## MIDDLESBROUGH COUNCIL

## **OVERVIEW AND SCRUTINY BOARD**

## **8 DECEMBER 2015**

**BALANCED SCORECARDS: QUARTER TWO 2015/16** 

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#### **PURPOSE OF THE REPORT**

- 1. To provide an overview of the Council's performance at Quarter Two 2015/16 and responses of Outcome Areas to the issues outlined.
- 2. To provide an update on the development of Balanced Scorecard methodology and content during the 2015/16 pilot phase.

#### SUMMARY OF RECOMMENDATIONS

- That the responses of Outcome Areas and the Council's wider Change Programme to the performance issues outlined in the report are noted and potential impacts on the scrutiny work programme considered.
- 4. That progress in developing the Balanced Scorecard model during the pilot phase is noted.

#### **BACKGROUND AND EXTERNAL CONSULTATION**

## **Background**

- 5. On 7 October 2014, Executive approved the introduction of Balanced Scorecards across the Council, to replace the previous 'top-down' performance management framework by the end of March 2015.
- 6. Balanced Scorecards are central to the Council's new performance and risk management framework, approved by Executive on 14 July 2015, and will provide a single 'traffic light' view of performance across four perspectives Customer, Business, Finance and People at the Council's three senior management levels.

| Level | Descriptor  | Owned by           |
|-------|---|--------------------|
| 1     | Whole service level (i.e. the three outcomes that an Executive Director oversees) plus service specific items with corporate relevance. | Executive Director |
| 2     | Individual service area level (i.e. an outcome that an AD oversees) plus single unit items with a departmental relevance.               | Assistant Director |
| 3     | Individual unit level (i.e. an individual contributor to an outcome).   | Head of Service    |

- 7. The four perspectives are considered equally important to the Council's success, and reflect the four business skills of the Middlesbrough Manager Competency Framework. In essence, Balanced Scorecards will answer the question: what percentage of its targets is the Council achieving overall?
- 8. Scorecards are being introduced initially on a post-quarter basis (in line with the previous performance management framework), but the Council aspires to move to 'real time' generation of Scorecards in due course.
- 9. Standard measures have been included in each quadrant of every Scorecard to ensure appropriate comparability between the performance of departments and services, as follows:

| Customer   | Business   |
|--|--|
| <ul> <li>Customer satisfaction measure(s)</li> <li>Number of upheld complaints (contextual only)</li> </ul>  | <ul> <li>Change projects projected to meet milestones</li> <li>Capital projects projected to meet milestones</li> <li>Risk mitigation actions on target</li> </ul>   |
| Finance  | People   |
| <ul> <li>Projected performance against revenue budget</li> <li>Performance against capital budgets</li> <li>Projected attainment of savings targets</li> </ul> | <ul> <li>Staff with current appraisal</li> <li>Managers meeting Level 3+ in Middlesbrough Manager</li> <li>Employees meeting Level 3+ in Middlesbrough Employee</li> <li>Sickness absence</li> <li>Staff satisfaction</li> </ul> |

- 10. Some of the above are new measures and information systems will be developed to ensure performance can be reported during 2015/16. Similarly, standard targets are in place for some standard measures, and others will be developed in during the coming year.
- 11. Services have discretion over the other measures to be included in Scorecards, and as such Assistant Directors have identified the majority of measures and targets included in the first iteration of Scorecards.
- 12. The Balanced Scorecard approach is being piloted in 2015/16 and as such the model and its measures and targets will be subject to refinement during the year. There will be a number of drivers for this refinement process including:
  - the need to refine scorecards so that they continue align with the with the high level outcomes identified in the three-year Outcome Delivery Plans which are in development for each service area
  - changes arising as a result of ongoing cultural / enabling projects within the Council's Change Programme such as the Customer Strategy and the Commercial Strategy
  - the ongoing review of the pilot scorecards process to identify where changes are required to strengthen the process.

## **Progress to date**

13. Scorecards have now been in place since Year-End 2014/15 and a timetable of officer performance clinics at the management levels set out in paragraph six is in place to discuss outturns and agree resulting actions. Post-Quarter Two a challenge and review

- session with the Chief Executive has been implemented to assess key issues arising from the consolidated Scorecard report. The first session focused on Outcome 4.
- 14.A number of changes to measures in the pilot Scorecards have been implemented since the Year-End 2014/15 report and are outlined at Appendix 1. The scoring mechanism used for Scorecards has also been simplified. The revised mechanism is attached at Appendix 2.
- 15. Within Quarter Two, the Council revised its Strategic Risk Register to reflect its agreed Strategic Plan and Outcome Delivery Plans (outlined at Appendix 3). Progress against milestones for planned mitigation actions identified in the Strategic Risk Register will be tracked through the standard Scorecard measure identified at paragraph nine from Quarter Three 2015/16, and the revised Strategic Risk Register republished in quarterly reports (outlining changes) from that report onwards.
- 16. The first 2015/16 review of the Capital Programme, approved by Executive on 3 November 2015, provided for a revised capital allocation per Outcome Area as outlined below.

| Outcome Area                                  | 2015/16 (£m) | 2016/17 (£m) | 2017/18 (£m) |
|---|--------------|--------------|--------------|
| 1 Economic Development                        | 27.237       | 35.079       | 4.603        |
| 2 Supporting Communities                      | 0.042        | 0            | 0            |
| 3 Public Health                               | 0            | 0            | 0            |
| 4 Learning & Skills                           | 5.149        | 2.181        | 0.300        |
| 5 Safeguarding & Children's Care              | 0            | 0            | 0            |
| 6 Social Care                                 | 2.652        | 1.098        | 0.060        |
| 7 Environment, Property & Commercial Services | 7.227        | 6.031        | 0.100        |
| 8 Finance & Investment                        | 0            | 0            | 0            |
| 9 Organisation & Governance                   | 5.594        | 3.047        | 0            |
| Total   | 47.901       | 47.436       | 5.063        |

- 17. Work has since been undertaken to profile this expenditure and set associated milestones for the delivery of approved capital projects. The capital programme identifies 322 individual projects, grouped into 118 project areas. Projected expenditure against profile for these projects will now be reported to LMT on a monthly basis. In addition to this, progress against milestones for 62 key capital projects (listed at Appendix 4) will be monitored at the same frequency. This list of key projects has been determined as those key to the delivery of Outcome Delivery Plans, and excludes cyclical or planned maintenance budgets or demand-led capital budgets.
- 18. Progress against the capital programme will be tracked through Balanced Scorecards. Projected expenditure against capital budget is included within this report and shows that the 2015/16 budget is currently projected to be 25% underspent this year. Work is currently ongoing to identify what proportion of the projected underspend is underprofiling or slippage, and what proportion may no longer be required and it is expected that performance against this measure will improve by the end of Quarter Three. In addition, the Council is currently undertaking a review of its capital programme and the outcome of both exercises will be included in the next iteration of the Strategic Plan, to be considered by Council in March 2016. Performance against milestones for key

- capital projects will be included within Balanced Scorecards from Quarter Three 2015/16.
- 19. Discussions on the Quarter Two Balanced Scorecards have identified further potential changes that will be explored within Quarter Three to assess whether they would strengthen the process including:
  - implementing a minimum and maximum number of measures for each of the four quadrants; and
  - weighting measures and / or quadrants or implementing a 'limiting judgement' approach to ensure that it is not technically possible to significantly under-perform on a key measure (such as expenditure against budget) or a single quadrant yet still have a Green rating overall.

## **Overall performance**

20. The following table sets out performance at the Quarter Two 2015/16. Performance overall for the Council is **Amber** at 69%, compared with 74% for Quarter One. The difference is explained principally through the first inclusion of performance against the projected performance against capital budget KPI, which demonstrates a significant projected underspend at the end of Quarter Two.

| Level                              | Customer | Business | Finance | People | Overall |
|------------------------------------|----------|----------|---------|--------|---------|
| Council overall                    | 76%      | 74%      | 44%     | 80%    | 69%     |
| Level 1 – Departments              |          |          |         |        | ,       |
| Economic Development & Communities | 75%      | 81%      | 56%     | 77%    | 72%     |
| Wellbeing, Care & Learning         | 81%      | 65%      | 25%     | 71%    | 61%     |
| Commercial & Corporate Services    | 73%      | 75%      | 50%     | 91%    | 72%     |
| Level 2 - Outcome Areas            |          |          | ,       |        | ,       |
| Economic Development               | 75%      | 67%      | 50%     | 100%   | 73%     |
| 2. Supporting Communities          | 100%     | 100%     | 50%     | 40%    | 73%     |
| 3. Public Health                   | 60%      | 80%      | 75%     | 90%    | 76%     |
| 4. Learning & Skills               | 64%      | 75%      | 0%      | 63%    | 51%     |
| 5. Safeguarding                    | 100%     | 42%      | 50%     | 90%    | 71%     |
| 6. Social Care                     | 100%     | 80%      | 33%     | 60%    | 68%     |
| 7. EPCS                            | 90%      | 89%      | 33%     | 83%    | 74%     |
| 8. Finance & Investment            | 33%      | 58%      | 75%     | 100%   | 67%     |
| 9. Organisation & Governance       | 83%      | 67%      | 50%     | 90%    | 73%     |

- 10. The Quarter Two position is set out at Appendix 5, which includes Departmental and Outcome Area Scorecards, and detailed information for each Outcome Area.
- 11. The financial information in the Scorecards reflect the Quarter Two Revenue Outturn report, which shows a projected overall net saving of £1.679m, representing 1.4% of the budget.

## Outcome Area performance and resulting improvement activity

12. The following section sets out key achievements and areas of under-performance in Level 2 (Outcome Area) Scorecards at Quarter Two 2015/16. It also sets out resulting improvement activity identified by departments, and the Council's wider Change Programme.

## **Outcome 1: Economic Development**

13.Overall performance for Economic Development was rated Amber. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

14. Performance in the Customer quadrant was Green, with the three processing of planning and building control applications KPIs all performing above target at Quarter Two. However, the number of children killed or seriously injured in road traffic accidents was again rated red at the end of the quarter. In the first six months of the year, nine children were seriously injured against a target of four, meaning that that the annual target has now been exceeded. All of these accidents happened in different locations in Middlesbrough, and as such there has been no particular cluster of accidents at a specific geographical location. The majority of incidents involved very young (aged under 7) or young pedestrians (aged 7 to 17) stepping into the road without due care and attention.

#### Business

- 15. Performance in the Business quadrant was Amber. The Outcome Area is predicted to overachieve against its target for the number of new homes built in the town this year both overall and for those that will be rated Council Tax Band D or higher, and its target for bringing empty dwellings back into use. Performance against these measures are critical to the success of this Outcome and contribute positively to the Council's overall revenue position.
- 16. Three change projects within this outcome area were re-profiled during 2014/15 and are again demonstrating slippage against timescales:
  - an assessment of the Alternative Delivery Model options for Cultural Services is currently being completed, with the assistance of external expertise;
  - an ADM assessment for Transport and Infrastructure is currently being completed following the LGA Peer Challenge of the service; and
  - the Community Transport project has been delayed slightly to ensure WCL senior managers are able to be fully engaged in proposals for change.
- 17. In respect of key capital projects identified in the Scorecard:
  - The LED streetlight replacement scheme has recovered from under-performance in Quarter One and was 1% ahead of target at Quarter Two.
  - Planning permission has not yet been sought for the Middlehaven Dock Bridge development, which puts this project in delay. The project is reliant on national funding from the Local Growth Fund process. Tees Valley Unlimited has informed

the Council that only single year allocations have been secured to date, so as the project has two year timeline it has been paused until early 2016, when it is anticipated the additional funding will be confirmed. Works on the design and ground investigations are continuing in the interim, and no significant delivery implications have been identified. It is expected that planning permission will now be sought around May 2016.

18. Performance against these projects will be tracked through the capital projects milestones KPI from Quarter Three, to avoid duplication.

