

			ID (			Derby City Council
Measure Details	Quarterly Target Status		Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
Directorate : Communitie	es & Place					
L&C PM28 Livewell: NHS Health Checks	Amber	Green	Target 500.0 Actual 475.0 Forecast data Target 1,000.0 Actual 1,000.0	Despite being 25 down for the year, there is no reason why 1000 will not be achieved. Based on historical data Q4 will be the busiest period of the year, which will ensure that the target will be achieved. Q4 in 16/17 was 335 and it is anticipated that this will be similar in 17/18.	In addition to the existing promotion and campaigns, the service has now got a physical presence within one of the largest 'opted out' practices - Osmaston Surgery. This will support in engaging with an audience that has not yet been reached.	No further action proposed - target forecasted to be achieved.
YA&H PM08 (NI 155) Number of new affordable homes provided (gross)	Red	Green	Deteriorating Quarterly data Target 34.0 Actual 30.0 Forecast data Target 65.0 Actual 65.0 Deteriorating	There has been minor slippage of 4 units from Quarter 1 to Quarter 2 due to slight delay in delivery from a partner provider.  We remain confident that resources and opportunities are available to meet the target for the year.	-We have 12 units currently on site, which will be completed within the yearWe have grant and Right to Buy receipts available to be allocated, and expect to acquire a number of properties for affordable housingWe also have affordable housing coming through on a number of private-led developments.	To be reviewed by Executive Scrutiny, December 2017.
Directorate : Organisation	n & Govern	ance				
CM PM15 Number of online transactions	Red	Red	Quarterly data Target 42,005.0 Actual 38,551.0 Forecast data Target 96,100.0 Actual 87,770.0	At the end of quarter 2, there had been 38,551 online transactions, which 13.8% up on the same point in the previous year. However the year end forecast of 87,770 is 9.3% down on target.	-An improvement plan has been identified, and performance against this is being monitored monthly.  -The successful implementation of Bulky Waste collections is encouraging, and the recent deployment of an online option for renewal of Gold Card bus passes will help towards meeting the year end target.	A review of the target has been completed however it will remain at 96,100 to ensure focus on move to more online activity.

Data Source: DORIS





Measure Details	Quarterly		Performance	Context for Current Performance	Improvement Actions Taken	Intervention / Review
	Target Status	Year End Status	VS Target			
CM PM05 % sundry debt collected in-year	Red	Green	Quarterly data Target 93.0% Actual 87.6%	Although current performance is behind target, a large proportion of the balance outstanding is with our top ten debtors. This will be the focus of our recovery	-The teams continue to operate a robust recovery timetable, which will support the delivery of the target for the end of the year.	No further action proposed the target is forecasted to be achieved.
				efforts and should result in an increased collection rate		
			Forecast data Target 93.0%	by the end of quarter 3 (December 2017).		
			Actual 93.0%			
			Improving			
CM PM09a Percentage of Council Tax collected	Amber	Green	Quarterly data Target 97.5%	The indicator tracks collection of Council Tax arrears.  The 97.4% in the year to date column is the collection	-The Council Tax team continues to actively pursue payment of Council Tax when it is no longer current	No further actions proposed as forecasts are that the target will
within 36 months of it			Actual 97.4%	rate for the 2014/15 financial year. This year ended on	year and this indicator demonstrates the effectiveness	be achieved.
becoming due				the 31st March 2015 so to achieve target the collection	of that activity.	
			Forecast data	rate for this year needed to be at least 97.5% by 31st		
			Target 98.0% Actual 98.0%	March 2018. At the end of quarter 2 this indicator is on track to meet target.	-The collection rate for 2014/15 is on track to hit target by the end of the financial year and all prior years have	
			Actual 90.076	li ack to meet target.	already surpassed the target.	
			Improving			
CP 08f Average working	Red	Red	Quarterly data	Second quarter shows an overall improvement	-First Care went live on 1 June 2017 so figures	-This measure was reviewed at
days per employee (full time equivalents) per			Target 4.2 Actual 6.2	compared to quarter 2 of 2016/17, where the total days lost were at 7.14.	provided include a full quarter's data from them for quarter 2 along with month 3 from quarter 1.	Corporate Scrutiny Board in February 17 and was reviewed
year lost through			Actual 0.2	Year end projection currently stands at 12.3 days.	quarter 2 along with month 3 from quarter 1.	again by Executive Scrutiny
sickness absence -			Forecast data		-All Directorates have seen a reduction in sickness	Board via a Performance Surgery
Excluding Schools			Target 8.4	The breakdown by department is	compared with that of last year with the most significant	on Wednesday 18 October 2017.
			Actual 12.3	- COMMUNITIES & PLACE - 5.71 days lost and year	being in Communities and Place, where last year the	A fourth an annual data will be
			Improving	end projection of 11.4.	days lost was at 7.45 and this year the days lost is at 5.71.	-A further update will be presented to Executive Scrutiny
			inipioving	- ORGANISATION & GOVERNANCE - 4.52 days lost		in November 2017 with a focus
				and year end projection of 9.0.	-Proactive monitoring and improved data collection are supporting improvements alongside wider staff health	on health and wellbeing.
				- PEOPLE SERVICES - 7.25 days lost and year end	and wellbeing initiates.	
				projection of 14.5.		

