

PERFORMANCE DIGEST

VITAL SIGNS 2006/07

Quarter Three

PRU 06/07 - 18

Executive 12 March 2007

POLICY & REGENERATION UNIT
LONDON BOROUGH OF BRENT

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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 Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
BV011a.02 D Women in top 5% earners (calculated on average)	47.14	44.00	46.00		0.00		45.35	44.00	Bigger is Better
BV011b.02 D Black/ethnic in top 5%	17.20	20.00	16.33		0.00		17.58	20.00	Bigger is Better
BV012 D Days lost to sickness	2.09	2 days	2.31		0.00		1.98	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	80.60	37.90	Data not available to be reported in quarter 4					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)	35.20	30.00	31.10		1.1		31.70	30.00	Bigger is Better


Vital Sign Central Unit Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	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 Q4								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 Q4								Bigger is Better
REG EST LAA02.1.06 The number of people from a BME groups helped into employment	203.00	146.00	279.00		133.00		647	487.00	Bigger is Better

Vital Sign Central Unit Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	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	17.00	84.00	11.00		- 73.00		41.00	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 Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	25.00	10.00	18.75		8.75		20.87	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working days	45.00	85.00	34.38		-50.63		40.00	85.00	Bigger is Better
CF SI LAA02.2.18 Number of schools attaining December 2005 National Health Schools Standard	29.00	32.00	34.00		2.00		34.00	42.00	Bigger is Better
CF CY3.06 D Proportion of Schools offering access to the extended service	100	46.00	46.88		0.88		82.29	100.00	Bigger is Better

Vital Sign Children & Families Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	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	0.19	0.40	0.49		0.09		1.09	1.30	Smaller is Better
CYP3.08.2 Di % of children who waited more than six weeks for a primary school place after registration	36.24	0.00	1.59		1.59		17.89	100.00	Smaller is Better
BV163 D Adoptions of children looked after	0.66	5.25	1.59		-3.66		1.00	7.00	Bigger is Better
BV049.04 D The percentage of children with 3 or more placements in a year	4.48	8.00	11.28		3.28		11.28	11.00	Smaller is Better





Vital Sign Children & Families Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
CF/C68 D % Timeliness of reviews of looked after children	81.40	80.00	97.78		17.78		83.23	80.00	Bigger is Better
2065SC D % U16 Looked after children in the same place for 2.5+ yrs or more adopted	62.90	68.00	50.41		-17.59		60.48	68.00	Bigger is Better
CF/C69 D Distance newly looked after children are placed from home (LAC placed 20 miles outside the borough	0.00	6.00	30.77		24.77		8.33	6.00	Smaller is Better


Vital Sign Environment & Culture Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	21.59	10.00	16.78		6.78		18.07	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working	75.29	85.00	75.86		-9.14		74.64	85.00	Bigger is Better
CYP1.12 No. visits by young people for sport at council owned	28747.00	25350.00	51179.00		25829.00		91582.00	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	Tranche 1 Apr June 28	26.00	Tranche 2 Aug – Nov 32* *estimated		6.00		32.00	26.00	Smaller is Better




Vital Sign Environment & Culture Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
EC PLSS6 D Number of library visits per 1,000 population	1757.69	1950.00	1524.05		-425.95		1524.05	7800.00	Bigger is Better
EC C4 D Active borrowers as a percentage of population	13.07	18.60	16.20		-2.40		16.20	25.00	Bigger is Better
BV091a.05 D % residents receiving kerbside recyclables	91.00	92.00	91.00		-1.00		91.00	93.00	Bigger is Better
EC BV082 D % of household waste arising which has been sent to authority for recycling and composting	23.93	22.00	23.23		1.23		23.23	22.00	Bigger is Better
BV084a.05 D Household Waste Collection in kilograms per head	107.00	98.28	98.00		-0.28		98.00	411.00	Smaller is Better



Vital Sign Finance & Corporate Services Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	9.42	10.00	10.29		0.29		10.29	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working	90.27	90.00	91.36		1.36		91.36	90.00	Bigger is Better
BV078a D Average time for new benefit claims	37.35	36.40	36.40		0.00		35.33	36.00	Smaller is Better
FCR PM5 D Average processing time taken for change of circumstances affecting benefit claims	27.32	20.00	25.07		5.07		67.27	20.00	Smaller is Better
FCR PM18 D Percentage of cases (benefit claims) referred to tribunal service within 4 weeks	77.50	65.00	10.00		-55.00		162.15	65.00	Bigger is Better






Vital Sign Finance & Corporate Services Q3 06/07

	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
FCR PM19 D Percentage of cases (benefit claims) referred to tribunal service within 3 months	87.50	95.00	40.00		-55.00		40.00	95.00	Smaller is Better
BV009 D Council Tax collected	22.57	23.10	22.58		-0.52		22.58	94.00	Bigger is Better
BV010 D NNDR collected	59.82	29.00	87.73		58.73		59.43	98.30	Bigger is Better
FCR PM7 D Over payments recovered	68.08	50.00	63.89		13.89		64.57	50.00	Bigger is Better

