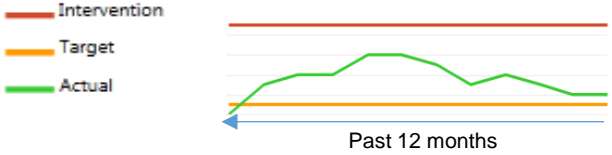
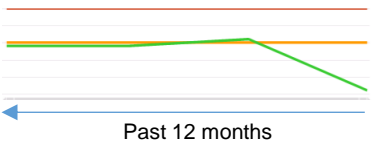

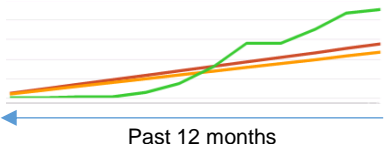
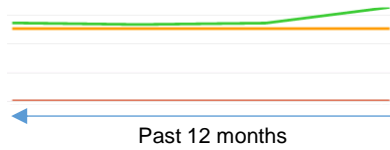


PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
<b>Housing Management</b>				
<b>AH211 Average days to re-let all housing stock</b> Anita Goddard				<b>How did we do?:</b> Re-let days reached a high of 22 in Aug and Sep. Thereafter there was a trend of improvement, and a reduction to 18 by year-end.
	Jan	19	17	25
	Feb	18	17	25
	Mar	18	17	25
				<b>What was the context?:</b> Although 'Amber' for much of 17/18, results have remained within the best 25% for organisations submitting data to the Housemark benchmarking club, demonstrating the demanding nature of meeting a 17 day target.
				<b>17/18 outlook:</b> We will be assessing the relationship with our contractor Mears to identify opportunities for increasing efficiencies within the void process. There are also plans to review our approach to the management of void properties within our Neighbourhood Services Team, focussing on feedback received from our customers.
<b>Housing Advice</b>				
<b>AH203 Number of households in temporary accommodation</b> Susan Carter/Heather Wood				Comment covers AH203 and AH208
	Dec	61	60	70
	Mar	46	60	70
				<b>How did we do?:</b> The number of households helped to prevent homelessness was better than target throughout, with 207 preventions in 17/18, compared with 126 in 16/17. The number of households in temporary accommodation was better than target, with the exception of Q3, when target was exceeded by one household.
				<b>What was the context?:</b> These good results have been achieved within challenging conditions, caused by a lack of affordable private rental stock and the impacts of welfare reform. South Cambs mirrors the national trend of increasing homelessness, placing further pressure on temp. accomm. including B&B placements.
<b>AH208 Number of households helped to prevent homelessness</b> Susan Carter/Heather Wood				
	Dec	64	30	27
	Mar	38	30	27
				<b>18/19 outlook:</b> These PIs will continue to be used to monitor risks around the costs of managing homelessness. Target and intervention for number of households helped to prevent homelessness will increase in line with the performance trend seen in 17/18, allowing us to compare the impact of further pressures, including the introduction of the Homeless Reduction Act. Number of households in temporary accommodation target and intervention levels are to remain unchanged.
<b>AH212 £s spent on Bed and Breakfast accommodation (cumulative)</b> Susan Carter/Heather Wood				<b>How did we do?:</b> Results were 'Red' from Nov and reached £22,607 by year-end.
	Jan	17551	9740	11500
	Feb	21674	10714	12650
	Mar	22607	11688	13800
				<b>What was the context?:</b> High spend was due to enforcement action which displaced several families from Traveller sites, triggering accommodation under homeless legislation. South Cambs also mirrors the national trend of increasing homelessness, placing further pressure on B&B placements.
				<b>18/19 outlook:</b> B&B spend will continue to be important in monitoring risks around the costs of managing homelessness. Control measures are in place, including development of Shire Homes Private Sector Leasing scheme as a means of minimising B&B use, alongside the ongoing homeless prevention work undertaken by the team. Target and intervention have been increased in line with 17/18 spend to allow easy comparison to take place.

Landlord Services

AH204 % tenants satisfied with responsive repairs

Anita Goddard



Dec	97.39	97
Mar	97.95	97

**How did we do?:** Performance has remained above target throughout 17/18.

**What was the context?:** Results during 17/18 have been consistently above the Housemark benchmarking club median for Qs 1 to 3 (95% in Qs 1 and 2 and 94.3% in Q3).

**18/19 outlook:** We are continuing to target satisfaction levels at 97% or above. Target and intervention therefore remain unchanged.

