

**Committee:** Governance, Audit & Performance Committee      **Date:** Tuesday 28<sup>th</sup> June 2022

**Title:** Quarter 4 and Year End 2021/22 Performance Indicator Report

**Report Author:** Paula Evans, Customer Services and Performance Manager      **Key Decision:** No

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## Summary

1. This report presents the Quarter 4 2021/22 and Year End outturn and data analysis for all Key Performance Indicators (KPIs) and Performance Indicators (PIs).
2. All of the indicators contained in Appendix A had been monitored throughout the COVID-19 pandemic so that comparative analysis could be completed. However, a full year end outturn report was not brought to this Committee in 2021. Instead, a summary of the performance of all indicators used to monitor the impact of the pandemic was presented for information only.
3. Although performance levels were still being affected by the impact of the COVID-19 pandemic throughout the 2021/22 year, with long term trends showing an overall decline in performance levels when compared to 2020/21, it should be noted that short term analysis shows an improvement across the majority of indicators monitored on a quarterly basis.

## Recommendations

4. None

## Financial Implications

5. There are no financial implications associated with this report.

## Background Papers

6. The following papers were referred to by the author in the preparation of this report and are available for inspection from the author of the report - None

## Impact




- 7.

Communication/Consultation	None
Community Safety	None

Equalities	None beyond service improvement on the equalities performance indicator
Health and Safety	None
Human Rights/Legal Implications	None
Sustainability	None
Ward-specific impacts	None
Workforce/Workplace	None

## Situation




8. Appendix A presents the data for Quarter 4 2021/22 (1<sup>st</sup> January 2022 to 31<sup>st</sup> March 2022) along with the annual 2021/22 outturn figures for each individual Key Performance Indicator (KPI) and Performance Indicator (PI) collected and reported by the authority.
9. Data for the majority of PIs is collected and reported on a quarterly basis; however this report also includes year end data. All outturn data is shown in bold.
10. Performance is monitored against targets reviewed by the Governance, Audit and Performance Committee during the 2021/22 performance year.
11. For comparison purposes, the report contains data for Quarter 4 2021/22 and the previous four quarters. To enable a yearly comparison, the report also contains the annual outturn for 2020/21 for a year-on-year performance appraisal against the 2021/22 year outturn.
12. For some indicators, either quarterly or annual data is not yet available or has not been collated. Some data is dependent upon site visits or locally-based reporting databases, and other data has been affected by changes in process due to COVID-19. As soon as this data is available, or new methods of monitoring have been defined, it will be reported to future meetings of the Governance, Audit and Performance Committee.
13. All data and performance notes have been reviewed by the Corporate Management Team (CMT) and the Informal Cabinet Briefing (ICB) group.
14. Viewing both performance in Quarter 4 and Annual Year End 2021/22, it is evident that the majority of indicators are meeting target:

Status	Quarter 4 2021/22		Year End 2021/22	
	19	61%	19	59%
	3	10%	6	19%
	9	29%	7	22%
<b>Total</b>	<b>31*</b>	<b>100%</b>	<b>32**</b>	<b>100%</b>

\*PI 41 has not had outturn reported – see indicator note




\*\* 4 indicators have not had outturns reported to date

15. When analysing indicator performance levels for Quarter 4 2021/22 in comparison to Quarter 3 2021/22, it can be seen that performance in the short-term has improved across all statuses:

Status	Quarter 3 2021/22		Quarter 4 2021/22	
	13	42%	19	61%
	7	23%	3	14%
	11	35%	9	25%
<b>Total</b>	<b>31</b>	<b>100%</b>	<b>31</b>	<b>100%</b>

This improvement is encouraging and in many cases may be indicative of a 'return to normal' as the authority continues to recover from the impact of the pandemic.

16. When comparing annual performance outturn for 2021/22 with 2020/21, the long term trend analysis indicates that performance has dropped with the majority of indicators showing a decline in performance levels, with these indicators also moving from a higher to lower status level (green to amber, amber to red or green to red). This may be where additional post-pandemic pressures through the year have affected long term performance of certain indicators.

Status	Year End 2020/21		Year End 2021/22	
	21	66%	19	55%
	6	19%	6	18%
	5	15%	7	27%
<b>Total</b>	<b>32</b>	<b>100%</b>	<b>32</b>	<b>100%</b>

17. Of the 34 indicators that have 2021/22 outturns reported there are six KPIs that have not met their target at year end but are within the 10% threshold and have an 'amber' status:



<b>KPI 14</b>	Percentage of household waste sent for reuse, recycling and composting (LAA) (max)
<b>KPI 17</b>	Local Council Tax Support Collection Rate (max)
<b>KPI 20</b>	Average days lost per FTE through sickness absence based on the rolling year (min)
<b>PI 20</b>	Percentage of IT help Desk calls resolved within target (max)
<b>PI 34</b>	Residual household waste per household (kg) (years) (min)
<b>PI 43</b>	Percentage of premises with access to superfast/ultrafast broadband in Uttlesford (max)

