

# **PERFORMANCE DIGEST**

## **VITAL SIGNS 2006/07**

### Quarter Two

PRU 06/07 12

POLICY & REGENERATION UNIT  
LONDON BOROUGH OF BRENT

Tel: (020) 8937 1030 Fax: (020) 8937 1050



	<b>Page:</b>
<b>Foreword</b>	5
<b>Section One</b> Table of performance	7
<b>Section Two: High and medium risk monitoring</b>	
Central Units	21
Children & Families	22
Environment & Culture	28
Finance & Corporate Resources	32
Housing & Community Care	34
Partners	38
<b>Section Three: Glossary</b>	39








## Foreword

The Vital Signs Performance Digest is part of the high level performance monitoring carried out by Members and senior management of Brent Council. The digest is published quarterly and aims to provide useful information on how well Brent is performing against key indicators. The indicators reflect areas critical for Comprehensive Performance Assessment (CPA), all of the targets negotiated as part of the council's Local Area Agreement (LAA) which attract a Performance Reward Grant at the end of the LAA, and any others identified as high risk.

### Section One: Table of performance




The table shows the following for each indicator:

1. Current quarter performance
2. Direction of travel against previous quarter's performance:

	Arrow signifies that performance has gone up between quarters and that this is the right direction it should be going.		Performance falling where it should be falling (as smaller is better)
	No change from previous quarter		Performance falling where it should be rising (as bigger is better)
	Signifies that performance has gone up between quarters, and that this is the wrong direction.	-1.2 3.00 2.50	Actual distance between quarters target and performance (colour coded to show risk)

3. Year-to-date performance
4. Annual target

The table also shows an alert to highlight whether or not performance is reaching target. The following explains what each alert means:

	Low risk' performance indicators – this means the target is either being met or exceeded
	'Medium risk' performance indicators this means performance is not being met but is within 10-15% of the target
	High risk' performance indicators this means targets are not being met and are not within 10-15% of the target

The performance alert refers to year-to-date performance and target

## **Section Two: High and medium risk monitoring**

For each performance indicator that has been identified as high or medium risk (that is not reaching target), more information is provided. This section includes a graph tracking performance over time against target, comments from the Lead Member and Service Director/Manager, and plans for improvement with actions and timeframes.



## **Section Three: Glossary**








The terms listed in this section are based on the DCLG description and provide information to the reader on the purpose and aim of the Best Value indicators

Vital Sign Central Unit Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
BV011a.02 D Women in top 5% earners (calculated on average)	43.05	47.14	47.14	★	0.00	📈	45.02	44.00	Bigger is Better
BV011b.02 D Black/ethnic in top 5%	19.21	17.20	17.20	★	0.00	📉	18.18	20.00	Bigger is Better
BV012 D Days lost to sickness	1.54	2.00	2.09	★	0.09	📉	3.63	8 days	Smaller is Better
LAA WSP32 The proportion of domestic violence (DV) incidents where a suspect is present and an arrest is made for an incident recorded as DV related	71.20	37.90	80.60	★	42.7	📈	79.20	37.90	Bigger is Better
LAA WSP33 The proportion of domestic violence incidents which result in sanctioned detections (crimes for which someone is charged, summonsed, receives a caution or other formal sanction- including a fixed)	28.60	30.00	35.20	★	5.20	📈	32.00	30.00	Bigger is Better







Vital Sign Central Unit Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
BV174 D The number of racial incidents per 1000 pop reported to the LA, where the LA has a direct involvement in remedying the situation	Work is currently going on at both service and corporate level to provide accurate information which is expected to available from Q3								Smaller is Better
BV175 D The number of racial incidents per 1000 pop reported to the LA, where the LA has a direct involvement in remedying the situation further action	Work is currently going on at both service and corporate level to provide accurate information which is expected to available from Q3								Bigger is Better
REG EST LAA02.1.06 The number of people from a BME groups helped into employment	165.00	112.00	203.00	★	91.00	✓	368.00	487.00	Bigger is Better



Vital Sign Central Unit Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
REG EST LAA02.1.07 the number of people from a disadvantaged group (non-BME) helped into employment	13.00	65.00	17.00		- 48.00		30.00	281.00	Bigger is Better
BrAVA VST LAA03.3.01 The number of volunteers from non-socially excluded groups - 100 hours a year	The baseline is 1,619 volunteers from both groups. This performance indicator is to be measured annually because of the length of time needed to be defined as 'formal' volunteer (100 hours)								Bigger is Better
BrAVA VST LAA03.3.02 The number of volunteers from a socially excluded groups, 100 hours a year	The baseline is 1,619 volunteers from both groups. This performance indicator is to be measured annually because of the length of time needed to be defined as 'formal' volunteer (100 hours)								Bigger is Better

Vital Sign Children & Families Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	18.60	10.00	25.00		15.00		21.69	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working days	39.53	85.00	45.00		-40.00		42.17	85.00	Bigger is Better
CF SI LAA02.2.18 Number of schools attaining December 2005 National Health Schools Standard	27.00	35.00	27.00		-6.00		35.00	42.00	Bigger is Better
CF CY3.06 D Proportion of Schools offering access to the extended service	6.00	6.00	6.00		0.00		6.00	24.00	Bigger is Better

Vital Sign Children & Families Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
BV197 D The percentage change in teenage pregnancy rate	The PCT are currently not able to provide quarterly information so as a result the reporting against this indicator will revert to annual only								Smaller is Better
CF L11 The number of pupils excluded from Brent maintained schools	0.41	0.30	0.19	★	-0.11	✓	0.60	1.30	Smaller is Better
CYP3.08.2 D % the number of primary school aged children seeking a school place granted a place	89.44	100.00	86.24	▲	-13.76	✗	87.60	100.00	Bigger is Better
BV163 D Adoptions of children looked after	0.69	1.75	0.66	▲	-1.09	✗	1.4	7.00	Bigger is Better
BV049.04 D The percentage of children with 3 or more placements in a year	2.11	5.00	4.48	★	1.40	✗	6.59	11.00	Smaller is Better

Vital Sign Children & Families Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
CF/C68 D % Timeliness of reviews of looked after children	75.34	80.00	81.40		1.40		77.59	80.00	Bigger is Better
2065SC D % U16 Looked after children in the same place for 2.5+ yrs or more adopted	68.00	68.00	62.90		-5.10		65.46	68.00	Bigger is Better
CF/C69 D Distance newly looked after children are placed from home (LAC placed 20 miles outside the borough	4.44	6.00	Nil		-6.00		3.39	6.00	Smaller is Better




Vital Sign Environment & Culture Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	15.79	10.00	21.59		11.59		18.58	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working	72.84	85.00	75.29		-9.71		74.11	85.00	Bigger is Better
CYP1.12 No. visits by young people for sport at council owned	11656.00	16,900	17091.00		191.00		28747.00	33800.00	Bigger is Better
EC SP LAA02.2.06 D Percentage of adults taking part in sport and physical exercise ST	Base line data for this indicator is currently not available so reporting against this indicator will revert to annual only								Bigger is Better
BV199a.05 D Env. Cleanliness – Litter The proportion combined deposits of litter and detritus that fall below an acceptable level	28.00	26.00	33.00		7.00		30.50	26.00	Smaller is Better