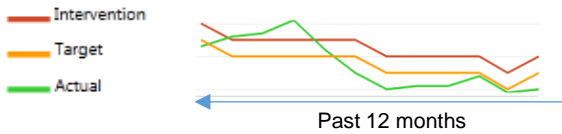
Report continues on following page

PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
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**Benefits**

**FS112 Average number of days to process new HB/CTS claims**

Dawn Graham



In-year targets account for seasonal variation

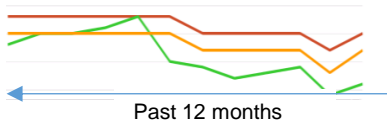
Jan	14	15	20
Feb	9	10	15
Mar	10	15	20

**How did we do?** New claims processing days were 'Red' from May to Jul, before reducing to within target in Sep, and remaining green thereafter. Change events processing days were 'Amber' in Jul and Aug, reducing to better than target from Sep.

**What was the context?** The improvement from Aug onwards was achieved as a result of a number of factors, including reduced staff absence, introduction of the Civica workflow system (including one-to-one support from supplier to staff to ensure benefits are maximised), commencement of an offsite, on-demand staffing arrangement, and a change in working practices (providing an agile and responsive approach to workload demands in different areas).

**FS113 Average number of days to process HB/CTS change events**

Dawn Graham



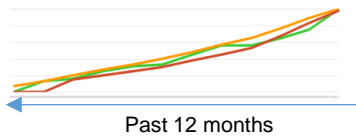
In-year targets account for seasonal variation

Jan	9	12	15
Feb	4	8	12
Mar	6	12	15

**18/19 outlook** The team will target a continuation of the good performance seen in the second half of 17/18. Processing days are typically higher in the opening months of the year and this has been accounted for within target and intervention levels.

**SF740 % Discretionary housing grant paid (cumulative)**

Dawn Graham



Jan	65	77	68
Feb	75	89	83
Mar	100	100	98

**How did we do?** Results were 'Green' or 'Amber' until Jan, when a slow in spend resulted in two 'Red' results. Despite this, all of the fund was spent by year-end.

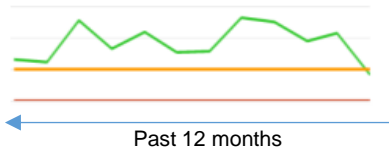
**What was the context?** Awards are considered where those receiving Housing Benefit are at risk of homelessness. The Benefits team work with Housing Advice and Rents teams to identify cases that would benefit from awards.

**18/19 outlook** Responsibility for awarding DHPs will be shared with the Housing Advice team to ensure that awards continue to reach those most in need. Target and intervention remain unchanged to flag where difficulty may occur in spending the entire fund.

**Contact Centre**

**CC303 % total calls to the Contact Centre handled**

Dawn Graham



Jan	89.4	85	80
Feb	90.7	85	80
Mar	84.2	85	80

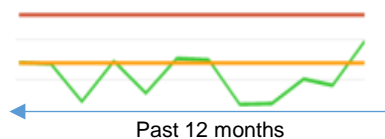
Comment covers CC303 and CC307

**How did we do?** Total number of calls handled remained above target throughout, until Mar, when the result dropped to 84% compared with a target of 85%. Average call answer times remained better than the 2 minute target during 7 of the 12 months. Where target was exceeded, only Mar had an average call answer time of more than 130 seconds (147 seconds). In total 88.9% of calls were handled and there was an average call answer time of 104 seconds during 2017-18. This compares with 77.9% of calls handled and an average call answer time of 231 seconds in 2016-17. (Continues on following page)

PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
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**CC307 Average call answer time (seconds)**

Dawn Graham



Jan	100	120	180
Feb	92	120	180
Mar	147	120	180

(Continued from previous page)

**What was the context?** 2017/18 showed a continued stabilisation in performance and overall improvement from 2016/17. Throughout the year, there was a continuation in the drive towards channel shift, demonstrated by an 837 increase in the number of completed e-forms received (a total of 19,427 for the year) and a reduction in call numbers by 11,597.

**18/19 outlook?** In 18/19 we hope to see continued improvement in performance levels through a number of measures. Targets are being altered to reflect this.

**Corporate Services**

**CC305 % of formal complaint responses sent within timescale (all SCDC)**

EMT



70	80	70
63	80	70

**How did we do?** Complaint handling was below the target throughout the year. In Q2 & Q4 performance was below target but didn't reach intervention levels.

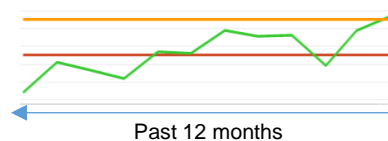
**What was the context?** The current arrangements for logging, allocating and reporting on complaints is under review to ensure the organisation can be more responsive and customer focused when responding to complaints. EMT is the PI owner and has commissioned the review.