Vital Sign Housing & Community Care Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
CC CMP1 D % of complaints escalated from stage 1 to stage 2	18.52	10.00	23.66		13.66		20.42	10.00	Smaller is Better
CC CMP2 D % of stage 1 complaints responses within 15 working days	75.85	85.00	76.42		-8.58		76.01	85.00	Bigger is Better
HCC TA LAA03.1 The percentage change of families in temporary accommodation	6.00	10.00	7.00		-3.00		7.00	12.00	Smaller is Better
HCC TA LAA03.1.03 The number of families in temporary accommodation	4202	4466.00	4466.00		0.00		4202	3930	Smaller is Better
BV183a Length of stay in B&B accommodation	4.44	6.00	5.59		-0.41		5.59	6.00	Smaller is Better
BV183b Length of stay in hostel accommodation	14.05	15.00	13.03		-1.97		13.03	15.00	Smaller is Better

Vital Sign Housing & Community Care Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
BV064.02 Private sector dwellings returned into occupation	467	502.00	194.00		-308.00		915.00	669.00	Bigger is Better
BV 212 Average re-let times council property in days	27.00	30.00	30.00		-0.00		27.67	30.00	Smaller is Better
HCC BHP.01 Percentage of repairs completed within government time limits	99.00	98.00	98.00		1.00		98.67	98.00	Bigger is Better
BV201 Adults receiving direct payments of benefits	69.63	80.00	73.88		-6.12		73.88	90.00	Bigger is Better
BV056.03 D The percentage of equipment delivered within 7 days	87.86	85.01	85.65		0.64		86.89	85.00	Bigger is Better
BV195 D Acceptable waiting times for assessment	67.64	75.00	67.88		-7.12		67.64	75.00	Bigger is Better

Vital Sign Housing & Community Care Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
BV196 Acceptable wait for care packages	87.90	90.00	91.32		1.32		87.47	90.00	Bigger is Better

Vital Sign Partners Q3 06/07									
	Performance Q2	Target Q3	Actual Perf Q3	Q3 Perf Alert	Actual distance between Q3 target and Q3 performance	Direction of Travel between Q2 and Q3	Perf YTD (Q2 and Q3)	Annual Target 06/07	Good Performance is?
LFB LAA01.1.2.27 BV142iii The number of accidental fires in residential properties	56.00	69.00	55.00		-14.00		182.00	276.00	Smaller is Better
PCT SST LAA02.2.26 The number of people who quit smoking for 13 weeks	54.000	58.00	16.00		-42.00		94.00	225.00	Bigger is Better
PCT SST LAA02.2.27 The number of people who stop smoking for 4 weeks in NRF areas	42.00	80.00	91.00		-30.00		371.00	475.00	Bigger is Better

CENTRAL

HIGH LEVEL MONITORING		COMMENTS																					
<p>REG EST LAA02.1.07 No. of people from a disadvantaged group (non-BME) helped into employment ST</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 align="center"> Actual Target </p>		DIRECTOR	PHIL NEWBY																				
		<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>																					
		EXECUTIVE MEMBER:	CLLR O' SULLIVAN																				
<p>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</p> <table border="1"> <thead> <tr> <th></th> <th align="center">Jun 06</th> <th align="center">Sep 06</th> <th align="center">Dec 06</th> <th align="center">Mar 07</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td align="center">13</td> <td align="center">17</td> <td align="center">11</td> <td></td> </tr> <tr> <td>Target</td> <td align="center">51</td> <td align="center">65</td> <td align="center">84</td> <td align="center">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	11		Target	51	65	84	81	Performance	▲	▲	▲	?	Comments noted	
	Jun 06	Sep 06	Dec 06	Mar 07																			
Actual	13	17	11																				
Target	51	65	84	81																			
Performance	▲	▲	▲	?																			

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

CHILDREN & FAMILIES

HIGH LEVEL MONITORING	COMMENTS																				
<p>CC CMP1 D % of complaints escalated from stage 1 to stage 2</p> <p>Actual: 18.6 (Jun-06), 25 (Sep-06), 18.75 (Dec-06), ? (Mar-07) Target: 10 (Jun-06), 10 (Sep-06), 10 (Dec-06), 10 (Mar-07)</p> <p>Smaller Is Better tolerances, upper 10, lower 0.01 % Variance</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>18.6</td> <td>25</td> <td>18.75</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	18.75		Target	10	10	10	10	Performance	▲	▲	▲	?	<p>DIRECTOR JOHN CHRISTIE</p> <p>Please note that for complaints falling within the Children Act complaints procedure, a new statutory timescale of 10 working days [which may be extended to 20 working days for complex complaints] came into force from 1 September 2006 Service area analysis Achievement and Inclusion No. of complaints registered - 2 % escalated from Stage 1 to Stage 2 – 0% Finance and Performance No of complaints registered – 3 % escalated from Stage 1 to Stage 2 – 0% Social Care No of complaints registered – 27 % escalated from Stage 1 to Stage 2 -18% Strategy and Partnership No of complaints registered – 0</p> <p>EXECUTIVE MEMBER: CLLR WHARTON</p> <p>Number of complaints is falling. Staff may need training in how to respond better first time</p>
	Jun 06	Sep 06	Dec 06	Mar 07																	
Actual	18.6	25	18.75																		
Target	10	10	10	10																	
Performance	▲	▲	▲	?																	