#### **Finance**

- 19. Performance in the Finance quadrant was Amber.
  - The Outcome Area is on target to achieve 97% of Change Programme savings targets for 2015/16, and showed a predicted overspend of 1% (£81,000) against the revenue budget at Quarter Two. The principal source of the projected overspend is the net pressure of £190,000 forecast for the Integrated Transport Unit, following increased demands on the service from the Wellbeing, Care and Learning Directorate.
  - The capital programme allocation for the Outcome Area is currently predicted to underspend by 21% against the 2015/16 profile. This issue will be addressed as part of the ongoing review of the capital programme outlined at paragraph 18.

#### People

20. Performance in the People quadrant was Green, with all KPIs meeting targets at the end of Quarter Two.

## Resulting actions

- 21. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will review its Change Programme and Capital Programme projects to ensure that milestones and expenditure profiles are in place as appropriate and that requested changes are presented to LMT where appropriate.
  - The Outcome Area will review existing road safety initiatives for children to ensure fitness for purpose in the light of performance against the KPI for children killed or seriously injured in road traffic accidents. Current initiatives include: all nursery schools in Middlesbrough receiving "children's traffic club" information, all Year 3 children receiving pedestrian training, and 'Bikeability' training being offered to all pupils from Years 4 to 6.

## **Outcome 2: Supporting Communities**

22. Overall performance for Supporting Communities was rated **Amber**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer and Business

23. Performance in the Customer and Business quadrants was Green, with all KPIs on target at the end of Quarter Two, demonstrating a very high level of performance.

#### **Finance**

- 24. Performance in the Finance quadrant was Amber:
  - The Outcome Area is on target to achieve 94% of Change Programme savings targets for 2015/16, and showed a predicted underspend of 6% (£275,000) against the revenue budget at Quarter Two. The principal source of the projected underspend relate to vacancies and staffing budget underspends. Savings are also forecast on supplies and service costs and as a result of an increase in nursery education grant.
  - The capital programme allocation for the Outcome Area is currently predicted to underspend by 29% against the 2015/16 profile. This issue will be addressed as part of the ongoing review of the capital programme outlined at paragraph 18.

## People

25. Performance in the People quadrant was Red, and there remain some people management challenges within the Outcome Area. Sickness absence was 45% over target at the end of Quarter Two. A number of employees are currently off on long-term sick or with repeated periods of significant absence, some of which are potentially related to issues of capability and / or suitability to their current roles. The Outcome Area has engaged proactively with Human Resources to address the people management issues identified and have recently implemented a regular programme of specific case management, briefings for managers and staff, and are addressing those most concerning cases at a senior level. Some of the cases being managed will take time to address effectively, but a significant reduction in sickness absence is seen as achievable, given the steps being taken.

#### Resulting actions

- 26. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will continue to implement its action plan to resolve the people management issues identified above.
  - The Outcome Area will review its Capital Programme allocation to ensure that expenditure profiles and where appropriate milestones are in place and that requested changes to these are presented to LMT where appropriate.

## Scorecard development

27. The Balanced Scorecard for Supporting Communities will be fully revised during 2015/16. As measuring the impact of preventative work is traditionally difficult, an incremental change model is to be developed with support from the Government through the Delivering Differently programme. The intention of this model is to measure impact against major life outcomes on a more incremental basis i.e. if the right actions are taken at age 1, what would be the likely observed behaviour at age two etc. This

would allow the effectiveness of interventions to be tracked more effectively throughout an individual's life, and close the gap between taking preventative action and agreeing that a negative life outcome has been avoided. Once complete, this work will be reflected in the revised Balanced Scorecard.

#### **Outcome 3: Public Health**

28. Overall performance for Public Health was rated **Green**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

- 29. Performance in the Customer quadrant was Amber overall. Performance on smoking cessation '4-week quitters' KPI was red. The service has commissioned a pharmacy to provide stop smoking service aimed at TEWV staff this will increase numbers setting a quit date and successfully quitting. In order to increase access to service for BME community, specialist provision has been increased by commissioning two additional providers. In addition, a Service Development Improvement Plan has been agreed with the provider service to monitor four-week quitting activity, receive regular updates and highlight areas for improvement.
- 30. Performance on rehab completions for non-opiate addictions is currently amber, mainly due to low treatment numbers. Plans are in place to increase numbers via initiatives such as the community gym and the health and wellbeing hub. There is an action plan in place to improve pathways into treatment via the hospital through the HILT team. The Payment by Results targets for the substance misuse services have been updated to increase numbers in treatments for non-opiates.
- 31. Breast and Cervical cancer screening performance is amber. A multi-agency strategic group has been established to join up local response to tackling cancer and this will be picked up within the work plan for the group. A targeted high profile cervical screening campaign has been live since May 2015 based on insight from target groups. A full evaluation of this will be completed December 2015.
- 32.NHS Health checks offered were running at almost 50% under target at the end of Quarter One 2015/16 (the most recent data available). Tees Valley Public Health Shared Service leads on the implementation of the NHS Health Check on behalf of the four local authorities. The clinical team are currently working with GP practices to increase the uptake of the check. There are also plans in place to undertake community screening sessions to increase access for targeted population groups. The Public Health Partnership Board will monitor uptake levels and liaise with TVPHSS. Middlesbrough will be setting up a steering group chaired by the clinical lead to enhance utilisation of the TVPHSS Middlesbrough service resource.

#### **Business**

33. Performance in the Business quadrant was Green, with the majority of KPIs on or exceeding targets at Quarter Two. The exception was that the number of tobacco control enforcement exercises were running at 16% below target at the end of Quarter Two due to vacancies within the Public Protection service. A trading standards officer,

funded from the public health grant, has now been appointed and will lead on tobacco control enforcement visits going forward.

#### Finance

34. Performance in the Finance quadrant was Green. The Outcome Area is on target to achieve 99% of Change Programme savings targets for 2015/16, and showed a predicted underspend of -722% (£148,000) against the revenue budget at Quarter Two. The source of the projected underspend is staffing budget savings within Public Protection.

#### People

35. Performance in the People quadrant was Green, with the all KPIs either on target or within agreed tolerances.

## Resulting actions

- 36. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will continue to implement its action plans to improve performance against customer KPIs, as outlined above, as part of the ongoing development of the Public Health Outcome Area.

## Scorecard development

37. There remain a number of challenges around customer measures and the availability of timely data for this Outcome Area. The Balanced Scorecard for Public Health will be fully revised during 2015/16 to make clear the distinction between population-level health measures, which will only improve significantly over the medium-to-long-term, and measures that demonstrate or project the current or future effectiveness of the Council's Public Health service.

## **Outcome 4: Learning and Skills**

38. Overall performance for Learning and Skills was rated **Amber**. A challenge and review session was hosted by the Chief Executive to clarify issues and identify improvement actions for this Outcome. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

39. Performance in the Customer quadrant was Amber. The rate of permanent exclusions from school stood at three times the targeted level for the 2014/15 school year, and five times the national average. This is an area the Outcome Area seeks to influence but does not control. Schools actions in this area are governed by their own school performance measures from OfSTED around achievement and attendance, and their own behaviour models. A Behaviour Partnership has been established within the Middlesbrough Achievement Partnership (MAP) to address these issues. All Middlesbrough schools are involved in this partnership, which is supported by an allocation of £850,000 from the School Management Forum and is chaired by a

secondary school Head Teacher. A Behaviour Partnership Manager will shortly be appointed by the Council and an action plan is in place to improve outcomes in this area.

- 40. Educational attainment results for 2014/15 were published in Quarter Two. Key Stage 4 (GCSE) results are provisional and the final results will be confirmed by the end of 2015.
- 41. Performance on phonics de-coding and Key Stage 2 were on target or within agreed tolerances. Improvement was delivered in writing, maths, Grammar, Punctuation and Spelling (GPS) and Reading, Writing and Maths combined at level 4+. However, there have also been some dips, particularly in reading and at higher levels in Maths. For some measures this is consistent with North East and national performance; however, in others the gap between regional and national average performance has widened.
- 42. Middlesbrough's performance against the absolute Key Stage 4 KPI for Middlesbrough pupils attaining 5 A\*-C GCSEs including English and maths was down around one percentage point from 2014. A summary of performance in Middlesbrough schools and comparator areas is set out below:

| School                                  | Candidates | %    |
|---|------------|------|
| National (All Schools)                  | 612346     | 52.8 |
| National (State Funded Schools)         | 553839     | 56.1 |
| North East                              | 27077      | 54.4 |
| Middlesbrough LA (State Funded Schools) | 1398       | 44.8 |
| Acklam Grange School                    | 266        | 44.0 |
| Beverley School                         | 12         | 8.3  |
| Macmillan Academy                       | 221        | 67.4 |
| Ormesby School                          | 144        | 32.6 |
| Outwood Academy Acklam                  | 157        | 52.2 |
| Prince Bishop School                    | 16         | 0.0  |
| Priory Woods School                     | 10         | 0.0  |
| The King's Academy                      | 197        | 39.6 |
| Trinity Catholic College                | 229        | 52.4 |
| Unity City Academy                      | 124        | 25.8 |

- 43. While performance against the absolute Key Stage 4 measure is disappointing, performance against the rates of progression measures outlined in the Scorecard are generally meeting target, with the exception of students making two levels of progress between Key Stages 2 and 4 in maths. Discussions with individual schools and with groups of secondary head teachers identified that the following factors that contributed to Key Stage 4 outcomes:
  - Shifting grade boundaries Schools report significant changes in grade boundaries set by exam boards. Some schools believe that there have been increases of up to 10% in the thresholds required to achieve higher grades. Head teachers suggest that predictions accurately forecasted the marks that students would get but, because of these changes, they were not accurate in forecasting the

correct grades. Grade boundary changes disproportionately impact on disadvantaged areas and disadvantaged schools, with significant percentages of students who are lower ability or who have only just crept into a level at the end of Year 6. These students have further to travel and teachers tend to prepare them just about get over the line. When the line moves even slightly, the impact for these students is significant. For example, at The King's Academy grade boundary changes resulted in sixteen fewer students achieving a C grade in maths than would have done so a year earlier.

- Inconsistencies in marking Schools believe that outcomes have been affected by poor marking. All schools have submitted scripts for remarking. Macmillan alone has submitted 200 scripts. Of the first batch of English scripts submitted twenty were returned without a single change and the twenty-first saw a 28 mark uplift. The King's Academy saw student grades increased following submission, except at the C/D boundary where no change was recommended.
- Individual school legacy Two schools, Ormesby and Unity City, have been going through a major transformation which has seen significant staff turnover, with 30 new staff starting at Unity this term and a 60% turnover in teaching staff at Ormesby over the last twelve months. In both cases head teachers believe that their new staff will be able to provide higher quality teaching and learning than teachers previously employed at these schools. Year 11 students will have had most of their teaching under previous regimes and at the end of their courses will have been taught by teachers who were not part of the school going forward. A recent monitoring inspection of Ormesby suggests that the quality of teaching is improving rapidly.
- Attendance Attendance has been highlighted as an issue at three schools, Ormesby, Unity and The King's Academy. Support is being provided to tackle this issue.
- Poor specification choice Most of the issues reported by schools this year centred on Edexcel specifications and English in particular. A number of schools followed the iGCSE specification issued by Edexcel. This syllabus offers a larger coursework component (60%) and a speaking and listening element that still counts towards the GCSE grade. However, the skills associated with success are not practiced in other subject areas in school so that there is little reinforcement. Schools that followed this specification saw coursework moderated down despite experienced teachers replicating approaches than in previous years. This issue is being picked up with the Chief Examiner.
- Staff changes One school, Trinity, lost a key maths teacher at Easter and the school believes this factor resulted in a key group underperforming. Of the fourteen students predicted to gain a C grade, only two achieved this outcome.
- Quality of teaching and learning Trinity believes that it offers excellent provision
  in English and that this has contributed to strong outcomes. The same students do
  less well in maths, where teaching is not as consistently strong. Elsewhere legacy
  issues also impacted on the quality of teaching. In order for students to achieve
  outstanding results schools need outstanding teachers and in too many there is little
  externally validated evidence that outstanding teaching is commonplace.