**18/19 outlook?** The review referred to above will consider appropriate corporate systems for logging, monitoring and business information reporting. The review will also consider officer skills and business changes that may need to be made.

**Finance**

**FS109 % invoices paid in 30 days**

Caroline Ryba



Jan	95.9	98.5	96.5
Feb	97.9	98.5	96.5
Mar	98.7	98.5	96.5

**How did we do?** There has been a general improvement in performance as the year has progressed, culminating in March 2018 performance exceeding target.

**What was the context?** The Corporate Management Team received detailed monthly breakdowns of performance by service areas throughout the year, working proactively with heads of service to identify the causes of underperformance and share best practice measures to address this.

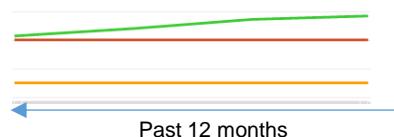
**18/19 outlook?** We will continue to strive to achieve the target of 98.5% through continued high levels of invoice payment performance visibility and scrutiny at CMT.

PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
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HR

**FS116 Staff sickness days per FTE (non-cumulative)**

Susan Gardner Craig



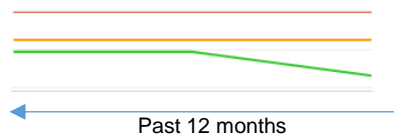
**How did we do?** Sickness was higher than intervention each quarter, with a small increase as the year progressed. The year end cumulative was 11.04% (target 7%, intervention 10%). The transfer of a sizeable workforce with several ongoing sickness cases following the launch of the Greater Cambridge Shared Waste Service contributed to this increase. There was also significant virus-related sickness absence early in the year.

**What was the context?** Sickness information is provided to managers on a monthly basis and self-service access to the HR system enables managers to monitor absences independently. Complex and long term cases are being managed with HR support, with cases resulting in a successful return to work and, in some cases ill health dismissals. There remain a significant number of cases in the Shared Waste Service and steps are being taken to support managers to address this. The Council uses a range of initiatives to combat ill health including; coaching, counselling, occupational health support, health promotion, well-being initiatives and social events.

**18/19 outlook?** We will continue to support and coach managers to manage performance and sickness absence effectively, and to support all staff to maintain good attendance levels.

**FS117 Staff turnover (non-cumulative)**

Susan Gardner Craig



**How did we do?** Staff turnover figures remained better than target throughout 17/18. At year-end the total cumulative result was 10.6% compared with a target of 13.0% for the year.

**What was the context?** Target and intervention levels were increased at the beginning of the year to more accurately represent levels that are seen as success and cause for concern.

**18/19 outlook:** Target and intervention levels continue to reflect healthy levels of staff turnover and therefore remain unchanged for the new financial year. Recruitment and retention remain very 'live' issues for the Council and we will review and refresh employment policies and terms and conditions as appropriate. We will also refresh our job marketing to ensure that the council attracts the best candidates.

Revenues

**FS102 % Housing Rent collected**

Katie Brown

No line chart included - scale of chart means actual is indistinguishable from target.

Jan	98.33	97.3	87.6
Feb	98.50	97.9	88.2
Mar	98.50	98.0	90.0

Comment covers FS102, FS104 and FS105

**How did we do?** Housing rent, NNDR and Council Tax collection rate targets were all exceeded at year-end, having remained predominantly at or better than target throughout 17/18.

**What was the context?** Good collection rates have been achieved through efficient collection processes. (Continues on following page)

PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
<b>FS104 % NNDR collected (cumulative)</b>				
(Continued from previous page)				
Katie Brown				Work has also been undertaken to implement and receive training on new Civica Workflow software as part of the Revs and Bens automation project.
No line chart included - scale of chart means actual is indistinguishable from target.	Jan	96.30	95.5	86.0
	Feb	97.90	98.4	88.6
	Mar	99.45	99.0	90.0
<b>FS105 % Council Tax collected (cumulative)</b>				
Katie Brown				
No line chart included - scale of chart means actual is indistinguishable from target.	Jan	97.60	97.8	88.0
	Feb	98.90	98.6	88.7
	Mar	99.34	99.1	90.0

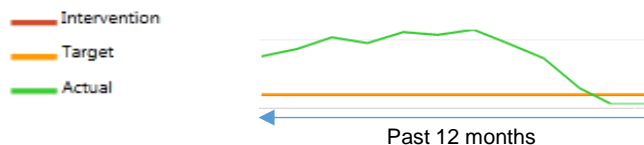
Report continues on following page

PI and PI owner and Month organised by Service Area	Actual	Target	Int.
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**Waste Services**

**ES418 % of household waste sent for reuse, recycling and composting (cumulative)**

Trevor Nicoll



Jan	50.25	50	48
Feb	49.66	50	48
Mar	49.66	50	48

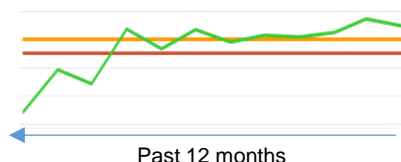
**How did we do?:** Year-end result was marginally below 50% target.

