significance compared to national, has a school improvement board. At this meeting there is challenge, and support is agreed and brokered.

All schools have had data reviewed since August with a School Partnership Adviser and actions have been agreed in partnership with the school as a result. This may be then escalated into a school improvement board.

Actions:

1. Schools that have significantly below average attainment have regular meetings with Head of Education, Standards and Achievement to review progress. (Head of Education Standards and Achievement, August 2019)

2. Continue to identify focus schools and set robust challenge and support for improving disadvantaged pupil outcomes following mock results. (Head of Education, Standards and Achievement, August 2019)

The average Progress 8 score of disadvantaged pupils all pupils attending state funded schools at the end of Key Stage 4 [Corporate - council]	No.	-0.44	-0.57	 Not comparable to 2017/18
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Position:

The Progress 8 score for disadvantaged pupils in Brighton and Hove was -0.57 in the 2017/18 academic year.

This result is not directly comparable to last year's, because new GCSEs awarded 9-1 grades have been introduced for 20 subjects, including sciences and modern foreign languages.

The national result was -0.44, the statistical neighbour average was -0.55, and the south east coastal strip was -0.63.

The target shown is the national result. The target for 2017/18 was to be above both national and stat neighbour performance.

Progress 8 is key measure that shows how well schools are performing with the cohort of children they are working with. A positive result shows better than expected progress and a negative result shows worse than expected progress; when comparing KS4 results with other schools whose pupils achieved similar results for KS2 attainment. The target is to be above the national result.

Attainment 8 is separate measure which better measures the outright attainment of pupils. It is a single number which represents average performance of all pupils across 8 GCSEs and equivalent qualifications at the end of secondary school, with extra weightings given to English, and Maths. The Attainment 8 score for disadvantaged pupils in Brighton & Hove was 34.9 in the 2017/18 academic year. The national result for disadvantaged pupils was 36.8 the statistical neighbour average was 34.6, and the south east coastal strip was 33.5. These results also cannot be compared to previous years because of changes in GCSE grading. All data is final release data as published by the DfE.

Commentary:

Outcomes for disadvantaged pupils clearly remain a significant challenge for this city however information now suggests gains particularly at KS4. The 'Reducing the Difference Strategy' therefore continues to be implemented in Brighton and Hove and is likely to remain a key priority for some time.

There is increasing evidence through the autumn term school visits that schools are much more aware of this as a priority and are much more skilled in tracking, monitoring and intervening to address underperformance. There is also evidence through the School Improvement Board meetings in schools,

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through Head teacher conferences and events and in data tracking exercises that the schools are monitoring more forensically and prioritising more rigorously the performance of disadvantaged groups. Further evidence to support this also comes from Ofsted inspections over the last 12 months. The Local Authority (LA) are uncertain how much this will be translated into quantifiable gains moving forward and are still awaiting more detailed data to be released in January 2019. It is also clear that impacting on progress outcomes is a long-term intervention and it is unlikely that improvements will necessarily be seen immediately within an academic year.

A pupil premium group has now been formed in secondary schools but has yet to deliver on pupil premium review. This however has now commenced but in early stages. It has been supported by a senior leader seconded to the Local Authority for 1 day per week and Pavilion and Downs Teaching School.. Further actions are to be planned in the autumn term.

The Head of Education, Standards and Achievement has met with all secondary heads to further highlight issues with data and presented detailed data and findings from analysis. Individual school partnership adviser visits have further followed up and examined data closely in autumn term visits.

The data team will complete further analysis of data and this has been shared at primary headteachers meeting and with School Partnership Advisers.

The key challenge for this area is limited funding for schools and the LA. It is also clearly an issue that is not likely to be addressed by schools alone.

Actions:

1. Continue to identify focus schools and set robust challenge and support for improving disadvantaged pupil outcomes following mock results (Head of Education, Standards and Achievement, August 2019)
2. Further embed a secondary pupil premium group and deliver pupil premium reviews in secondary schools along and agree further actions to support improvement (Head of Education Standards and Achievement, August 2019)
3. Continue to provide training to governing bodies to enable them to track and challenge the impact of pupil premium spend on outcomes for disadvantaged groups. (Head of Education, Standards and Achievement, August 2019)
4. A strategic group which is a subgroup of Brighton and Hove Education Partnership needs fully embedding following the inaugural meeting to agree new actions to improve outcomes (Head of Education, Standards and Achievement, August 2019)

The average Progress 8 score of children in care in state funded schools at the end of Key Stage 4 [Corporate - council]	No.	-1.20	-1.52	 RED
				Not comparable to 2017/18

Position:

The 2017/18 average Progress 8 score for children in care was -1.52.

Progress 8 measures the progress pupils have made between key stage 2 and key stage 4. A progress score of -1 is on average one grade below national in ten qualifications. A progress score of -0.1 is on average one grade below national in one out of ten qualifications.

In 2016/17 the Progress 8 score for children in care was -1.60, which while a better score, although this is not directly comparable as continuing adjustments to the national grading are made.

In 2017/18 the national average progress 8 score for children in care was -1.2 for children in care nationally. The statistical neighbour average was -1.23 and the South East was -1.17.

The target shown is the national result. The target for 2017/18 was to be above both national and stat neighbour performance.

Progress 8 aims to capture the progress a pupil makes from the end of key stage 2 to the end of key stage 4. It compares pupils' achievement – their Attainment 8 score – with the average Attainment 8 score of all pupils nationally who had a similar starting point (or 'prior attainment'), calculated using assessment results from the end of primary school. Progress 8 is a relative measure; therefore the national average Progress 8 score for mainstream schools is very close to zero. When including pupils at special schools the national average is not zero as Progress 8 scores for special schools are calculated using Attainment 8 estimates

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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based on pupils in mainstream schools. Progress 8 is part of the new secondary accountability system being implemented from 2016. Progress 8 is a relative measure, which means that the overall national score remains the same between years. In 2017, a new methodology was implemented which changed the basis for calculating key stage 2 prior attainment. Previously attainment had been calculated using an average for English (reading and writing) and maths scores. This was revised to be just reading and maths. This resulted in a larger proportion of pupils with higher key stage 2 prior attainment scores. The Progress 8 measure should not be compared year on year.

Attainment 8 is also measured, looking at the average achievement of pupils in up to 8 qualifications. The average Attainment 8 score for children in care is 18.1 (F/E range) for Brighton and Hove compared to 18.9 (F/E grade range) for children in care nationally. The result for all pupils is 48.0 (B/C range) in Brighton & Hove and 46.4 (B/C range) nationally.

Commentary:

The wide range of complex issues experienced by children in care means that there are multiple barriers to children in care making rapid and sustained progress. These include changes in placement and consequently school provision; coming into care late, which could be part way through a key stage having not made progress in previous years.

The Virtual School places a large emphasis on supporting schools to support a child rather than just working directly with individuals and finances are allocated from the pupil premium to support tuition for Y10s and 11s.

The biggest risk to academic progress for any individual child is that of instability in their own lives this means the termly educational planning meetings (known as PEP, Personal Education Planning) between social worker and schools are key and these are being supported for children who are having most difficulty by Virtual School Staff.

The current PEP system has been evaluated and the decision has been made to introduce an electronic PEP (ePEP) for September; the voice of the child and their aspirations will continue to be a focus.

Deep dive reviews continue to be an effective way to identify children who are underachieving; this in turn not only informs interventions but also feeds into how we challenge schools and request support. The ePEP will also provide an effective way to identify cohorts of children who are not progressing.

Visits to the head teachers of schools with the largest number of children in care are carried out; these enable further support to be explored; progress to be challenged and good practice to be shared.

“Revision skills for GCSE Maths” sessions were commissioned by the virtual school and were attended by a small number of foster carers, who found this helpful.

In partnership with a Brighton school the Virtual School has offered a bespoke GCSE Maths course for foster carers, so that carers feel confident in how they support Maths skills; this starts in the summer term of this school year.

A small cohort of children who are persistently absent have been supported on attendance plans and the Virtual school is working in close collaboration with schools and the professionals involved with these children in order to support them improving their attendance.

The virtual school is currently engaged in training to pods of social workers, with attendance, maths progress and PEPs key aspects. An attendance plan has been incorporated into the PEPs of selected children.

The Virtual school is working more closely and in a more structured way with BHISS; training is shared and meetings are scheduled to discuss children targeted as not achieving, so that information can be shared effectively and so that children in care and children previously in care receive the “in school” support they require as a priority.

Actions:

1. Support the Maths GCSE course for foster carers, so that it is well attended by foster carers. (Headteacher of Virtual School, July 2019).
2. Continue to deliver revised training to all social care pods on new developments in education and current priorities, including attendance (Headteacher of Virtual School, throughout the year).
3. Continue to reinforce links between the virtual school, head teachers and designated teachers, through school visits and designated teacher training events. (Headteacher of Virtual School, July 2019).

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
4. Ensure the upcoming foster carer and Virtual school summer conferences address the need to raise aspirations for children in care and children previously in care and are well attended. (Headteacher of Virtual School, July 2019).				
5. Ensure schools, social work teams, IRO (Independent Reviewing Officer) teams and foster carers receive training ahead of the implementation of the new electronic Personal Education Plan. (Head teacher of Virtual School, July 2019).				
6. Ensure the "Raising Aspirations" trip to Oxford University for children in key stage four is planned for the summer term. (Head teacher of Virtual School, July 2019).				
7. Work with Social Emotional Mental Health, Behaviour and Attendance Partnership (BAP) and Special Educational Needs teams to ensure children in care are receiving the support they need in a timely and effective manner. (Head teacher of Virtual School, July 2019).				

% of all pupils attending state funded schools achieving the 'expected standard' in reading, writing and maths at the end of key stage 2 [Corporate - council]	%	65.00	67.00	 Improving
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Position:

The published revised data confirms that 67% of all pupils in Brighton and Hove achieved the expected standard in the reading test, writing teacher assessment and the maths test, during the 2017/18 academic year.

This is a 3-percentage point increase from 64% in the 2016/17 academic year.

The target is to be higher than the national benchmark of 65%, which itself was an increase against the previous year's national figure of 61%.

The statistical neighbour local authority level data has now been published as 64%.

This is the third year of the new key stage 2 tests in maths, reading and grammar, punctuation and spelling, to reflect the new primary curriculum, introduced in 2014.

KS1 to KS2 Brighton and Hove progress data:

Reading Progress +0.5 (Last Year +1.2) National 0.0

Writing Progress -0.7 (Last Year -0.2) National 0.0

Maths Progress -0.5 (Last Year -0.4) National 0.0

Most schools will have progress scores between -5 and +5. A progress score of 0 means that, on average, pupils achieved similar results at the end of KS2 to pupils in other schools with similar results at the end of KS1. A positive progress score means that, on average, pupils made more progress than pupils with similar results at the end of KS1, in other schools.

Commentary:

Attainment can be considered high in Brighton and Hove. Despite the increase in the national average, Brighton and Hove has remained well above in terms of attainment.

The reading outcomes demonstrate this as an ongoing area of strength in the city. Maths is in line with the National Average but remains an area of improvement.

Progress in writing and maths are both a significant change.

A new streamlined system for monitoring and categorisation has been fully implemented. This allows a more accurate and quicker method of identifying schools in need of support throughout the year. This School Partnership Adviser led model of categorisation supports and challenges primary schools to improve standards. Partnership chairs have now been involved in this process. School Improvement Boards are in place for higher support schools. School to school, teaching schools and national leaders of education also support improvements within Brighton Schools.

A Maths project continues where focused work is taking place to support 12 schools. This will continue for the rest of the academic year. A further 8 schools are supported with an LA lead programme. Writing progress has become more of a challenge following 2018 results and training is being delivered this term

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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to support schools. Further projects for writing are being investigated in partnership with teaching schools.

Actions:

1. Further work will be investigated to support writing with the view to commission further support for schools to help them improve standards. (Head of Education, Standards and Achievement, May 2019)
2. Further support and challenge will be given to schools via termly SPA meetings on standards (Head of Education, Standards and Achievement, May 2019)

% of disadvantaged pupils attending state funded schools achieving the 'expected standard' in reading, writing and maths at the end of key stage 2 [Corporate - council]	%	51.00	47.00	 Improving
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Position:

The percentage of Brighton & Hove disadvantaged pupils making the 'expected level' in 2017/18 (which is achieving the expected standard in the reading test, writing teacher assessment and the maths test) was 47%. Disadvantaged pupils are those pupils eligible for free school meals in the last six years; or looked after continuously for 1 day or more; or formerly in care and recorded as such in school census).

There has been a 2-percentage point increase in performance this year, compared to the previous academic year where performance was 45%.

The target for 2017/18 was to be above national results for disadvantaged pupils, which were 51%. The statistical neighbour result was 48%.

The Department for Education comparison group for disadvantaged pupils is other (non-disadvantaged) pupils nationally. The revised non-disadvantaged figure was 71%.

Commentary:

Outcomes for disadvantaged pupils clearly remain a significant challenge for this city and early non-validated information may suggest small gains particularly at KS4.

The 'Reducing the Difference Strategy' therefore continues to be implemented in Brighton and Hove and is likely to remain a key priority for some time. Part of this strategy aims to improve outcomes for disadvantaged at KS2.

There is increasing evidence through the Autumn term's 'Know Your School visits' that schools are much more aware of this as a priority and are much more skilled in tracking, monitoring and intervening to address underperformance. There is also evidence through the School Improvement Board meetings in schools, through Head teacher conferences and events and in data tracking exercises that the schools are monitoring more forensically and prioritising more rigorously the performance of disadvantaged groups. Further evidence to support this also comes from Ofsted inspections over the last 12 months. The Local Authority (LA) are uncertain how much this will be translated into quantifiable gains in 2019 and are still awaiting more detailed data to be released in January 2019. It is also clear that impacting on progress outcomes is a long-term intervention and it is unlikely that improvements will necessarily be seen immediately within an academic year.