Vital Sign Environment & Culture Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
EC PLSS6 D Number of library visits per 1,000 population	1937.17	1950.00	1757.69		-192.31		3694.86	7800.00	Bigger is Better
EC C4 D Active borrowers as a percentage of population	8.62	12.50	13.07		0.57		13.07	25.00	Bigger is Better
BV091a.05 D % residents receiving kerbside recyclables	91.00	91.00	91.04		0.04		91.04	93.00	Bigger is Better
EC BV082 D % of household waste arising which has been sent to authority for recycling and composting	23.64	22.00	22.16		0.16		22.16	22.00	Bigger is Better
BV084a.05 D Household Waste Collection in kilograms per head	109.00	114.12	110.00		-4.12		219kg	411.00	Smaller is Better

Vital Sign Finance & Corporate Services Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	6.52	10.00	6.81	★	-3.19	↘	6.65	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working	55.22	90.00	85.34	●	- 4.66	↘	68.88	90.00	Bigger is Better
BV078a D Average time for new benefit claims	32.40	36.00	37.35	★	1.35	↘	34.79	36.00	Smaller is Better
FCR PM5 D Average processing time taken for change of circumstances affecting benefit claims	14.87	20.00	27.32	●	7.32	↘	21.48	20.00	Smaller is Better
FCR PM18 D Percentage of cases (benefit claims) referred to tribunal service within 4 weeks	74.65	65.00	77.50	★	12.50	↘	75.68	65.00	Bigger is Better







Vital Sign Finance & Corporate Services Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
FCR PM19 D Percentage of cases (benefit claims) referred to tribunal service within 3 months	90.14	95.00	87.50	★	-7.50	↓	89.19	95.00	Smaller is Better
BV009 D Council Tax collected	29.52	22.50	22.57	★	0.07	↗	40.79	94.00	Bigger is Better
BV010 D NNDR collected	30.69	30.57	59.82	★	29.25	↓	45.25	98.30	Bigger is Better
FCR PM7 D Over payments recovered	58.08	50.00	68.08	★	18.08	↓	65.89	50.00	Bigger is Better



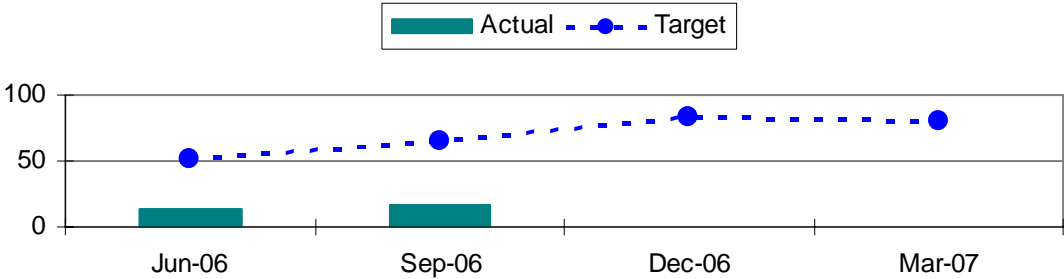
Vital Sign Housing & Community Care Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	19.08	10.00	18.51		-8.52		18.65	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working days	76.34	85.00	66.90		-18.10		75.85	85.00	Bigger is Better
HCC TA LAA03.1 The percentage change of families in temporary accommodation	5.00	7.00	6.00		-1.00		11.00	12.00	Smaller is Better
HCC TA LAA03.1.03 The number of families in temporary accommodation	4270	4153	4202		-0.49		4202	3930	Smaller is Better
BV183a Length of stay in B&B accommodation	4.87	6.00	4.44		-1.56		4.44	6.00	Smaller is Better
BV183b Length of stay in hostel accommodation	15.00	15.00	14.05		-0.95		14.05	15.00	Smaller is Better

Vital Sign Housing & Community Care Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
BV064.02 Private sector dwellings returned into occupation	254.00	336.00	467	★	131	↓	467.00	669.00	Bigger is Better
BV 212 Average re-let times council property in days	26.00	30.00	27.00	★	-3.00	↗	26.98	30.00	Smaller is Better
HCC BHP.01 Percentage of repairs completed within government time limits	99.00	98.00	99.00	★	1.00	→	99.00	98.00	Bigger is Better
BV201 Adults receiving direct payments of benefits	58.37	70.00	69.63	●	-0.37	↓	69.63	90.00	Bigger is Better
BV056.03 D The percentage of equipment delivered within 7 days	88.22	85.00	87.86	★	2.86	↗	88.00	85.00	Bigger is Better
BV195 D Acceptable waiting times for assessment	64.95	75.00	67.64	●	-7.36	↓	67.64	75.00	Bigger is Better

Vital Sign Housing & Community Care Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
BV196 Acceptable wait for care packages	89.32	90.00	87.90	★	-2.10	↘	87.47	90.00	Bigger is Better

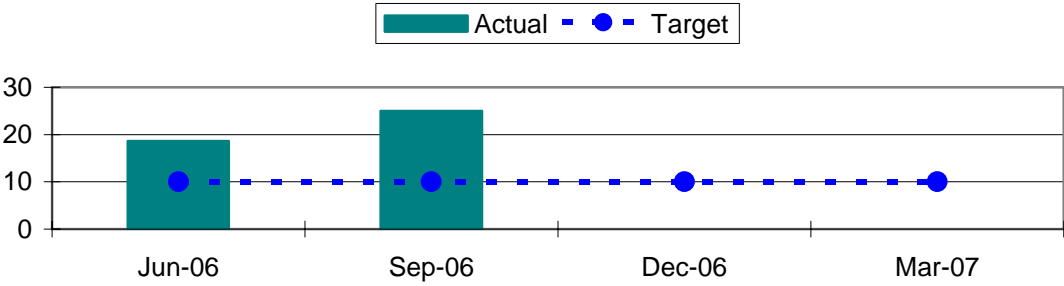
Vital Sign Partners Q2 06/07									
	Performance Q1	Target Q2	Actual Perf Q2	Q2 Perf Alert	Actual distance between Q2 target and Q2 performance	Direction of Travel between Q1 and Q2	Perf YTD (Q1 and Q2)	Annual Target 06/07	Good Performance is?
LFB LAA01.1.2.27 BV142iii The number of accidental fires in residential properties	71.00	69.00	56.00		-13.00		127.00	276.00	Smaller is Better
PCT SST LAA02.2.26 The number of people who quit smoking for 13 weeks	24.00	38.00	0.00		-38.00		24.00	225.00	Bigger is Better
PCT SST LAA02.2.27 The number of people who stop smoking for 4 weeks in NRF areas	151.00	80.00	42.00		-38.00		193.00	475.00	Bigger is Better

**CENTRAL**

HIGH LEVEL MONITORING	COMMENTS																					
<p><b>REG EST LAA02.1.07 No. of people from a disadvantaged group (non-BME) helped into employment ST</b></p> <p>Number of people from a disadvantaged group (excluding BME) helped into work for a sustained period of at least 16 hours a week for 13 consecutive weeks or more</p>  <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" data-bbox="152 962 1317 1141"> <thead> <tr> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>13</td> <td>17</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>51</td> <td>65</td> <td>84</td> <td>81</td> </tr> <tr> <td>Performance</td> <td align="center">▲</td> <td align="center">▲</td> <td align="center">?</td> <td align="center">?</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	13	17			Target	51	65	84	81	Performance	▲	▲	?	?	<p>DIRECTOR   PHIL NEWBY</p>	
	Jun 06	Sep 06	Dec 06	Mar 07																		
Actual	13	17																				
Target	51	65	84	81																		
Performance	▲	▲	?	?																		
	<p>Performance is poor as there has been difficulties capturing information effectively. An action plan is in place to ensure that this has happened by the end of the year. Although this years target may not be achieved, we expect to be able to achieve the LAA lifetime target in 2009</p>																					
	<p>EXECUTIVE MEMBER:   CLLR O' SULLIVAN</p>																					