#### Business

44. Performance in the Business quadrant was Green, with the majority of KPIs on target or within agreed tolerances. Prospects for future improvement in educational attainment are strong following the recent positive school improvement inspection by OFSTED and the Council's ongoing work with its partners in the MAP. Secondary

consultants and Specialist Leaders of Education accessed through the Teaching School Alliances, supported by school improvement advisers, continue to work closely with school leaders to help schools prepare for inspection and improve pupil outcomes. The School Effectiveness Strategy 2014-16 has established a challenging target of 90% of local schools judged 'Good' or better by OfSTED to drive improved attainment outcomes. Current performance overall against this target is 72.9%. The current breakdown across sectors for this measure is 88% in the primary sector, 57% in the secondary sector and 80% in the special sector.

#### Finance

- 45. Performance in the Finance quadrant was Red.
  - The Outcome Area is on target to achieve 28% of Change Programme savings targets for 2015/16, and showed a predicted overspend of 32% (£434,000) against the revenue budget at Quarter Two. The principal sources of the overspend are a reduction in Education Services grant due to the conversion of eleven schools to academy status, together with the in-year devolution of specialist administration to Outcome Areas.
  - The capital programme allocation for the Outcome Area is currently predicted to underspend by 34% against the 2015/16 profile. This issue will be addressed as part of the ongoing review of the capital programme outlined at paragraph 18.

## People

46. Performance in the People quadrant was Amber, with the majority of KPIs on target or within agreed tolerances at the end of the Quarter. However, the Outcome Area has been unable to effectively implement the Council's new appraisal system in 2014/15. Work is now underway to ensure that all employees receive an appraisal between January and March 2016, and this will be driven by the newly-appointed Assistant Director of Learning and Skills.

#### Resulting actions

- 47. The key actions resulting from consideration of performance at Quarter Two, as agreed with the Chief Executive, are as follows:
  - The Outcome Area will work with its partners in MAP to ensure that the new Behaviour Management Partnership action plan includes the following: reviews target setting for exclusions to ensure that they are challenging but SMART; tracks exclusions by schools to ensure appropriate challenge, including knock-on effects to other services; reviews approach to early intervention to prevent future exclusions and sets out appropriate routes for excluded children, mapping and reviewing the current offer.
  - The Outcome Area work with its partners in MAP to ensure that future Key Stage 4 predictions include an appropriate buffer to account for optimism bias in relation to grade boundaries, for example, and to implement improvement plans in relation to the issues identified above, including an improvement action plan for maths improvement, a plan to improve transition to secondary following a conference on this issue arranged for December 2015 and engagement with the DFE Regional Commissioner on support available for Middlesbrough Schools.

- The Outcome Area will review its Capital Programme allocation to ensure that expenditure profiles and where appropriate milestones are in place and that requested changes to these are presented to LMT where appropriate.
- The Outcome Area will engage with Human Resources to develop and implement an action plan to ensure that appraisals are completed in line with corporate timescales in future.

## Scorecard development

48. The majority of customer and business indicators within this Scorecard are updated annually following the publication of examination results across Key Stages. Proxy measures to demonstrate the impact of the Council's services on attainment outcomes will be introduced in future Scorecards.

## Outcome 5: Safeguarding and Children's Care

49. Overall performance for Safeguarding and Children's Care was rated **Amber**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

- 50. Performance in the Customer quadrant was Green. At 108 per 100,000 population, the rate of first time entrants to the Youth Justice System was 75% under target at the end of Quarter Two.
- 51. Children Looked After per 10,000 population increased from 111.9 at Quarter One to 114.2 at Quarter Two, remaining over 90% above the national average of 60. The number of Looked After Children remains high but relatively stable; however, the increase in Middlesbrough has been very low in comparison with other councils both locally and nationally. Reducing numbers to those similar to statistical and regional neighbours can only be achieved incrementally, and the Outcome Area is currently establishing revised targets for this KPI.

#### **Business**

- 52. Performance in the Business quadrant was Red. Looked after children cases reviewed within timescales stood at 50.1% at the end of Quarter Two against a target of 90%. This figure is currently under-reported due to difficulties presented in by the implementation of the new software application within the Outcome area. It is anticipated that these issues will be resolved by the end of Quarter Three and performance will be in line with target. Performance against the continuous assessment within 45 days KPI currently stands at third highest in the region and highest among the Council's statistical neighbour group.
- 53. The national Adoption Scorecard remains a significant challenge for the Outcome Area, and measures have been put in place to monitor and track adoption plans to ensure they are timely and producing good outcomes for children more quickly. As a consequence it is anticipated that a number of children are likely to be adopted within the near future, improving performance in the coming quarters.

54. Progress against the Social Care Transformation Workstream is currently under review as part of the overall review of the Council's Change Programme.

#### Finance

55. Performance in the Finance quadrant was Amber. The Outcome Area is projected to achieve only 65% of Change Programme savings targets for 2015/16, but showed a predicted overspend of 1% (£271,000) against the revenue budget at Quarter Two, which is within agreed tolerances. Significant pressures include the Independent Fostering Agency, Residential Placements and the in-year devolution of specialist administration to Outcome Areas. This has been partially off-set by use of the contingency budget for increases in demand.

#### People

56. Performance in the People quadrant was Green, with all KPIs on target or within tolerance at the end of Quarter Two.

## Resulting actions

- 57. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will establish SMART targets for the Children Looked After per 10,000 population KPI, to be included in future Scorecards.
  - The Outcome Area will implement a mitigation plan to ensure that cases are recorded in a timely manner on LCS to ensure that management information is accurate.
  - The Outcome Area will implement its plans to ensure more timely adoptions providing good outcomes from children, moving towards a performance level more in line with the national target.
  - The Outcome Area will review its Change Programme projects to ensure that milestones and expenditure profiles are in place as appropriate and that requested changes are presented to LMT where appropriate.

#### **Outcome 6: Social Care**

58. Overall performance for Social Care was rated **Amber**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

59. Performance in the Customer quadrant was Green, with all KPIs on target at the end of Quarter Two, demonstrating a very high level of performance. The annual Adult Social Care Survey will be undertaken in Quarters Three and Four of 2015/16, and the Scorecard will be updated when the results of the survey are available.

#### **Business**

60. Performance in the Business quadrant was Green, with all business-as-usual KPIs on target at the end of Quarter Two, again demonstrating a very high level of performance.

Progress against the Social Care Transformation workstream is currently under review as part of the overall review of the Council's Change Programme.

#### Finance

- 61. Performance in the Finance quadrant was Red.
  - The Outcome Area is on target to achieve only 86% of Change Programme savings targets for 2015/16, but showed a predicted underspend of 14% (£2,130,000) against the revenue budget at Quarter Two. The principal source of the projected underspend is a lower than anticipated estimated call on the contingency budget for increases in demand.
  - The capital programme allocation for the Outcome Area is currently predicted to underspend by 27% against the 2015/16 profile. This issue will be addressed as part of the ongoing review of the capital programme outlined at paragraph 18.

#### People

62. Performance in the People quadrant was Amber, and there remain some people management challenges within the Outcome Area. Services were significantly below the 95% target for completion of employee appraisals by 30 September, and work is now underway to ensure that all employees receive an appraisal between January and March 2016. Sickness absence was approximately one day per employee higher than the target of 3.75 days at the end of Quarter Two, and the reasons for this are currently under review.

## Resulting actions

- 63. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will review its Change Programme and Capital Programme projects to ensure that milestones and expenditure profiles are in place as appropriate and that requested changes are presented to LMT where appropriate.
  - The Outcome Area will engage with Human Resources to develop and implement an action plan to resolve the people management issues identified above.

## **Outcome 7: Environment, Property and Commercial Services**

64. Overall performance for Environment, Property and Commercial Services was rated **Amber**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

## Customer and Business

65. Performance in the Customer quadrant was Green, and is largely excellent, particularly in the areas of street cleanliness and recycling performance, which is very important to local residents. Performance is also excellent in those areas of statutory health and safety compliance within the Council's staff and public building portfolio, ensuring safe, compliant and well maintained public buildings for all users.

- 66. When last measured (2013), customer satisfaction with leisure services stood at 50%, which was 5 percentage points lower than the target at that time. This survey will be republished during 2015. Previous QUEST assessments have suggested that significant improvements in customer satisfaction would be difficult to achieve without capital investment in the service. It is therefore expected that the significant improvement made to the town's leisure offer through the development of the new Prissick Sport Village along with further investment in the Neptune and Rainbow facilities will increase satisfaction with leisure services significantly. The target for this indicator will be adjusted accordingly to ensure future targets are sufficiently challenging. The performance management framework for the proposed Leisure Trust arrangement will include all appropriate customer satisfaction and service performance measures.
- 67. Attendances at leisure sites very less than 50% of the annual target at the end of Quarter Two. However, based on seasonal profiling and historical trend data it is anticipated that the year-end target will still be achieved.
- 68. Surveys to measure customer satisfaction with public buildings and employee satisfaction with office accommodation will be undertaken in Quarters Three and Four of 2015/16 and the Scorecard will be updated when the results of the survey are available.

#### **Finance**

- 69. Performance in the Finance quadrant was Red:
  - The Outcome Area is on target to achieve only 86% of Change Programme savings targets for 2015/16, and showed a predicted overspend of 1% (£199,000) against the revenue budget at Quarter Two, which is within agreed tolerances. Significant pressures include the insourcing of the kerbside recycling contract.
  - The capital programme allocation for the Outcome Area is currently predicted to underspend by 29% against the 2015/16 profile. This issue will be addressed as part of the ongoing review of the capital programme outlined at paragraph 18.

## People

70. Performance in the People quadrant was Green. All KPIs bar one were performing above target at the end of Quarter Two. RIDDOR reportable accidents in the workplace were running at almost four times the targeted level at the end of Quarter Two. In consultation with health and safety colleagues and other local authority partners it is felt that this indicator does not provide sufficient context in relation to the way in which the service manages staff training and development and responds to accidents and emerging health and safety issues. This indicator will therefore be revisited for future reports.

### Resulting actions

- 71. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will review its Capital Programme allocation to ensure that expenditure profiles and where appropriate milestones are in place and that requested changes to these are presented to LMT where appropriate.

 The Outcome Area will review the RIDDOR KPI and provide an appropriate replacement measure to be reported in future Balanced Scorecards.

#### **Outcome 8: Finance and Investment**

72. Overall performance for Finance and Investment was rated **Amber**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

73. Performance in the Customer quadrant was Red, with two benefits KPIs significantly off-target at the end of Quarter Two. The percentage of appeals actioned within 4 weeks of receipt was almost 40 percentage points below the target of 85% at the end of the quarter, as a result of a significant increase in workload generated as a result of Government initiatives. This issue has been addressed in the last quarter and work is now moving towards a steady state and actioned within the 4 week target. Capability for customers to self-serve change in circumstances was removed due to system issues in mid-August 2015, and as a result the target for this measure was not met Quarter Two. This issue remains unresolved, so the annual target is unlikely to be achieved.

#### Business

- 74. Performance in the Business quadrant was Amber, with the majority of KPIs on target at the end of Quarter Two. Some slippage has been identified in a number of Change Programme projects within the Outcome Area. Progress against these projects is currently under review as part of the overall review of the Council's Change Programme.
- 75. The percentage of Council Tax collected at the end of Quarter Two was over 2 percentage points under target. However, the collection rate was comparable to that at the same stage in 2014/15, suggesting the annual target remains achievable.
- 76. Performance of the Teesside Pension Fund was 1.9% under the 'Customised Benchmark' for such funds across the three-year period from July 2012 to June 2015. The asset mix of the Fund differs significantly from the benchmark in placing more investment in UK and Far East equity and less in bonds. As bonds have performed well over the period and equity investments less so, the Fund therefore performed less well than the benchmark.

#### Finance

77. Performance in the Finance quadrant was Green. The Outcome Area is on target to achieve 95% of Change Programme savings targets for 2015/16, and showed a predicted underspend of 8% (£460,000) against the revenue budget at Quarter Two. The principal sources of the projected underspend include savings from the insourcing of services from Mouchel, an increase in recovery of housing benefits overpayments and court cost recoveries for Council Tax.