Pupil premium reviews are now being led by National Leaders of Education and have been completed in 8 out of 10 primary schools. A pupil premium champion has now been appointed and work will include disseminating learning from these reviews and national research.

The Head of Education, Standards and Achievement has met with all secondary heads to further highlight issues with data and presented detailed data and findings from analysis. Individual school partnership adviser visits have further followed up and examined data closely in autumn term visits.

The data team will complete further analysis of data and this has been shared at primary headteachers meeting and with School Partnership Advisers.

The key challenge for this area is limited funding for schools and the LA. It is also clearly an issue that is not likely to be addressed by schools alone.

Actions:

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
1. Continue to identify focus schools and set robust challenge and support for improving disadvantaged pupil outcomes following mock and summer results (Head of Education, Standards and Achievement, August 2019)				
3. Continue to provide training to governing bodies to enable them to track and challenge the impact of pupil premium spend on outcomes for disadvantaged groups. (Head of Education, Standards and Achievement, August 2019)				
4. Pupil premium review have been commissioned for the 10 most underachieving primary schools for disadvantaged pupils and are to be completed by the end of the year. These are to be evaluated and learning from the City shared with all headteachers (Head of Education, Standards and Achievement, August 2019)				
5. The revised monitoring process has a major focus on gaps and support and challenge will be given to all schools on this area as new results come in (Head of Education, Standards and Achievement, August 2019)				

Number of families identified as part of the Stronger Families Stronger Communities programme who are 'turned around' (Phase 2) [Corporate - council]	No.	560.00	247.00	 RED	No change
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Position:

247 families attached to the Stronger Families Stronger Communities programme have been identified as 'turned around' between April 18 and March 2019, 48 of which were identified as 'turned around' between January and March 2019.

The families turned around target is set locally and reflects a projected percentage of families out of the total number of families engaged on the programme in any one year.

The latest national comparator result is from end September 2018 and is a cumulative % of the number of families turned around to date from the start of the programme in January 2015. The BHCC figure was 32%, slightly below the national median figure of 33.35%.

The programme began in January 2015, and by the end of March 2019 a total of 770 cases have been turned around, 34% of the cumulative programme total of 2280.

The number of families turned around is dependent on the number of families the programmes engages with. Grant funding is determined based on 100% success with the number of families engaged with, which is an agreed figure at the beginning of the current phase of the programme. The original engagement target for phase 2 of the programme (2015 – 2020) is 2280 and this has now been reached.

Commentary:

The Troubled Families target for successful whole family casework remains challenging and this is reflected nationally. The national programme has a target to deliver between 90 and 100% success against its total target of engaged cases for which Local Authorities receive funding. Whole family working entails an assessment and plan that identifies the needs of all members of the family and a practitioner supporting the family to make the agreed changes and support may range from two to three months to over a year depending upon the complexity of needs.

Brighton & Hove has reached its engagement target of 2280 engaged families by March 2019 and as such has received the total engagement grant for Phase 2 of the programme which ends in March 2020. All funding for the programme will now come from the remaining projected success target which is 85% of 2280 engaged cases.

Following the annual Troubled Families review visit Brighton & Hove has submitted an updated action plan focusing on rapidly increasing the number of recorded successes through a combination of;

- Improving Troubled Families monitoring in teams and services where eligible casework is undertaken
- Opening up Troubled Families recording in areas not previously monitored under the programme
- Identifying eligible closed casework that hasn't been engaged to the programme within Phase 2 of the programme and evidences success under the Troubled Families framework
- Continued close monitoring of casework where the Troubled Families recording is sufficient

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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This action plan provides the framework for delivery of the programme until March 2020 and will be reviewed monthly and shared with the Troubled Families Unit at regular intervals.

The success target for 2019/20 reflects the remaining successes against our target of 85% of the 2280; this means identifying 1168 successful cases by March 2020. The Whole Family Partnership Board is leading on plans for a review of preventative services for families which will be facilitated by the Local Government Association. This review will provide a useful framework to discuss options for preventative work following the end of the current Troubled Families programme.

Over quarter 4 of 2018/29 the programme has:

Reviewed with the Troubled Families team and produced a revised success target, an updated action plan, revised targets profiled monthly by service area to March 2020.

Reviewed the barriers to accessing health visiting cases and updated the Data Sharing Agreement between the Council and SPFT to maximise the opportunity to identify and record successful cases.

Opened the family coach service for families with children in primary school from April 1st with initial communication out to all schools.

Actions:

1. Review eligible retrospective casework for success in Health Visiting, Children's Centres, Front Door for Families, Welfare Reform, Social Work Cohorts. (SFSC Programme Manager, September 19)
2. Ensure implementation of consistent eligibility and distance travelled progress recording in Front Door for Families and Social Work. (SFSC Programme Manager, September 19)
3. Primary Family Coach team to complete introductory meetings with all schools to facilitate increased take up of the family coaching offer alongside employment coaching offer to parents from the Department for Work and Pensions seconded employment coaches. (ITFYP Service Manager, July 19)
4. Work with partners in statutory and community and voluntary services for families to identify any Troubled Families aligned casework that can be accessed and for which there is clear evidence of progress. (SFSC Programme Manager, September 19)

Number of children in care [Corporate - council]	No.	422.00	393.00	 GREEN
				Improving

Position:

There are 393 children in care (CIC) at 31st March 2019.

The quarter by quarter trend is:

Mar 2019 - 393

Dec 2018 - 380

Sep 2018 - 394

Jun 2018 - 400

Mar 2018 - 418

Dec 2017 - 414

Since 2010, the highest number of CiC was 515 in November 2011 and the lowest number was 377 at 31st January 2019.

The aim and target shown is to reduce children in care to 422 (82.2 per 10,000 children), which is the average for our 10 nearest authorities in terms of contextual factors based on Public Health analysis of deprivation, alcohol, drugs and mental health.

The CIC rate per 10,000 is 76.6 at March 2019, down from 81.7 per 10,000 at March 2018. This is below the March 2018 contextual neighbour average (89.6), and above the national average (64) and statistical neighbour average (65). The South East average rate per 10,000 children rose from 61.3 in Quarter 3 2017/18 to 62.8 Quarter 3 2018/19.

There are 37 Unaccompanied Asylum Seeking Children (UASC) in care (9.4% of the total), up from 30 (7.2%) at March 2018. The number of CIC excluding UASC is down from 389 at March 2018 to 356 at March 2019 – a decrease of 33 children.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
218 (55.5%) of CiC are male, up from 52.7% at March 2018 and in-line with the national average of 56%. 175 (44.5%) of CiC are female.				
119 (30.3%) of CiC are not White British. If UASC are excluded, the percentage of CiC that are not White British is 23%. 21% of children aged under 18 in Brighton and Hove were not White British at the time of the 2011 census.				
158 children became looked after during the year ending 31st March 2019, up from 142 during the previous 12 months. Of the children becoming looked after during the year ending 31st March 2019, 15% were aged under 1, 16% were aged 1 to 4, 19% were aged 5 to 9, 30% were aged 10 to 15 and 20% were aged 16 and over.				
184 children ceased to be in care during the year ending 31st March 2019, up from 179 during the previous 12 months. Of these children, 22.8% returned to live with parents or relatives (up from 21.2% in the previous 12 months), 17.4% were adopted (down from 17.9%), 12.5% were subject to a Special Guardianship Order (up from 12.3%), 9.8% ceased care for any other reason – the majority of which is the young person reaching 18 and becoming a care leaver (down from 11.7%), 19% ceased due to the child turning 18 and living with former foster carer (unchanged from 19%), and 2.7% ceased due to a Child Arrangement Order being granted (down from 3.9%).				

Commentary:

Performance is above target. It is thought that this is a reflection of the success of the model of social work practice, and it becoming embedded in day to day social work practice with children and families to keep children safe within their families. It may also reflect some of the changing demography of the city and the impact of changes in the benefits system eg Universal Credit and housing benefit, resulting in families being placed / moving out of the city .

Whilst acknowledging the trajectory is currently reducing, challenges remain in sustaining this progress , particularly in relation to our UASC admissions to care as there has been a significant increase in spontaneous UASC arrival activity up from 30 at March 18 to 37 at March 19 . Based on this activity, it is predicted that there will be a further 45 UASC arrivals between Jan 19 and March 20 – this includes both spontaneous arrivals and those Brighton & Hove have committed to take under the National Transfer Scheme (NTS).

Children’s Services Entry to Care Panel continues to consider all admissions for children coming into care. It is chaired by the Assistant Director and oversees any admissions of children/young people into the care system, and continues to provide senior management oversight to ensure that all other alternatives have been including placement with family members with support packages have been explored before agreeing to a child/young person becoming looked after. This includes the use of support via the Extended Adolescence Service.

Work has now started on a work stream of reunification of children in care to parents or extended family care, which it is anticipated will impact positively in terms of further reducing the numbers of children in care by proactively addressing care planning.

Actions:

1. Children’s Services Entry to Care Panel to continue to review admissions for children into care to ensure that alternatives to care are vigorously explored where it is safe to do so. (Assistant Director Children’s Health Safeguarding & Care, Review – July 19)
2. Progress the development of reunification work stream (Head of Service -CIC Practice lead, Children’s Health Safeguarding & Care, Review – July 19)

2018-19 Finance & Resources - Council (Corporate) - annual

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
% of high priority audit recommendations (that have passed their agreed implementation deadline) that have been implemented [Corporate - council]	%	95.00	100.00	 GREEN Improving

Position:

This indicator shows the cumulative position based on high priority actions due to be implemented in the last 12 months.

The cumulative trend for 18/19 is:

- 18/19 Quarter 1 = 92.6%
- 18/19 Quarter 2 = 85.7%
- 18/19 Quarter 3 = 100%
- 18/19 Quarter 4 = 100%

17/18 data is not comparable as it includes medium priority actions as well as high priority actions.

As at the end of Quarter 4 100% of high priority audit actions (that have passed their agreed implementation deadline) have been implemented. This is on target.

This indicator shows the percentage of high priority audit actions that have reached their due date and have been implemented. The data is based on updates from those responsible for implementing recommendations setting out what has been done. The indicator provides contributory evidence about the extent to which the council is maintaining a strong control environment.

Commentary:

The corporate performance at the end of Quarter 4 is on target.

Whilst this is positive it should be noted that there are a number of actions that have had implementation dates postponed for specific reasons to allow effective actions to be implemented .

Actions:

- 1) Internal Audit sends reminders to action owners at the end of each quarter and collate information about high priority action progress. (Audit Manager, Quarterly)
- 2) Any overdue high priority actions are reported to the Audit and Standards Committee . (Audit Manager, Quarterly).
- 3) Directorate officers are required to attend the Audit and Standards Committee to provide additional information and scrutiny by Committee Members where high priority actions have not been implemented in agreed timescales. (Audit Manager, Quarterly)

% of invoices for commercial goods and services that were paid within 30 days [Corporate - council]	%	95.00	93.44	 AMBER Declining
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Position:

Between April and March 2019, 93.44% of invoices for commercial goods and services were paid within 30 days. This compares with 93.76% for the same period last year.

The quarter by quarter trend is:

- Apr 2017 to Mar 2018 = 93.76%
- Apr 2018 to Jun 2018 = 93.24%
- Apr 2018 to Sep 2018 = 92.61%
- Apr 2018 to Dec 2018 = 93.01%
- Apr 2018 to Mar 2019 = 93.44%

Between January and March 2019 (Q4), 94.54% of invoices for commercial goods and services were paid within 30 days. This compares with 93.86% for the previous quarter (October to December) and 92.96% for the same period last year. This measure/target is in response to the government's drive to improve the speed of payments across the whole of the public sector. The principle is about ensuring that suppliers' cash flows and viability are not impacted by slow payment processes. We aim to pay suppliers within 30

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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days of receiving the invoice, and have a target of 95%. Key to meeting the target of 95% is high compliance with the use of the purchase order system which makes processing invoices quick and efficient.

Commentary:

A high volume of invoices already overdue have been received by Accounts Payable during the period which continues to affect performance as does the continuing non compliance with the purchase to pay policy by some services.

The challenges facing the creditors service are:

1. Continuing to maintain the level of performance with reducing staff resources .
2. Invoices are initially received and processed by individual services therefore the invoice processing performance is not wholly in the control of the creditors service.
3. A high volume of invoices are already overdue at the point they are received by the creditors service .

Actions:

1. Reporting is being carried out to enable targeted communication and guidance to service areas struggling most to comply with the Purchase to Pay process. Meetings have taken place with some service areas and will continue, targeting areas that are struggling the most. This should also have a positive impact on the number of late invoices being sent to Corporate Payments from service areas (Accounts Payable Lead, ongoing).
2. To continue to review processes across the whole team to develop automation in processing as much as possible to reduce processing time, freeing staff time to enforce non-compliance of purchasing processes (Accounts Payable Lead, ongoing).
3. Continue to work with suppliers to ensure they do not invoice the council without a valid Purchase Order number (Accounts Payable Lead, ongoing).
4. We are continuing to explore alternative payment solutions with Lloyds Bank , our finance system supplier and our Orbis partners (e.g. e-invoicing, e-pay virtual) with the aim of providing services with the most effective purchasing and payment options and this is being prioritised by Business Operations . E-Pay Virtual is still being looked at although there are some system issues that need resolving first , which has caused a delay in implementation. Once E-Pay has been implemented we hope this will reduce the volume of one off invoice payments and consequently reduce the number of supplier set up requests . (Head of Business Operations BHCC, July 19).
5. We are exploring the option of supplier invoices coming in centrally to Accounts Payable , rather than being sent to services. As part of e-invoicing Brighton & Hove Buses are emailing their invoices directly to Corporate Accounts Payable, with a view of contacting other large suppliers once this process is working well. (Accounts Payable Lead, ongoing).

% of Purchase Orders raised on ordering rather than when invoiced [Corporate - council]	%	80.00	54.80	 RED
				Improving

Position:

Between April 2018 and March 2019, 54.8% of purchase orders were raised on ordering rather than when invoiced. This compares favourably with 47.94% for the same period last year, which indicates the targeted approach with services is having an impact, but there is clearly more work in this area to do.