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Monitoring of information	ongoing		

**CHILDREN & FAMILIES**

HIGH LEVEL MONITORING	COMMENTS																					
<p><b>CC CMP1 D % of complaints escalated from stage 1 to stage 2</b></p>  <p><b>Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</b></p> <table border="1" data-bbox="145 901 1308 1082"> <thead> <tr> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>18.6</td> <td>25</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>10</td> <td>10</td> <td>10</td> <td>10</td> </tr> <tr> <td>Performance</td> <td>▲</td> <td>▲</td> <td>?</td> <td>?</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	18.6	25			Target	10	10	10	10	Performance	▲	▲	?	?	DIRECTOR	JOHN CHRISTIE
	Jun 06	Sep 06	Dec 06	Mar 07																		
Actual	18.6	25																				
Target	10	10	10	10																		
Performance	▲	▲	?	?																		
	<p>It may be that there is some under-recording of stage 1 complaints which have been received directly by teams thus affecting the escalation rates to stage 2, and some responses sent yet to be notified to me.</p>																					
	EXECUTIVE MEMBER:	CLLR WHARTON																				
	<p>It is important that front line staff deal with the complaints at Stage 1 to avoid them escalating.</p>																					

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Managers to be reminded that the complaints Manager must be notified about all complaints.	Ongoing	Gillian Burrows	

## CHILDREN & FAMILIES

HIGH LEVEL MONITORING	COMMENTS																																											
<p><b>CC CMP2 D % of stage 1 complaints responses in time</b></p> <p style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: #008080; border: 1px solid black; margin-right: 5px;"></span> Actual             <span style="display: inline-block; width: 0; border-left: 1px dashed blue; border-right: 1px dashed blue; height: 0; margin-right: 5px;"></span> ● Target         </p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <thead> <tr> <th>Month</th> <th>Actual</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>39.53</td> <td>85</td> </tr> <tr> <td>Sep-06</td> <td>45</td> <td>85</td> </tr> <tr> <td>Dec-06</td> <td>-</td> <td>85</td> </tr> <tr> <td>Mar-07</td> <td>-</td> <td>85</td> </tr> </tbody> </table> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>39.53</td> <td>45</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>85</td> <td>85</td> <td>85</td> <td>85</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table>	Month	Actual	Target	Jun-06	39.53	85	Sep-06	45	85	Dec-06	-	85	Mar-07	-	85		Jun 06	Sep 06	Dec 06	Mar 07	Actual	39.53	45			Target	85	85	85	85	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>JOHN CHRISTIE</td> </tr> <tr> <td colspan="2"> <p>The corporate standard of 15 days is the overall target for the service area. However some sections of the service have a statutory requirement to respond within 10 days. Additional briefing material is also being prepared for social care staff on the new regulations and guidance for statutory complaints under the Children Act 1989 procedure. The new regulations came into effect on 1 September 2006 and include a requirement to respond at Stage 1 within 10 working days. Two training sessions on Stage 1 complaint handling are planned for the Autumn</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="text-align: center; height: 100px; vertical-align: middle;">           Comments noted         </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	<p>The corporate standard of 15 days is the overall target for the service area. However some sections of the service have a statutory requirement to respond within 10 days. Additional briefing material is also being prepared for social care staff on the new regulations and guidance for statutory complaints under the Children Act 1989 procedure. The new regulations came into effect on 1 September 2006 and include a requirement to respond at Stage 1 within 10 working days. Two training sessions on Stage 1 complaint handling are planned for the Autumn</p>		EXECUTIVE MEMBER:	CLLR WHARTON	Comments noted	
Month	Actual	Target																																										
Jun-06	39.53	85																																										
Sep-06	45	85																																										
Dec-06	-	85																																										
Mar-07	-	85																																										
	Jun 06	Sep 06	Dec 06	Mar 07																																								
Actual	39.53	45																																										
Target	85	85	85	85																																								
Performance	▲	▲	?	?																																								
DIRECTOR	JOHN CHRISTIE																																											
<p>The corporate standard of 15 days is the overall target for the service area. However some sections of the service have a statutory requirement to respond within 10 days. Additional briefing material is also being prepared for social care staff on the new regulations and guidance for statutory complaints under the Children Act 1989 procedure. The new regulations came into effect on 1 September 2006 and include a requirement to respond at Stage 1 within 10 working days. Two training sessions on Stage 1 complaint handling are planned for the Autumn</p>																																												
EXECUTIVE MEMBER:	CLLR WHARTON																																											
Comments noted																																												

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Two training sessions on Stage 1 complaint handling are planned for the January 2007	March 2007	Gillian Burrows	

## CHILDREN & FAMILIES

HIGH LEVEL MONITORING	COMMENTS																												
<p><b><i>CYP3.08.2 D % Number of primary school aged children seeking a school place granted a place</i></b></p> <p>The percentage of children not placed in school that have been assessed and offered alternative provision.</p> <div style="text-align: center;"> <p>Legend: Actual (teal bar), Target (blue dashed line with dot)</p> </div> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>89.44</td> <td>86.24</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>100</td> <td>100</td> <td>100</td> <td>100</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	89.44	86.24			Target	100	100	100	100	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>JOHN CHRISTIE</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>During the period school admissions received 218 applications for school provision of which 188 were assessed and offered school places. This indicator to be changed to the % of children who waited more than 6 weeks for a school place.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>An important indicator given the shortage. I assume that the denominator is pupils applying outside the normal application process (We would have about 3,000 applying for the start of Reception)</p> </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	<p>During the period school admissions received 218 applications for school provision of which 188 were assessed and offered school places. This indicator to be changed to the % of children who waited more than 6 weeks for a school place.</p>		EXECUTIVE MEMBER:	CLLR WHARTON	<p>An important indicator given the shortage. I assume that the denominator is pupils applying outside the normal application process (We would have about 3,000 applying for the start of Reception)</p>	
	Jun 06	Sep 06	Dec 06	Mar 07																									
Actual	89.44	86.24																											
Target	100	100	100	100																									
Performance	▲	▲	?	?																									
DIRECTOR	JOHN CHRISTIE																												
<p>During the period school admissions received 218 applications for school provision of which 188 were assessed and offered school places. This indicator to be changed to the % of children who waited more than 6 weeks for a school place.</p>																													
EXECUTIVE MEMBER:	CLLR WHARTON																												
<p>An important indicator given the shortage. I assume that the denominator is pupils applying outside the normal application process (We would have about 3,000 applying for the start of Reception)</p>																													

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Ongoing monitoring of the process over the year	ongoing	John Christie	



## CHILDREN & FAMILIES

HIGH LEVEL MONITORING	COMMENTS																												
<p><b><i>BV163 D Adoptions of children looked after</i></b></p> <p>The number of looked after children adopted during the year as a percentage of the number of children looked after at 31 March who had been looked after for 6 months or more at that date. (PAF C23 – revised definition)</p> <div style="text-align: center;"> </div> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>0.69</td> <td>0.66</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>1.75</td> <td>3.5</td> <td>5.25</td> <td>7</td> </tr> <tr> <td>Performance</td> <td>▲</td> <td>▲</td> <td>?</td> <td>?</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	0.69	0.66			Target	1.75	3.5	5.25	7	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>JOHN CHRISTIE</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;">                     We are hoping the performance of children being adopted will improve throughout the year                 </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;">                     Need to monitor progress now that second adoption team is in place                 </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	We are hoping the performance of children being adopted will improve throughout the year		EXECUTIVE MEMBER:	CLLR WHARTON	Need to monitor progress now that second adoption team is in place	
	Jun 06	Sep 06	Dec 06	Mar 07																									
Actual	0.69	0.66																											
Target	1.75	3.5	5.25	7																									
Performance	▲	▲	?	?																									
DIRECTOR	JOHN CHRISTIE																												
We are hoping the performance of children being adopted will improve throughout the year																													
EXECUTIVE MEMBER:	CLLR WHARTON																												
Need to monitor progress now that second adoption team is in place																													