## People

78. Performance in the People quadrant was Green, with all KPIs performing above target at the end of Quarter Two.

## Resulting actions

- 79. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will continue to work with suppliers to ensure that the capability for customers to self-serve change in circumstances for benefits is restored as soon as possible.
  - The Outcome Area will determine whether the 'average number of days for the Council to receive payment' KPI is measurable through the new finance and procurement system. If so, a target will be set and measurement of the KPI will commence from Quarter Four 2015/16.

## **Outcome 9: Organisation and Governance**

80. Overall performance for Organisation and Governance was rated **Amber**. Performance for individual quadrants and issues identified in associated discussions with the Outcome Area are set out below.

#### Customer

81. Performance in the Customer quadrant was Green, with all KPIs on target or within agreed tolerance levels at the end of Quarter Two.

#### **Business**

82. Performance in the Business quadrant was Amber, due to slippage on a number of Change Programme projects within the Outcome Area. Progress against these projects is currently under review as part of the overall review of the Council's Change Programme.

#### **Finance**

- 83. Performance in the Finance quadrant was Amber:
  - The Outcome Area is on target to achieve 94% of Change Programme savings targets for 2015/16, and showed a predicted underspend of 4% (£327,000) against the revenue budget at Quarter Two. The principal source of the projected underspend is savings from the insourcing of services from Mouchel.
  - The capital programme allocation for the Outcome Area is currently predicted to underspend by 31% against the 2015/16 profile. This issue will be addressed as part of the ongoing review of the capital programme outlined at paragraph 18.

#### People

84. Performance in the People quadrant was Green, with all KPIs on target or within agreed tolerance levels at the end of Quarter Two.

## Resulting actions

- 85. The key actions resulting from consideration of performance at Quarter Two are as follows:
  - The Outcome Area will review its Change and Capital Programme projects to ensure that expenditure profiles and where appropriate milestones are in place and that requested changes to these are presented to LMT where appropriate.

## **Crosscutting performance issues**

#### Customer

- 86. Following approval by Executive in June 2015, constituent projects and governance arrangements for the implementation of the Council's Customer Strategy have been agreed by Leadership Management Team. The implementation of the strategy is now underway and briefings for elected members will be provided from Quarter Three.
- 87. A significant amount of work has been undertaken in the quarter to develop Support Service Promises (as agreed by Executive in November 2014) and finalise agreement of these between Support Services and Outcome Areas. It is anticipated that Service Promises will now be implemented from October 2015. Once implemented, the satisfaction of Outcome Areas with Support Services will be assessed on a quarterly basis and reported in future Balanced Scorecards.

#### **Business**

88. In July 2014, Executive endorsed three-year delivery plans for each Outcome Area of the Council, outlining how services would transform within the 2015-18 period to deliver outcomes. These will be finalised and presented to Council for approval later in Quarter Three 2015. Responsible Outcome Areas will be seeking feedback from Overview and Scrutiny Board and Scrutiny Panels on Outcome Delivery Plans and key policy developments throughout the coming year.

#### People

- 89. The Council has commenced the implementation of a new appraisal system to embed the Middlesbrough Manager and Employee competency frameworks into working practice. Three standard targets within the Balanced Scorecard People quadrant relate to the appraisal system: (i) the percentage of employees that have been appraised within the past 12 months, with a target of 95% (to account for maternity leave etc); and (ii) the percentage of managers and employees scoring better than an average of 3.00 (i.e. satisfactory) within appraisals, with an initial target of 90% for both. Provisional performance against these measures is included within the Balanced Scorecards at Appendix 5. The new appraisal process will be evaluated in Quarter Three and resulting changes will be communicated in January 2016 so that all appraisals for 2016/17 can be completed before the end of this financial year.
- 90. A second phase of the Middlesbrough Manager Development Programme (for over 200 frontline managers) commenced in Quarter Two for completion by the end of 2015.

91. The average number of days lost to sickness absence per employee in Quarter Two was 3.53 days. In response to the 2014/15 outturn of 9.41 days, the Council's corporate target has been amended to 7.5 days, resulting in a standard quarterly target across Outcome Areas of 1.875 days. Current performance is therefore just ahead of target. As previously reported, monitoring of employee sickness absence will be improved significantly in 2015/16 and Human Resources will work with Public Health to address the issues raised.

92. A staff satisfaction survey will be undertaken in Quarter Three and all Scorecards will be updated to reflect the results of the survey once available.

## **IMPLICATIONS**

- 93. **Financial implications** The Council's budget setting process for 2015/16 was developed in line with the priorities subsequently published in the draft 2015-2018 Strategic Plan, therefore the financial implications of the improvement activity described in this report have been fully considered.
- 94. Legal implications None.
- 95. Ward Implications None.

#### RECOMMENDATIONS

- 96. That the responses of Outcome Areas and the Council's wider Change Programme to the performance issues outlined in the report are noted and potential impacts on the scrutiny work programme considered.
- 97. That progress in developing the Balanced Scorecard model during the pilot phase is noted.

#### **REASONS**

98. To enhance monitoring of performance across the four key perspectives of customer, business, finance and people, at both a member and senior officer level in order to enable the effective delivery of the Council's targeted strategic outcomes.

#### **BACKGROUND PAPERS**

None

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# Appendix 1: Balanced Scorecards pilot – record of changes made in pilot phase

The following changes to the pilot Scorecards have been implemented since the Year-End 2014/15 report:

- The approach to traffic-lighting indicators has been simplified. The revised methodology is set out at Appendix 2.
- Descriptions of performance measures in Appendix 5 have been amended where appropriate to remove acronyms.
- Some changes have been made to Level 2 Scorecard measures following review, as outlined in the table below.

| Date       | Scorecard       | Code                   | Performance Measure  | Change  |
|------------|-----------------|------------------------|--|---|
| 06/08/2015 | 07 L2<br>ENV L3 | O7-C-001               | Percentage of service response times in line with customer promises  | Change wording to "Percentage of<br>Environment Customer Service Promises<br>meeting targets"   |
| 06/08/2015 | 07 L2<br>PCS L3 | O7-C-005               | Staff satisfaction with office accommodation   | Moved to Strategic Assets – Level 3 Scorecard   |
| 07/09/2015 | O4 L2           | NI 72                  | Headline Achievement across the Early<br>Years Foundation Stage  | Removed from O4, left in O2. Indicator should only be in one Outcome area.  |
| 08/10/2015 | O5 L2<br>SPE L3 | NI 61                  | Timeliness of placements of looked after children for adoption following an agency decision that the child should be placed for adoption | Replaced by SPE-B-007: The % of children waiting less than 18 months between entering care and moving in with their adoptive family.  |
| 28/10/2015 | O4 L2<br>ATE L3 | O4-B-003               | Sufficiency of places for mainstream and special education.  | Replaced by ATE-B-005: % of Middlesbrough children not allocated a school place.  |
| 15/11/2015 | O9 L2           | ICT-C-005<br>ICT-C-006 | Respond and Fix service responses within timescales  | Added to Level Two scorecard, remains on ICT Level Three.   |
| 15/11/2015 | O5 L2           | O5-B-005               | Continuous assessments completed within 45 days  | Target reduced to 90% (from 95%) after comparisons demonstrated that 95% is not a SMART target. The Council's current level of performance compares favourably to regional and statistical neighbours. The targeted performance level will be reviewed for 2016/17. |

## Appendix 2: Summary of the scoring mechanism used in Scorecards

- Relevant performance measures within Balanced Scorecards must have targets so that performance can be traffic-lighted (NB some measures are provided for context only – these are in grey text within the Scorecards – and so do not contribute to the overall score).
- However, many measures identified for the pilot stage either had no readily available targets, or have targets that require review in the light of likely future budget savings targets. Therefore for the purposes of the pilot, where no targets currently exist for measures it has been assumed that the current level of performance is the targeted level of performance.
- Assistant Directors are now reviewing targets for their key measures in line with the outcomes of their areas identified in the three-year Outcome Delivery Plans summarised in the Change Programme 2015-2018 document, and these will be updated throughout 2015/16.
- For the pilot stage, the following scoring mechanism has been applied to each individual measure within the Scorecards, differentiated by target type.

Each individual measure is RAG rated based on the type of target. Standard targets include maintaing, reducing or increasing the previous years performance, for example.

| Traffic Light | Target Type    |              |               |  |  |  |  |  |
|---------------|----------------|--------------|---------------|--|--|--|--|--|
| Traffic Light | Standard       | Floor        |               |  |  |  |  |  |
| Green         | Achieve or     | <10% above   | Above target  |  |  |  |  |  |
| Green         | exceed target  | <10% above   | Above target  |  |  |  |  |  |
| Amber         | Within 10%     | 10-20% above | On the target |  |  |  |  |  |
| Red           | Miss target by | >20% above   | Below target  |  |  |  |  |  |
| ked           | 10%+           | >20% above   | Below target  |  |  |  |  |  |

A score is given to each PI based on its traffic light.

For each quadrant a traffic light is assigned based on the Total Points Gained / Total Points Available (2 x No. of Pls)

| Traffic Light | Score    |
|---------------|----------|
| Green         | 2 Points |
| Amber         | 1 Point  |
| Red           | 0 Points |
|               |          |
| Traffic Light | %        |

75% +

50% - 74%

0% to 49%

All quadrants are worth a maximum of 25% of the total scorecard score, with the quadrant score scaled down to a Note: There is no weighting for the individual PIs.

Green

Amber

Red

For example, a scorecard with 20 PIs.

| Traffic Light | Example                  | Score | %   |
|---------------|--------------------------|-------|-----|
| Green         | 14 Green, 4 Amber, 2 Red | 32    | 80% |
| Amber         | 20 Amber                 | 20    | 50% |
| Red           | 4 Green, 2 Amber, 14 Red | 10    | 25% |

# **Appendix 3: Revised Strategic Risk Register**

| Ref     | Summary of risk description   | Original score | Summary of existing mitigations   | Current score | Summary of planned mitigations  | Target score |
|---------|---|----------------|---|---------------|---|--------------|
| Outcome | 1   | ,              | •   |               |   |              |
| 01-005  | Targeted investment within Middlesbrough disproportionately affected by low economic growth.  | 25             | Risk reduced by early adoption of Housing Local Plan, exploitation of external funding opportunities and agreement of significant local capital investment. Risk shared and opportunities exploited through TVU and TV Single Economic Plan.  | 20            | Further reduction of risk through implementation of Town Centre Strategy. Continued risk sharing and exploitation / enhancement of opportunities from Combined Authority and Devolution for Tees Valley. Implementation of contingency plans e.g. SSI taskforce.                              | 20           |
| Outcome | 2   |                |   |               |   |              |
| 02-014  | Qualifications and skills profile of local labour does not match requirements of current employers and / or potential future investors.                                     | 25             | Risk reduced by delivery of advice and guidance in schools and development of vocational specialisms within 14-19 schools. Development of ongoing mitigation activity including Youth Employment Strategy and Group and promoting work-readiness through skills, experiences and apprenticeships in conjunction with business leaders and MAP.  | 20            | Risk reduced / further reduced by adoption of Youth Pledge, greater joint working around NEET data, an improved employability offer for schools, rollout of Risk of NEET Indicator in schools, and achievement of greater school buy-in to IAG provision.                                     | 20           |
| 02-013  | Individuals and families in need not provided with effective help at appropriately early stage, resulting in social issues and greater downstream costs to public services. | 15             | Development of mitigation activity including multi-agency Early Help Strategy, Early Help Hub in First Contact, family casework approach across Outcome Area, Team Around the School Pilot and Selective Landlord Licensing in North Ormesby.   | 15            | Risk reduced / further reduced by rollout of Team Around the School and Risk of NEET Indicator in schools, joint case reviews with Safeguarding, involvement in MASH development and extension of Selective Landlord Licensing to other areas.  | 10           |
| Outcome | 3   |                |   |               |   |              |
| 03-008  | Potential for achieving sustainable improvement in local health and wellbeing affected by failure to protect and improve public health.                                     | 20             | Risk shared and opportunities exploited through South Tees Integrated Programme Board. Risk reduced by ongoing service delivery and improvement plans and multiagency working on prevention and early intervention and emergency planning. Development of ongoing mitigation activity including prevention and independence strategy, local health protection plan, transformation of Healthy Child programme and drugs and alcohol services and procurement of sexual health services. | 15            | Risk further reduced through implementation of HeadStart programme, CAMHS transformation plan and rehabilitation strategy. Risk sharing and exploitation / enhancement of opportunities from integration of health and social care and exploration of associated alternative delivery models. | 10           |