The quarter by quarter trend is:

Apr 17 to Mar 18 = 47.94%

Apr to Jun 18 = 51.64%

Apr to Sep 18 = 52.97%

Apr to Dec 18 = 54.16%

Apr to Mar 19 = 54.8%

There is no benchmark for this indicator but the challenging and necessary 80% target was set to improve compliance with the process known as Purchase to Pay. Purchase to Pay means raising an electronic purchase order and sending this to the supplier who then quotes this order when they eventually send their

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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invoice for the goods or services. Compliance is important for a wide range of reasons including:

- a) it improves commitment accounting and therefore the quality of financial forecasts across the council;
- b) it helps to speed up the process of paying invoices by being able to automatically match invoices to purchase orders - this helps to meet government Prompt Payment guidelines and avoid late payment penalties;
- c) it provides qualitative and quantitative management information concerning purchasing activity and enables monitoring of compliance with Contract Standing Orders and purchasing behaviours (e.g. on or off contract activity).

All budget managers are provided with monthly reports highlighting non-compliant purchases (invoices) known as 'retrospective orders'.

Commentary:

Of the 7,242 orders raised in Qtr 4, 4,091 were raised in compliance i.e. 56.49% which is similar to the last quarter's performance of 56.54% and an increase to 50.58% for the same quarter last year. ELT and DMTs wish to see significant improvement in compliance for the reasons stated above. Improving compliance will take time and effort as the wide range of procurement practices deployed across the council require different responses and solutions ranging from training financial administrators with under-developed skills to finding solutions for complex call-off purchasing arrangements without creating an inefficient and onerous administrative burden.

Primary focus is on the integration of a new Contract Management Module with financial system data as this has the best prospect of improving compliance. Once implemented, purchasing that is 'off contract' will be highlighted to managers and Corporate Procurement. These purchases can be examined to determine if any action is required, e.g. whether a procurement project is required.

Actions:

1. RAG rated reporting to ELT members to raise the profile of non-compliance. This information is presented alongside TBM (with more detailed being sent to budget holders) and the intention is to include the RAG rating information in monthly reports (Deputy Chief Finance Officer, monthly).
2. Critically, implementation of the Civica Contract Module (business case approved by CMDDB) which enables non-compliance to be detected easily and provides effective MI and exception reporting. The Contracts module is in use on the live Purchasing system, with more contracts being added all the time as more teams are involved around the council or newly awarded contracts are added. (Head of Procurement, ongoing as contracts are created).
3. Continuing to identify high volume non-compliant areas from available data. (Head of Procurement/Accounts Payable Lead, ongoing);
4. Report presented to Orbis Customer Board with areas with low compliance highlighted. (Accounts Payable Lead, ongoing)
5. Continuing to work on a daily basis with suppliers and visiting service areas to promote purchasing compliance. (Accounts Payable Lead, ongoing)

Average number of working days / shifts lost per Full Time Equivalent (FTE) due to sickness absence (not including schools) [Corporate - council]	No.	9.70	10.09	 Improving
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Position:

From Quarter 1 (Q1) 2015/16, the target was changed to benchmark it against the CIPFA (Chartered Institute of Public Finance and Accountancy) HR (Human Resources) Benchmarking Club. The target was reduced from 10 days to 9.7 days and has remained unchanged as it is still comparable to the latest benchmarking information available.

The average days lost due to sickness absence between April 18 and March 19 (year-end 2018/19) is 10.09 days compared with 10.57 days for the same period in 2017/18. During Q4 (Jan to March 19) average sickness was 2.74 days, which is above the quarterly target of 2.41 days, and is a Red RAG

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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rating. This average is higher than in Q3 where the average days lost was 2.60 days, Q2 at 2.42 days and Q1 at 2.33 days.

The quarter by quarter trend (days) is:

Apr to Jun 16 = 2.67

Jul to Sep 16 = 2.6

Oct to Dec 16 = 2.72

Jan to Mar 17 = 2.6

Apr to Mar 17 = 10.59

Apr to Jun 17 = 2.41

Jul to Sep 17 = 2.63

Oct to Dec 17 = 2.59

Jan to Mar 18 = 2.94

Apr to Mar 18 = 10.57

Apr to Jun 18 = 2.33

Jul to Sep 18 = 2.42

Oct to Dec 18 = 2.60

Jan to Mar 19 = 2.74

Apr 18 to Mar 19 = 10.09

It should be noted that this year's outturn of 10.09 days is the lowest sickness result for the council since 2011/12. The results for previous years are: 10.43 days in 2012/13, 11.23 days in 2013/14, 10.91 days in 2014/15, 10.59 days in 2016/17, 10.57 days in 2017/18.

Commentary:

- This month the highest specified reason for absence was stress/mental health conditions which account for 23.88% of all absences (this is slightly lower than Q3). The next highest reason for absence was infections which account for 19.44% of all absences (which is higher than in Q3).
- FirstCare was launched across the Council (except in schools) on the 1st December 2017. All absence recording is done by FirstCare rather than line managers which we are hoping will improve the accuracy of our absence data.
- One of the benefits of FirstCare has been the access to immediate medical advice and a number of staff have reported back to HR on the advice they have received and how useful they found this aspect of the service.
- Automated emails are sent direct from FirstCare to managers regarding the following alerts, which include: a Day 1 alert on stress/mental health conditions, Day 14 alert on musculo-skeletal conditions, Day 28 alert on long-term conditions, Alert when staff have reached 3 periods of absence in 6 months and an alert when staff have reached 10 days absence in 6 months.
- Managers also receive automated e-mails (from the new system) regarding the need to complete return-to-work interviews and have access to a suite of management information reports on the FirstCare attendance management database.
- Although completion of Return to Work Interviews (RTWI's) across the council remains above 70% with 72.4% of RTWI's being completed during this quarter this % is reducing and so we need to continue to push this across the council. Prior to FirstCare the RTWI completion rate was 62% across the council.

Actions for Improvement:

1. The implementation of FirstCare for the council (which came in on 1st December 2017, will continue to be monitored (a report went to CDMB in June 2018 on the implementation of FirstCare) and regular review meetings are set up with FirstCare to manage this contract. We are now in the second year of this contract. (Lead HR Consultant, Ongoing).
2. The Attendance Management Procedure is being reviewed and a new Attendance Policy, Procedure and Toolkit has been drafted in consultation with the trade unions. HR&OD are aiming for the new policy and toolkit to be ready for implementation in 2019. (HR Business Partner for Health & Adult Social Care, August 2019).
3. All of the above feed into the work that has started on the Well-being agenda (including the establishment of the Well-being Steering Group) for our staff, which is being driven through the Executive Director of

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Finance & Resources and health and safety colleagues. Some of the activity taking place includes:

- Continued delivery of Pensions Awareness Sessions – 7 sessions have been delivered with more planned.
- Delivery of the Menopause sessions which have been really successful with more sessions planned.
- Delivery of Mental Health Practical skills for managers training with further sessions planned this year.
- Rebrand and refocus of Resilience training and additional sessions added.
- Physical Activities are being promoted by our Healthy Lifestyles team e.g. pilates sessions have been run at the Royal Pavilion.
- Targeted NHS Health checks in City Clean / City Parks and in Knoll House with further sessions planned. Funding for wider roll-out of NHS health checks has been agreed. (Head of Health & Safety, ongoing).

Staff who declare that they have a disability as a % of the total workforce who declare whether they have a disability (not including schools) [Corporate - council]	%	8.00	7.62	 Improving
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Position:

At the end of 2018/19, the percentage of staff who declared a disability was 7.62%. This figure is higher than at 31 March 2018.

16/17 - 7.36%

17/18 - 7.4%

18/19 – 7.62%

The original target of 7.5% was set in 2013 in line with this group's level of representation within the economically active population in the City as per the 2011 Census. This was subsequently increased to 8% in 2016/17 in response to the progress the council had made in increasing the percentage of disabled staff within its workforce.

Commentary:

- Historically, disabled employees have been more likely to be employed in lower graded roles and have been particularly under-represented in roles graded M8 or above. However, for the third year running, the highest level of representation of disabled staff in 2018/19 was within the middle grade band i.e. posts graded scale SO1/2 – M9 (7.77%). This figure is higher than in 2017/18.
- The only way to increase the diversity of the workforce is by attracting, recruiting and retaining more disabled staff. During 2018/19 the proportion of applicants who declared a disability was disappointingly low at 3.39%. This figure is slightly lower than last year.
- Whilst the individuals who applied generally out-performed their non-disabled counterparts at being shortlisted for interview, they fared less well at securing job offers (10.76% and 13.63% respectively). This bucks the trend seen in job offers made to this group since 2014/15 and further work is required to understand the reasons for this. Work carried out this year has included:

- Continuing to review person specifications as jobs are advertised to reduce the number of essential criteria – overly long person specifications had been identified as potential barriers to employment.
- Trialling the use of four different application methods to make it easier for candidates to apply for jobs.
- Working with managers to develop positive action recruitment initiatives with the aim of attracting more diverse talent for roles that have either proved hard to fill or have involved larger recruitment exercises.
- Attending local community events such as Disability Pride to promote job opportunities.
- Attending a variety of local careers fairs including within schools, colleges and universities.
- Working with JobCentre Plus and the National Careers Service to deliver workshops to potential job applicants to help them apply for council vacancies.
- Ensuring recruiting managers maintain an appropriate level of knowledge and skill by requiring them to attend a recruitment and selection skills workshop and undertake unconscious bias training before they can chair a recruitment panel.
- Roll out of the council's new Behaviour Framework to all staff at TIER 5 and below.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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- Procuring a new online recruitment system and ensuring the new system supports the council's equalities priorities.
- HR support and attendance at staff forum events and activities.
- A dedicated resource within Human Resources and Organisational Development (HR&OD) to develop and deliver a range of activities to increase the diversity of the workforce at all levels so that it more closely reflects the equality profile of the economically active population in the City.
- Recruiting to a collaborative post with four other public sector partners to develop, co-ordinate and evaluate a programme of actions designed to enable these organisations to develop and maintain diverse workforces that more closely reflect the profile of the local communities they serve.
- External consultants, Global HPO undertaking a follow-up review of race equality and diversity within the workforce. The review identified specific realistic actions the council needs to take to deliver real and tangible outcomes for the workforce and increase the pace of change. Although this review has focussed particularly on the day-to-day experiences of BME staff in the workplace, it has also considered issues that may be affecting other protected groups including disabled staff.

• In addition, other work has been undertaken to ensure disabled staff already working for the council are effectively supported. Key activities have included:

- Delivering mental health training for key stakeholders including HR Advisers and line managers to enable them to better support staff with mental health conditions.
- Reviewing the council's Attendance Support Procedure to improve practice and ensure managers deal with staff attendance concerns in a fair, consistent and supportive way.
- Improving the process for implementing reasonable adjustments to ensure that these are provided promptly to disabled staff so that, wherever possible, disabled staff can continue to work effectively and remain in employment.

Actions:

1. Continue to use and monitor the effectiveness of positive action recruitment initiatives with the aim of increasing the diversity of applicants and new recruits (HR Consultant, ongoing).
2. Support managers to develop effective and innovative attraction strategies in order to improve our ability to secure high quality talent and improve the diversity of our workforce (HR Consultant, ongoing).
3. Continue to engage with local communities through a variety of organised and coordinated initiatives/events to increase their confidence in seeking employment with the council (HR Consultant, ongoing).
4. Continue to work with other organisations such as JobCentre Plus, the Careers Advisory Service etc. to develop and run workshops aimed at supporting potential applicants and other outreach work (HR Consultant, ongoing).
5. Seek committee approval for new Attendance Procedure/Policy and implement (Head of HR&OD, July 2019).
6. Continue to streamline the process for identifying and providing assistive technology to ensure it is provided promptly to those staff who need it and is fit for purpose (HR Manager, Advisory, ongoing).
7. Implement the co-created Fair & Inclusive Action Plan following the Global HPO review (Head HR&OD, April 2019 ongoing).
8. Data analysis of the outcomes of different application methods for applicants who share a particular protected characteristic (HR Consultant, May 2019 and ongoing).
9. Produce and publish the annual Workforce Equalities Report for 2018/9. Use the insight from this comprehensive analysis of workforce data to target future areas of work (HR Consultant, June 2019).
10. Increase social media presence in line with recruitment strategy (HR Consultant & Communications Team, ongoing).
11. Implementing and continuing to develop the functionality of the new online recruitment system (Business Operations, April 2019 and ongoing).

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
Staff who declare themselves as BME (excludes White Irish and White Other) as a % of the total workforce who declare their ethnicity (not including schools) [Corporate - council]	%	9.10	7.37	 RED Improving

Position:

At the end of 2018/19, the percentage of staff who identified themselves to be BME as a percentage of the workforce who declared their ethnicity was 7.37%. This represents an increase of 0.51% over the last twelve months. This continues the upward trend seen over the last four years. The level of representation of BME staff remains below target and so the indicator continues to have a Red RAG rating.

16/17 - 6.7%

17/18 - 6.86%

18/19 - 7.37%

The target is based on the percentage of economically active residents within the local community, as per the 2011 Census. The Council's 2018/19 target is 9.1%.