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Measure Details	Quarterly Target Status		Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
GOV PM01 DBS renewal programme achievement	Blue	Amber	Quarterly data Target 60.0% Actual 86.0% Forecast data Target 98.0% Actual 95.0%	Improvement of 17.03% on Q1 figure with a further 11% (108) checks currently in progress or awaiting DBS certificate issue number. Still a further 8.97% gap to close to reach 95% target set which equates to 90 checks in total	-Dedicated team continues to chase managers and employees for outstanding checks and disclosure numbers.  -By Q3 team will be able to target and manage outstanding checks and give a more detailed account for the reasons behind non-compliance, for example, long term sickness, maternity leave etc.	This measure was subject to review by Executive Scrutiny in July 2017. Target is proposed to be changed to 95% in line with discussions at Scrutiny.
			Improving			
Directorate : People Serv	vices					
AHH 02D Sequel to short term support resulting in no services needed (STMAX)	Amber	Red	Target 70.0% Actual 68.4%	Performance has improved in Quarter 2, contributing to an upturn in the year to date performance.  However it is still below the Quarter 2 target set and would need to be near 100% for the remainder of the year, which isn't practical.	-More challenging and complex cases have been taken on by the reablement service which makes it more difficult to reach targets.  -Recommendation for targets to be reviewed to reflect the increase in complexity of customers.  In remaining quarters Discharge to Assess Pathways roll out, Home First gateway and DCHS alignment will improve performance.  New quarterly targets reflect this phased approach. (Q1 65%, Q2 70%, Q3 75%, Q4 80%).	Corporate Scrutiny Board reviewed this measure alongside associated Adult Social Care measures in January 2017 and Executive Scrutiny Board will review this measure in 2018.





Measure Details	Quarterly Target Status		Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
AHH Local 2A (i) Adults aged 18 to 64 whose long term care needs are met through residential or nursing care per 100,000 population	Red	Green	100,000 population Actual 7.7 per 100,000 population Forecast data Target 13.5 per 100,000	This is a new measure for 2017-18 counting customers in long term residential and nursing care rather than counting only those in permanent placements. After an initial pause numbers have begun to rise toward the comparator average.  Through transitions and hospital discharges we are seeing people with complex needs who are requiring enhanced support.  This is the first year of the changed metric this may be impacting.  Performance is currently missing Quarter 2 target but should moderate to meet end of year target.	This is the first year of the changed metric, so it would be practical to conduct a review of the data to check accuracy. It is expected a review would improve performance back towards end of year targets.  - The Council has introduced demand management initiatives such as "Talking Points", Local Area Co-ordination, Ordinary Lives and Shared Lives.  - Over the past five years the Council has developed five new extra care facilities for older people across the city.  - The Council also has developed a younger adults accommodations strategy, which has yielded many supported living opportunities for younger adults, hence the low younger adults admissions rate.  - The Council has continued to grow the Direct Payment offer to allow people to self-direct support in supported living arrangements.	Corporate Scrutiny Board reviewed this measure alongside associated Adult Social Care measures in January 2017 and Executive Scrutiny Board will review this measure in 2018.