| Ref     | Summary of risk description   | Original score | Summary of existing mitigations   | Current score | Summary of planned mitigations   | Target score |
|---------|---|----------------|---|---------------|--|--------------|
| Outcome | 4   |                |   |               |  |              |
| 04-006  | Qualifications and skills profile of school leavers does not allow them to progress to further education, employment or training.   | 20             | In addition to the mitigation activity for risk 02-<br>014: risk reduced by implementation of School<br>Effectiveness Strategy.   | 15            | In addition to the mitigation activity for risk 02-014: risk further reduced by development and implementation of new model for behaviour provision and implementation of Secondary School Improvement Partnership to embed best practice in English, maths and science. | 10           |
| Outcome | 5   |                |   |               |  |              |
| 05-004  | Targeted savings not achieved or reputational risks incurred due to failure to transform Safeguarding and Children's Care.  | 35             | Risk reduced by: demand projection model for<br>Safeguarding and Children's Care and Social<br>Care Transformation workstream / associated<br>projects of the Council's Change Programme.   | 20            | Risk further reduced by exploiting /<br>enhancing opportunities provided through<br>South Tees Integration and / or Combined<br>Authority arrangements.  | 15           |
| 05-009  | Increased risk of harm to children and young people due to instability caused by Social Care transformation.  | 25             | Risk reduced by: implementation of new system to track workflow and improve record keeping; action plans to address social worker recruitment and retention and caseloads; and integrated development with Outcome 2 as part of the Social Care Transformation Programme.   | 15            | Risk further reduced by ongoing implementation of recruitment and selection and caseload plans, and maintaining current staffing levels until trends have demonstrated that it is safe to reduce them.   | 10           |
| Outcome | 6   |                |   |               |  |              |
| 06-003  | Targeted savings not achieved or reputational risks incurred due to failure to transform Social Care.   | 20             | Risk shared and opportunities exploited through South Tees Integrated Programme Board. Risk reduced by: demand projection model for Social Care and Social Care Transformation workstream / associated projects of the Council's Change Programme.  | 15            | Risk further reduced by exploiting / enhancing opportunities provided through South Tees Integration and / or Combined Authority arrangements.   | 9            |
| Outcome | 2 7   |                |   |               |  |              |
| 07-015  | Targeted savings not achieved or reputational risks incurred due to failure to meet the expectations of residents and 'difficult to reach' groups in respect of environmental services. | 20             | Risk reduced by: agreement, monitoring and communication of performance against customer service promises; ongoing consultation with elected members and measurement of customer satisfaction; ensuring easy access to services through call centre and e-services; and proactive approach to complaint resolution. | 10            | Risk reduced / further reduced by exploiting / enhancing opportunities provided by the Change Programme's Customer Strategy workstream, including improvement management information from the new CRM system and via Balanced Scorecards.                                | 7            |

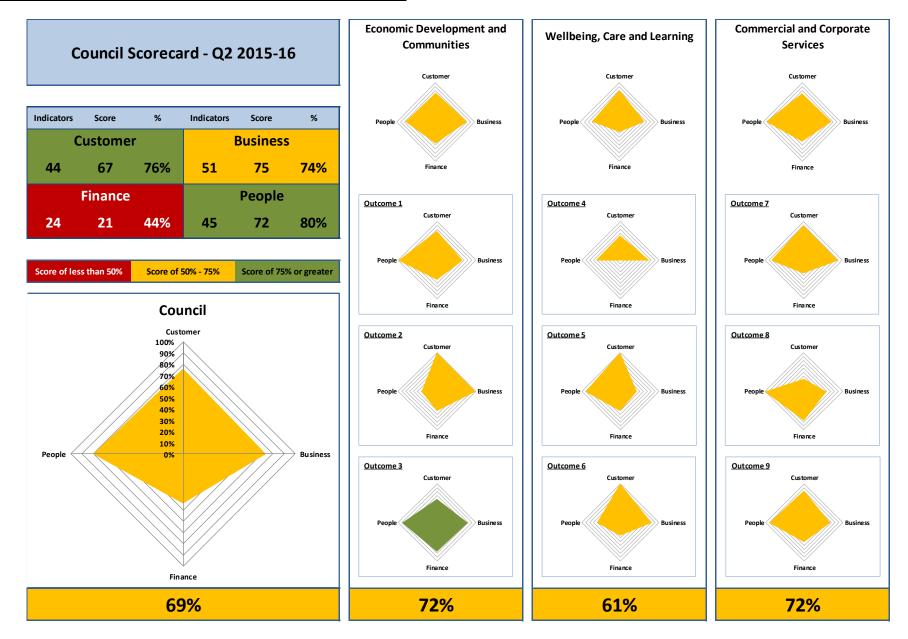
| Ref          | Summary of risk description   | Original score | Summary of existing mitigations  | Current score | Summary of planned mitigations   | Target score |
|--------------|---|----------------|--|---------------|--|--------------|
| Outcome      | 8   |                |  | ,             |  |              |
| CRP089<br>CS | Failure to achieve balanced budget in short term places Council in breach of statutory duties.  | 35             | Risk reduced by integrated MTFP and budget review process, with member and senior management involvement; and ongoing implementation of agreed corporate transformation programme as core strand of MTFP. Contingency plan in place through use  | 14            | Risk reduced / further reduced by implementation of actions relating to financial governance set out within the Council's Corporate Governance Improvement Plan.  Medium-term risk reduced by ongoing            | 14           |
| CRP089<br>CS | Failure to achieve balanced budget in medium-term places Council in breach of statutory duties.   | 35             | of reserves / balances as appropriate. Current medium-term risk remains high due to uncertainty around Government funding levels.  | 28            | development of three-year budget cycle and associated delivery plans.  | 14           |
| Outcome      | 9   |                |  |               |  |              |
| 09-001       | Organisational transformation and associated savings impacted / not achieved due to failure to ensure effective people management in fast changing environment.   | 28             | Risk reduced by ongoing engagement with Trade Unions in relation to the Change Programme; range of employee communication mechanisms on changes; introduction of revised employee engagement approach; coordinated approach to Service Reviews and employee support and assistance; and agreed approach to succession.   | 21            | Risks further reduced by developing and implementing a revised stakeholder engagement strategy and employee communications plan for the Council's Change Programme.  | 14           |
| RCS103       | Targeted savings not achieved or reputational risks incurred due to failure to promote customer excellence and achieve targeted customer change in customer behaviour, in particular take up of e-services. | 25             | Development of mitigation activity through Customer Strategy workstream of the Change Programme, including the implementation of a Customer Charter, the procurement of a single CRM system and design of associated processes, the ongoing implementation of eservices, the redesign of customer services and receptions and associated training for employees. | 20            | Risk reduced / further reduced by ongoing implementation of Customer Strategy workstream projects, supported by a full promotional campaign to customers, increasing awareness of e-services and their benefits. | 10           |
| 09-002       | Organisational transformation and service delivery objectives impacted / not achieved due to failure to ensure effective ICT strategy, infrastructure and services.   | 35             | Development of mitigation activity through the Cultural and Enabling workstream of the Change Programme, underpinned by specialist technical advice, including the development of a revised ICT Strategy and associated programme and supporting service delivery arrangements.  | 28            | Risk reduced by effective implementation of the ICT Strategy and programme and implementation of effective service delivery arrangements to ensure organisational outcomes are fully supported.                  | 14           |

| Ref    | Summary of risk description   | Original score | Summary of existing mitigations  | Current score | Summary of planned mitigations  | Target score |
|--------|---|----------------|--|---------------|---|--------------|
| 09-007 | Legal compliance, organisational effectiveness and / or achievement of objectives impacted by failure to operate effective corporate governance framework and associated processes. | 25             | Risk reduced by: Constitution and Corporate Governance Framework; ongoing monitoring of implementation of Executive decisions; internal and external audit arrangements; utilisation of peer challenge and regional bodies; and overview and scrutiny. Development of mitigation activity through the Cultural and Enabling workstream of the Change Programme, including revised frameworks for performance, project and risk management. | 20            | Risk reduced / further reduced by implementation of actions set out within the Council's Corporate Governance Improvement Plan. Corporate Peer Review to be arranged to LGA to challenge assumptions, plans and progress.   | 10           |
| 09-008 | Reduced outcomes and incurred costs through failure to implement effective strategic and delivery partnerships.   | 25             | Risk reduced by: agreements, terms of reference and governance arrangements in place for key partnerships; senior management relationship manager arrangement; recent review of Health and Wellbeing Board and delivery structures; and ongoing development of Combined Authority and Devolution arrangements.   | 20            | Risk reduced / further reduced by continued development of Combined Authority governance arrangements; implementation of Health and Wellbeing Board development plan; internal risk review of partnerships and guidance on joint working provided to manager as part of ongoing development of the Middlesbrough Manager model.               | 15           |
| 09-009 | Targeted savings not achieved or organisational risks incurred due to failure to embed targeted cultural change, in particular the Middlesbrough Manager model.                     | 25             | Risk reduced by: publication and communication of competency frameworks, development programme for Middlesbrough Managers; embedding of frameworks within recruitment, selection, appraisal and succession; the agreement of Support Service Promises; and provision of supporting policies, guidance notes and toolkits.  | 20            | Risk reduced / further reduced by development of e-learning and toolkits for managers and employee through the Council's new Learning Management System; implementation of action plan for further embedding of frameworks within management practice and development and communication of a self-serve timetable for managers and employees. | 10           |

# Appendix 4: Capital Programme 2015/16 – Projects to be monitored by milestones

| Outcome 1  | Outcome 2  | Outcome 3   |
|--|--|---|
| Employment and Business 1. BOHO 5 2. Boho 'Grow on' Space 3. TAMP – TWI Building   | 33. Libraries software upgrade   | No capital funding in current programme.  |
| Housing Regeneration   | Outcome 4  | Outcome 5   |
| 4. Empty Homes action plan 5. Gresham redevelopment 6. Grove Hill redevelopment 7. Housing Delivery Vehicle Housing Growth   | <ul><li>34. Improvements Partnership for Schools</li><li>35. Increasing 2 year old places provision in Middlesbrough</li></ul> | No capital funding in current programme.  |
| 8. Bringing Sites to Sale  | 0.1  |   |
| Hemlington Grange electrical connections     Classified Roads – Grey Towers / Brookfield   | Outcome 6  | Outcome 7   |
| Middlehaven 11. Site assembly 12. Dock Bridge 13. Urban Park 14. Urban Pioneers 15. Snow Centre  | No major capital projects in current programme.  | <ul> <li>36. Invest to save carbon reduction</li> <li>37. Community Hub works Neptune and Rainbow</li> <li>38. Improvement to infrastructure Bereavement Services</li> <li>39. Accommodation Cargo Fleet investment</li> <li>40. Middlesbrough Sports Village</li> <li>41. Purchase of new vehicles</li> <li>42. Stewarts Park Phase 2</li> </ul> |
| 1 16 St Hilda's  |  |   |
| 16. St. Hilda's Town Centre  | Outcome 8  | Outcome 9   |
| 16. St. Hilda's  Town Centre  17. Baker Street Phase 2  18. Tackling Town Centre Vacancies  19. WIFI – Town Centre  20. Town Hall development  Highways and Infrastructure  21. Tees Valley Bus Network Improvements | Outcome 8  No capital funding in current programme.  | <ul> <li>43. Tees Valley Broadband</li> <li>44. iPortal</li> <li>45. Mobile Working Implementation</li> <li>46. ICS</li> <li>47. Biztalk</li> <li>48. Disaster Recovery</li> </ul>  |
| Town Centre  17. Baker Street Phase 2  18. Tackling Town Centre Vacancies  19. WIFI – Town Centre  20. Town Hall development  Highways and Infrastructure  |  | <ul> <li>43. Tees Valley Broadband</li> <li>44. iPortal</li> <li>45. Mobile Working Implementation</li> <li>46. ICS</li> <li>47. Biztalk</li> </ul>   |