Commentary:

- In contrast to 2017/18, where levels of representation were fairly consistent across all grade bands, this year BME staff were more likely to be employed in lower graded roles (8.33%).
- The only way to increase the diversity of the workforce is by attracting, recruiting and retaining more staff who identify themselves as BME. The percentage of BME applicants during 2018/19 was significantly higher than the figure for the same period last year (17.4% compared with 14.8%) and their chance of being shortlisted was also higher this year, with more than a quarter (25.4%) of BME applicants securing an interview. The percentage of BME applicants who were successful in obtaining a job offer in 2018/19 remains at a similar level to 2017/18 (8.3%).
- These results are encouraging and may be a positive reflection of the work that has been carried out over the last couple of years or so to address the under-representation of this group within the workforce. Work carried out this year has included:
 - Continuing to review person specifications as jobs are advertised to reduce the number of essential criteria – overly long person specifications had been identified as potential barriers to employment.
 - Trialling the use of four different application methods to make it easier for candidates to apply for jobs .
 - Working with managers to develop positive action recruitment initiatives with the aim of attracting more diverse talent for roles that have either proved hard to fill or have involved larger recruitment exercises.
 - Attending local community groups such as International Women’s Network to promote job opportunities.
 - Attending a variety of local careers fairs including within schools, colleges and universities.
 - Working with JobCentre Plus and the National Careers Service to deliver workshops to potential job applicants to help them apply for council vacancies.
 - Ensuring recruiting managers maintain an appropriate level of knowledge and skill by requiring them to attend a recruitment and selection skills workshop and undertake unconscious bias training before they can chair a recruitment panel.
 - Roll out of the council’s new Behaviour Framework to all staff at TIER 5 and below.
 - Procuring a new online recruitment system and ensuring the new system supports the council’s equalities priorities.
 - HR support and attendance at staff forum events and activities.
 - A new post within Human Resources and Organisational Development (HR&OD) to provide a dedicated resource to develop and deliver a range of activities to increase the diversity of the workforce at all levels so that it more closely reflects the equality profile of the economically active population in the City.
 - Recruiting to a collaborative post with four other public sector partners to develop, co-ordinate and evaluate a programme of actions designed to enable these organisations to develop and maintain diverse workforces that more closely reflect the profile of the local communities they serve.
 - External consultants, Global HPO undertaking a follow-up review of race equality and diversity within the

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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workforce. The review identified specific realistic actions the council needs to take to deliver real and tangible outcomes for the workforce and increase the pace of change. This review has focussed particularly on the day-to-day experiences of BME staff in the workplace, but also considered issues that may be affecting other protected groups.

Actions:

1. Continue to use and monitor the effectiveness of positive action recruitment initiatives with the aim of increasing the diversity of applicants and new recruits (HR Consultant, ongoing).
2. Support managers to develop effective and innovative attraction strategies in order to improve our ability to secure high quality talent and improve the diversity of our workforce (HR Consultant, ongoing).
3. Continue to engage with local communities through a variety of organised and coordinated initiatives/events to increase their confidence in seeking employment with the council (HR Consultant, ongoing).
4. Continue to work with other organisations such as JobCentre Plus, the Careers Advisory Service etc. to develop and run workshops aimed at supporting potential applicants and other outreach work (HR Consultant, ongoing).
5. Implement the co-created Fair & Inclusive Action Plan following the Global HPO review (Head of HR&OD, April 2019 ongoing).
6. Data analysis of the outcomes of different application methods for applicants who share a particular protected characteristic (HR Consultant, May 2019).
7. Produce and publish the annual Workforce Equalities Report for 2018/19. Use the insight from this comprehensive analysis of workforce data to target future areas of work (HR Consultant, June 2019).
8. Increase social media presence in line with recruitment strategy (HR Consultant & Communications Team, ongoing).
9. Implementing and continuing to develop the functionality of the new online recruitment system (Business Operations, April 2019 and ongoing).

Staff who declare themselves as White Irish as a % of the total workforce who declare their ethnicity (not including schools) [Corporate - council]	%	1.60	2.24	 No change
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Position:

As at the end of 2018/19 the percentage of staff who identified themselves as being from a White Irish background as a percentage of the workforce who declared their ethnicity was 2.24%. This figure remains unchanged since 2016/17 and this indicator continues to have a Green RAG rating.

16/17 - 2.25%

17/18 - 2.22%

18/19 – 2.24%

The target is based on the percentage of economically active residents within the local community, as per the 2011 Census. The Council's 2018/19 target is 1.6%.

Commentary:

- The White Irish group is an ethnic group in its own right but, unlike other minority ethnic groups that the council monitors, its level of representation within the council's workforce is higher than might be expected given this group's level of representation within the economically active community locally.
- At the end of March 2019, White Irish staff were found to be under-represented only in lower graded posts (Scales 1 - 6). In contrast to 2017/18, the highest level of representation (3.92%) was seen within the highest grade band (M8 and above).
- The percentage of individuals of Irish heritage applying for council vacancies during 2017/18 was 1.1%, similar to the figure for 2017/18 (1.04%). This is below this group's level of representation within the local economically active population (1.6%). Despite applying in lower numbers, White Irish candidates were the most successful ethnic group in terms of securing interviews and job offers.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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• Analysis of the council's employment data set out in the council's Workforce Equalities Report for 2017/18 did not highlight any adverse equality impacts on this ethnic group.

Actions:

1. Recruitment and workforce data will continue to be monitored and analysed and published as part of the council's annual Workforce Equalities Report. The report for 2018/19 is timetabled to be published later in the year. Any adverse trends identified will be addressed as part of the Fair & Inclusive Action Plan (HR Consultant, June 2019 ongoing).
2. Implement Year 1 of the Fair & Inclusive Action Plan and monitor this through the new Equality Governance Framework (Head of HROD, April 2019, ongoing).

Staff who declare themselves as white other as a % of the total workforce who declare their ethnicity (not including schools) [Corporate - council]	%	8.80	6.77	 RED No change
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Position:

At the end of 2018/19, the percentage of staff who identified themselves as being from a White Other background as a percentage of the workforce who declared their ethnicity was 6.77%. This figure is the same as at March 2018. The level of representation of this group within the workforce remains below target and so the indicator continues to have a Red RAG rating.

16/17 - 6.49%

17/18 - 6.78%

18/19 – 6.77%

The target is based on the percentage of economically active residents within the local community, as per the 2011 Census. The Council's 2018/19 target is 8.8%.

Commentary:

- The percentage of White Other employees has increased across the lower (9.0%) and middle grade (5.09%) bands since the end of March 2018; this group continues to be predominantly employed in lower graded roles (Scale 1-6) and is least well represented at senior management level.
- During 2018/19, the proportion of applicants from a White Other background was 14.78% an increase of 1% on 2017/18.
- Applicants from this group were more successful in securing job interviews this year – 28.4% compared with 26.1% in 2017/18. The proportion of applicants from a White Other background who converted interviews into job offers in 2018/19 was more than 1% higher than the previous year (10.4% compared with 9.15%).
- The increase in the percentage of White Other applicants for council vacancies and this group's improved success rate in securing interviews is encouraging although there is still more work to do to increase job offers to White Other candidates. These improvements may be a positive reflection of the work that has been carried out over the last couple of years or so to address the under-representation of this group within the workforce. Work carried out this year has included:
 - Continuing to review person specifications as jobs are advertised to reduce the number of essential criteria – overly long person specifications had been identified as potential barriers to employment.
 - Trialling the use of four different application methods to make it easier for candidates to apply for jobs .
 - Working with managers to develop positive action recruitment initiatives with the aim of attracting more diverse talent for roles that have either proved hard to fill or have involved larger recruitment exercises.
 - Attending local community groups such as International Women's Network to promote job opportunities.
 - Attending a variety of local careers fairs including within schools, colleges and universities.
 - Working with JobCentre Plus and the National Careers Service to deliver workshops to potential job applicants to help them apply for council vacancies.
 - Ensuring recruiting managers maintain an appropriate level of knowledge and skill by requiring them to attend a recruitment and selection skills workshop and undertake unconscious bias training before they can

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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chair a recruitment panel.

- Roll out of the council's new Behaviour Framework to all staff at TIER 5 and below.
- Procuring a new online recruitment system and ensuring the new system supports the council's equalities priorities.
- HR support and attendance at staff forum events and activities.
- A new post within Human Resources and Organisational Development (HR&OD) to provide a dedicated resource to develop and deliver a range of activities to increase the diversity of the workforce at all levels so that it more closely reflects the equality profile of the economically active population in the City.
- Recruiting to a collaborative post with four other public sector partners to develop, co-ordinate and evaluate a programme of actions designed to enable these organisations to develop and maintain diverse workforces that more closely reflect the profile of the local communities they serve.
- External consultants, Global HPO undertaking a follow-up review of race equality and diversity within the workforce. The review identified specific realistic actions the council needs to take to deliver real and tangible outcomes for the workforce and increase the pace of change. This review has focussed particularly on the day-to-day experiences of BME staff in the workplace, but has also considered issues that may be affecting other protected groups.

Actions:

1. Continue to use and monitor the effectiveness of positive action recruitment initiatives with the aim of increasing the diversity of applicants and new recruits (HR Consultant, ongoing).
2. Support managers to develop effective and innovative attraction strategies in order to improve our ability to secure high quality talent and improve the diversity of our workforce (HR Consultant, ongoing).
3. Continue to engage with local communities through a variety of organised and coordinated initiatives/events to increase their confidence in seeking employment with the council (HR Consultant, ongoing).
4. Continue to work with other organisations such as JobCentre Plus, the Careers Advisory Service etc. to develop and run workshops aimed at supporting potential applicants and other outreach work (HR Consultant, ongoing).
5. Implement the co-created Fair & Inclusive Action Plan following the Global HPO review (Head of HR&OD, April 2019 ongoing).
6. Data analysis of the outcomes of different application methods for applicants who share a particular protected characteristic (HR Consultant, May 2019).
7. Produce and publish the annual Workforce Equalities Report for 2018/9. Use the insight from this comprehensive analysis of workforce data to target future areas of work (HR Consultant, June 2019).
8. Increase social media presence in line with recruitment strategy (HR Consultant & Communications Team, ongoing).
9. Implementing and continuing to develop the functionality of the new online recruitment system (Business Operations, April 2019 and ongoing).

Staff who declare themselves to be LGBT as a % of the total workforce who declare their sexuality (not including schools) [Corporate - council]	%	13.00	12.51	 AMBER Improving
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Position:

At the end of 2018/19 the percentage of staff who declared their sexual orientation and identified as L, G, or B was 12.51%.

16/17 - 11.97%

17/18 - 11.78%

18/19 – 12.51%

The target is based on an estimate of this group's level of representation within the economically active population in the City.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Commentary:

- In contrast to BME and White Other employees, those identifying as L, G or B are more likely to be employed in posts within the middle and higher grade bands across the organisation.
- The highest level of representation of this group was within the highest grade band (M8 and above) at 13.6%.
- The council continues to have no apparent difficulty in attracting recruiting and retaining staff who identify as L,G, or B. Individuals from this group consistently out-perform their heterosexual counterparts in terms of securing interviews and job offers.
- The work that has been carried out over the last twelve months or so to address the under-representation of other protected groups within the workforce will also benefit those identifying as L,G, B or T. Work carried out this year has included:

- Continuing to review person specifications as jobs are advertised to reduce the number of essential criteria – overly long person specifications had been identified as potential barriers to employment.
- Trialling the use of four different application methods to make it easier for candidates to apply for jobs .
- Working with managers to develop positive action recruitment initiatives with the aim of attracting more diverse talent for roles that have either proved hard to fill or have involved larger recruitment exercises.
- Attending local community events to promote job opportunities.
- Attending a variety of local careers fairs including within schools, colleges and universities.
- Working with JobCentre Plus and the National Careers Service to deliver workshops to potential job applicants to help them apply for council vacancies.
- Ensuring recruiting managers maintain an appropriate level of knowledge and skill by requiring them to attend a recruitment and selection skills workshop and undertake unconscious bias training before they can chair a recruitment panel.
- Roll out of the council's new Behaviour Framework to all staff at TIER 5 and below.
- Procuring a new online recruitment system and ensuring the new system supports the council's equalities priorities.
- HR support and attendance at staff forum events and activities.
- A new post within Human Resources and Organisational Development (HR&OD) to provide a dedicated resource to develop and deliver a range of activities to increase the diversity of the workforce at all levels so that it more closely reflects the equality profile of the economically active population in the City.
- Recruiting to a collaborative post with four other public sector partners to develop, co-ordinate and evaluate a programme of actions designed to enable these organisations to develop and maintain diverse workforces that more closely reflect the profile of the local communities they serve.
- External consultants, Global HPO undertaking a follow-up review of race equality and diversity within the workforce. The review identified specific realistic actions the council needs to take to deliver real and tangible outcomes for the workforce and increase the pace of change. Although this review has focussed particularly on the day-to-day experiences of BME staff in the workplace, it has also considered issues that may be affecting other protected groups.

Actions:

1. Continue to use and monitor the effectiveness of positive action recruitment initiatives with the aim of increasing the diversity of applicants and new recruits (HR Consultant, ongoing).
2. Support managers to develop effective and innovative attraction strategies in order to improve our ability to secure high quality talent and improve the diversity of our workforce (HR Consultant, ongoing).
3. Continue to engage with local communities through a variety of organised and coordinated initiatives/events to increase their confidence in seeking employment with the council (HR Consultant, ongoing).
4. Continue to work with other organisations such as JobCentre Plus, the Careers Advisory Service etc. to develop and run workshops aimed at supporting potential applicants and other outreach work (HR Consultant, ongoing).
5. Implement the co-created Fair & Inclusive Action Plan following the Global HPO review (Head of HR&OD, April 2019 ongoing).

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
6. Data analysis of the outcomes of different application methods for protected groups (HR Consultant, May 2019).				
7. Produce and publish the annual Workforce Equalities Report for 2018/9. Use the insight from this comprehensive analysis of workforce data to target future areas of work (HR Consultant, June 2019).				
8. Increase social media presence in line with recruitment strategy (HR Consultant & Communications Team, ongoing).				
9. Implementing and continuing to develop the functionality of the new online recruitment system (Business Operations, April 2019 and ongoing).				

H&S Audit and Assurance - High priority audit recommendations progressed within agreed timescales [Corporate - council]	%	100.00	100.00	 GREEN
				No change

Position:

A total of 31 health & safety audits were undertaken in 2018-19, not including Independent Care Home CHAS (The Contractors Health and Safety Assessment Scheme) Audits on behalf of Professional Standards, Safeguarding and Quality.