**What was the context?** A strong seasonal trend exists, due to the large amount of compostable garden material collected Apr-Oct. The extended wet and cold weather in Mar resulted in a continuation of winter composting rates, impacting on the year-end result. An intervention of 48% has been applied following discussion with the PI Owner.

**18/19 outlook?** The MetalMatters recycling campaign has seen a reported increase in dry recycling. The service will be undertaking other campaigns around contamination and individual materials, in addition to continuing to provide second blue bins for recycling as requested by residents.

**ES408 % of bins collected on schedule (SSWS)**

Trevor Nicoll



Jan	99.62	99.50	99.25
Feb	99.86	99.50	99.25
Mar	99.74	99.50	99.25

**How did we do?** The first 3 monthly results were below intervention. A marked improvement was seen from July and target consistently exceeded from Nov onwards.

**What was the context?** Results from Apr-Jun continued to be impacted by the introduction of new domestic collection rounds, introduced towards end of 16/17. The improvement in performance from 98.2% in Apr to consistently above 99.5% demonstrates that round changes have now been fully assimilated.

**18/19 outlook?** The service's new data management system will provide a greater level of detail to enable us to maintain the high percentage of bins collected on schedule and enable the service to be able to focus on resolving individual collection issues.

**Environ. Health & Licensing**

**ES406 % major non-compliances resolved (in rolling year)**

Rob Lewis / Emma Knight



Dec	75.0	90	80
Mar	93.3	90	80

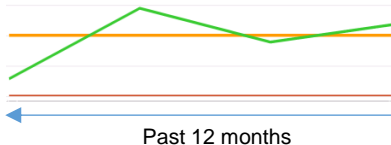
**How did we do?** The Q1 result was 'Amber', Q3 'Red' and Q2 and 4 'Green'.

**What was the context?** Although the Q3 result was below intervention, this was based on a small number of non-compliances (8) arising in the 12 months prior (6 of which had been resolved) which, in the context of the subsequent Q4 result is not a cause for serious concern. The Q4 result shows there has been an overall reduction in non-compliance during 17/18.

**18/19 outlook?** Target and intervention remain unchanged for 18/19 as we will continue to prioritise the resolution of major non-compliances to reduce the risk of harm to the public.

**ES401 % business satisfaction with regulation service**

Rob Lewis / Emma Knight



Dec	88.9	90	80
Mar	91.9	90	80

**How did we do?** Q1 and 3 results were 'Amber', whilst Q2 and 4 were 'Green'. Over the course of the year there was a total satisfaction figure of 88.9% (104 of 117 respondents) against a target of 90%.

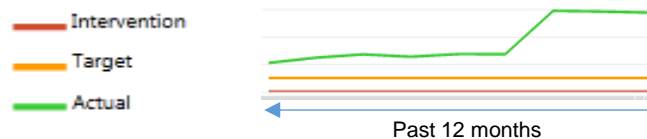
**18/19 outlook?** We will continue to engage constructively with businesses to maintain high levels of satisfaction.

PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
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Dev. Management

**PN510 % of major applications determined within 13 weeks or agreed timeline (designation period cumulative)**

Jane Green



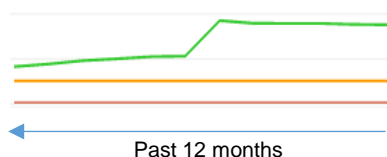
Jan	87.10	65	60
Feb	86.15	65	60
Mar	85.00	65	60

**How did we do?** Performance was better than target throughout for both PN510 and PN511. The changes in Oct are accounted for by the new designation period (see below for detail).

**What was the context?** Until Sep 2017 the figures provided for PN510 and PN511 aligned with MHCLG measurement criteria for designation over the two year period from Oct 2015 - Sep 2017. From Oct 2017 we have assumed that the 2018 designation period will follow the precedent set by previous periods and run from Oct 2016 - Sep 2018. Throughout 17/18 we have remained above target and intervention, which have been set in line with the designation threshold.