Measure Details	Quarterly Target Status	Forecast Year End Status	Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
C PM02a Takeup of FEEE places for three and four year-olds in each locality by eligible children	Amber	Green	1	DfE January 2017 has confirmed Derby City overall has an overall take up level for FEEE by three and four year olds of 93%. This has reduced from 95% in January 2016. Three year old take up levels have reduced from 93% to 90% but four year old take up levels have remained the same at 94%. The national take up levels are 95% whilst the East Midlands position is 97% for 3YO and 98% for 4YO, overall take up sits at 98%; so there is considerable work to do to close this gap.	Actions planned:  1)Urgent work being undertaken with Marketing and Communication Team to increase social media available as evidence proves this is a key route used by those LA's with high take up levels.  2) 2, 3 and 4 Year FEEE combined promotional leaflet to go into parents 'Red Book' for their child (Nov 2017) 3)Meetings booked in over November to meet with all Health Visitors to stress the key role they have in promoting to all parents the 2,3 and 4 Year Old FEEE provision.  4)Work planned and to be implemented from October 2017 to try and improve engagement with employers to ensure employees are made aware of the FEEE, 30 hour offer and tax free childcare options.  5)Working with Children's Centre Strategic Operational lead to agree and implement protocol on the activities CFIT/ Children's Centre will do to increase FEEE take up levels.  6)Poor FEEE take up levels to be raised at the first Early Years Strategic Group meeting led by School Improvement Head of Service on 30th October 2017	An update was presented to Children and Young People Overview and Scrutiny Board in September 2017.  No further actions proposed as the target is forecasted to be achieved with many actions in place to facilitate this.  Target amendment proposed.



Measure Details	Quarterly		Performance	Context for Current Performance	Improvement Actions Taken	Intervention / Review
	Target Status	Year End Status	VS Target			
EIISS PM04 Children who are the subject of a child protection plan per 10,000 population aged under 18 (Snapshot)	Red	Red	Quarterly data Target 57.00 per 10,000 population Actual 83.20 per 10,000 population  Forecast data Target 57.00 per 10,000 population Actual 75.00 per 10,000 population	There continues to be a rise in services and identification that children are vulnerable.  In September a comprehensive audit was completed which reviewed all child protection cases in the city. The result of this exercise evidenced that the threshold for child protection was met and the right children escalated to child protection level based on their experiences and need for greater specialist intervention from statutory services.  The target is a benchmark for changing demand and the priority should always be effectively safeguarding Derby's children and young people.	There will continue to be close monitoring of the child protection cohort of children by continued dip sampling of cases and benchmarking exercises in the quality assurance service.  Child protection Managers will ensure timely and safely deplaning of child protection cases to Children in Need status through continued multi agency partnership working.	There are regular updates on 'Monitoring Safeguarding Practices' to Children and Young People Overview and Scrutiny Board alongside monthly reviews via Safeguarding Assurance Meetings.  Further to this, a strategic working group has been established to review the current increase in demand, led by the Strategic Director of People
L&I PM23c Maintained Schools services, settings and institutions judged 'good' or 'outstanding'	Amber	Green	Deteriorating Quarterly data Target 83.0% Actual 82.0% Forecast data Target 83.0% Actual 83.0% Stabilised	Current performance at 82% with steady progress towards forecast of meeting year-end target of 83%.	-Robust LA risk assessment and early intervention is reducing the number of schools of greatest concern.  -Improvement strategies through sector led strategy groups are leading to improvements in schools that are not yet judged to be good.	Educational outcomes are scheduled for review by Children and Young People Overview and Scrutiny in November 2017. Further to this there will be an annual meeting with Ofsted in 2018 to review quality and outcomes.