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>CC CMP2 D % of stage 1 complaints responses in time</p> <p style="text-align: center;"> Actual Target </p> <table border="1" style="width: 100%; text-align: center; margin-top: 10px;"> <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>34.38</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: red;">▲</td> <td style="color: purple;">?</td> </tr> </tbody> </table> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</p>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	39.53	45	34.38		Target	85	85	85	85	Performance	▲	▲	▲	?	<p>DIRECTOR JOHN CHRISTIE</p> <p>The department will shortly have access to Non-Stop-Gov complaints recording system for complaints which should, with some additional admin support, facilitate better monitoring of complaint responses and the provision of additional support to managers.</p> <p>As with ' % of complaints escalated from stage 1 to stage 2' the new Children Act regulation and timescales for reporting complaints applies to this indicator as well.</p> <p>Service area analysis Achievement and Inclusion No. of complaints registered - 2 % responded to within the 15 w/day corporate timescale, as notified to date – 50% Finance and Performance No of complaints registered – 3 % responded to within the 15 w/day corporate timescale, as notified to date – 0% Social Care No of complaints registered – 27 % responded to within the 10 w/day statutory timescale or 15 w/day corporate timescale [as relevant], as notified to date – 37% Strategy and Partnership No of complaints registered 0</p> <p>EXECUTIVE MEMBER: CLLR WHARTON</p> <p>Important that we answer promptly, but that we do not do meaningless holding responses</p>
	Jun 06	Sep 06	Dec 06	Mar 07																	
Actual	39.53	45	34.38																		
Target	85	85	85	85																	
Performance	▲	▲	▲	?																	

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 2007	March 2007	Gillian Burrows	

CHILDREN & FAMILIES

HIGH LEVEL MONITORING	COMMENTS																																											
<p><i>CYP3.08.2 Di % of children who waited more than 6 weeks for a primary school place after registration</i> The percentage of children not placed in school that have been assessed and offered alternative provision.</p> <div style="text-align: center;"> <p style="font-size: small;">Legend: Actual (Teal Bar), Target (Blue Dot)</p> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <caption>Chart Data</caption> <thead> <tr> <th>Month</th> <th>Actual (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>24.84</td> <td>0</td> </tr> <tr> <td>Sep-06</td> <td>36.24</td> <td>0</td> </tr> <tr> <td>Dec-06</td> <td>1.59</td> <td>0</td> </tr> <tr> <td>Mar-07</td> <td>-</td> <td>0</td> </tr> </tbody> </table> </div> <p>Smaller Is Better tolerances, upper -0.01, lower -10 % 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>24.84</td> <td>36.24</td> <td>1.59</td> <td></td> </tr> <tr> <td>Target</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Performance</td> <td>▲</td> <td>▲</td> <td>▲</td> <td>?</td> </tr> </tbody> </table>	Month	Actual (%)	Target (%)	Jun-06	24.84	0	Sep-06	36.24	0	Dec-06	1.59	0	Mar-07	-	0		Jun 06	Sep 06	Dec 06	Mar 07	Actual	24.84	36.24	1.59		Target	0	0	0	0	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;"> During the period school admissions received 130 applications for primary school provision of which 13 were not offered a place within 6 weeks of registration. At the end of the quarter an additional 10 applications for school places were outstanding of which 8 were received in December 2006. The average timescale for providing a school place April to June 2006 - 25 days July to September 2006 – 35 days October to December 2006 - 14 days. </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> This reflects the shortage of primary places in the north of Brent. A better indicator might relate to pupils not offered a place within 2 miles of home. </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	During the period school admissions received 130 applications for primary school provision of which 13 were not offered a place within 6 weeks of registration. At the end of the quarter an additional 10 applications for school places were outstanding of which 8 were received in December 2006. The average timescale for providing a school place April to June 2006 - 25 days July to September 2006 – 35 days October to December 2006 - 14 days.		EXECUTIVE MEMBER:	CLLR WHARTON	This reflects the shortage of primary places in the north of Brent. A better indicator might relate to pupils not offered a place within 2 miles of home.	
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Key improvement actions	Timescale for completion	Responsible Officer	Date completed