A total of 56 Fire Risk Assessment reviews were undertaken.

Commentary:

During Q2 there was a fatality at one of the LA's secondary schools. This impacted on the Health & Safety Teams resources in terms of undertaking audits as they undertook the internal investigation, responded to Health & Safety Executive (HSE) investigations and the Coroners inquest. The audit programme for 2018-19 was therefore not completed and those schools/ services not audited will be prioritised as part of the 2019-20 programme. A review of the audit process and potential changes to reporting will be considered as part of the response to the HSE.

Health & Safety Audit - All audits have agreed management action plans with defined timescales for action which have been agreed by the service manager or Head Teacher.

Potential 'flaws' in the health and safety audit process undertaken by the corporate health and safety team have been highlighted by:

- Commentary by the HSE Inspector undertaking the ongoing investigation into the fatality at a BHCC secondary school in August 2018.
- Commentary by the BHCC's coroner at the Coroners Inquest held in February 2019
- Coroners Concerns listed within the coroners 'Regulation 28: Report to Prevent Future Deaths'

To further explore and address these potential 'flaws' please see 'Action' section below.

Fire Risk assessment - Further assurance work is continuing to gain assurance on the robustness on statutory testing with regards to fixed wire electrical testing. This is to ensure works are carried out in a timely manner and recorded appropriately; and to prevent confusion between schools / premises managers and the premises team where duplicate certificates may be held.

Actions:

1. Ensure themes and issues from health and safety audits are discussed in Directorate Safety Committees – (Executive Directors / Health & Safety directorate leads, ongoing)
2. Escalate corporate themes to the corporate health and safety committee – (Head of Health & Safety, ongoing)
3. Strategic Action Plan developed and shared with HSE (shared 26.4.19) and Coroner (shared 7.5.19) outlining actions BHCC will take to review its H&S arrangements including a specific review of its auditing process and framework. Progress in relation to the action plan will be monitored through an Assurance Group, chaired by ED F&R with 2 additional members of the ELT and the Head of H&S. (ED F&R, Head of

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Health & Safety) First Assurance Meeting undertaken 30.4.19 with monthly meetings booked in.
 4. Continue assurance work in relation to fixed wire electrical testing. Progress tracked via 121's with Head of Health & Safety and AD Property & Design (raised at meeting on 7.5.19).

2018-19 Health & Adult Social Care - Council (Corporate)

Permanent admissions of older adults (65+) to residential and nursing care homes per 100,000 population [Corporate - council]	No.	699.20	790.50	 Improving
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Position:

Between Jan 2018 and Dec 2018 there were 303 admissions of older adults (65+) to residential care homes.

The monthly numbers of admissions is:

- Jan 18: 35
- Feb 18: 27
- Mar 18: 31
- Apr 18: 36
- May 18: 28
- Jun 18: 29
- Jul 18: 17
- Aug 18: 24
- Sep 18: 15
- Oct 18: 19
- Nov 18: 18
- Dec 18: 24
- Total: 303

Figures can be subject to some fluctuation during the year due to retrospective adding of service agreements (causing figures to increase) and retrospective awarding of continuing health funding (causing figures to decrease). As these figures can be subject to change this is being reported 3 months in arrears so we can report the position in stable data.

The Performance Indicator (PI) is expressed per 100,000 population.

Latest 65+ Population estimate based on mid-2017 figures is 38330

Jan 2018 – Dec 2019 PI Value: 790.5 (303 admissions)

Q4 2018/9 Target: 699.20 (268 admissions)

2017/18 PI Value: 809.90 (311 new admissions for over 65s)

2016/17 PI Value: 717.01 (273 new admissions for over 65s)

2015/16 PI Value: 793.16 (295 new admissions for over 65s)

Comparative Data:

2014/15 National PI Value: 658.5

2015/16 National PI Value: 628.2

2016/17 National PI Value: 610.7

2017/18 National PI Value: 585.63

2016/17 Comparator Group PI Value: 701.8

2017/18 Comparator Group PI Value: 653.16

Demographic breakdown of admissions:

Age Groups: 34 admissions 65-74 year olds (11.2%), 115 admissions 75-84 year olds (37.0%), 154 admissions for 85+ year olds (50.8%).

Genders: 192 Females (63.4%), 111 Males (36.6%)

Primary Support Reasons: 3 Learning Disability Support (0.99%), 11 Mental Health Support (3.63%), 186 Physical Support (61.39%), 4 Sensory Support (1.32%), 99 Support with Memory & Cognition (32.67%)

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Commentary:

Reducing levels of long term admission to residential and nursing care for older adults remains a key priority for the directorate. Whilst the lagged 2018/19 shows an improving picture from 2017/18 this area remains a challenge with levels of admission above the latest reported comparator average. Improved performance on Delayed Transfer of Care out of acute hospital settings has resulted in an increased pace of admissions to long term care particularly within nursing home settings. Approximately 1/3 of new long term care admissions between January 2018 and December 2018 followed on from a spell in acute hospital settings (with 60% of these in to nursing home placements). Of the 43 residential care admissions that followed an acute hospital spell 21 were placed directly from hospital settings, however, our aim is that no one should be admitted directly to residential settings (as opposed to nursing) from hospital. A number of joint initiatives are already in place e.g. Homefirst scheme to enable more effective discharge from inpatient care and ensure that people are assessed in their home environment and given the optimum opportunity to rehabilitate and stabilise. We are also developing new ways of working with Health colleagues having aligned social work staff with GP clusters. We are working with Health partners to undertake system demand and capacity modelling to identify opportunities for development of alternative step down models to residential care. Collaboration of health and social care services will enable us to create more effective preventative services, early intervention and sources of support that seek to challenge the reliance on formal social care services and promote an asset based approach drawing in resources from wider communities and partner organisations. We have been successful in bidding for a Darzi fellow to work on our project exploring opportunities to reduce levels of long term care admission through use of linked data. This work commenced in April and will support the health and care system to think about how we can intervene earlier to delay or prevent long term care admission.

Actions:

1. Darzi fellow being seconded in to HASC Performance and Business Improvement team for one year (funded by Darzi scheme). Project looking at how we can use data to intervene earlier to reduce levels of admission to long term care (Project completion April 2020)
2. Older people's Housing Needs Assessment commissioned through Strategic Accommodation Board Draft report due Jun 19 (Assistant Director Adult Social Care, Jun 19)
3. Design and get agreed system wide model of care for Health and Social Care (Assistant Director Adult Social Care, Jun 19)

% of social care clients receiving Direct Payments [Corporate - council]	%	25.20	24.46	 Improving
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Position:

Between Apr 2018 and Mar 2019 the percentage of people using social care in receipt of Direct Payments was 24.46%

The Q4 figure represents a slight increase from the previous quarter:

2018/19 Q2: 24.84%

2018/19 Q3: 24.21%

2018/19 Q4: 24.46%

Clients receiving Direct Payments: 551

Clients in receipt of long term community based services: 2253

2018/19 Target is 25.20%

The Q4 figure represents a slight increase from the previous year (at year-end):

2017/18 24.23% (565 Direct Payment recipients)

2016/17 25.09% (589 Direct Payment recipients)

2015/16 21.41% (529 Direct Payments recipients)

2014/15 19.62% (504 Direct Payments recipients)

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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2017/18 comparator group average is 25.76%
 2017/18 National (All England) PI figure is 28.47%

Demographic breakdown

Gender: 335 of clients are female (60.8%), 214 of clients are male (38.84%), 2 Indeterminate (0.36%).
 Age Bands: 439 clients are 18-64 (79.67%) and 112 clients are 65 and over (20.33%).
 Ethnicity: 468 clients are White (84.94%), 16 clients are Asian or Asian British (2.9%), 10 clients are Black or Black British (1.81%), 23 clients are Mixed (4.17%), 21 clients are from Other Ethnic Groups (3.81%), 13 clients are Not Stated (2.36%).

Commentary:

In April 2018 the council awarded a new contract to People Plus to provide advice, information and support to potential and current direct payment recipients. Clear information on Direct payments is critical for uptake and the new provider is expecting to improve and simplify information to help more people make the initial first steps and reduce anxiety at becoming an employer and offering an empowering approach. Whilst the first review of the new contract in January 2019 was positive take up of Direct Payment has plateaued (in line with the national/comparator trend).

We include an overview of direct payments as part of our 3 day Assessment Pathway training programme, which is mandatory for staff carrying out Care Act assessments. As part of this training staff identified it would be helpful to relaunch the Direct Payment offer with a focussed task and finish group to increase staff awareness and develop communication on the Direct Payment for staff and citizens.

Action:

1. Continue to review progress with new provider to monitor performance and uptake (Assistant Director – Adult Social Care, Ongoing)
2. Establish Task and Finish group involving front-line practitioners to refresh the DP offer (Assistant Director – Adult Social Care, Sep 19)

% of older people (65 and over) still at home 91 days after discharge from hospital into reablement/rehabilitation services [Corporate - council]	%	82.10	78.90	 Declining
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Position:

This indicator looks at the proportion of older people (65+) who are still at home 91 days after being discharged from hospital in to reablement services between October and December.

2018/19 78.9% still at home after 91 days (478 of 606)
 2018/19 Target 82.10% (based on 2016/17 comparator average).
 2017/18 79.42% still at home after 91 days (467 of 588 people)
 2016/17 77.23% (329 of 426 people)
 2015/16 83.18% (277 of 333 people)
 2014/15 81.76% (269 of 329 people)
 2017/18 England average 82.9%
 2017/18 Comparator average 80.9%

Demographic breakdown

Age Bands: 105 of clients are aged 65-74 (17%) and 225 clients are aged 75-84 (37%) 276 were 85 and over (46%)

A higher proportion of those in the younger age brackets were still at home after 91 days.

65-74 84.8% still at home

75-84 83.6% still at home

85+ 72.8% still at home

Gender: 228 of the cohort were Male (37.6%) and 378 were Female (62.4%).

73.7% of men were still at home after 91 days.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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82.0% of women were still at home after 91 days.

Commentary:

The 2018/19 performance of 78.9% falls short of the target of 82.10%. However the indicator should not be viewed in isolation. Performance needs to be viewed alongside ASCOF 2B (2) which looks at the proportion of the overall older population discharged from hospital within the period who go in to reablement services. Taken together these indicators reflect both the effectiveness of rehabilitation and the coverage of the service.

Brighton and Hove were the top performing authority in England in 2017/18 for part 2 of the indicator with 11.2% of older adults discharged within the period receiving reabling care (against a national average of 2.9% and comparator average of 4.7%)

Although Hospital Episode Statistics (on which part 2 is based) have not been released yet for 2018/19 numbers going through the service increased by 3% from 2017/18 so it is highly likely that performance will remain in the top quartile. This indicates that a relatively high number of older adults in Brighton and Hove benefit from receiving care to maximise their independence on discharge from hospital settings.

Work is underway with Health partners to review Step up/Step down capacity across the Sustainable Transformation Partnership (STP) area. This includes a local focus on Brighton & Hove to ensure we have the right capacity in the right place to facilitate smooth discharge from hospital with access to services that support rehabilitation and recovery and maximise ongoing independence.

Actions:

1. Review of Discharge to Assess pathway/processes overseen by Operational Command Group (joint executive Health and Care forum with weekly updates to Chief Execs across system). (HASC Assistant Director Oct 2019)
2. Participate with STP Community Step up/step down capacity review - "a formal review of the model of care and future configuration of function and effectiveness of community step up/ down capacity within the context of the health and care economy's broader community assets." Workshops in May and June 2019. (HASC Assistant Director, Jun 2019)

Number of delayed transfers of care attributable to social care per 100,000 population [Corporate - council]	No.	3.41	4.71	 Declining
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Position:

DToCs Attributable to Social Care per 100,000 Q4 figure for 2018-19 (Apr 18 – Mar 19) is 4.71
 For comparison Q4 DToC figure for 2017-18 was 3.41 (Apr 17 –Mar 18)

Latest population estimate based on mid-2017 figures is 237170.

2018/19 whole year target of 3.41 set as maintenance target based on 17/18 result.

There were 4,068 delayed days attributed to social care in the period (Apr 18-Mar 19), of which 1,485 (36.50%) were in acute care and 2,583 (63.50%) in non-acute care.

- 2017/18 Brighton & Hove PI Figure: 3.41
- 2017/18 National average PI: 4.34
- 2016/17 Brighton & Hove PI Figure: 3.53 (recalculated)
- 2016/17 National average PI: 4.91(recalculated)

Commentary:

As at March 19, performance against this indicator is 4.71, above the target of 3.41.

From April 2018-March 2019 the proportion of delays attributable to social care was 39.03%, above the

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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national average of 32.65%

Nationally 67.82% of delayed days were attributable to the NHS, 32.65% were attributable to Social Care and the remaining 8.63% were attributable to both NHS and Social Care.

Locally 44.44% of delayed days were attributable to the NHS, 39.03% were attributable to Social Care and the remaining 16.53% were attributable to both NHS and Social Care.

Delays of non-acute patients at Sussex Partnership Foundation Trust (SPFT) settings accounted for 51.40% of social care delays. The main issue cited by SPFT is lack mental health housing, temporary accommodation and residential care capacity. Complexity of need has resulted in providers declining some patients following assessment. BHCC Commissioning are supporting providers to diversify so that they can better meet the needs of people with mental health issues. This work to improve flow from hospital for patients with mental health needs is being funded using money from the Improved Better Care Fund. The Council is also working closely with CCG commissioners to ensure that mental health supported accommodation pathways meet the needs of those being discharged from hospital.

Increasing acuity and complexity in the cohort being discharged from acute hospital has led to increased demand for 24 hour support from acute hospital settings. A system demand and capacity review is underway to explore what capacity is needed to maintain flow and ensure people with 24 hour support needs can access effective rehabilitation and recovery in a timely way.

Further development of the Care Matching function including improved systems and reporting will help to address issues around provider responsiveness in the wider market and inform commissioning plans.