## Appendix 5: Balanced Scorecards - Quarter Two 2015/16



| Outcome 1                     | Securing economic development, physical regeneration and transport to create jobs and housing such that the mix of jobs, skills and quality of housing in the town is complementary. |
|-------------------------------|--|
| Owner                         | Sharon Thomas  |
| Period                        | Q2 2015-16   |
| Overall scorecard performance | 73%  |

| Custome   | er   |        |        | 75%                |          |              | Busine   | ss  |        |       | 67%               |          |          |
|-----------|--|--------|--------|--------------------|----------|--------------|----------|---|--------|-------|-------------------|----------|----------|
| Ref       | Measure  | Target | Perf.  | Period             | Quartile | Trend        | Ref      | Measure   | Target | Perf. | Period            | Quartile | Trend    |
| NI 157a   | Processing of planning applications: Major applications          | 61%    | 100%   | To Q2 15/16        | -        | <b>1</b>     | O1-B-001 | Change Programme projects projected to meet milestones (O1)               | 100%   | 50%   | Q2 2015-16        | - 1      | <b>→</b> |
| NI 157b   | Processing of planning applications: Minor applications          | 72%    | 74.54% | To Q2 15/16        | -        | $\downarrow$ | O1-B-002 | Capital projects projected to meet milestones (O1)                        | -      | -     | -                 |          |          |
| O1-C-002  | Number of Building control applications completed within 5 weeks | 80%    | 82.86% | To Q2 15/16        | -        | -            | O1-B-003 | Risk mitigation actions on target (O1)                                    | -      | -     | -                 |          |          |
| O1-C-003  | Number of children killed or seriously injured                   | 4      | 9      | Jan 15 - Jun<br>15 | -        | -            | O1-B-005 | Planning consent on target to be granted for Middlehaven Dock<br>Bridge   | Yes    | No    | At Q2 2015-<br>16 | -        | <b>→</b> |
| 01-C-008* | Upheld complaints (service area overall) (O1)                    | -      | 0      | To Sept 15         | -        | -            | O1-B-006 | LED streetlight replacement scheme commences (subject to capital funding) | 3150   | 3183  | To Q2 2015-<br>16 | -        | -        |
|           |  |        |        |                    |          |              | O1-B-008 | Empty dwellings brought back into use                                     | 35.5   | 37    | To Q2 2015-<br>16 | -        | <b>→</b> |
|           |  |        |        |                    |          |              | O1-B-009 | New homes built Council Tax Band D and above (proxy)                      | 65     | 134   | To Q2<br>15/16    | -        | -        |
|           |  |        |        |                    |          |              | NI 155   | Number of homes delivered (gross)   | 205    | 351   | To Q2<br>15/16    | -        | ↓        |

| Finance    |   |        |       | 50%         |          |              | People   |   |        |       | 100%       |          |       |
|------------|---|--------|-------|-------------|----------|--------------|----------|---|--------|-------|------------|----------|-------|
| Ref        | Measure   | Target | Perf. | Period      | Quartile | Trend        | Ref      | Measure   | Target | Perf. | Period     | Quartile | Trend |
| O1-F-001   | Projected performance against revenue budget (O1) | 100%   | 101%  | Q2 2015-16  | -        | $\downarrow$ | O1-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O1) | 95%    | 100%  | 2015-16    | -        | 1     |
| O1-F-001a* | Projected expenditure as % of budgeted (O1)       | 100%   | 101%  | Q2 2015-16  | -        | $\uparrow$   | O1-P-002 | Managers scoring Level 3+ for MM competencies (O1)    | 90%    | 100%  | 2015-16    | -        | -     |
| O1-F-001b* | Projected income as % of budgeted (O1)            | 100%   | 101%  | Q2 2015-16  | -        | $\uparrow$   | O1-P-005 | Employees scoring Level 3+ for ME competencies (O1)   | 90%    | 100%  | 2015-16    | -        | -     |
| 01-F-003   | Attainment of savings targets (O1)                | 100%   | 97%   | Q2 2015-16  |          | - 1          | 01 0 002 | Sickness absence (O1)                                 | 3.75   | 2.63  | To Sept    |          |       |
| 01-F-003   | Attainment of Savings targets (O1)                | 100%   | 97%   | Q2 2015-16  | -        | <b>V</b>     | U1-P-003 | Sickless absence (O1)                                 | 3./3   | 2.03  | 2015       | _        | _     |
| O1-F-002   | Projected performance against capital budget (O1) | 100%   | 79%   | At Q2 15/16 | -        | -            | O1-P-004 | Staff satisfaction (Feel valued) proxy measure (O1)   | 70%    | 82.6% | 2012 (Cal) | -        | -     |

| Outcome 2                     | Providing services and support to communities such that people have more fulfilling lives, feel safe and their need for support services reduces |
|-------------------------------|--|
| Owner                         | Richard Horniman   |
| Period                        | Q2 2015-16   |
| Overall scorecard performance | 73%  |

| Custome   | er   |        |       | 100%              |          |          | Busine   | ss  |        |        | 100%              |          |                   |
|-----------|--|--------|-------|-------------------|----------|----------|----------|---|--------|--------|-------------------|----------|-------------------|
| Ref       | Measure  | Target | Perf. | Period            | Quartile | Trend    | Ref      | Measure   | Target | Perf.  | Period            | Quartile | Trend             |
| O2-C-001  | Troubled Families who have sustained and measured positive outcomes                    | 30     | 66    | Sept 15<br>Claim  | -        | 1        | O2-B-001 | Change Programme projects projected to meet milestones (O2)     | 100%   | 100%   | Q2 2015-16        | -        | $\leftrightarrow$ |
| O2-C-002  | Number of Chidren in Need referrals resulting in Common Assesment Framework step-downs | 40     | 46    | To Q2 15/16       | -        | <b>\</b> | O2-B-008 | Capital projects projected to meet milestones (O2)              |        | -      | -                 | -        |                   |
| O2-C-004  | New volunteer registrations  | 30     | 66    | To Q2 2015-<br>16 | -        | -        | O2-B-002 | Risk mitigation actions on target (O2)                          |        | -      | -                 | -        |                   |
| LOR02     | Number of households accepted as homeless.   | 45     | 22    | To Q2 2015-<br>16 | -        | -        | O2-B-003 | Common Assessment Frameworks completed                          | 230    | 244    | To Q2<br>15/16    | -        | -                 |
| NI 117    | 16 to 18 year olds resident in Middlesbrough who are NEET                              | 8.7%   | 7.1%  | Sep 15            | -        | 1        | O2-B-005 | Percentage of North East asylum seekers housed in Middlesbrough | 33%    | 31.59% | Sep 15            | -        | $\downarrow$      |
| NI 72     | Headline achievement across the Early Years Foundation Stage                           | 56%    | 57.4% | 2014/15           | -        | 1        | O2-B-007 | Uptake of additional 2 Year Old Offer places                    | 60%    | 80%    | Summer<br>2015    | -        | $\leftrightarrow$ |
| 02-C-006* | Upheld complaints (service area overall) (O2)  | -      | 0     | To Sept 15        | -        | -        | LOR08    | Contacts with library Services                                  | 140000 | 154664 | To Q2 2015-<br>16 | 0        | <b>↓</b>          |

| Finance        | inance  |        |       | 50%         |          |          | People   |   |        | 40%   |                 |          |              |  |  |
|----------------|---|--------|-------|-------------|----------|----------|----------|---|--------|-------|-----------------|----------|--------------|--|--|
| Ref            | Measure   | Target | Perf. | Period      | Quartile | Trend    | Ref      | Measure   | Target | Perf. | Period          | Quartile | Trend        |  |  |
| O2-F-001       | Projected performance against revenue budget (O2) | 100%   | 94%   | Q2 2015-16  | -        | 1        | O2-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O2) | 95%    | 80%   | 15/16           | -        | $\downarrow$ |  |  |
| 02-F-<br>001a* | Projected expenditure as % of budgeted (O2)       | 100%   | 97%   | Q2 2015-16  | -        | 1        | O2-P-002 | Managers scoring Level 3+ for MM competencies (O2)    | 90%    | 100%  | 2015-16         | -        | -            |  |  |
| 02-F-<br>001b* | Projected income as % of budgeted (O2)            | 100%   | 104%  | Q2 2015-16  | -        | 1        | O2-P-005 | Employees scoring Level 3+ for ME competencies (O2)   | 90%    | 87%   | 2015-16         | -        | -            |  |  |
| O2-F-003       | Attainment of savings targets (O2)                | 100%   | 94%   | Q2 2015-16  | -        | <b>V</b> | O2-P-003 | Sickness absence (O2)                                 | 3.75   | 5.5   | To Sept<br>2015 | -        | -            |  |  |
| O2-F-002       | Projected performance against capital budget (O2) | 100%   | 72%   | At Q2 15/16 | -        | -        | O2-P-004 | Staff satisfaction (Feel valued) proxy measure (O2)   | 70%    | 68.8% | 2012 (Cal)      | -        | -            |  |  |

| Outcome 3                     | Achieving longer and healthier lives, reducing health inequalities and protecting the local population from environmental hazards and incidents. |
|-------------------------------|--|
| Owner                         | Edward Kunonga   |
| Period                        | Q2 2015-16   |
| Overall scorecard performance | 76%  |

| Custome           | r  |        |       | 60%        |          |              | Busine   | ss   |        |       | 80%               |          |                   |
|-------------------|--|--------|-------|------------|----------|--------------|----------|--|--------|-------|-------------------|----------|-------------------|
| Ref               | Measure  | Target | Perf. | Period     | Quartile | Trend        | Ref      | Measure  | Target | Perf. | Period            | Quartile | Trend             |
| NI 123<br>(VSB05) | Stopping smoking   | 296    | 90    | Q1 2015/16 | -        | -            | O3-B-001 | Change Programme projects projected to meet milestones (O3)  | 100%   | 100%  | Q2 2015-16        | -        | $\leftrightarrow$ |
| PHOF02.03         | Smoking status at time of delivery   | 23.9%  | 23.9% | 2013-14    | -        | 1            | O3-B-003 | Risk mitigation actions on target (O3)   | -      | -     | -                 | -        | 1                 |
| PHOF02.15i        | Successful completion of drug treatment - Opiate Users                             | 5.1%   | 6.6%  | Q1 2014/15 | -        | -            | O3-B-005 | % of Middlesbrough food businesses rated as satisfactory and above compared with national percentage rate. | 0%     | 3%    | Q2 2015-16        | -        | $\leftrightarrow$ |
| PHOF02.15ii       | Successful Completion of drug treatment - non-opiate users                         | 37.8%  | 34.8% | Q1 2015/16 | -        | -            | O3-B-006 | Licensing: Number of enforcement exercises undertaken.   | 30     | 37    | To Q2 2015-<br>16 | -        | -                 |
| NI 8              | Adult participation in sport and active recreation                                 | 49.3%  | 52.8% | 2014/15    | -        | 1            | O3-B-007 | Tobacco Control: Number of enforcement exercises undertaken.   | 42     | 35    | To Q2<br>15/16    | -        | -                 |
| PHOF02.20i        | Cancer Screening Coverage - breast cancer  | 71.4%  | 71.1% | 2013-14    | -        | $\downarrow$ | O3-B-008 | % of businesses visited brought to a state of compliance   | 80%    | 83%   | Q2 15/16          | -        | <b>↓</b>          |
| PHOF02.20ii       | Cancer Screening Coverage - cervical cancer  | 70.1%  | 69.8% | 2013-14    | -        | 1            |          |  |        |       |                   |          |                   |
| 1PH()F()/ //i     | Take up of the NHS Health Check programme by those eligible - health check offered | 1822.3 | 990   | Q1 2015/16 | -        | -            |          |  |        |       |                   |          |                   |
| PHOF02.22ii       | Take up of NHS Health Check programme by those eligible - health check take up     | 1093.5 | 990   | Q1 2015/16 | -        | -            |          |  |        |       |                   |          |                   |
| 02.6.002          | Catiofastian with Culateras Misses annias CCC                                      | 000/   | 000/  | 2014 15    | 1        |              | 7        |  |        |       |                   |          |                   |