CHILDREN & FAMILIES

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<p>BV163 D Adoptions of children looked after</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;"> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <caption>Chart Data: Actual vs Target Adoptions</caption> <thead> <tr> <th>Month</th> <th>Actual (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>0.69</td> <td>1.75</td> </tr> <tr> <td>Sep-06</td> <td>0.66</td> <td>1.75</td> </tr> <tr> <td>Dec-06</td> <td>1.59</td> <td>5.25</td> </tr> <tr> <td>Mar-07</td> <td>-</td> <td>7</td> </tr> </tbody> </table> </div> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % 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>0.69</td> <td>0.66</td> <td>1.59</td> <td></td> </tr> <tr> <td>Target</td> <td>1.75</td> <td>1.75</td> <td>5.25</td> <td>7</td> </tr> <tr> <td>Performance</td> <td>▲</td> <td>▲</td> <td>▲</td> <td>?</td> </tr> </tbody> </table>	Month	Actual (%)	Target (%)	Jun-06	0.69	1.75	Sep-06	0.66	1.75	Dec-06	1.59	5.25	Mar-07	-	7		Jun 06	Sep 06	Dec 06	Mar 07	Actual	0.69	0.66	1.59		Target	1.75	1.75	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> </table> <p>We are hoping that the performance of children being adopted will improve throughout the year. Year end target is to have 20 -22 children adopted. At the end of December 10 children have been adopted (6 adoptions, 4 (Special Guardianship Orders) and we are hoping that the numbers will increase by March 2007. NB figure include Special Guardianship Orders (SPO), quarter 1 figures adjusted to include these orders</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> </table> <p>.It is likely that a further 8 children will be adopted and 2 -3 more SGO granted by March 2007. Of the 8 children we hope will be adopted, 6 are children for whom applications have already been logged and 2 are children whom placement orders have been granted. If orders are granted as anticipated the 2006 -07 target will be met</p>	DIRECTOR	JOHN CHRISTIE	EXECUTIVE MEMBER:	CLLR WHARTON
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Second adoption team now in operation	ongoing	Jan Fishwick	
New adoption protocol implemented which will speed up the process of children being adopted nationally.	ongoing	Jan Fishwick	

CHILDREN & FAMILIES

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<p>BV049.04 D % Children in care 3+ placement</p> <p>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;"> </div> <p>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>2.11</td> <td>4.48</td> <td>11.28</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>★</td> <td>★</td> <td>▲</td> <td>?</td> </tr> </tbody> </table>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	2.11	4.48	11.28		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;"> <p>We have managed to reduce the number of looked after children changing placement 3 or more times throughout last year and we are hoping through close monitoring and regular reviewing placement that we do not exceed the 16% limit.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>This looks to be on a rising trend. We may need to look for more fundamental reasons why placements are breaking down</p> </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	<p>We have managed to reduce the number of looked after children changing placement 3 or more times throughout last year and we are hoping through close monitoring and regular reviewing placement that we do not exceed the 16% limit.</p>		EXECUTIVE MEMBER:	CLLR WHARTON	<p>This looks to be on a rising trend. We may need to look for more fundamental reasons why placements are breaking down</p>	
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Review to take place year end	March 2007	John Christie	

CHILDREN & FAMILIES

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<p>2065SC D % U16 LAC for 2.5+ yrs in same place or adopted</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> <div style="text-align: center;"> <p>Actual (Teal bars), Target (Blue dashed line with dots)</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>68</td> <td>68</td> </tr> <tr> <td>Sep-06</td> <td>62.9</td> <td>68</td> </tr> <tr> <td>Dec-06</td> <td>50.41</td> <td>68</td> </tr> <tr> <td>Mar-07</td> <td>?</td> <td>68</td> </tr> </tbody> </table> </div> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % 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>68</td> <td>62.9</td> <td>50.41</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>	Month	Actual	Target	Jun-06	68	68	Sep-06	62.9	68	Dec-06	50.41	68	Mar-07	?	68		Jun 06	Sep 06	Dec 06	Mar 07	Actual	68	62.9	50.41		Target	68	68	68	68	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>This is to be reviewed by Social Care Management Team as the national target identified by CSCI and DfES is 68% by 2008</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR WHARTON</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>We need to know why there has been a sharp fall</p> </td> </tr> </table>	DIRECTOR	JOHN CHRISTIE	<p>This is to be reviewed by Social Care Management Team as the national target identified by CSCI and DfES is 68% by 2008</p>		EXECUTIVE MEMBER:	CLLR WHARTON	<p>We need to know why there has been a sharp fall</p>	
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Monitor targets	ongoing		