ASC continues to work closely with partners in Health and the 3rd sector in providing a Discharge to Assess approach (Home First). Restructure of Social Work assessment capacity completed in December 2018 has enabled an increase of social work staff aligned to community (HomeFirst) and admission avoidance. This different way of working has enabled us to have a duty cluster so we can respond more effectively to escalation and surge in demand.

Actions:

1. Participate in weekly MADE (Multi Agency Accelerated Discharge Event) meetings. MADE events are designed to support patient discharge, improve flow and enable timely escalation. (Senior managers, Ongoing)
2. Maintain representation on the A&E Delivery Board where strategic and operational action plans are developed and monitored to address the local issues and create collaborative solutions. (Director/Assistant Directors of HASC, Ongoing).
3. Participate in the daily BSUH DTOC and complex discharge calls (with colleagues from BHCC, CCG, SCFT and BSUH) and daily system calls. (Assistant Director of HASC, Ongoing).
4. Participate in fortnightly SPFT/Local Authority DToC call regarding mental health delays (Assistant Director of HASC, Ongoing).
5. Participate with STP Community Step up/step down capacity review - "a formal review of the model of care and future configuration of function and effectiveness of community step up/ down capacity within the context of the health and care economy's broader community assets." Workshops being held in May and June 2019. (Assistant Director of HASC, June 2019)

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
% of people receiving continuous services over 12 months who receive a review [Corporate - council]	%	60.00	35.36	 Improving

12 Month Consecutive Reviews.

Position:

2018/19 Q4 Figure: 35.36%

2017/18 EoY: 32.39%.

952 of 2692 people who have been in receipt of services for 12 months or more have had a review within the last 12 months.

Gender: 572 Female (60.08%), 379 Male (39.81%), 1 Indeterminate (0.11%)

Age Bands: 391 clients are 18-64 (41.07%) and 561 clients are 65 and over (58.93%).

PI target set at 60%.

It is not part of a national set so no comparator information is available.

Commentary:

This area remains a significant challenge due to demand and workforce issues. Although there has been a small increase on the year end position last year performance is still significantly short of the target of 60%.

We have established a new targeted review team with an initial focus on 6 weekly review of people being discharged from hospital. Analysis shows that this in an area where timely intervention can have a significant impact on people's ongoing care needs and costs. Another priority is to review those in receipt of direct payments.

It is important to ensure that all reviewing activity is being appropriately reflected on the Carefirst social care system to support information sharing and contribute to performance against this indicator. Information Officers are supporting staff with data quality and offering targeted individual support where required .

As part of the development of our target operating model we are establishing a project on development of asset based approaches. Although the scope of this work is much wider than social work assessment services it will have an impact on how we communicate with and review people that we support and their carers. Implementation of Eclipse (new social care platform) will also present an opportunity to streamline workflow aligned to this new asset based model of practice.

Actions:

1. Targeted Review Team –review of 6 week hospital discharge (General Manager HASC, Jun 19)
2. Strength based practice project plan and structure to be established (Assistant Director-Jun 19)
3. Workshops with OLM (new social care system provider) to establish requirements for aligning workflows with asset based model of practice within Eclipse (Jul 19)

Telecare - % of support plans that have Telecare as a component [Corporate - council]	%	60.00	59.40	 Declining
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Position:

This Performance Indicator (PI) measures whether Telecare is in place and is based on historical information on Social Care records, activities completed by the Living Well team and new information provided by the Carelink service. This is reported as a rolling 12 month result.

Of the 3034 people with community based services & care plans in the period April 2018-March 2019, 1,803 had provision of Telecare captured on their record.

This equates to 59.4% of people with current Community Based services identified as having Telecare/Carelink in place.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Target is 60%.

This is a local indicator so no national/regional comparator data is available.

Demographic Profile:

Of the 1803 people who have had provision of telecare captured in their record the following demographic profile applies:

Gender: 1145 are female and 658 are male.

Age band: 526 people are aged 18-64, 262 are aged 65-74, 394 are 75-84 and 621 are aged over 85.

Ethnicity: Asian/Asian British: 19, Black / African / Caribbean / Black British: 15, Information Not Yet Obtained: 131, Mixed / multiple ethnic groups: 28, Other ethnic group: 29, White British: 1519, White Irish:24, White Other : 38.

Primary Support reasons: Physical Support: 1420, Sensory Support: 29, Social Support 17, Memory and Cognition Support 121, Mental Health Support 69, Learning Disabilities Support: 147

Commentary:

Whilst just short of the target of 60% overall performance demonstrates that Telecare has become an integral part of social care provision. There are approx. 5100 Telecare uses in the city. The core telecare offer is delivered to a high standard with an increasing range of devices available and ongoing accreditation from the Telecare Association in place. Another important element of the service is Living Well. This innovative Better Care funded initiative provides Telecare support and other personalised preventative services to help reduce, prevent or delay the need for care and support. Performance against this indicator has increased significantly since Living Well was introduced in 2015 (up from 45% to almost 60%).

Pressure in the hospital within the last year affected number of Living Well referrals from the acute sector. The Living Well service devised a number of actions to strengthen links with the hospital and promote the service. Living Well referrals are now at a high level with positive links embedded with Access point and the Home first (Discharge 2 Assess) process.

A strategic review of First Contacts in HASC began in January 2019- Analysis of the benefits of telecare is one work stream and this will be used to inform the strategy to improve the uptake of Telecare prior to people needing any support from Adult social care, i.e. before they have a support plan.

Within the last year we have explored technical solutions to link data in Jontek (Carelink database) and Carefirst (social care database). Data matching supported analysis of the effectiveness of telecare in delaying or reducing the need for further support. Early analysis indicated that telecare is effective in keeping people in their own homes for longer. Work is underway to refine and automate data matching in the future to enable ongoing monitoring of the effectiveness of telecare as a preventative service.

Work has been undertaken to refine referral pathways and raise awareness of the telecare service. ASC online referral forms now include the option to refer to Carelink which has helped to increase awareness and number of referrals, ensuring that Telecare is seen as a core offer to meet social care needs.

We have also developed stronger links with the community and voluntary sector raising awareness of Telecare and the Living Well and streamlining the referral process for 3rd sector partners.

Actions:

1) Ongoing Telecare promotion (and training) for health and social care professionals and members of the community. (Operations Manager, Assessment Unit-ongoing).

2) Ensure latest technological solutions are used to support independent living and minimise risks. (Operations Manager, Assessment Unit-ongoing)

3) Design of new operating model for First Contact (General Manager, assessment service, Sept 19),

4) Develop improved methods to record preventative interventions through Eclipse Digital project. (Performance Improvement Managers, Assessment Service.Mar 20)

5) Further development of data matching aligned to Eclipse Digital project to support more refined measurement of impact of telecare as a preventative service (Data Integration Project Manager Mar 20)

% of carers assessments completed [Corporate - council]	%	75.19	Trend Increasing trend
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INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Position:

The 2018/19 result of 75.19% is a substantial increase against the 2017/18 figure of 60.76%. This reflects a number of actions during the last quarter, which has increased direct engagement with carers and resulted in an increase in assessments and support.

1,382 of 1838 people in receipt of Carer Support provided during the year have received a completed assessment.

Gender: 892 Female (64.54%), 477 Male (34.52%), 13 Indeterminate/Unknown (0.94%)

Age Bands: 7 clients under 18 (0.51%), 41 clients between 18 and 25 (2.97%), 748 clients between 26–64 (54.12%), 407 clients between 65-84 (29.45%) and 179 clients 85+ (12.95%).

This was a new indicator for 2017/18, which is being treated as a baseline year, no target has been set. It is not part of a national set so comparator information is not available.

Commentary:

Supporting carers so they can continue to play a hugely important role in our communities has continued to be a priority for the directorate. Over the previous quarter there have been a number of actions which have directly affected the increase in support and assessment for carers locally.

The bi-annual Carers Survey was undertaken between October-December 2018 (directed by the Department of Health). During this period 100 carers were referred for review (where answers within the survey indicated they would benefit from further information/advice).

Work has been undertaken to review and streamline the information and advice provided across the Carers Hub and ASC; whilst our Carers Assessment Workers have continued to develop dedicated action plans within the 'Think Carer' Programme.

The Young Carers Awareness Day held in January 2019 attracted over 60 people; with awards presented to over 15 young carers for a range of achievements.

To raise awareness of supporting working carers, a 'Working Carers Group' has been established, with membership from BHCC; Workers Forums; Carers Hub; and the national lead organisation Employers for Carers. Further work to support Carers within the BHCC Workforce is planned for June 2019, including workshops/activities for staff who have caring responsibilities, and continued promotion of the Carers Employment Passport.

A 'Supporting Mental Health Carers Group' has been set up, with key stakeholders involved in supporting carers of people with mental health needs. The aim of the group is to increase awareness of mental health carers, and ensure that all carers of people with mental health needs are aware of the range of services available.

Plans to develop a toolkit to improve carers experience within secondary health services are well underway; following learning gained at a national Carers workshop (NHS England). This toolkit will be implemented via our 'Think Carers' Programme.

Work is continuing across the Sussex and Surrey Sustainability and Transformation Partnership, to develop a Carers Memorandum of Understanding to ensure carers receive a consistent offer across the region.

Actions:

1. Refresh the Carers Strategy (and related Think Carer Action Plan) to reflect recent national (NHS Long Term Plan; National Carers Action Plan; Carer Friendly Communities; Care Act Duties) and local (STP Carers Memorandum of Understanding, BHCC Wellbeing Strategy, and outcomes of the ASC Carers Survey) policy drivers – building on a Carer Friendly City. (Commissioning Manager, Aug 19)
2. Consultation on building a Carer Friendly City (refresh of the Carers Strategy) at a range of events (Carers Week 10-16th June 2019 – Carers Festival + Carer Friendly Employers Event), including the launch of the NHS England Primary Care Carers Quality Markers (12.6.19) and through discussion with senior managers HASC DMT (Commissioning Manager, Jul'19)
3. Stakeholder evaluation of the Carers Hub, survey to all carers who have accessed the service, action plan to be developed within refreshed Carers Strategy (Carers Hub Direct and Commissioning Manager, Aug'19)
4. Continue to explore the implementation of CareFirst across the Carers Hub, to enable greater communication, and effective recording of activities related to the above indicator. (Commissioning

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Manager, Jul'19)

5. Development of a new factsheet for carers of people with mental health needs, identifying support they can access and the importance of getting support. (Commissioning Manager, Jul'19)

2018-19 Neighbourhoods Communities & Housing - Council (Corporate) - quarterly

The number of private sector vacant dwellings returned into occupation or demolished [Corporate - council]	No.	159.00	162.00	 Improving
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Position:

During 2018/19, 162 private sector vacant dwellings were returned into occupation or demolished after direct involvement / intervention of the Empty Property Team. This exceeds the target of 159 properties for this period. This result may increase as further properties which were brought back into use are identified by the Empty Property Team. The standalone results are 49 for Quarter 1, 57 for Quarter 2, 25 for Quarter 3 and 31 for Quarter 4.

Annual trend

- 2018/19 – 162 dwellings
- 2017/18 – 161 dwellings
- 2016/17 – 159 dwellings
- 2015/16 – 158 dwellings
- 2014/15 – 158 dwellings

The 2018/19 annual target is set at 159 (39.75 per quarter) and aims to maintain performance achieved during 2017/18.

Comparator information is not available.

Commentary:

A well established and systematic approach by the Empty Property Team has led to sustained year on year performance. Threatened and actual enforcement measures act as a disincentive for owners to leave dwellings empty and assist in improving performance.

A review of properties through the Empty Property Enforcement Group (EPEG) has led to the team issuing 6 CPN (Community Protection Notice) warning letters which has forced engagement from previously disengaged owners of long term empty properties. This engagement has subsequently led to the sale of two of those properties with works underway to bring them back into beneficial use as homes. All members of the Empty Property team have now gained their Housing Health & Safety Rating System (HHSRS) qualification and also the 'power of entry' authorisation. This enables the formal inspection and assessment of empty properties (internal and external) and, where appropriate, to proceed with further relevant enforcement action.

Agreement has now been made with the Planning Team regarding the issuing of notices against their relevant legislation and similar discussion is continuing with the Private Sector Housing Team .

A pilot project has been undertaken investigating use of a recyclable funding pot to resource enforcement action with suitable properties / legislation being identified through EPEG.

A lack of funding for incentive offers to owners is an ongoing challenge and this continues to be explored . Funding options from external partners: YMCA and CLHP (Community Led Housing Partnership) are incorporated in to the Empty Property Team offer to owners.

An action from the previous quarter has been completed (EPEG identifying properties for Works in default / Enforced Sale Pilot as approved by HNHC March 2017).

Actions:

1. Review and update Empty Property Service Plan to be included in Empty Property web page (Empty Property Officers, Jun 19)

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
The number of households where homelessness was prevented due to casework by the council [Corporate - Council]	No.	790.00	810.00	 GREEN Improving

Position:

During 2018/19, 810 households had their homelessness prevented by the council. Of these, 181 were achieved during Quarter 4. This has exceeded our target of 790.

The current figures are likely to be an undercount, as we continue to face significant challenges in providing reliable data, with the new housing IT system having been delayed further. We are confident that there are a significantly higher number of homelessness preventions achieved than are currently recorded.

The amount of data required by central government vastly increased with the implementation of the Homeless Reduction Act. Collecting and recording this data has proved onerous and has had an impact on our recording of numbers of households where homelessness was prevented.

From the data we have available so far, the number of preventions just above target for 2018/19..

In the context of the difficulties with our IT systems, the demands of the Housing Reduction Act, our service re-design and the housing market / welfare reform, this is a positive achievement.

Commentary:

Prevention of homelessness is achieved through assisting households to obtain alternative accommodation (homelessness relief) or enabling them to remain in their existing home. Although a high rate of prevention reflects positive work to help people at risk of homelessness, the large number of people facing such a risk also indicates high levels of pressure in the city for people to access secure housing. The Homelessness Reduction Act has placed additional duties on local authorities, and we must now work with more households and for a greater length of time than previously.