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Second adoption team now in operation	June/July 2006	Jan Fishwick	
New adoption protocol implemented which will speed up the process of children being adopted nationally.	April 2006	Jan Fishwick	

## CHILDREN & FAMILIES

HIGH LEVEL MONITORING	COMMENTS																												
<p><b><i>BV049.04 D % Children in care 3+ placement</i></b>                      Stability of placements of children in care. Amended in 2004 to remove the requirement to include children placed for adoption with the same carers as a change of placement</p> <div style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: #008080; border: 1px solid black; margin-right: 5px;"></span> Actual                     <span style="display: inline-block; border-bottom: 1px dashed blue; width: 15px; margin-left: 10px; margin-right: 5px;"></span> ● Target                 </div> <table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>2.11</td> <td>6.72</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>2.5</td> <td>5</td> <td>8</td> <td>11</td> </tr> <tr> <td>Performance</td> <td style="color: green;">★</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table> <p><b>Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</b></p>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	2.11	6.72			Target	2.5	5	8	11	Performance	★	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>JOHN CHRISTIE</td> </tr> <tr> <td colspan="2" style="padding: 10px;">                     We have managed to reduce the numbers of looked after children changing placement 3 or more time throughout the year due to closer monitoring and regularly reviewing placement options                 </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="padding: 10px;">                     There is an upper limit to the target range of 16% by year end. If the actual strays towards this it may indicate that monitoring of placements is not good enough.                 </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	We have managed to reduce the numbers of looked after children changing placement 3 or more time throughout the year due to closer monitoring and regularly reviewing placement options		EXECUTIVE MEMBER:	CLLR WHARTON	There is an upper limit to the target range of 16% by year end. If the actual strays towards this it may indicate that monitoring of placements is not good enough.	
	Jun 06	Sep 06	Dec 06	Mar 07																									
Actual	2.11	6.72																											
Target	2.5	5	8	11																									
Performance	★	▲	?	?																									
DIRECTOR	JOHN CHRISTIE																												
We have managed to reduce the numbers of looked after children changing placement 3 or more time throughout the year due to closer monitoring and regularly reviewing placement options																													
EXECUTIVE MEMBER:	CLLR WHARTON																												
There is an upper limit to the target range of 16% by year end. If the actual strays towards this it may indicate that monitoring of placements is not good enough.																													

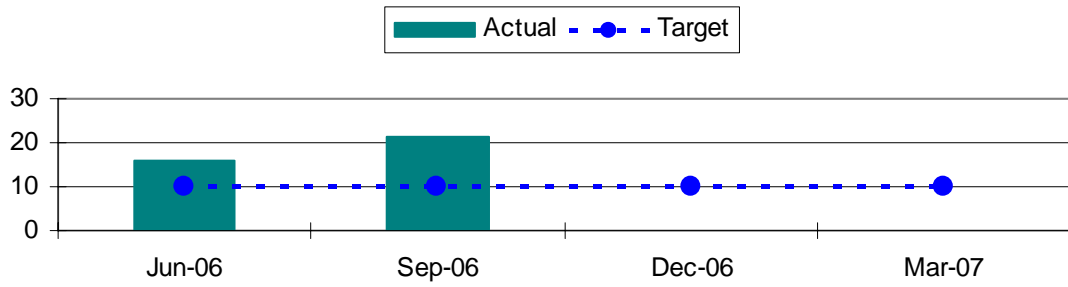
IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Review to take place year end	March 2007	John Christie	

**CHILDREN & FAMILIES**

HIGH LEVEL MONITORING		COMMENTS																				
<p><b>2065SC D % U16 LAC for 2.5+ yrs in same place or adopted</b></p> <p>The percentage of under 16s who have been looked after for 2.5 or more years, living in the same placement for at least two years, or placed for adoption</p> <p align="center"> <span style="display: inline-block; width: 15px; height: 10px; background-color: #008080; border: 1px solid black;"></span> Actual                        <span style="display: inline-block; width: 10px; border-bottom: 1px dashed blue; border-left: 1px solid blue; border-right: 1px solid blue;"></span> Target                 </p> <table border="1"> <thead> <tr> <th></th> <th>Jun-06</th> <th>Sep-06</th> <th>Dec-06</th> <th>Mar-07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>68</td> <td>62.9</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>68</td> <td>68</td> <td>68</td> <td>68</td> </tr> <tr> <td>Performance</td> <td>★</td> <td>●</td> <td>?</td> <td>?</td> </tr> </tbody> </table> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p>			Jun-06	Sep-06	Dec-06	Mar-07	Actual	68	62.9			Target	68	68	68	68	Performance	★	●	?	?	DIRECTOR    JOHN CHRISTIE
			Jun-06	Sep-06	Dec-06	Mar-07																
Actual	68	62.9																				
Target	68	68	68	68																		
Performance	★	●	?	?																		
<p>May not be easy to recover after poor second quarter.</p>		EXECUTIVE MEMBER:    CLLR WHARTON																				

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Monitor targets	ongoing		

## ENVIRONMENT & CULTURE

HIGH LEVEL MONITORING	COMMENTS																												
<p><b>CC CMP1 D % of complaints escalated from stage 1 to stage 2</b></p>  <p style="font-size: small;">Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>15.79</td> <td>21.59</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>10</td> <td>10</td> <td>10</td> <td>10</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	15.79	21.59			Target	10	10	10	10	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>RICHARD SAUNDERS</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>The escalation rate was particularly high in Planning related complaints during the last quarter. These complaints are being reviewed to identify any underlying issues that need to be resolved.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td></td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>CLLR VAN COLLE I am looking forward to seeing the analysis of where these complaints arise</p> <p>CLLR D BROWN</p> </td> </tr> </table>	DIRECTOR	RICHARD SAUNDERS	<p>The escalation rate was particularly high in Planning related complaints during the last quarter. These complaints are being reviewed to identify any underlying issues that need to be resolved.</p>		EXECUTIVE MEMBER:		<p>CLLR VAN COLLE I am looking forward to seeing the analysis of where these complaints arise</p> <p>CLLR D BROWN</p>	
	Jun 06	Sep 06	Dec 06	Mar 07																									
Actual	15.79	21.59																											
Target	10	10	10	10																									
Performance	▲	▲	?	?																									
DIRECTOR	RICHARD SAUNDERS																												
<p>The escalation rate was particularly high in Planning related complaints during the last quarter. These complaints are being reviewed to identify any underlying issues that need to be resolved.</p>																													
EXECUTIVE MEMBER:																													
<p>CLLR VAN COLLE I am looking forward to seeing the analysis of where these complaints arise</p> <p>CLLR D BROWN</p>																													

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Targeted monitoring within unit to identify any trends	Ongoing	Richard Saunders	N/A