CHILDREN & FAMILIES

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ENVIRONMENT & CULTURE

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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>CC CMP2 D % of stage 1 complaints responses in time</p> <table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <thead> <tr> <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;">72.84</td> <td style="text-align: center;">75.29</td> <td style="text-align: center;">75.86</td> <td></td> </tr> <tr> <td>Target</td> <td style="text-align: center;">85</td> <td style="text-align: center;">85</td> <td style="text-align: center;">85</td> <td style="text-align: center;">85</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>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</p> <table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <thead> <tr> <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;">72.84</td> <td style="text-align: center;">75.29</td> <td style="text-align: center;">75.86</td> <td></td> </tr> <tr> <td>Target</td> <td style="text-align: center;">85</td> <td style="text-align: center;">85</td> <td style="text-align: center;">85</td> <td style="text-align: center;">85</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>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	72.84	75.29	75.86		Target	85	85	85	85	Performance	▲	▲	▲	?		Jun 06	Sep 06	Dec 06	Mar 07	Actual	72.84	75.29	75.86		Target	85	85	85	85	Performance	▲	▲	▲	?	<p>DIRECTOR RICHARD SAUNDERS</p> <p>This is an improvement on last quarter but is still 7% over target. The stage 2s' were spread across 9 service areas with Planning accounting for 25% of these. 2 of these stage 2 complaints were subsequently withdrawn.</p> <p>Improvement since last quarter but it is unlikely that the target is achievable.</p> <p>EXECUTIVE MEMBER:</p> <p>CLLR Van Colle This is a difficult and stretching target.</p> <p>Cllr D Brown</p>
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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

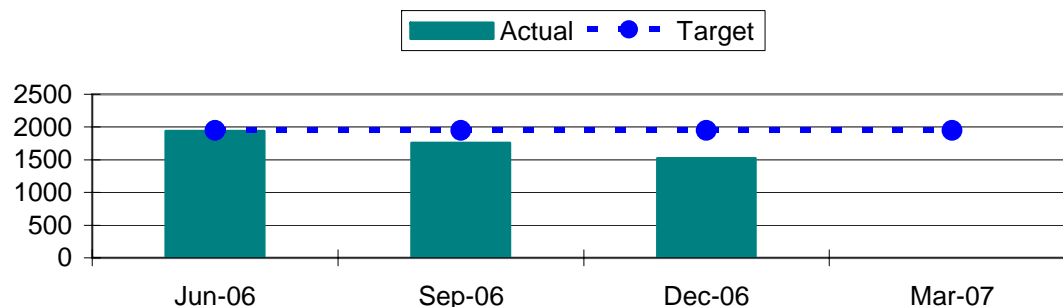
HIGH LEVEL MONITORING	COMMENTS																		
<p>BV199a.05 D Env. Cleanliness - Litter</p> <p>The proportion of relevant land and highways (expressed as a %) that is assessed as having combined deposits of litter and detritus that fall below an acceptable level.</p> <div style="text-align: center;"> </div> <p>Smaller Is Better tolerances, upper 5, 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>Jul 06</th> <th>Nov 06</th> </tr> </thead> <tbody> <tr> <td>Actual</td> <td>27.6</td> <td>32</td> </tr> <tr> <td>Target</td> <td>26</td> <td>26</td> </tr> <tr> <td>Performance</td> <td style="text-align: center;">▲</td> <td style="text-align: center;">▲</td> </tr> </tbody> </table>		Jul 06	Nov 06	Actual	27.6	32	Target	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"> <p>The new waste management contract that starts on 1st April 2007 should address many of the issues that have caused the current target to be missed.</p> <p>Reporting periods have be adjusted for this indicator to reflect the collection and feedback from inspections</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 1st April 2007 should address many of the issues that have caused the current target to be missed.</p> <p>Reporting periods have be adjusted for this indicator to reflect the collection and feedback from inspections</p>		EXECUTIVE MEMBER:	CLLR VAN COLLE CLLR D BROWN
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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
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EC PLSS6 D Number of library visits per 1,000 population



Bigger Is Better tolerances, upper -0.01, lower -10 % Variance

	Jun 06	Sep 06	Dec 06	Mar 07
Actual	1,937.17	1,757.69	1,524.05	
Target	1,950	1,950	1,950	1,950
Performance	●	●	▲	?

DIRECTOR | RICHARD SAUNDERS

Although visitor figures are still rising in real terms, an Audit Commission visit in 2006 revealed serious inconsistencies and inaccuracies in the way visitor data was collected in individual libraries. This problem had developed over a number of years. Following this the management team have carried out work to ensure that the collection method is uniform across the service and we are now totally confident that the figures are accurate. These changes have meant that our performance appears to have dropped. Fortunately visitor figures are still rising but the service may fall short of this year's target of 7800 visits per 1000. Work still needs to be done to make libraries more attractive to visitors, to modernise the buildings and increase books on the shelves. A new library strategy will shortly come to Executive prior to public consultation.

EXECUTIVE MEMBER

CLLR VAN COLLE

Although there has been collection of data inconsistencies and there is budget under-funding, the new administration is working to resolve these issues.