| Finance    |   |        |       | 75%        |          |                   | People   |   |        |       | 90%        |          |              |
|------------|---|--------|-------|------------|----------|-------------------|----------|---|--------|-------|------------|----------|--------------|
| Ref        | Measure   | Target | Perf. | Period     | Quartile | Trend             | Ref      | Measure   | Target | Perf. | Period     | Quartile | Trend        |
| O3-F-001   | Projected performance against revenue budget (O3) | 100%   | -722% | Q2 2015-16 | -        | 1                 | O3-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O3) | 95%    | 93%   | 2015-16    | -        | $\downarrow$ |
| O3-F-001a* | Projected expenditure as % of budgeted (O3)       | 100%   | 99%   | Q2 2015-16 | -        | $\leftrightarrow$ | O3-P-002 | Managers scoring Level 3+ for MM competencies (O3)    | 90%    | 100%  | 2015-16    | -        | -            |
| O3-F-001b* | Projected income as % of budgeted (O3)            | 100%   | 100%  | Q2 2015-16 | -        | $\leftrightarrow$ | O3-P-005 | Employees scoring Level 3+ for ME competencies (O3)   | 90%    | 100%  | 2015-16    | -        | -            |
| 03-F-003   | Attainment of savings targets (O3)                | 100%   | 99%   | Q2 15-16   |          |                   | 02 0 002 | Sickness absence (O3)                                 | 3.75   | 0.86  | To Sept    |          |              |
| U3-F-003   | Attainment of Savings targets (OS)                | 100%   | 99%   | Q2 13-16   | -        | Ψ                 | U3-P-003 | Sickless absence (O3)                                 | 3.73   | 0.86  | 2015       | -        | _            |
|            |   |        |       |            |          |                   | O3-P-004 | Staff satisfaction (Feel valued) proxy measure (O3)   | 70%    | 82.8% | 2012 (Cal) | -        | -            |

80%

2014-15 To Sept 15

O3-C-002 Satisfaction with Substance Misuse services – CSS
O3-C-001\* Upheld complaints (service area overall) (O3)

| Outcome 4                     | Promoting effective learning for children and adults such that residents fulfil their potential, attainment improves and people have the requisite skills to secure employment. |
|-------------------------------|---|
| Owner                         | Chris Fallon  |
| Period                        | Q2 2015-16  |
| Overall scorecard performance | 51%   |

| Custome   | er   | *      |       |                        |          |       | Busine    | Business  |        |       | 75%                 |          |                   |  |  |
|-----------|--|--------|-------|------------------------|----------|-------|-----------|---|--------|-------|---------------------|----------|-------------------|--|--|
| Ref       | Measure  | Target | Perf. | Period                 | Quartile | Trend | Ref       | Measure   | Target | Perf. | Period              | Quartile | Trend             |  |  |
| NI 114    | Rate of permanent exclusions from school   | 0.06%  | 0.18% | 2014-15<br>School Year | -        | →     | O4-B-001  | Change Programme projects projected to meet milestones (O4) | 100%   | 100%  | Q2 2015-16          | -        | $\leftrightarrow$ |  |  |
| NI 94     | Progression by 2 levels in Maths between Key Stage 1 and Key Stage 2                                   | 91%    | 91.3% | 2014/15                | -        | ↓     | O4-B-002  | Risk mitigation actions on target (O4)                      | -      | -     | -                   |          | -                 |  |  |
| NI 97a    | % achieving 2 levels progress between KS2 and KS4 in English   | 72%    | 74%   | 2014-15                | -        | 1     | O4-B-004  | Capital projects projected to meet milestones (O4)          | -      | -     | -                   | -        | -                 |  |  |
| NI 98a    | % achieving 2 levels progress in maths between KS2 and KS4   | 65.5%  | 50.7% | 2014/15                | -        | ↓     | NI 87     | Secondary school persistent absence rate                    | 6.9%   | 6.9%  | Autumn<br>2014      | -        | 1                 |  |  |
| 04-C-005  | The % of pupils making expected and better than expected levels of progress between KS1-KS2 in reading | 90%    | 90.6% | 2014-15                | -        | 4     | O4-B-007  | Pupils attending a school judged 'Good' or better by Ofsted | 90%    | 72.9% | May 15              | -        | ↓                 |  |  |
| O4-C-006  | The % of pupils making expected and better than expected levels of progress between KS1-KS2 in writing | 93%    | 95.1% | 2014/15                | -        | 1     | O4-B-009  | Success rates on Community Learning Skills programmes       | 84.5%  | 83.5% | To Aug 2015         | -        | 1                 |  |  |
| O4-C-008  | The % of pupils achieving the expected level in Phonics De-coding                                      | 72%    | 71.2% | 2014-15                | -        | 1     | RTB01     | Primary school persistent absence rate (Overall)            | 5.3%   | 4.4%  | Autumn<br>2014      | -        | -                 |  |  |
| 04-C-009* | Upheld complaints (service area overall) (O4)  | -      | 0     | To Sept 15             | -        | -     | ATE-B-005 | % of Middlesbrough children not allocated a school place    | 2%     | 0.45% | Year to 1<br>Nov 15 | -        | -                 |  |  |

| Finance    |   |        |       | 0%          |          |                   | People   |   | 63%    |       |                 |          |       |  |
|------------|---|--------|-------|-------------|----------|-------------------|----------|---|--------|-------|-----------------|----------|-------|--|
| Ref        | Measure   | Target | Perf. | Period      | Quartile | Trend             | Ref      | Measure   | Target | Perf. | Period          | Quartile | Trend |  |
| O4-F-001   | Projected performance against revenue budget (O4) | 100%   | 132%  | Q2 2015-16  | -        | ↓                 | O4-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O4) | 95%    | 2%    | At Sept<br>2015 | -        | ↓     |  |
| 04-F-001a* | Projected expenditure as % of budgeted (O4)       | 100%   | 100%  | Q2 2015-16  | -        | $\leftrightarrow$ | O4-P-002 | Managers scoring Level 3+ for MM competencies (O4)    | 90%    | -     | -               | -        | -     |  |
| 04-F-001b* | Projected income as % of budgeted (O4)            | 100%   | 100%  | Q2 2015-16  | -        | $\leftrightarrow$ | O4-P-005 | Employees scoring Level 3+ for ME competencies (O4)   | 90%    | 100%  | Q2 2015-16      | -        | -     |  |
| O4-F-003   | Attainment of savings targets (O4)                | 100%   | 28%   | Q2 2015-16  | -        | ↓                 | O4-P-003 | Sickness absence (O4)                                 | 3.75   | 3.87  | To Sept<br>2015 | -        | -     |  |
| O4-F-002   | Projected performance against capital budget (O4) | 100%   | 66%   | At Q2 15/16 | -        | -                 | O4-P-004 | Staff satisfaction (Feel valued) proxy measure (O4)   | 70%    | 77.7% | 2012 (Cal)      | -        | -     |  |

| Outcome 5                     | Protecting and safeguarding vulnerable adults and children and, wherever possible, seek to enable a safe environment that reduces dependency on services. |
|-------------------------------|---|
| Owner                         | Neil Pocklington  |
| Period                        | Q2 2015-16  |
| Overall scorecard performance | 71%   |

| Custome   | r   |        | 100%   |                  |          |       | Busine    | ss   | 42%    |       |                |          |              |  |
|-----------|---|--------|--------|------------------|----------|-------|-----------|--|--------|-------|----------------|----------|--------------|--|
| Ref       | Measure   | Target | Perf.  | Period           | Quartile | Trend | Ref       | Measure  | Target | Perf. | Period         | Quartile | Trend        |  |
| KIGS CH39 | Children looked after per 10,000 population aged under 18         | -      | 114.2  | Q2 15/16         | -        | 1     | O5-B-001  | Change Programme projects projected to meet milestones (O5)  | 100%   | 82%   | Q2 2015-16     | -        | $\downarrow$ |  |
| NI 111    | First time entrants to the Youth Justice System aged 10-17 (Rate) | 470    | 107.82 | To Q2 15/16      | -        | 1     | O5-B-002  | Risk mitigation actions on target (O5)   | -      | -     | -              | -        | -            |  |
| O5-C-001  | Care Proceedings completed within 26 weeks                        | 80%    | 87%    | -                | -        | -     | SPE-B-007 | The % of children waiting less than 18 months between entering care and moving in with their adoptive family | 70%    | 75%   | Q2 2015/16     | -        | -            |  |
| 05-C-003* | Upheld complaints (service area overall) (O5)                     | -      | 0      | To Sept<br>15/16 | -        | -     | INI 66    | Looked after children cases which were reviewed within required timescales                                   | 90%    | 50.1% | To Q2<br>15/16 | -        | -            |  |
|           |   |        |        |                  |          |       | O5-B-003  | Adoptions from care  | 12%    | 5.5%  | To Q2<br>15/16 | -        | <b>→</b>     |  |
|           |   |        |        |                  |          |       | O5-B-005  | Continuous assessments completed within 45 working days  | 90%    | 90.6% | To Q2<br>15/16 | -        | -            |  |
|           |   |        |        |                  |          |       | O5-B-007  | Caseload per social worker   | 21     | 22.1  | At Q2 15/16    | -        | <b>4</b>     |  |

| Finance    | inance  |        | 50%   |            |          |              |          | People  |        |       | 90%        |          |       |  |  |  |
|------------|---|--------|-------|------------|----------|--------------|----------|---|--------|-------|------------|----------|-------|--|--|--|
| Ref        | Measure   | Target | Perf. | Period     | Quartile | Trend        | Ref      | Measure   | Target | Perf. | Period     | Quartile | Trend |  |  |  |
| O5-F-001   | Projected performance against revenue budget (O5) | 100%   | 101%  | Q2 2015/16 | -        | $\downarrow$ | O5-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O5) | 95%    | 94%   | At Sept 15 | -        | 1     |  |  |  |
| 05-F-001a* | Projected expenditure as % of budgeted (O5)       | 100%   | 100%  | Q2 2015-16 | -        | $\uparrow$   | O5-P-002 | Managers scoring Level 3+ for MM competencies (O5)    | 90%    | 100%  | At Sept 15 | -        | -     |  |  |  |
| O5-F-001b* | Projected income as % of budgeted (O5)            | 100%   | 95%   | Q2 2015-16 | -        | $\downarrow$ | O5-P-005 | Employees scoring Level 3+ for ME competencies (O5)   | 90%    | 100%  | At Sept 15 | -        | -     |  |  |  |
| 05-F-003   | Attainment of savings targets (O5)                | 100%   | 65%   | Q2 2015-16 |          |              | OF D 003 | Sickness absence (O5)                                 | 3.75   | 3.33  | To Sept    |          |       |  |  |  |
| U3-F-003   | Attainment of Savings targets (OS)                | 100%   | 05%   | Q2 2015-16 | -        | •            | U3-P-003 | Sickness absence (O5)                                 | 3.73   | 5.55  | 2015       | -        |       |  |  |  |
|            |   |        |       |            |          |              | O5-P-004 | Staff satisfaction (Feel valued) proxy measure (O5)   | 70%    | 83.3% | 2012 (Cal) | -        | -     |  |  |  |

| Outcome 6                     | Providing support to help families and adults in need and maximise their independence such that dependency on services reduces. |
|-------------------------------|---|
| Owner                         | Erik Scollay  |
| Period                        | Q2 2015-16  |
| Overall scorecard performance | 68%   |