## ENVIRONMENT & CULTURE

HIGH LEVEL MONITORING	COMMENTS																																																
<p><b>CC CMP2 D % of stage 1 complaints responses in time</b></p> <p style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: teal; border: 1px solid black; margin-right: 5px;"></span> Actual              <span style="display: inline-block; width: 15px; border-bottom: 1px dashed blue; margin-right: 5px;"></span> ● Target         </p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; text-align: center;"> <thead> <tr> <th></th> <th>Jun-06</th> <th>Sep-06</th> <th>Dec-06</th> <th>Mar-07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>72.84</td> <td>75.29</td> <td>85</td> <td>85</td> </tr> <tr> <td>Target</td> <td>85</td> <td>85</td> <td>85</td> <td>85</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>72.84</td> <td>75.29</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>85</td> <td>85</td> <td>85</td> <td>85</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table>		Jun-06	Sep-06	Dec-06	Mar-07	Actual	72.84	75.29	85	85	Target	85	85	85	85	Performance	▲	▲	?	?		Jun 06	Sep 06	Dec 06	Mar 07	Actual	72.84	75.29			Target	85	85	85	85	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>RICHARD SAUNDERS</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>There has been some improvement since the last quarter. Emphasis continues to be put on quality of response (which needs to improve) as well as speed.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td></td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>CLLR VAN COLLE I am pleased that we dealt with more complaints even though we did not meet the planned percentage</p> <p>CLLR D BROWN</p> </td> </tr> </table>	DIRECTOR	RICHARD SAUNDERS	<p>There has been some improvement since the last quarter. Emphasis continues to be put on quality of response (which needs to improve) as well as speed.</p>		EXECUTIVE MEMBER:		<p>CLLR VAN COLLE I am pleased that we dealt with more complaints even though we did not meet the planned percentage</p> <p>CLLR D BROWN</p>	
	Jun-06	Sep-06	Dec-06	Mar-07																																													
Actual	72.84	75.29	85	85																																													
Target	85	85	85	85																																													
Performance	▲	▲	?	?																																													
	Jun 06	Sep 06	Dec 06	Mar 07																																													
Actual	72.84	75.29																																															
Target	85	85	85	85																																													
Performance	▲	▲	?	?																																													
DIRECTOR	RICHARD SAUNDERS																																																
<p>There has been some improvement since the last quarter. Emphasis continues to be put on quality of response (which needs to improve) as well as speed.</p>																																																	
EXECUTIVE MEMBER:																																																	
<p>CLLR VAN COLLE I am pleased that we dealt with more complaints even though we did not meet the planned percentage</p> <p>CLLR D BROWN</p>																																																	

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Units are being regularly reminded about outstanding complaints	Ongoing	Ros Carson	N/A

## ENVIRONMENT & CULTURE

HIGH LEVEL MONITORING	COMMENTS																																									
<p><b>BV199a.05 D Env. Cleanliness - Litter</b></p> <p>The proportion of relevant land and highways (expressed as a %) that is assessed as having combined deposits of litter and detritus that fall below an acceptable level.</p> <div style="text-align: center;"> <p>Legend: Actual (Teal Bar), Target (Blue Dot on Dashed Line)</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <caption>Actual vs Target Data</caption> <thead> <tr> <th>Month</th> <th>Actual (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>28</td> <td>26</td> </tr> <tr> <td>Sep-06</td> <td>33</td> <td>26</td> </tr> <tr> <td>Dec-06</td> <td>-</td> <td>26</td> </tr> <tr> <td>Mar-07</td> <td>-</td> <td>26</td> </tr> </tbody> </table> </div> <p><b>Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>28</td> <td>33</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>26</td> <td>26</td> <td>26</td> <td>26</td> </tr> <tr> <td>Performance</td> <td>●</td> <td>▲</td> <td>?</td> <td>?</td> </tr> </tbody> </table>	Month	Actual (%)	Target (%)	Jun-06	28	26	Sep-06	33	26	Dec-06	-	26	Mar-07	-	26		Jun 06	Sep 06	Dec 06	Mar 07	Actual	28	33			Target	26	26	26	26	Performance	●	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>RICHARD SAUNDERS</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>The new waste management contract that starts on 1<sup>st</sup> April 2007 should address many of the issues that have caused the current target to be missed.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>                     CLLR VAN COLLE                      CLLR D BROWN                 </td> </tr> </table>	DIRECTOR	RICHARD SAUNDERS	<p>The new waste management contract that starts on 1<sup>st</sup> April 2007 should address many of the issues that have caused the current target to be missed.</p>		EXECUTIVE MEMBER:	CLLR VAN COLLE CLLR D BROWN
Month	Actual (%)	Target (%)																																								
Jun-06	28	26																																								
Sep-06	33	26																																								
Dec-06	-	26																																								
Mar-07	-	26																																								
	Jun 06	Sep 06	Dec 06	Mar 07																																						
Actual	28	33																																								
Target	26	26	26	26																																						
Performance	●	▲	?	?																																						
DIRECTOR	RICHARD SAUNDERS																																									
<p>The new waste management contract that starts on 1<sup>st</sup> April 2007 should address many of the issues that have caused the current target to be missed.</p>																																										
EXECUTIVE MEMBER:	CLLR VAN COLLE CLLR D BROWN																																									

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Implement officer: ENCAMS inspection feedback	October 2006	Ian Stewart	October 2006 (complete)
Recommend contract renewal to members	November 2006	Keith Balmer	Draft report with Lead Member for Environment

## ENVIRONMENT & CULTURE

HIGH LEVEL MONITORING	COMMENTS																																								
<p><b><i>EC PLSS6 D Number of library visits per 1,000 population</i></b></p> <p style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: #008080; border: 1px solid black; margin-right: 5px;"></span> Actual             <span style="display: inline-block; width: 15px; border-bottom: 1px dashed blue; margin-right: 5px;"></span> ● Target         </p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; text-align: center;"> <thead> <tr> <th></th> <th>Jun-06</th> <th>Sep-06</th> <th>Dec-06</th> <th>Mar-07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>1,937.17</td> <td>1,757.69</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>1,950</td> <td>1,950</td> <td>1,950</td> <td>1,950</td> </tr> <tr> <td>Performance</td> <td>●</td> <td>●</td> <td>?</td> <td>?</td> </tr> </tbody> </table> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>1,937.17</td> <td>1,757.69</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>1,950</td> <td>1,950</td> <td>1,950</td> <td>1,950</td> </tr> <tr> <td>Performance</td> <td>●</td> <td>●</td> <td>?</td> <td>?</td> </tr> </tbody> </table>		Jun-06	Sep-06	Dec-06	Mar-07	Actual	1,937.17	1,757.69			Target	1,950	1,950	1,950	1,950	Performance	●	●	?	?		Jun 06	Sep 06	Dec 06	Mar 07	Actual	1,937.17	1,757.69			Target	1,950	1,950	1,950	1,950	Performance	●	●	?	?	<p>DIRECTOR   RICHARD SAUNDERS</p> <p>More work still needs to be done to make libraries more attractive to visitors, to modernise the buildings and increase the number of new books on the shelves. These issues will be considered in the 2007/08 budget round.</p> <p>EXECUTIVE MEMBER:</p> <p>Provided we can find additional budget this ought to improve.</p>
	Jun-06	Sep-06	Dec-06	Mar-07																																					
Actual	1,937.17	1,757.69																																							
Target	1,950	1,950	1,950	1,950																																					
Performance	●	●	?	?																																					
	Jun 06	Sep 06	Dec 06	Mar 07																																					
Actual	1,937.17	1,757.69																																							
Target	1,950	1,950	1,950	1,950																																					
Performance	●	●	?	?																																					