**PN511 % of non-major applications determined within 8 weeks or agreed timeline (desig. period cumulative)**

Jane Green

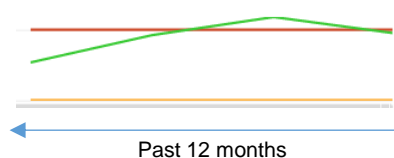


Jan	87.72	75	70
Feb	87.52	75	70
Mar	87.43	75	70

**18/19 outlook?** Performance indicators remain unchanged to continue to monitor performance against MHCLG criteria. Individual monthly determination times will also continue to be monitored at the service level, providing greater visibility to monthly changes in performance.

**PN512 % of appeals against major planning permissions refusal allowed (designation period cumulative)**

Jane Green



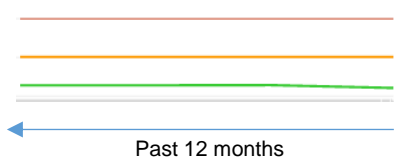
Dec	10.90	5	10
Mar	9.77	5	10

**How did we do?** PN512 performance exceeded intervention and designation threshold (see below for detail) in Q3. PN513 remained significantly better than target throughout.

**What was the context?** Until Dec 2017 PN512 and PN513 aligned with MHCLG criteria for designation by providing a cumulative percentage based on decisions made Apr 2015 - Dec 2017. By the end of this period we exceeded the designation threshold (see Dec result). Consequently MHCLG informed the Council that we are at risk of designation. We have responded, setting out the circumstances that we believe justify MHCLG excepting SCDC from designation, and await the outcome. From Jan 2018 we have assumed that the appeals designation period will follow the precedent set by previous periods and run from Apr 2016.

**PN513 % of appeals against non-major planning permission refusal allowed (designation period cumulative)**

Jane Green



Dec	1.35	5	10
Mar	0.98	5	10

**18/19 outlook?** Performance indicators remain unchanged to continue to monitor performance against MHCLG criteria.

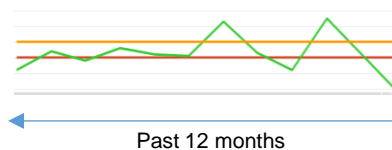


PI and PI owner and Month organised by Service Area	Actual	Target	Int.	Comments
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**PNC (directorate wide)**

**PN505 % customers satisfied with Planning and New Communities**

Jane Green



Jan	85	70	60
Feb	No result	70	60
Mar	41	70	60

**How did we do?** Variations in results were seen during 17/18 due to low volume of responses. The total satisfaction rate over the course of the year was 63%.

**What was the context?** The Planning Department investigates the nature of complaints and negative feedback to identify common themes and take action to address issues. The number of responses to the satisfaction survey remained low throughout the year (140 in total, including Feb during which no responses were received).

**17/18 outlook?** Arrangements for measuring and reporting customer satisfaction are being reviewed to ensure that measures of customer satisfaction provide useful insight into future service improvements. A new Customer Engagement Officer position is to be developed to support this work.

**Land Charges**

**SX025 Average Land Charges search response days**

Jane Green



Jan	6.3	8	10
Feb	8.6	8	10
Mar	3.8	8	10

**How did we do?** Performance was better than the 8 day target throughout 17/18, with the exception of Feb, which saw an increase to 8.6. Since Feb, performance has improved in line with management and service expectations/targets.

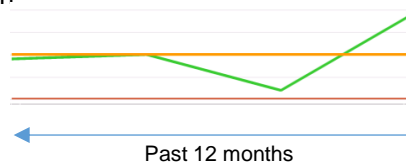
**What was the context?** Land charges have been free of any backlog for the entire year and have consistently performed better than target (with the exception of February).

**18/19 outlook?** Continuation of the good levels of performance seen throughout 18/19.

**Planning Policy**

**PN518 % of new homes permitted that are affordable home (on developments requiring affordable housing provision)**

Jane Green



Dec	32	40	30
Mar	49	40	30

**How did we do?** Q1 and 3 results were 'Amber' (although Q1 was only 1% below target). Q2 and 4 results were 'Green', meeting and exceeding the 40% target. Overall, 34% (1355 of 3974) of new homes permitted were affordable on developments requiring affordable housing provision in 17/18.

**What was the context?** This PI was introduced for 17/18 to measure new affordable home provision within the district. The target was set in line with the Council's commitment to seek 40% or more affordable housing (subject to continued development viability). The intervention was provisionally set at 30%. Q3's result included the 2350 homes granted planning permission at Cambourne West on the basis of 30% affordable homes provision (705 affordable homes). Following this, the increase in Q4 was due to a rural exception site delivering 100% Affordable Housing.