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	

ENVIRONMENT & CULTURE

HIGH LEVEL MONITORING	COMMENTS																				
<p><i>EC C4 D Active borrowers as a percentage of population</i></p> <p style="text-align: center;"> Actual ● Target </p>	<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"> <p>Reduction in this year's stock fund has contributed to the service falling below target. Managers are working hard to promote existing stock and ensure that there are close links to activities and lending in libraries.</p> <p>Work still needs to be done to make libraries more attractive to visitors, to modernise the buildings and increase books on the shelves. A new library strategy will shortly come to Executive prior to public consultation</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR VAN COLLE</td> </tr> </table> <p style="margin-top: 20px;">This is a particularly difficult year due to budget under-funding</p>	DIRECTOR	RICHARD SAUNDERS	<p>Reduction in this year's stock fund has contributed to the service falling below target. Managers are working hard to promote existing stock and ensure that there are close links to activities and lending in libraries.</p> <p>Work still needs to be done to make libraries more attractive to visitors, to modernise the buildings and increase books on the shelves. A new library strategy will shortly come to Executive prior to public consultation</p>		EXECUTIVE MEMBER:	CLLR VAN COLLE														
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IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed

ENVIRONMENT & CULTURE

HIGH LEVEL MONITORING	COMMENTS																				
<p>BV091a.05 D % res's kerbside recyclables % of households resident in the authority's area served by kerbside collection of recyclables</p> <div style="text-align: center;"> </div> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % 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>91</td> <td>91</td> <td>91</td> <td></td> </tr> <tr> <td>Target</td> <td>91</td> <td>91</td> <td>92</td> <td>93</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	91	91	91		Target	91	91	92	93	Performance	★	★	●	?	<p>DIRECTOR RICHARD SAUNDERS</p> <p>Progress on this PI is slow due to the need for extensive consultation with property managers. Permission is required from owners and residents in order to implement this service. It is usual for there to be some resistance to installing recycling facilities outside residential blocks. In many cases it is difficult to ascertain property ownership and to make contact with the appropriate person. It is anticipated that expansion will be speedier under the new contract arrangements, whereby a reduced number will be installed at each site. In order to move this process forward more speedily, grant funding has been sought and obtained from WRAP (Waste and Resources Action Programme) to undertake a full audit of estates in Brent. This will provide a clear picture of estates in Brent and their recycling needs. It will identify ownership, list contacts and specify what recycling facilities are most appropriate at each site. This information will enable a comprehensive expansion programme to be developed and then implemented under the new contract arrangements.</p> <p>Progress with this indicator remains slow. The new more comprehensive approach set out above should deliver a step change in progress.</p>
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Actual	91	91	91																		
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Performance	★	★	●	?																	
	<p>EXECUTIVE MEMBER CLLR VAN COLLE</p> <p>Better progress should be made as a result of the new contract.</p>																				

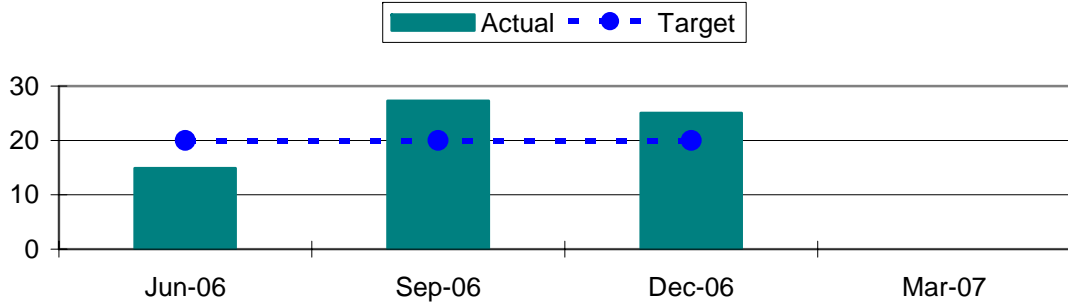
IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed

FINANCE & CORPORATE RESOURCES

HIGH LEVEL MONITORING	COMMENTS																				
<p>CC CMP1 D % of complaints escalated from stage 1 to stage 2</p> <p style="text-align: center;"> ■ Actual -●- Target </p>	<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>The escalation rate was higher than expected this 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>CLLR BLACKMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>Although escalation rates have increased slightly, in context this represents a very small number of escalated complaints. Improvement plans are in place to address underlying issues causing justified complaints</p> </td> </tr> </table>	DIRECTOR	DUNCAN MCLEOD	<p>The escalation rate was higher than expected this quarter. These complaints are being reviewed to identify any underlying issues that need to be resolved.</p>		EXECUTIVE MEMBER:	CLLR BLACKMAN	<p>Although escalation rates have increased slightly, in context this represents a very small number of escalated complaints. Improvement plans are in place to address underlying issues causing justified complaints</p>													
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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><i>FCR PM5 D Average processing time taken for change of circumstances</i></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>14.87</td> <td>27.32</td> <td>25.07</td> <td></td> </tr> <tr> <td>Target</td> <td>20</td> <td>20</td> <td>20</td> <td></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	14.87	27.32	25.07		Target	20	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>Large volumes of aged items were cleared within the quarter. This will continue to completion throughout Q4 and will adversely impact on performance</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR BLACKMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>The increase to processing times was forecast as a natural consequence of clearing aged items of work. Although this adversely affects reported performance, in practice it means that those customers who have experienced delays in having their claims amended are no longer waiting</p> </td> </tr> </table>	DIRECTOR	DUNCAN MCLEOD	<p>Large volumes of aged items were cleared within the quarter. This will continue to completion throughout Q4 and will adversely impact on performance</p>		EXECUTIVE MEMBER:	CLLR BLACKMAN	<p>The increase to processing times was forecast as a natural consequence of clearing aged items of work. Although this adversely affects reported performance, in practice it means that those customers who have experienced delays in having their claims amended are no longer waiting</p>	
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IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Continuing to monitor progress	ongoing	Simon Hardwick	
Review at end of year	March 2007		

FINANCE & CORPORATE RESOURCES

HIGH LEVEL MONITORING	COMMENTS																												
<p><i>FCR PM18 D Percentage of cases referred to tribunal service within 4 weeks</i></p> <div style="text-align: center;"> </div> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % 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>74.65</td> <td>77.5</td> <td>10</td> <td></td> </tr> <tr> <td>Target</td> <td>65</td> <td>65</td> <td>65</td> <td>65</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	74.65	77.5	10		Target	65	65	65	65	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>Decrease in performance due to staffing issues. Recovery plan now in place to clear aged items of work. This will impact on performance during quarter 4 but will improve performance during 2007/08</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR BLACKMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>This drop in performance has adversely affected customers awaiting a Tribunal Hearing. A detailed plan is now in place to clear backlogs and to ensure that future delays do not re-occur</p> </td> </tr> </table>	DIRECTOR	DUNCAN MCLEOD	<p>Decrease in performance due to staffing issues. Recovery plan now in place to clear aged items of work. This will impact on performance during quarter 4 but will improve performance during 2007/08</p>		EXECUTIVE MEMBER:	CLLR BLACKMAN	<p>This drop in performance has adversely affected customers awaiting a Tribunal Hearing. A detailed plan is now in place to clear backlogs and to ensure that future delays do not re-occur</p>	
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FINANCE & CORPORATE RESOURCES

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<p>BV009 D Council Tax collected Percentage of Council Tax collected.</p> <table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <thead> <tr> <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;">29.52</td> <td style="text-align: center;">22.57</td> <td style="text-align: center;">22.58</td> <td></td> </tr> <tr> <td>Target</td> <td style="text-align: center;">30.11</td> <td style="text-align: center;">22.5</td> <td style="text-align: center;">23.1</td> <td style="text-align: center;">18.29</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>Bigger Is Better tolerances, upper -0.01, lower -10 % Variance</p>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	29.52	22.57	22.58		Target	30.11	22.5	23.1	18.29	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>The increase in Direct Debit payers has contributed to the gap against the target set earlier this year. This is because DD payers have instalments in February and March</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR BLACKMAN</td> </tr> <tr> <td colspan="2" style="padding: 10px;"> <p>The gap against profile was reduced in January and meetings with Capita indicate that they are still confident of achieving 94% by 31/03/07. There is a higher percentage of cash instalments due in February/March than previous years and this does in theory mean that improvements to collection can still be achieved. Tough action is being taken to deal with non payers and help is being offered to those who cant pay</p> </td> </tr> </table>	DIRECTOR	DUNCAN MCLEOD	<p>The increase in Direct Debit payers has contributed to the gap against the target set earlier this year. This is because DD payers have instalments in February and March</p>		EXECUTIVE MEMBER:	CLLR BLACKMAN	<p>The gap against profile was reduced in January and meetings with Capita indicate that they are still confident of achieving 94% by 31/03/07. There is a higher percentage of cash instalments due in February/March than previous years and this does in theory mean that improvements to collection can still be achieved. Tough action is being taken to deal with non payers and help is being offered to those who cant pay</p>	
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IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Maintain and monitor collection rates until end of financial year	March 2007		

HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																																									
<p>CC CMP1 Di (H&ASC) % of complaints escalated from stage 1 to stage 2</p> <div style="text-align: center;"> <p>Legend: Actual (Teal Bar), Target (Blue Dashed Line with Dot)</p> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <thead> <tr> <th>Period</th> <th>Actual</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>Jun-06</td> <td>17.58</td> <td>10</td> </tr> <tr> <td>Sep-06</td> <td>17.63</td> <td>10</td> </tr> <tr> <td>Dec-06</td> <td>23.66</td> <td>10</td> </tr> <tr> <td>Mar-07</td> <td>?</td> <td>10</td> </tr> </tbody> </table> </div> <p>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>17.58</td> <td>17.63</td> <td>23.66</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: red;">▲</td> <td style="color: purple;">?</td> </tr> </tbody> </table>	Period	Actual	Target	Jun-06	17.58	10	Sep-06	17.63	10	Dec-06	23.66	10	Mar-07	?	10		Jun 06	Sep 06	Dec 06	Mar 07	Actual	17.58	17.63	23.66		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
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Introduction of an upgraded complaints systems	In progress		
Creating an integrated H&CC complaints team			