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Monitoring of data collection to ensure robustness and identify any unexpected changes.	Ongoing	Sue McKenzie /Neil Davies	

## FINANCE & CORPORATE RESOURCES

HIGH LEVEL MONITORING	COMMENTS																										
<p><b>CC CMP2 D % of stage 1 complaints responses in time</b></p> <p style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: teal; border: 1px solid black; margin-right: 5px;"></span> Actual             <span style="display: inline-block; width: 10px; border-bottom: 1px dashed blue; margin-right: 5px; vertical-align: middle;"></span> Target           </p> <table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>55.22</td> <td>85.34</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>90</td> <td>90</td> <td>90</td> <td>90</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: blue;">●</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	55.22	85.34			Target	90	90	90	90	Performance	▲	●	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>DUNCAN MCLEOD</td> </tr> <tr> <td colspan="2" style="padding: 10px;">Performance has improved due to the clearance of aged items of work and is on track to meet target in q3</td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR BLACKMAN</td> </tr> </table>	DIRECTOR	DUNCAN MCLEOD	Performance has improved due to the clearance of aged items of work and is on track to meet target in q3		EXECUTIVE MEMBER:	CLLR BLACKMAN
	Jun 06	Sep 06	Dec 06	Mar 07																							
Actual	55.22	85.34																									
Target	90	90	90	90																							
Performance	▲	●	?	?																							
DIRECTOR	DUNCAN MCLEOD																										
Performance has improved due to the clearance of aged items of work and is on track to meet target in q3																											
EXECUTIVE MEMBER:	CLLR BLACKMAN																										

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Ongoing monitoring	March 2007	Simon Hardwick	



## FINANCE & CORPORATE RESOURCES

HIGH LEVEL MONITORING	COMMENTS																										
<p><b><i>FCR PM5 D Average processing time taken for change of circumstances</i></b></p> <p style="font-size: small;">Legend: Actual (Green Bar), Target (Blue Circle with Dashed Line)</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th style="text-align: center;">Jun 06</th> <th style="text-align: center;">Sep 06</th> <th style="text-align: center;">Dec 06</th> <th style="text-align: center;">Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td style="text-align: center;">14.87</td> <td style="text-align: center;">27.32</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td style="text-align: center;">20</td> <td style="text-align: center;">20</td> <td></td> <td></td> </tr> <tr> <td>Performance</td> <td style="text-align: center;">★</td> <td style="text-align: center;">●</td> <td style="text-align: center;">?! </td> <td style="text-align: center;">?! </td> </tr> </tbody> </table> <p><b>Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</b></p>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	14.87	27.32			Target	20	20			Performance	★	●	?!	?!	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>DUNCAN MCLEOD</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>Performance has declined due to the clearance of aged items of work, which is ongoing. Performance is likely to be below target in Q3 and improve in Q4.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR BLACKMAN</td> </tr> </table>	DIRECTOR	DUNCAN MCLEOD	<p>Performance has declined due to the clearance of aged items of work, which is ongoing. Performance is likely to be below target in Q3 and improve in Q4.</p>		EXECUTIVE MEMBER:	CLLR BLACKMAN
	Jun 06	Sep 06	Dec 06	Mar 07																							
Actual	14.87	27.32																									
Target	20	20																									
Performance	★	●	?!	?!																							
DIRECTOR	DUNCAN MCLEOD																										
<p>Performance has declined due to the clearance of aged items of work, which is ongoing. Performance is likely to be below target in Q3 and improve in Q4.</p>																											
EXECUTIVE MEMBER:	CLLR BLACKMAN																										

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Continuing to monitor progress	ongoing	Simon Hardwick	

## HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																																									
<p><b>CC CMP1 D % of complaints escalated from stage 1 to stage 2</b></p> <p style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: teal; border: 1px solid black; margin-right: 5px;"></span> Actual                <span style="display: inline-block; width: 10px; border-bottom: 1px dashed blue; margin-right: 5px;"></span> ● Target           </p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Quarter</th> <th>Actual</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>19.08</td> <td>10</td> </tr> <tr> <td>Sep-06</td> <td>18.52</td> <td>10</td> </tr> <tr> <td>Dec-06</td> <td></td> <td>10</td> </tr> <tr> <td>Mar-07</td> <td></td> <td>10</td> </tr> </tbody> </table> <p><b>Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>19.08</td> <td>18.52</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>10</td> <td>10</td> <td>10</td> <td>10</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: red;">▲</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table>	Quarter	Actual	Target	Jun-06	19.08	10	Sep-06	18.52	10	Dec-06		10	Mar-07		10		Jun 06	Sep 06	Dec 06	Mar 07	Actual	19.08	18.52			Target	10	10	10	10	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>MARTIN CHEESEMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>At present complaints that are received 14 days before the end of the quarter might be responded to before the 15 days deadline but in the following quarter. These complaints will not be counted in the present quarter that is being reported on and can thus reduce the overall percentage of the indicator. However work is being carried out towards achieving the yearly target of 85%.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR ALLIE</td> </tr> </table>	DIRECTOR	MARTIN CHEESEMAN	<p>At present complaints that are received 14 days before the end of the quarter might be responded to before the 15 days deadline but in the following quarter. These complaints will not be counted in the present quarter that is being reported on and can thus reduce the overall percentage of the indicator. However work is being carried out towards achieving the yearly target of 85%.</p>		EXECUTIVE MEMBER:	CLLR ALLIE
Quarter	Actual	Target																																								
Jun-06	19.08	10																																								
Sep-06	18.52	10																																								
Dec-06		10																																								
Mar-07		10																																								
	Jun 06	Sep 06	Dec 06	Mar 07																																						
Actual	19.08	18.52																																								
Target	10	10	10	10																																						
Performance	▲	▲	?	?																																						
DIRECTOR	MARTIN CHEESEMAN																																									
<p>At present complaints that are received 14 days before the end of the quarter might be responded to before the 15 days deadline but in the following quarter. These complaints will not be counted in the present quarter that is being reported on and can thus reduce the overall percentage of the indicator. However work is being carried out towards achieving the yearly target of 85%.</p>																																										
EXECUTIVE MEMBER:	CLLR ALLIE																																									

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Introduction of an upgraded complaints systems	In progress		
Creating an integrated H&CC complaints team			

## HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																																														
<p><b>CC CMP2 D % of stage 1 complaints responses in time</b></p> <p style="text-align: center;"> <span style="display: inline-block; width: 15px; height: 10px; background-color: teal; border: 1px solid black; margin-right: 5px;"></span> Actual              <span style="display: inline-block; width: 15px; border-bottom: 1px dashed blue; margin-right: 5px;"></span> ● Target         </p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse; text-align: center;"> <thead> <tr> <th></th> <th>Jun-06</th> <th>Sep-06</th> <th>Dec-06</th> <th>Mar-07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>76.34</td> <td>66.9</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>85</td> <td>85</td> <td>85</td> <td>85</td> </tr> <tr> <td>Performance</td> <td>▲</td> <td>▲</td> <td>?</td> <td>?</td> </tr> </tbody> </table> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>76.34</td> <td>66.9</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>85</td> <td>85</td> <td>85</td> <td>85</td> </tr> <tr> <td>Performance</td> <td>▲</td> <td>▲</td> <td>?</td> <td>?</td> </tr> </tbody> </table>		Jun-06	Sep-06	Dec-06	Mar-07	Actual	76.34	66.9			Target	85	85	85	85	Performance	▲	▲	?	?		Jun 06	Sep 06	Dec 06	Mar 07	Actual	76.34	66.9			Target	85	85	85	85	Performance	▲	▲	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>MARTIN CHEESEMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>At present complaints that are received 14 days before the end of the quarter might be responded to before the 15 days deadline but in the following quarter. These complaints will not be counted in the present quarter that is being report on and can thus reduce the overall percentage of the indicator. However work is being carried out towards achieving the yearly target of 85%.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR ALLIE</td> </tr> </table>	DIRECTOR	MARTIN CHEESEMAN	<p>At present complaints that are received 14 days before the end of the quarter might be responded to before the 15 days deadline but in the following quarter. These complaints will not be counted in the present quarter that is being report on and can thus reduce the overall percentage of the indicator. However work is being carried out towards achieving the yearly target of 85%.</p>		EXECUTIVE MEMBER:	CLLR ALLIE
	Jun-06	Sep-06	Dec-06	Mar-07																																											
Actual	76.34	66.9																																													
Target	85	85	85	85																																											
Performance	▲	▲	?	?																																											
	Jun 06	Sep 06	Dec 06	Mar 07																																											
Actual	76.34	66.9																																													
Target	85	85	85	85																																											
Performance	▲	▲	?	?																																											
DIRECTOR	MARTIN CHEESEMAN																																														
<p>At present complaints that are received 14 days before the end of the quarter might be responded to before the 15 days deadline but in the following quarter. These complaints will not be counted in the present quarter that is being report on and can thus reduce the overall percentage of the indicator. However work is being carried out towards achieving the yearly target of 85%.</p>																																															
EXECUTIVE MEMBER:	CLLR ALLIE																																														