Measure Details	Quarterly Target Status	Forecast Year End Status	Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
L&I PM23e Percentage of inspected services settings and institutions that are judged as 'good' or 'outstanding' – Residential Children's Homes	Red	Red	Target 100.0% Actual 83.0% Forecast data	Five of the six Children Homes have been rated Good by Ofsted in 2017. One has been rated as requiring improvement. This relates to a perceived inappropriate placement within a mainstream Home. Derby City Council has a duty of care to ensure that all young people requiring care, are placed appropriately. However no external placements could be sourced then and to date. In addition, the education offer is insufficient. This is being addressed and work is on going with regards to supporting the young person.	-A full improvement plan is implemented and monitored monthly.  -Regarding Education; Resources and school provision coordinator has been secured to establish a suitable and appropriate education offer.  -This now requires progressing.	No further actions proposed - quality of homes are subject to routine monitoring and actions taken to support improvements will remain on-going. Any change in this measure is reliant on a re-inspection.
L&I PM26a % of NEW EHCPs issued in 20 weeks	Red	Red	Quarterly data Target 90.0% Actual 81.0% Forecast data Target 90.0% Actual 85.0% Deteriorating	The target is particularly challenging currently due to the high numbers of requests that are coming in (for example we received 59 EHC requests in July which is unprecedented). This number is significantly higher than in previous months. The team are however on track with plans received in this period.	Key actions to support improvement include: - Support is being channelled from the post-16 management to the VLS workforce to strengthen the output There is further training on IT systems and appointment of super users to improve recording and monitoring Process Mapping is being completed supported through IT provider and Business Intelligence to provide an efficient and transparent process There is on-going training on the Graduated response for SEN to all schools to strengthen SEN support Management support is also being from the Post 16 Team.	SEND inspection readiness, which will cover the timeliness and quality of EHCPs will be reviewed by Children and Young People's Overview and Scrutiny Board in October 2017.
AHH 02B (NI 125) Achieving independence for older people through rehabilitation/intermediat e care	Amber	Amber	Quarterly data Target 85.0% Actual 81.7% Forecast data Target 85.0% Actual 81.3% Deteriorating	Performance has decreased since Quarter 1 resulting in a downturn in the year to date performance. The Quarter 2 target has been missed; performance would need to be near 100% for the remainder of the year to meet target, which isn't practical. Data quality review on 26/10/2017 revised performance slightly higher to 73.0% and overall YTD to 81.7%	-More challenging and complex cases have been taken on by the reablement service which makes it more difficult to reach targets.  -Target review is recommended to reflect the increase in complexity of customers.	Corporate Scrutiny Board reviewed this measure alongside associated Adult Social Care measures in January 2017 and Executive Scrutiny Board will review this measure in 2018.