HOUSING & COMMUNITY CARE

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<p>CC CMP2 Di (H&ASC) % of stage complaints responded in time</p> <p style="text-align: center;"> Actual ● Target </p>	<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: 5px;"> <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														
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IMPROVEMENT ACTION PLAN			
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HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																												
<p>BV201 Adults receiving direct payments</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 (Teal bar), Target (Blue dashed line with dot)</p> </div> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % 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>58.37</td> <td>69.63</td> <td>73.88</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>		Jun 06	Sep 06	Dec 06	Mar 07	Actual	58.37	69.63	73.88		Target	60	70	80	90	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"> <p>The number of people receiving Direct Payments continues to increase. We are 7 people below our quarterly target. By the end of December 2006 we were providing direct payments to 131 clients aged 18 & over; with a further 21 people referred & pending. This grand total of 152 breaks down to 122 adults aged 18-64 & 30 people aged 65 and over. Clients referred but not yet receiving direct payments have been included since September 2005. At present we are 38 clients below target for the end of 2006-07. Efforts will continue to promote Direct Payments and to achieve the annual target.</p> </td> </tr> <tr> <td>EXECUTIVE MEMBER:</td> <td>CLLR COLWILL</td> </tr> <tr> <td colspan="2"> <p>It is encouraging that take-up of Direct Payments continues to rise. Performance is currently slightly below the target for the quarter, but work will continue across all service areas to maintain the continuous improvement</p> </td> </tr> </table>	DIRECTOR	MARTIN CHEESEMAN	<p>The number of people receiving Direct Payments continues to increase. We are 7 people below our quarterly target. By the end of December 2006 we were providing direct payments to 131 clients aged 18 & over; with a further 21 people referred & pending. This grand total of 152 breaks down to 122 adults aged 18-64 & 30 people aged 65 and over. Clients referred but not yet receiving direct payments have been included since September 2005. At present we are 38 clients below target for the end of 2006-07. Efforts will continue to promote Direct Payments and to achieve the annual target.</p>		EXECUTIVE MEMBER:	CLLR COLWILL	<p>It is encouraging that take-up of Direct Payments continues to rise. Performance is currently slightly below the target for the quarter, but work will continue across all service areas to maintain the continuous improvement</p>	
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IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Training in Direct Payments for staff in all service areas	From April 07		
Project group meets quarterly to monitor performance & identify improvement actions	From April 07	Christabel Shawcross	Apr 06 & ongoing
Increased publicity for service users	December 06		
Review processes	February 07	Christabel Shawcross	Dec 06 & ongoing

HOUSING & COMMUNITY CARE

HIGH LEVEL MONITORING	COMMENTS																																								
<p>BV195 D Acceptable waiting times for asst</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 <= 28 days</p> <div style="text-align: center;"> <table border="1" style="margin: 10px auto; border-collapse: collapse;"> <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>67.88</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="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> </div> <p>Bigger Is Better tolerances, upper -0.01, lower -10 % 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>64.95</td> <td>67.64</td> <td>67.88</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="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>		Jun-06	Sep-06	Dec-06	Mar-07	Actual	64.95	67.64	67.88		Target	75	75	75	75	Performance	▲	●	●	?		Jun 06	Sep 06	Dec 06	Mar 07	Actual	64.95	67.64	67.88		Target	75	75	75	75	Performance	▲	●	●	?	<p>DIRECTOR MARTIN CHEESEMAN</p> <p>This is a 'key threshold indicator' as defined by CSCI. The target for 2006-07 for this indicator is 75%, significantly above the threshold of 70%. Figures for quarters 2 & 3 are actuals, and are as complete and accurate as we can make them. Figures for quarter 1 were estimated due to recording difficulties on the Framework-i database. Though somewhat below target, performance continues to improve. A project group to oversee further improvement has been established, and actions plans are being developed and implemented to ensure that performance improves and that the annual target is achieved.</p> <p>EXECUTIVE MEMBER: CLLR COLWILL</p> <p>Performance has improved slightly from last year, but still has some way to go in order to reach the annual target. Robust measures are in place to ensure that appropriate improvement action is taken.</p>
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IMPROVEMENT ACTION PLAN			
Key improvement actions	Timescale for completion	Responsible Officer	Date completed
Project group to oversee improvements	From August 2006	Ros Howard	From September 06

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 & 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		