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Introduction of an upgraded complaints systems	In progress		
Creating an integrated H&CC complaints team			

## HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																																			
<p><b>BV201 Adults receiving direct payments</b></p> <p>Age standardised by age groups. Weighted average of four age bands: 18-64, 65-74, 74-84, and 85 or over. Weightings are according to the percentage of the population of England that falls into the relevant age band.</p> <div style="text-align: center;"> <p>Legend: Actual (Green Bar), Target (Blue Dot)</p> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <thead> <tr> <th>Month</th> <th>Actual</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>58.37</td> <td>60</td> </tr> <tr> <td>Sep-06</td> <td>69.63</td> <td>70</td> </tr> <tr> <td>Dec-06</td> <td>-</td> <td>80</td> </tr> <tr> <td>Mar-07</td> <td>-</td> <td>90</td> </tr> </tbody> </table> </div> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: black; color: white;"> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>58.37</td> <td>69.63</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>60</td> <td>70</td> <td>80</td> <td>90</td> </tr> <tr> <td>Performance</td> <td>●</td> <td>●</td> <td>?</td> <td>?</td> </tr> </tbody> </table>	Month	Actual	Target	Jun-06	58.37	60	Sep-06	69.63	70	Dec-06	-	80	Mar-07	-	90		Jun 06	Sep 06	Dec 06	Mar 07	Actual	58.37	69.63			Target	60	70	80	90	Performance	●	●	?	?	<p><b>DIRECTOR</b> MARTIN CHEESEMAN</p> <p>The number of people receiving direct payments continues to increase. We are 6 people below our quarterly target. By the end of September we were providing direct payments to 114 clients aged 18 and over, with a further 27 people referred and pending. This grand total breaks down to 110 adults aged 18-64 &amp; 31 people aged 65 and over. At present we are 49 clients below annual target. Efforts will continue to promote direct payments.</p> <p><b>EXECUTIVE MEMBER:</b> CLLR COLWILL</p> <p>It is encouraging that take-up of direct payment continues to rise. Performance is currently slightly below the target for the quarter, but work will continue across all services to maintain the continuous improvement</p>
Month	Actual	Target																																		
Jun-06	58.37	60																																		
Sep-06	69.63	70																																		
Dec-06	-	80																																		
Mar-07	-	90																																		
	Jun 06	Sep 06	Dec 06	Mar 07																																
Actual	58.37	69.63																																		
Target	60	70	80	90																																
Performance	●	●	?	?																																

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Training in direct payments for all staff	February 2007		
Project groups meet quarterly to monitor performance & identify improvement actions	From April 2006	Christabel Shawcross	
Increase publicity for service users	December 2006	Christabel Shawcross	

## HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																																											
<p><b>BV195 D Acceptable waiting times for asst</b></p> <p>For new older clients the av of % where time from contact to start of assessment is less than 48 hours, and % where time from first contact to completion of assessment &lt;= 28 days</p> <div style="text-align: center;"> <p>Legend: Actual (Green Bar), Target (Blue Dashed Line with Dot)</p> <table border="1" style="margin: 10px auto;"> <thead> <tr> <th>Quarter</th> <th>Actual</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>64.95</td> <td>75</td> </tr> <tr> <td>Sep-06</td> <td>67.64</td> <td>75</td> </tr> <tr> <td>Dec-06</td> <td>-</td> <td>75</td> </tr> <tr> <td>Mar-07</td> <td>-</td> <td>75</td> </tr> </tbody> </table> </div> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>64.95</td> <td>67.64</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>75</td> <td>75</td> <td>75</td> <td>75</td> </tr> <tr> <td>Performance</td> <td style="color: red;">▲</td> <td style="color: blue;">●</td> <td style="color: purple;">?</td> <td style="color: purple;">?</td> </tr> </tbody> </table>	Quarter	Actual	Target	Jun-06	64.95	75	Sep-06	67.64	75	Dec-06	-	75	Mar-07	-	75		Jun 06	Sep 06	Dec 06	Mar 07	Actual	64.95	67.64			Target	75	75	75	75	Performance	▲	●	?	?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">DIRECTOR</td> <td>MARTIN CHEESEMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>This is a key threshold indicator as defined by CSCI. Figures for quarter 2 are actuals as the reporting difficulties experienced with Frameworki database have now been resolved. Though some what below target, performance continues to improve. A project group to oversee further improvements has been established and action plans developed and implemented so that annual target can be reached</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR COLWILL</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>Performance has improved slightly form last year, but we are still has some way to go in order to reach the annual target, Robust measures are in place to ensure that appropriate action is taken</p> </td> </tr> </table>	DIRECTOR	MARTIN CHEESEMAN	<p>This is a key threshold indicator as defined by CSCI. Figures for quarter 2 are actuals as the reporting difficulties experienced with Frameworki database have now been resolved. Though some what below target, performance continues to improve. A project group to oversee further improvements has been established and action plans developed and implemented so that annual target can be reached</p>		EXECUTIVE MEMBER:	CLLR COLWILL	<p>Performance has improved slightly form last year, but we are still has some way to go in order to reach the annual target, Robust measures are in place to ensure that appropriate action is taken</p>	
Quarter	Actual	Target																																										
Jun-06	64.95	75																																										
Sep-06	67.64	75																																										
Dec-06	-	75																																										
Mar-07	-	75																																										
	Jun 06	Sep 06	Dec 06	Mar 07																																								
Actual	64.95	67.64																																										
Target	75	75	75	75																																								
Performance	▲	●	?	?																																								
DIRECTOR	MARTIN CHEESEMAN																																											
<p>This is a key threshold indicator as defined by CSCI. Figures for quarter 2 are actuals as the reporting difficulties experienced with Frameworki database have now been resolved. Though some what below target, performance continues to improve. A project group to oversee further improvements has been established and action plans developed and implemented so that annual target can be reached</p>																																												
EXECUTIVE MEMBER:	CLLR COLWILL																																											
<p>Performance has improved slightly form last year, but we are still has some way to go in order to reach the annual target, Robust measures are in place to ensure that appropriate action is taken</p>																																												

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Project group to oversee improvements meets monthly	Ongoing	Ros Howard	
Recording system reviewed	September 2006	Ros Howard	
Database reporting tools reviewed	October 2006	Ros Howard	
Staff trained in new system	October 2006	Ros Howard	