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Measure Details	Quarterly Target Status		Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
SS PM07 - Children in	Amber	Amber	Quarterly data	CIC numbers continue to rise and many of these are in	All S20 placements in localities have been reviewed in	There are regular updates on
Care per 10,000			Target 77.00	localities subject to care proceedings which are taking	September and October to ensure any children who	'Monitoring Safeguarding
population aged under 18			per 10,000 population	slightly longer than in recent months.	can be returned to family have been reunited.	Practices' to Children and Young
(EIISS PM05)			Actual 79.10		Work will continue to robustly monitor threshold for new	People Overview and Scrutiny Board alongside monthly reviews
			per 10,000		admissions to care to ensure interventions are based	via Safeguarding Assurance
			population		on need.	Meetings.
			population		on need.	ivicetings.
			Forecast data			
			Target 77.00			
			per 10,000			
			population			
			Actual 78.00			
			per 10,000			
			population			
			Deteriorating			
SS PM23b Percentage of	Red	Red	Quarterly data	Enquiry numbers decreased slightly during quarter 2 at	-Work continues on the development of the website	The recruitment of carers was a
children placed with			Target 50.0%	41 compared to 44 in the previous quarter. This could	and early examples show a much more user friendly	recommendation from the SIF
independent fostering			Actual 64.2%	be attributable to the summer holiday period and is a	journey to find information and make an enquiry.	inspection and progress is
agencies				common trend particularly in August. Enquiry numbers		monitored through the
			Forecast data	should pick up during the autumn months and it is	-The use of social media has increased as part of the	Improvement Plan.
			Target 50.0%	hoped our next major recruitment campaign will also	marketing strategy and this has been particularly	
			Actual 61.0%	bring a number of new applications.	successful during the latest recruitment campaign.	
			Improving	Between July and September there were 2 approvals,	The convice continues to monitor all applications to	
			Improving	bringing the total for the year so far up to 4. The service received 5 new applications but also lost 3	-The service continues to monitor all applications to track the progress and delay factors that contribute to	
				applicants from the assessment process. Therefore at		
				the end of September there were 10 assessments	approvals outside of timescales.	
				underway, 2 of which were on hold. The service is still		
				in line to double the approval figures during this		
				financial year compared to last year.		
				initialistic year compared to last year.		

Data Source: DORIS



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Measure Details	Quarterly Target Status		Performance VS Target	Context for Current Performance	Improvement Actions Taken	Intervention / Review
SS PM25 Percentage of	Red	Red	Quarterly data	Out of the 8 children adopted in the last quarter, four	The new Childrens Adoption Permanence Team	No further action proposed -
children who wait less			Target 52.0%	children were adopted within 16 months, and a 5th	(CAPT) from July 17 offers greater opportunity to	timeliness is improving and any
than 16 months between			Actual 40.0%	child was only a few days outside of the 16 months	ensure all children with a plan of adoption are tracked	'outstanding' legacy cases were
entering care and moving				timescale despite having had an previous adoption	at an earlier stage. This work is being monitored as	reviewed by Ofsted in March
in with their adoptive			Forecast data	disruption.	part of the D2N2 RAA work stream.	2017.
family			Target 52.0%			
			Actual 49.0%	This is a positive trend and the new CAPT will continue	The new CAPT will continue to improve this	
				to improve this performance measure	performance measure.	
			Improving			
Directorate : Reporting			'			
DH Local 62b Number of	Annual	Red	Quarterly data	The target of 60 a year is based on financial capacity is	We are working pro-actively with colleagues in DCC	Executive Scrutiny considered
new homes delivered in	Collection		Target Actual	unlikely to be met this year as insufficient sites came	Planning, Property Services and Estates to (1) ensure	new homes in March 2017. As a
year (HRA & DH)			24.0	forward over the last year. There were 24 completions	a steady flow of new site feasibilities is being	measure linked to a pledge this
				during the first half of the current year, and there are a	considered by the Planning Department in order to deal	area is also subject to monthly
			Forecast data	number of others in the current pipeline about to start	with actual scheme proposals efficiently; (2) initiating	monitoring by lead Cabinet
			Target 60.0	on site. The number this year is likely to be an increase	the transfer of suitable land into the HRA for further	Members and Chief Officers.
			Actual 39.0	on last year.	housing development and (3) using framework	
					architects in addition to DCC Architectural services to	There will be a further updated to
			Improving		get around capacity bottlenecks. For example we have	Executive Scrutiny in January
					6 scheme feasibilities comprising of 19 units with DCC	2018.
					Planning for feedback. We have 1 scheme of 1 unit	
					currently in Planning for approval. We have 1 site that	
					needs to be transferred into the HRA from the GF	
					which will yield 6 units and another site that will yield up	
					8-10 units as we work with DCC Estates and	
					colleagues from Parks/Leisure to release the land for	
					development. There are also other sites lined up which	
					are at much more early and sensitive stages to report	
					on at this time.	

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