It is challenging to prevent homelessness in the city because of a toughening climate in which lower income households find it difficult to access the private rented sector and are at risk of losing accommodation in this sector. This is related to factors such as increasing rents and welfare reforms (such as the Benefit Cap and the full rollout of Universal Credit, which began in October 2017). The key financial implication is that we are less able to prevent homelessness.

The Housing Needs service has continued to consider ways to meet the housing needs of the city, both as demanded by the Homelessness Reduction Act and using the trailblazer, early intervention approach. This includes a recent review of the service design, to enable Homeless Prevention Officers to concentrate their efforts on preventing homelessness to households who would be owed a main housing duty. To this end, our frontline Housing Needs Officers are working with those households where we have no reason to believe there is a priority need. We have also created a new team of three officers to make decisions on main housing for more complex cases – this will allow our core team of Homeless Prevention Officers to focus on homeless prevention and should lead to an increase in prevention numbers.

The target date for action 1 below has changed, from April to July 2019, due to the delay in the replacement of the IT system. We have been in regular discussions with the provider over the difficulties they have and have hopefully now agreed a way forward.

Another action, user testing and research in support of the Local Government Association's 'Smarter Digital Services', has been completed.

We have also had the challenge of high staff turnover which we are working to rectify and build resilience.

Actions:

1. Replace the current IT system for Housing Needs ('Locata') with the new 'Home Connections' system (Head of Temporary Accommodation and Allocations, Jul 19)
2. Further training for staff on Psychologically Informed Environment to improve skills to enable more prevention and build resilience (Head of Temporary Accommodation and Allocations, Mar 20)

Housing Tenants: Rent collected as % of rent due [Corporate - council]	%	98.00	97.81	 AMBER Declining
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INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Position:

The end year 2018/19 rent collection rate for council housing tenants is 97.81%.

Trend:

Mar 2019 = 97.81% (actual)

Dec 2018 = 98.10% (annual forecast)

Sep 2018 = 98.31% (annual forecast)

Jun 2018 = 98.56% (annual forecast)

Mar 2018 = 98.66% (actual)

Mar 2017 = 98.96% (actual)

The target of 98% is based on projections of increased arrears due to Universal Credit by April 2019, which are anticipated to result in a small drop in performance. This has been the case during 2018/19 and the end year result of 97.81% is slightly below this target, which is a 0.85 percentage point reduction on 2017/18 performance.

Comparator data from Housemark indicates that 2017/18 performance ranked within the top quartile (best 25%) when compared to both local authorities and housing associations.

Commentary:

Although the target has been narrowly missed, performance has held up well in light of the increasing challenge posed by the full rollout of Universal Credit (UC) which began in October 2017. This is the most serious challenge when it comes to rent collection, and now affects over 1,000 tenants. Although the evidence base is limited, drops in performance have also occurred for comparator authorities that have seen similar implementation of Universal Credit.

The council's Housing Income Management team have a procedure in place to formalise the way they help affected tenants with their claims. The ability to collect rents from tenants has a significant financial impact because it determines the resources available to spend on the management and maintenance of tenants' properties through the Housing Revenue Account (HRA).

The Housing Management System Replacement project team have a provisional plan to pilot and rollout the use of mobile working devices during the second half of the 2020/21 financial year, although more specific dates are still to be confirmed with the supplier.

Actions:

1. Carry out a recruitment drive to recruit to all existing team vacancies by December 2019 (Housing Income Manager, Dec 19)
2. Review and ensure that all accounts in arrears and that are eligible for alternative payment arrangements has one in place (rent paid directly by the DWP) (Housing Income Manager, Oct 19)
3. Look into how technology can support income collection and arrears minimisation e.g. Housing app, text message notifications/reminders, mobile working possibilities (Housing Systems Implementation Programme Manager, Mar 21)

% of the council's homes that meet the government's Decent Homes Standard [Corporate - council]	%	100.00	100.00	 GREEN No change
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Position:

The target is to ensure that all Council homes meet the Decent Homes Standard throughout the year. At the end of March 2019 all council owned dwellings met the Decent Homes Standard (100%). This level of performance was first achieved in December 2013 and has been maintained since September 2015.

Commentary:

The council holds asset information for each property on its Asset Management System including the age and condition of the individual elements such as kitchens, bathrooms and windows. This is used to determine if a property meets the Decent Homes Standard. Properties can potentially become non-decent on the 1st of January each year when the age of each asset element is updated. Information from

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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the system is also used to identify the properties that will require planned works in the forthcoming year to ensure they continue to meet the Decent Homes Standard. The budget for decent homes work is set in accordance with the Council's Housing Asset Management Strategy priority of "investing in homes and neighbourhoods". Progress against planned programmes of work and meeting the Decent Homes Standard are monitored on a quarterly basis and reported to Housing & New Homes Committee.

The following planned works and gas boiler installations has been completed from January to March 2019 (Annual figure for 2018-19 in brackets) to maintain 100% decency:

- Kitchens – 125 (367) units
- Bathrooms – 9 (96) units
- Doors – 12 (196) units
- Windows – 57 (396) units
- Rewires – 94 (339) units
- Roofs – 35 (227) units
- Gas boiler installs – 187 (777) units.

The Property & Investment service are currently in the process of procuring consultancy services to carry out a sample Stock Condition Survey in 2019, with 20% of the stock to be surveyed over the coming months (around 2,300 of 11,500 dwellings). This is to test the validity and extent of existing data, to ensure the service have accurate and sufficient data about its housing stock to inform future investment decisions . The service are also working to put in place new contracts for planned and major works in line with the decisions made by Policy, Resources & Growth Committee in October 2018. These will support the future delivery of decent homes works in line with our strategic objectives for the new service:

- Excellent customer service including the ability to self-serve and greater direct customer access to services
- A strong focus on pro-active maintenance of existing assets
- Increased transparency, control and accountability around cost, programme information and quality assurance
- Demonstration of value for money combined with the inclusion of social value requirements in order to secure added economic, social or environmental benefits for the local area.

Actions:

1. Commission stock condition survey of 20% of council owned dwellings for contract to start in July 2019 (Housing Business Programme Manager, Jul 19)

2018-19 Strategy Governance & Law - Council (Corporate)

Number of Whistleblowing Allegations received [Corporate - council]	No.	8.00	Trend
			Decreasing trend

Position:

This Performance Indicator (PI) measures the number of whistleblowing allegations which were received within the reporting period.

Jan-Mar Q4 2018/19: 5

Oct-Dec Q3 2018/19: 1

Jul - Sep Q2 2018/19: 1

Apr – Jun Q1 2018/19: 1

Jan - Mar Q4 2017/18: 4

Oct - Dec Q3 2017/18: 5

Jul - Sep Q2 2017/18: 2

Apr - Jun Q1 2017/18: 0

This indicator is set up to measure the trend of the numbers of whistleblowing allegations received and as such has no target set for the year. It is a local measure; there is no comparator information available.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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Commentary:

Between January and March 2019 there have been 5 reported cases, 8 for the year to date. There were 4 for the same period last year, 11 for the year 2017/18.

All whistleblowing allegations received have been or are being investigated. The Monitoring Officer, Head of Human Resources and Organisational Development and the Head of Internal Audit continue to meet regularly to review progress on whistle blowing cases and to identify any common themes or issues that might require wider consideration. The whistleblowing policy has been publicised as part of the refreshed approach to Fraud & Corruption awareness.

Monitoring of whistleblowing in the council is now more robust and continues to be improved; we have more reliable data, better monitoring, better publicity and greater numbers of allegations received.

Actions:

1. Continue to monitor the returns. (Executive Lead Officer, SGL. ongoing)
2. Improved communications to staff via the Corporate Management Team and the Wave (Executive Lead Officer, SGL. June 2019)
3. Take report to July 2019 Audit & Standards Committee (Executive Lead Officer, SGL. July 2019)
4. Raise any significant issues through BIG and ELT (Executive Lead Officer, SGL. June 2019)

% of residents that think, overall, that Brighton & Hove City Council keeps residents well informed about the services and benefits it provides (City Tracker) [Corporate - council]	%	58.00	51.00	 RED
				Declining

Position:

A half of residents (51%) feel that Brighton & Hove City Council keeps residents informed about the services and benefits it provides. The proportion of residents feeling informed is down compared to 2017 and 2016 when 55% and 57% respectively felt informed. Brighton & Hove residents are also slightly less likely to feel informed about council activities than residents nationally, 58% (LGA survey October 2018). 1,003 residents were interviewed via telephone survey between 17th September and 9th November 2018. Flexible quotas were set to ensure the sample closely matched the actual population profile by gender, age, ethnicity and postcode.

Sub-groups (e.g. men vs. women) are tested for statistical significance and included in commentary only where there is a statistically significant difference to comment on. All data is weighted to match the local population by age, gender and postcode sector.

There is no comparable national data.

Residents who don't think that they will have enough money to meet basic living costs (food, water and heating) in the coming 12 months (44%) are the least likely to say that they are well informed compared to 56% of residents who think they will have enough money.

Commentary:

- The fall in percentage points is being addressed through the refreshed Communications service plan 2018-20. The emphasis will be on gaining a better understanding of the needs and views of our audiences which will be a major priority in the drive to improve our communications.
- This will inform intelligence-based communications which are essential if the council is to truly engage with people and involve them in making the council, and its services, successful.
- We need be clear about what they know and think about the council, how they like to be communicated with, and which audiences are especially important to us and why.
- The Communications Strategy will also aim to take council communications and engagement activity and functions to where the conversations are taking place, rather than expecting residents and stakeholders to 'come to the council'.

Actions:

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
1. A reader / information survey to better understand not only how our residents consume information, but also how they would like to, especially targeting traditionally hard to reach audiences, older people, religious communities, rough sleepers, new arrivals to the city, young people (Head of Communications, Sep 2019)				
2. Run a series of year-long holistic communications and PR campaigns and activities with specific objectives and audiences, clear and consistent messaging and means of evaluation. (Head of Communications, Mar 2020)				
3. Craft and deliver a social media strategy which enables better engagement, targeted communications and message monitoring on social media, resulting in an increase in involvement in Facebook conversation and promotions, and increase in residents citing social media as source of information in 2019 Readership Survey and raising the percentage of residents who say they are well informed about council services. (Head of Communications, Mar 2020)				
4. Developing and increasing the readership, relevance and frequency of Your Brighton & Hove a weekly resident's e-bulletin emailed directly to subscribers email accounts. (Head of Communications, Mar 2020)				
5. Replacing the 'news' pages on the council's website with a dynamic and more 'breaking news' 'newsroom'. (Head of Communications, Sep 2020)				
6. Continue to develop a new Internal Communications & Engagement (ICE) strategy and action plan for 2019/20 aimed specifically at staff and councillors. (Head of Communications, Sep 2020)				
7. Launch a public affairs / networking strategy aimed at improving: <ul style="list-style-type: none"> • The style and success of funding bids • Relationships with key stakeholders • The council's reputation as an innovator • Winning awards for excellence • Lobbying activities • Responses to national and regional consultations (Head of Communications, Mar 2020)				

% of residents very or fairly satisfied with Brighton & Hove City Council (City Tracker) [Corporate - council]	%	60.00	54.00	 RED
				Declining

Position:

Over a half of residents (54%) are satisfied with Brighton & Hove City Council. More than twice as many residents are satisfied (54%) with the council as are dissatisfied (23%).

According to the LGA, nationally 60% are satisfied with the way their council runs things. The target has been set based on that figure.

Compared to 2017, satisfaction with the council is nine percentage points lower and dissatisfaction four percentage points higher. In 2017, 63% were satisfied and 19% dissatisfied.

1,003 residents were interviewed via telephone survey between 17th September and 9th November 2018. Flexible quotas were set to ensure the sample closely matched the actual population profile by gender, age, ethnicity and postcode.

Sub-groups (e.g. men vs. women) are tested for statistical significance and included in commentary only where there is a statistically significant difference to comment on. All data is weighted to match the local population by age, gender and postcode sector.

Looking at satisfaction with the council by demographic groups reveals that:

- Although the numbers are small residents aged 75 or older (76%, 34 people) are most likely to be satisfied with the council. This compares to only 48% of residents aged 18 to 34, 54% of those aged 45 to 74 and 61% of those aged 35 to 44.

- LGB residents are also more likely to be satisfied (69%) compared to only 53% of heterosexual residents. The number of responses (2 people) who identified as Trans is too small to draw any robust conclusions.

- Those residents with a connection to the armed forces (68%) are also more likely to be satisfied with the council. This compares to 52% of residents without a connection to the forces.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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- Residents with a health problem or disability that affects their activity a lot (63%) are more like to be satisfied with the council than are residents with no health problem or disability (53%).
- BME residents are more likely to be satisfied with the council (58%).
- Residents who think that they will not have enough money to meet basic living costs (41%) are least likely to be satisfied with the council. This compares to 59% of residents who think they will have enough money to meet basic living cost.
- Although the numbers are small residents who rent their home from a housing association (43%, 12 people) are also less likely to be satisfied with the council. This compares to 60% who rent from a private landlord, 54% who own their home and 51% who rent from the council.

Commentary:

The council is committed to improving customer satisfaction. It has established a Customer Experience Steering Group (CESG) focusing on Efficiency, Consistency, Improvement and Resilience in customer service delivery. The CESG has developed a Customer Experience Strategy which was approved in principle by the Policy, Resource & Growth Committee in March 2019 . The CESG has also recently delivered Customer Experience Ambassador awareness raising sessions. These sessions were attended by 77 Ambassadors across the council – the key messages at these sessions were: Customer Promise, Customer Experience Vision, Equalities, One Council approach and learning from customer feedback. These sessions have highlighted key barriers to improving customer experience. £1.8million investment has been secured for 2019/20 to improve our digital offer for customers.