**PARTNERS**

HIGH LEVEL MONITORING	COMMENTS																
<p><b>PCT SST LAA02.2.26 The number of people who quit smoking for 13 weeks borough wide ST</b></p> <p>Increase the number of people who stop smoking (1) 13 week quit Borough-wide</p> <p align="center"> <span style="color: green;">■</span> Actual    <span style="color: blue;">-●-</span> Target         </p> <p><b>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</b></p> <table border="1" data-bbox="143 963 1310 1098"> <thead> <tr> <th></th> <th>Jun 06</th> <th>Sep 06</th> <th>Dec 06</th> <th>Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>24</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Target</td> <td>34</td> <td>38</td> <td>58</td> <td>95</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	24	0			Target	34	38	58	95	DIRECTOR	Partners
	Jun 06	Sep 06	Dec 06	Mar 07													
Actual	24	0															
Target	34	38	58	95													
	EXECUTIVE MEMBER:																

IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed

## GLOSSARY

INDICATOR REFERENCE NUMBER:	DCLG DESCRIPTION:	PURPOSE/AIM
BV011a.02 D Women in top 5% earners	Percentage of top-paid 5% of local authority staff who are women	To monitor progress towards equal opportunities
BV011b.02 D Black/ethnic in top 5%	The percentage of the top 5% of Local Authority staff who are from an ethnic minority	To monitor the outcome of equal opportunities policies
BV012 D Days lost to sickness	The number of working days/shifts lost to the Local Authority due to sickness absence	To monitor the level of sickness absence in local authorities
BV174 D Racial incidents reported to the local authority per 100,000 pop	The number of racial incidents reported to the Local Authority, and subsequently recorded, per 100,000 population	To monitor the reporting of racial incidents where the authority has some measure of direct involvement in remedying the situation. It is important that there are clear arrangements within the Authority for reporting racial incidents. Furthermore it is important that those arrangements make victims feel confident that any incidents reported will be met appropriately.  BV174 is meant to set the context for BV175 rather than measure performance in itself: therefore there is no preferred Good Performance for this indicator.
BV175 D Racial incidents reported to the local authority resulting in further action	The percentage of racial incidents reported to the Local Authority that resulted in further action	To monitor the incidence and handling of racial incidents where the authority has some measure of direct involvement in remedying the situation. This BVPI should be viewed in the context of BV174.
BV197 D Percentage change in the rate of teenage pregnancies amongst 15 – 17 year olds in Brent	Percentage change in number of conceptions amongst 15-17 year olds	To measure progress in reducing conception rates amongst 15-17 year olds

## GLOSSARY

INDICATOR REFERENCE NUMBER:	DCLG DESCRIPTION:	PURPOSE/AIM
BV163 D Adoptions of children looked after	The number of children who ceased to be looked after during the year as a result of the granting of an adoption or special guardianship order, as a percentage of the number of children looked after at 31 March (excluding unaccompanied asylum seekers) who had been looked after for 6 months or more on that day	To increase the use of adoption and special guardianship as options for over looked after children
BV049.04 D % of children in care with 3 or more placements in a year	The percentage of Looked After Children at 31 March with three or more placements during the last financial year	To encourage the stability of looked after children
BV199a.05 D % of streets not reaching cleanliness standard	The proportion of relevant land and highways (expressed as a percentage) assessed as having combined deposits of litter and detritus that fall below an acceptable	
BV091a.05 D % of residents receiving kerbside collections of recyclables	Percentage of households resident in the authority's area served by kerbside collection of recyclables	To measure the ease with which householders are able to recycle. Under the Waste Recycling Act 2003, every waste collection authority, subject to certain exceptions, is required to provide kerbside collection of at least two recyclables by 2010
EC BV082 D % of household waste arising which has been sent to authority for recycling and composting	Total tonnage of household waste arisings which have been sent by the Authority for recycling	This indicator together with BV82 (b) measures each local authority's achievement against its Statutory Performance Standards for recycling and composting household waste in 2005/06. This is a key measure of local authorities' progress in moving management of household waste up the hierarchy, consistent with the Government's national strategy for waste management. The Government expects local authorities to maximise the tonnage of waste recycled.
BV084a.05 Household Waste Collection in kilograms per head of population	Number of kilograms of household waste collected per head of the population	In line with the position of waste reduction at the top of the waste hierarchy, the Government wishes to see the quantity of household waste collected per head reduced over time



## GLOSSARY

INDICATOR REFERENCE NUMBER:	DCLG DESCRIPTION:	PURPOSE/AIM
BV078a D Average time taken for new benefit claims in days	The average processing time taken for all new Housing and Council Tax Benefit (HB/CTB) claims submitted to the Local Authority, for which the date of decision is within the financial year being reported.	To monitor the administration of Housing and Council Tax Benefit
BV009 D Council Tax collected due within the quarter	The percentage of council tax collected by the Authority in the year	To monitor the rate of collection of council tax
BV010 D NNDR collected due within the quarter	The percentage of non domestic rates collected by the Authority in the year	To monitor the collection rate of national non-domestic rates
BV183a Length of stay in B&B accommodation in weeks	The average length of stay in bed and breakfast accommodation of households that are unintentionally homeless and in priority need	To measure authorities' success in reducing the inappropriate use of temporary accommodation
BV183b Length of stay in hostel accommodation in weeks	The average length of stay hostel accommodation of households that are unintentionally homeless and in priority need	To measure authorities' success in reducing the inappropriate use of temporary accommodation
BV064.02 Number of private sector dwellings returned into occupation	Number of non-local authority-owned vacant dwellings returned to occupation or demolished during the financial year as a direct result of action by the local authority	To encourage the occupation or demolition of empty homes
BV066b.05 D % tenants with rent arrears of 7 weeks or more	Rent collected by the local authority as a proportion of rents owed on Housing Revenue Account (HRA) dwellings	<p>This indicator, along with BV66b, 66c &amp; 66d is a key measure of the effectiveness and efficiency of a local authority's rent collection and arrears recovery service. These indicators are four discrete parts but should be looked at holistically.</p> <p>An efficient rent collection service is important to ensuring that as much of the rent due, and thus potential income is collected and received.</p>

## GLOSSARY

INDICATOR REFERENCE NUMBER:	DCLG DESCRIPTION:	PURPOSE/AIM
BV212.05 Average Time to re-let council property in days	Average time taken to re-let local authority housing	To monitor housing management performance  With the present pressure on authority-provided housing it is important that re-let times are kept to a minimum
BV201 Number of adults receiving direct payments for purchase of care	Adults and older people receiving direct payments at 31 March per 100,000 population aged 18 or over (age standardised)	To measure the number of adults and older people receiving direct payments
BV056.03 D % of occupational health equipment delivered within 7 days	Percentage of items of equipment delivered and adaptations made within 7 working days	To encourage prompt delivery of items of equipment
BV195 D % of people who had acceptable waiting times for needs assessment (within 28 days)	For new older clients (that is over 65 years of age), the average of (i) the percentage where the time from first contact to beginning of assessment is less than or equal to 48 hours (that is, 2 calendar days), and (ii) the percentage where the time from first contact to completion of assessment is less than or equal to four weeks (that is, 28 calendar days).	To monitor the waiting time for assessments
BV196 % of people who had an acceptable wait for care packages (within 28 days)	For new older clients, the percentage for whom the time from completion of assessment to provision of all services in the care package is less than or equal to 4 weeks	To monitor the waiting time for care packages

## GLOSSARY

INDICATOR REFERENCE NUMBER:	DCLG DESCRIPTION:	PURPOSE/AIM
BV142iii Number of accidental fires in residential properties		