18. Of the 34 indicators there are eight KPIs that have not met their target at year end and have exceeded the 10% performance threshold and have a 'red' status. A summary of the performance notes are included below:



<b>KPI 08 (a)</b>	Average re-let time in days (all re-lets including time spent in works) (min)	Of the average 49 days outturn, 40 days were spent in works and the rest applied to the lettings process. There has been a significant improvement in the outturn figure this year when compared to 2020/21 (a reduction of 19 days). UDC officers continue to work closely with Norse to ensure all voids are completed and let in the quickest possible timescales.
<b>KPI 21</b>	Average number of days lost per FTE through short-term sickness absence based on rolling quarter (min)	Short term sickness is an average of 5.7 FTE days per employee and has risen steadily over the last 3 quarters, mainly due to minor ailments such as Colds/upset stomachs and COVID-related illnesses, since the lifting of the lockdown restrictions. Colds/Upset stomachs/Headaches account for 44% of all short term absences, followed by COVID-related absences at almost 19%.  Almost 35% of the short term absences are in Environmental Services and 17% in both Resources and Housing, Health & Communities.

<b>PI 02</b>	Average time (days) to pay supplier invoices (min)	Average days to pay supplier (invoice to paid) = 17.98 days. Average days to pay within receipt (received by creditors to paid) = 7.06 days Average days to pay within receipt (received by creditors after additional intervention by department to paid) = 6.08 days
<b>PI 03</b>	Percentage of sundry debt income overdue (min)	The reasons for an increase in debt is based on 3 large accounts which are as follows. £5,314.35 – this is an amount that we will not get until the house has sold. £3,360.00 – this is a charge that waste arranged as a special collection and the company has disappeared £1,430.00 – this is a rent advance payment that housing tried to contact, but customer has failed to pay the instalments.
<b>PI 16</b>	Number of households living in temporary accommodation (min)	Use of B&B has escalated through the year as move-on from Council-owned self-contained accommodation has remained exceptionally slow for larger families. An Accommodation Officer is now in post to help manage the process as efficiently as possible. The Assistant Director for Housing, Health & Communities has been using discretion to prioritise the move-on of families in temporary accommodation. There is a plan to explore private sector opportunities in surrounding areas more intensively in the future.
<b>PI 21</b>	Percentage of minutes from meetings made available to the public within 10 working days (max)	Target has not been met due to a number of reasons: - Staff shortages during year - Unusually high volume of meetings - Delays through Officers clearing minutes
<b>PI 24 (d)</b>	Appeals allowed for enforcement notices (min)	<i>No performance notes given</i>
<b>PI 61</b>	Percentage of Insurance Claims settled as a proportion of Insurance Claims Made (min)	<i>No performance notes given</i>

19. Members should note that the reporting of performance for

**PI 46** Quality of Decisions: Percentage of Appeals Upheld for Major Planning Applications as a Proportion of Appeals Raised  
and

**PI 47** Quality of Decisions: Percentage of Appeals Upheld for Non-Major Planning Applications as a Proportion of Appeals Raised

is being reviewed regularly at Planning Committee. As the way these indicators are monitored varies considerably to that of a 'standard' indicator, with differing time periods needing to be considered, a snapshot of the latest

performance levels has been included as an additional appendix to this report (see Appendix B). The criteria for reporting these PIs are determined by Central Government and therefore cannot be adapted in any way at a local level.

20. As the 2022/23 year progresses, officers will continue to review and re-define the performance management processes. As discussed at previous GAP meetings, the Committee needs to take a more focused approach to specific areas of service performance, with a different service area discussed at each Committee meeting.

## Risk Analysis

21.

Risk	Likelihood	Impact	Mitigating actions
If performance indicators do not meet quarterly/annual areas then areas such as customer satisfaction and statutory adherence to government led requirements could be affected leading to a loss in reputation for the Council.	2 – The majority of performance measures perform on or above target. Where necessary, accompanying notes to individual performance indicators detail improvement plans.	3 – The majority of service areas in the Council are customer-facing.	Performance is monitored by CMT, and the Governance, Audit & Performance Committee on a quarterly basis. The inclusion of five quarters of data helps to identify trends. Where necessary, the Performance Team provides trend analysis to support CMT and Service Managers in improving performance.

1 = Little or no risk or impact

2 = Some risk or impact – action may be necessary.

3 = Significant risk or impact – action required

4 = Near certainty of risk occurring, catastrophic effect or failure of project.

Appendix A: Quarter 4 and Year End 2021/22 KPI & PI Data

Appendix B: PI 46 and 47 snapshot report