Action:

1. Finalise Customer Experience Strategy in consultation with customers, staff and new members (Head of Performance, Improvement & Programmes, December 2019)
2. Deliver Digital Customer programme focusing on new website, My Account, Customer Index (Head of IT&D, Head of Communications, March 2019)
3. Embed 5 key messages across the organisation (Customer Experience Ambassadors, October 2019)
4. Create and implement an action plan based on the feedback from Customer Experience Ambassadors ((Head of Performance, Improvement & Programmes, March 2020)

Number of Stage 1 Complaints received by corporate Customer Feedback Team [Corporate - council]	No.	1,740.00	Trend
			Increasing trend

Position:

The council has a three stage process for formal complaints, Stage 1 is the first stage of the formal process; these complaints are investigated and responded to by the service concerned. No target is set to reduce the volume of Stage 1 complaints – feedback from customers gives valuable insight into potential service improvements and issues. We identify and report on exceptional changes in complaint levels to identify areas for improvement and areas of good practice. Targets have been set for the time it takes to respond to Stage 1 complaints as we know that swift action and response when things have gone wrong is one of the key drivers of customer satisfaction (research from Institute of Customer Services 2017). We aim to respond to Stage 1 complaints within 10 working days.

The number of stage 1 complaints received by the council for the period 1/3/18 – 28/2/19 was 1740. The number of stage 1 complaints received for the same period in 2017/18 was 1560 This is an increase of 180 complaints (12%). Identifiable factors contributing to this are outlined in the commentary section.

The quarterly trend of the volume of Stage 1 complaints is as follows.

2017/18		2018/19
Q1=313	<	Q1=538
Q2=397	<	Q2=474

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
Q3=485	>	Q3=391		
Q4=365	>	Q4=337		

The overall response times to Stage 1 complaints for

2018/19 63% responded to within 10 working days, 81% within 20 days.

2017/18 72% responded to within 10 working days, 96% within 20 days.

This is a significant increase in the time taken to respond to complaints; contributing factors are outlined in the commentary.

A breakdown of the quarterly trend in response times for Stage 1 complaints shows a significant in year change between Q1 & 2 and Q3 & 4 2018/19.

2018/19	% responded to within 10 working days	% responded to within 20 working days
Q1	46%	62%
Q2	47%	74%
Q3	79%	95%
Q4	79%	98%

Contact method Stage 1 complaints – full year 2018/19

Email – 44%

Phone – 31%

Integrated web form – 24%

Equalities monitoring Stage 1 complaints

251 customers provided equalities information in 2018/19 which is 14% of all complainants and 60% of those making on line complaints; this is a significant increase from 2017/18 where only 8% gave equalities information.

The data received compared to city demographic information (based on 2011 census) shows we received fewer complaints from people in the age ranges 18 24, and higher complaints from people aged between 55 64 than should be expected. All other age ranges are within range that we would expect. Complaints from men and women were nearly equal, 4% of complaints preferred not to say what their gender was, 1% said they were transgender.

The percentage of LGB customers who raised complaints was 7% - lower than the city demographic of 11.5%; 2% said they were bi sexual; 21% preferred not to say; and 71% were heterosexual. For ethnicity, there were no particular observations; the proportions were broadly similar to the demographic of the city. We are currently unable to retrieve data for people limited by health and this is being addressed with the software supplier.

Commentary:

The increase in the volume of stage one complaints relates to exceptionally high numbers of complaints in Q1 and Q2. There has been a consistent reduction in complaints in each quarter throughout the year and the results for Q3 and Q4 were lower than for the same period in 2017/18.

The services with the greatest difference in S1 complaints for 2018/19 compared to 2017/18 are:

City Clean received 559 complaints compared to 445 in 17/18, an increase of 114 (26%); the most common issues are recycling collection missed, refuse collection missed. The number of complaints in each quarter has steadily reduced from 207 in Q1 to 83 in Q4.

Highways received 63 complaints compared to 38, an increase of 25 (66%); the most common issues are Street lighting and Highway condition.

Revenues and Benefits received 127 complaints compared to 99, an increase of 28 (28%); the most common issues are poor communication and Admin errors.

Tenancy Services received 140 complaints compared to 113, an increase of (24%); the most common issues are Lack of Action and Poor Communication.

Customer Experience Steering Group consisting of all key services across the council has been set up to

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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improve consistency, resilience, efficiency and improvements in a way customer services are delivered across the council. A group of Customer Service Ambassadors have been selected who will improve the way that services are delivered in all services. Consultation has begun on a Customer Experience Strategy. At Quarterly Customer Feedback Review meetings with service leads and at Departmental Management meetings emphasis is placed on learning from customer feedback to inform service improvement and the need to provide timely responses.

Services recognise that there is a need to try to reduce complaints by resolving issues of concern early and that dealing with complaints is costly but it does provide valuable feedback about the expectations of customers.

Actions:

1. The Customer Experience lead will work with our Digital Communications team to make the on line complaints form more easily accessible by September 2019. (Customer Experience Lead, Sept 19).
2. Working with Customer Experience Ambassadors to embed monthly key learning from customer feedback across the organisation (Customer Experience Lead, monthly)
3. Finalising the Customer Experience Strategy and implementing it to deliver our vision of 'Getting things right first time, every time' which will improve customer experience and reduce the number of complaints (Head of Performance, Improvement & Programmes, development Dec 19, implementation ongoing)
4. Revenues and Benefits will move away from pre-printed bills giving the facility to change the layout as desired to improve the quality of communication. (Revenues and Benefits Manager, start April 2019.)

% of all complaints received by the council that are not resolved at Stage 1 and are escalated to Stage 2 and investigated. [Corporate - council]	%	10.00	9.80	
				Improving

Position:

This indicator measures the number of complaints which are taken to the second stage of the complaints process and then investigated. This does not include the HASC directorate as there is no Stage 2 in the Adult Social Care statutory complaints process. This indicator has a set target of 10% or fewer complaints to be escalated from the initial stage, as this can indicate inadequate responses at Stage 1.

The 2018/19 result for S1 cases escalated to S2 and investigated is 9.8% (171/1740)

For 2017/18 the result was 9.9% (155/1560).

For the year 2018/19 there have been a total of 181 requests for Stage 2 (S2) investigations compared to 160 for 2017/18, which is an increase of 21 (13%).

10 (5.5%) cases were not investigated at S2 because there was a comprehensive Stage 1 reply and further investigation at S2 would not have achieved anything more for the customer or the service; for 2017/18 there were 5 (3.1%) cases thoroughly investigated at S1.

There were 1740 Stage 1 (S1) complaints in 2018/19 compared to 1560 in 2017/18, an increase of 180 (12%).

Services where the target for the percentage of complaints escalated to Stage 2 and investigated was exceeded are:

- City & Regeneration : 36% (14/39), 3 cases upheld
- Highways: 13% (9/63), 1 comprehensive S1, none upheld
- Parking: 12% (22/180), 2 comprehensive S1, 3 upheld
- Safer Communities: 35% (8/23), 1 upheld
- Tenancy Services: 13% (20/140), 2 comprehensive S1, 6 upheld
- Property and Investment: 13% (41/283), 4 comprehensive S1, 6 upheld

Services that achieved or did better than the target were:

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
Revenues & Benefits:	6% (7/127)	1 case upheld		
City Clean:	6% (34/559)	18 cases upheld		
Sport & Leisure:	9% (3/33)	no cases upheld		

Commentary:

Stage 1 complaints which do not address all issues raised or identify any areas in which service could have been improved are most likely to result in escalation to Stage 2. Generic responses which do not offer any advice or are not empathic in tone (even where the complaint is not upheld) are also contributory factors to complaint escalations.

The financial costs and reputational damage caused by a failure to resolve complaints at S1 are significant; services should try to avoid these costs by resolving complaints by providing a suitable remedy where there has been fault or by helping the member of the public to understand the reason for decisions and actions taken by the council. For Stage 1 complaints the cost of processing, investigating and responding is about £100 (including Customer Feedback Team and service manager), for Stage 2 that cost is about £450 (including contribution from service manager).

Customer Feedback Managers have delivered training in 'Complaint Investigation Skills and Service Improvement' along with individually tailored training and coaching in complaint handling for Housing Services, Council Tax, City Clean, Development Management, and Children's Social Care. In November and December we commissioned the Local Government and Social Care Ombudsman to deliver 4 sessions of 'Effective Complaint Handling' to Housing, Parking and Highways. 10% of complaint responses are being quality assured against the agreed standard developed by the Customer Experience Steering Group. Feedback is being given to managers on how responses could be improved. A sentence library has been created as a resource for improving responses.

Actions:

1. Customer Feedback Managers to analyse Stage 1 responses that are upheld at Stage 2 to understand the reason the case was escalated and to provide advice on how to improve the Stage 1 response so that escalation is avoided. (Customer Feedback Managers April 2019).
2. Customer Feedback Managers to give further advice to services on how to conduct an Effective Complaint Investigations at Stage 1 based on the feedback from the Ombudsman Training. (April 2019).

% Local Government and Social Care Ombudsman (LGSCO) complaints upheld or partially upheld [Corporate - council]	%	59.00	57.00	 GREEN
				Improving

Position:

The Ombudsman's published figure for complaints upheld for the council in 2017/18 (April to March) is 57% which is Green. This is the latest available information, results for 2018/19 will be released by the LGSCO later in 2019/20.

We benchmark against the results published by the Ombudsman for the 12 CIPFA nearest neighbours. The Green value was set at the CIPFA nearest neighbour average value for 2017/18; that figure was 59%. The Amber value was set at the top of the bottom quartile; that figure was 67%.

For 2017/18 the percentage of complaints upheld placed this council at the top of the second quartile, for 2016/17 this council was at the bottom of the third quartile. This is a significant improvement.

The number of enquiries received by the Ombudsman in 2017/18 about the council increased to 124 from 115 in 2016/17 and the number investigated increased to 42 from 24. This is a significant increase in investigations; the Ombudsman's letter to us does not give any reason for that increase. However, the percentage upheld reduced from 67% to 57%.

Commentary

The Ombudsman states in his report that high volumes of complaints can be a sign of an open, learning organisation, as well as sometimes being an early warning of wider problems, and that low complaint volumes can be a worrying sign that an organisation is not alive to user feedback.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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The Ombudsman is placing more emphasis on identifying and sharing learning from the investigations they carry out. To ensure that learning takes place within the council the recommendations are referred to Heads of Service and the case managers. The Director and Assistant Director have oversight of all cases where there is a finding of fault. The Ombudsman requires that we provide evidence their recommendations have been carried out and may consider issuing a public report if they are not.

We recognise there is a cost involved in administering and responding to the enquiries the Ombudsman makes. To gain value from investigations we ensure any learning is taken on board.

Actions:

1. Continue to provide support, advice and assistance to services to enable managers to give timely, accurate, high quality responses which represents the services provided in the best possible light.

(Customer Experience Lead and Managers. Ongoing)

2. Actions identified by the Ombudsman for service improvement will be communicated to the relevant team and will be monitored to ensure they are carried out. (Customer Experience Lead. Ongoing)

3. At quarterly Customer Feedback review meetings with services the Customer Feedback Manager and Service Lead will assess if the complaints that have progressed to the Ombudsman could have been avoided and apply learning from that discussion. (Customer Feedback Managers. Ongoing)

Number of compliments received [Corporate - council]	No.	922.00	1,375.00	 GREEN Improving
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Position:

We are reporting on compliments received from members of the public and businesses who receive services from the council and from other agencies who work in collaboration with us. For the year 2018/19 there were a total of 1375 compliments against a target of 922, this is Green.

Compliments received from colleagues are included in the information given in quarterly reports to services but are not included in these figures.

The trend is:

Q1=317 Q2=372 Q3=361 Q4=325

2018/19: Total of 1375

2017/18: Total of 922

2016/17: Total of 730

2015/16: Total of 503

There is no published benchmarking figure currently available for this indicator.

The results by Directorate were:

- Economy, Environment & Culture =317 (76+100+63+78)
- Families, Children & Learning =176 (54+39+39+44)
- Finance & Resources =55 (10+9+25+11)
- Health & Adult Social Care =177 (38+54+40+45)
- N'hoods, Communities & Housing =470 (105+132+137+96)
- Strategy Governance & Law =180 (34+38+57+51)

Services with the greatest increase in compliments when comparing 2017/18 to 2018/19:

- Property & Investment : 258 to 337 = +79
- Registrar Birth Death Marriage: 40 to 93 = +53
- Bereavement: 2 to 50 = +48
- Highways: 12 to 51 = +39
- City Clean: 42 to 78 = +36
- Revenues & Benefits: 19 to 52 = +33
- Seafront: 11 to 27 = +16
- Community Safety: 3 to 16 = +13

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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- Education & Inclusion: 17 to 29 = +12

Commentary:

“A compliment is where a person praises a member of staff or a service for the work they have done .”
 There is value in recording the compliments received, it helps to provide a balanced perspective alongside the complaints received and shows that very many customers are pleased with the services they receive. Additionally, compliments are very useful for motivating teams; it helps remind them that their work is appreciated. Teams that are highly motivated perform well ; there is less sick absence and they work with greater efficiency. We look for the common reasons that people send compliments and share this with services; this is a valuable source of learning. Compliments have been categorised against themes from our Customer Promise.

Clear: 41 (4%)

Easy to contact and responsive: 116 (11%)

Get things done: 461 (44%)

Helpful and supportive: 336 (32%)Respectful:92 (9%)

Actions:

1. The Customer Feedback Team will continue to encourage and remind teams to send their compliments to Customer Feedback using the generic email address as this will enable us to build a picture of what customers find valuable. (Customer Experience Lead, March 2020)
2. The value of Compliments is promoted in the Complaints Investigation and Service Improvement workshops. (Customer Experience Lead, March 2020).
3. Compliments received are discussed with services leads in quarterly meetings to inform service improvements and for service leads to share with their teams. (Customer Feedback Managers and Service Lead, March 2020)
4. A story highlighting key analysis from compliments will be shared across the organisation via intranet to promote best practice (Customer Experience Lead – Bi-monthly – starting June 19).