| Custome       | er  |        |       | 100%        |          |                   | Busine   | ss   |        |        | 80%        |          |                   |
|---------------|---|--------|-------|-------------|----------|-------------------|----------|--|--------|--------|------------|----------|-------------------|
| Ref           | Measure   | Target | Perf. | Period      | Quartile | Trend             | Ref      | Measure  | Target | Perf.  | Period     | Quartile | Trend             |
|               | Proportion of older people (65 and over) who were still at home 91      |        |       |             |          |                   |          |  |        |        |            |          |                   |
| 2B            | days after discharge from hospital into reablement/ rehabilitation      | 90%    | 90.9% | Q2 2015-16  | -        | _ ↑               | O6-B-001 | Change Programme projects projected to meet milestones (O6)        | 100%   | 80%    | Q2 2015-16 | -        | ↓                 |
|               | services.   |        |       |             |          |                   |          |  |        |        |            |          |                   |
| 4R            | The proportion of people who use services who say that those            | 90     | 94.7  | 2014/15     |          | _                 | O6-B-002 | Capital projects projected to meet milestones (O6)                 | _      |        |            | _        |                   |
| 40            | services have made them feel safe and secure.                           | 30     | 34.7  | 2014/13     |          | '                 | 00-D-002 | capital projects projected to meet miles tones (60)                |        |        |            | -        |                   |
| ASCOF_1A      | Social care-related quality of life                                     | 19.6   | 20    | 2014/15     | -        | 1                 | O6-B-003 | Risk mitigation actions on target (O6)                             | -      | -      | -          | -        | -                 |
| NI 130b(KPI)  | Social Care clients receiving Self Directed Support (ADASS Definition - | 100%   | 100%  | To Q2 15/16 |          | $\leftrightarrow$ | 2A       | Permanent admissions to residential and nursing care homes per     | 118.5  | 114.12 | To Q2      |          |                   |
| 141 130b(K11) | Eligible users during the year)   | 100%   | 10070 | 10 02 13/10 |          | `′                | 20       | 100,000 population.  | 110.5  | 114.12 | 15/16      | _        | , ' I             |
| 06-C-005*     | Upheld complaints (service area overall) (O6)                           |        |       | To Sept 15  |          |                   | O6 B 006 | Number of reablement packages                                      | 60     | 249    | To Q2      |          |                   |
| 06-6-003      | Opheia complaints (service area overall) (06)                           | _      | _     | 10 зері 13  | _        | -                 | 00-6-006 | Number of readiement packages                                      | 60     | 249    | 15/16      | -        |                   |
| •             |   | -      |       |             |          |                   | O6-B-007 | %age of reablement episodes achieving identified goals             | 64.2%  | 69.92% | 2014/15    | -        | -                 |
|               |   |        |       |             |          |                   |          | Delayed transfers of care from hospital, and those attributable to | 1.56   | 0      | Apr-Aug 15 |          | $\leftrightarrow$ |
|               |   |        |       |             |          |                   | 20       | adult social care. (Per 100,000 population)                        | 1.50   | U      | Api-Aug 13 | -        | ₹7                |

| Finance    |   |        |       | 33%         |          |            | People   |   |        |       | 60%             |          |       |
|------------|---|--------|-------|-------------|----------|------------|----------|---|--------|-------|-----------------|----------|-------|
| Ref        | Measure   | Target | Perf. | Period      | Quartile | Trend      | Ref      | Measure   | Target | Perf. | Period          | Quartile | Trend |
| O6-F-001   | Projected performance against revenue budget (O6) | 100%   | 95%   | Q2 2015-16  | -        | -          | O6-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O6) | 95%    | 53%   | To Sept<br>2015 | -        | -     |
| O6-F-001a* | Projected expenditure as % of budgeted (O6)       | 100%   | 98%   | Q2 2015-16  | -        | 1          | O6-P-002 | Managers scoring Level 3+ for MM competencies (O6)    | 90%    | 100%  | To Sept 15      | -        | -     |
| O6-F-001b* | Projected income as % of budgeted (O6)            | 100%   | 103%  | Q2 2015-16  | -        | $\uparrow$ | O6-P-005 | Employees scoring Level 3+ for ME competencies (O6)   | 90%    | 94%   | To Sept 15      | -        | -     |
| O6-F-003   | Attainment of savings targets (O6)                | 100%   | 86%   | Q2 2015-16  | -        | <b>↑</b>   | O6-P-003 | Sickness absence (O6)                                 | 3.75   | 4.79  | To Sept<br>2015 | -        | -     |
| O6-F-002   | Projected performance against capital budget (O6) | 100%   | 73%   | At Q2 15/16 | -        | -          | O6-P-004 | Staff satisfaction (Feel valued) proxy measure (O6)   | 70%    | 79.4% | 2012 (Cal)      | -        | -     |

| Outcome 7                     | Providing, managing, maintaining and enhancing highways, streets, parks, open spaces, leisure facilities, public buildings and commercial properties such that the quality of place supports the needs of residents, visitors and business. |
|-------------------------------|---|
| Owner                         | Tom Punton  |
| Period                        | Q2 2015-16  |
| Overall scorecard performance | 74%   |

| Custome   | r   |        |       | 90%        |          |       | Busines  | ss   |        |        | 89%                     |          |                   |
|-----------|---|--------|-------|------------|----------|-------|----------|--|--------|--------|-------------------------|----------|-------------------|
| Ref       | Measure   | Target | Perf. | Period     | Quartile | Trend | Ref      | Measure  | Target | Perf.  | Period                  | Quartile | Trend             |
| LOE06     | Satisfaction with cleanliness of streets                            | 67%    | 71%   | 2011-12    | -        | -     | O7-B-001 | Change Programme projects projected to meet milestones (O7)            | 100%   | 100%   | Q2 2015-16              | -        | $\leftrightarrow$ |
| LOE08     | Satisfaction with waste and recycling collections                   | 80%    | 92%   | 2011-12    | -        | -     | O7-B-002 | Capital projects projected to meet milestones (O7)                     | -      | -      | -                       | -        | -                 |
| 07-C-001  | Percentage of Environment Customer Service Promises meeting targets | 90%    | 92%   | 2014-15    | -        | -     | O7-B-003 | Risk mitigation actions on target (07)                                 | -      | -      | -                       | -        | -                 |
| 07-C-002  | Customer satisfaction with public buildings                         | 80%    | -     | -          | -        | -     | LOE01    | Attendances at Leisure Centres   | 775000 | 759507 | To Q2 2015-<br>16       | -        | ↓                 |
| 07-C-004  | Overall customer satisfaction with Leisure Services                 | 55%    | 50%   | 2013 (Cal) | -        | -     | NI 192   | Percentage of household waste sent for reuse, recycling and composting | 35%    | 36%    | 2015/16<br>(Projection) | -        | ↓                 |
| O7-C-005  | Staff Satisfaction with Office Accommodation                        | 80%    | -     | -          | -        | -     | O7-B-004 | Streets meeting Keep Britain Tidy standards (Floor Target)             | 90%    | 93%    | 2013/14                 | -        | -                 |
| 07-C-006  | Customer satisfaction with commercial space                         | 80%    | 81%   | 2014/15    | -        | -     | O7-B-005 | Critical compliance works completed as per schedule (Electric)         | 100%   | 100%   | To Q2 2015-<br>16       | -        | -                 |
| 07-C-007* | Upheld complaints (service area overall) (07)                       | -      | 8     | To Sept 15 | -        | -     | O7-B-006 | Critical compliance works completed as per schedule (Gas)              | 100%   | 100%   | To Q2 2015-<br>16       | -        | -                 |
|           |   |        |       |            |          |       | O7-B-007 | Critical compliance works completed as per schedule (Legionella)       | 100%   | 99%    | Q1 2015-16              | -        | -                 |
|           |   |        |       |            |          |       | O7-B-008 | Occupancy rate in commercial portfolio (Commercial)                    | 88%    | 96%    | Sep 15                  | -        | $\downarrow$      |
|           |   |        |       |            |          |       | O7-B-009 | Occupancy rate in commercial portfolio (Enterprise)                    | 85%    | 91%    | Sep 15                  | -        | $\leftrightarrow$ |

| Finance    |   |        |       | 33%         |          |                   | People   |   |        | 83%   |            |          |       |  |  |
|------------|---|--------|-------|-------------|----------|-------------------|----------|---|--------|-------|------------|----------|-------|--|--|
| Ref        | Measure   | Target | Perf. | Period      | Quartile | Trend             | Ref      | Measure   | Target | Perf. | Period     | Quartile | Trend |  |  |
| 07-F-001   | Projected performance against revenue budget (O7) | 100%   | 101%  | Q2 2015-16  | -        | 1                 | 07-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O7) | 95%    | 100%  | 2015-16    | -        | 1     |  |  |
| 07-F-001a* | Projected expenditure as % of budgeted (O7)       | 100%   | 101%  | Q2 2015-16  | -        | $\downarrow$      | O7-P-002 | Managers scoring Level 3+ for MM competencies (O7)    | 90%    | 100%  | 2015-16    | -        | -     |  |  |
| 07-F-001b* | Projected income as % of budgeted (O7)            | 100%   | 100%  | Q2 2015-16  | -        | $\leftrightarrow$ | O7-P-005 | Employees scoring Level 3+ for ME competencies (O7)   | 90%    | 100%  | 2015-16    | -        | -     |  |  |
| 07-F-003   | Attainment of savings targets (O7)                | 100%   | 86%   | Q2 2015-16  | _        | .1.               | 07-P-003 | Sickness absence (O7)                                 | 3.75   | 3.49  | To Sept    | _        |       |  |  |
| 07-1-003   | Attaniment of savings targets (07)                | 100%   | 5070  | Q2 2013-10  |          |                   | 07-1-003 | Sickless absence (07)                                 | 3.73   | 3.43  | 2015       | _        |       |  |  |
| O7-F-002   | Projected performance against capital budget (O7) | 100%   | 71%   | At Q2 15/16 | -        | -                 | O7-P-004 | Staff satisfaction (Feel valued) proxy measure (O7)   | 70%    | 82.5% | 2012 (Cal) | -        | -     |  |  |
|            |   |        |       |             |          |                   | O7-P-006 | RIDDOR Reportable accidents in the workplace (O7)     | 2.25   | 8     | Q2 2015-16 | -        | 1     |  |  |

| Outcome 8                     | Ensuring that the financial assets and services and the physical assets of the Council support services in meeting needs whilst ensuring corporate financial probity. |
|-------------------------------|---|
| Owner                         | Paul Slocombe   |
| Period                        | Q2 2015-16  |
| Overall scorecard performance | 67%   |

| Customer  |  |        |        | 33%         |          |                   | Business |  |        | 58%    |                           |          |              |  |  |
|-----------|--|--------|--------|-------------|----------|-------------------|----------|--|--------|--------|---------------------------|----------|--------------|--|--|
| Ref       | Measure  | Target | Perf.  | Period      | Quartile | Trend             | Ref      | Measure  | Target | Perf.  | Period                    | Quartile | Trend        |  |  |
| 08-C-001  | Percentage of appeals actioned within 4 weeks of receipt                                   | 85%    | 46.08% | Q2 2015-16  | -        | \                 | O8-B-001 | Change Programme projects projected to meet milestones (O8)                        | 100%   | 50%    | Q2 2015-16                | -        | $\downarrow$ |  |  |
| O8-C-002  | Average customer rating of support services (/10)  | -      | -      | -           | -        | -                 | O8-B-003 | Risk mitigation actions on target (O8)   | -      | -      | -                         | -        | -            |  |  |
| 08-C-003* | Upheld complaints (service area overall) (O8)  | -      | 13     | To Sept 15  | -        | -                 | BV8      | Percentages of invoices paid on time ( within 20 days )                            | 91%    | 94.53% | Q1 2015-16                | -        | 1            |  |  |
| 08-C-004  | Percentage of appeals sent to the Tribunal Service within 3 months                         | 90%    | 100%   | Q2 2015-16  | -        | $\leftrightarrow$ | BV9      | % of Council Tax collected   | 56.92% | 54.65% | To Q2<br>15/16            | -        | ↓            |  |  |
| 08-C-005  | Number of new claims and change in circumstances for benefits submitted through self serve | 2850   | 2317   | To Q2 15/16 | -        | 1                 | BV10     | Percentage of Non-domestic Rates Collected   | 59.81% | 61.05% | To Q2<br>15/16            | -        | 1            |  |  |
|           |  |        |        |             |          |                   | BV78b    | Speed of processing - changes of circumstances for housing benefit claims          | 13     | 12.64  | To Q2<br>15/16            | -        | -            |  |  |
|           |  |        |        |             |          |                   | O8-B-010 | Rate of Return better than the Customised Benchmark on a 3 Year<br>Rolling Measure | 0%     | -1.9%  | July 2012 to<br>June 2015 | -        | -            |  |  |
|           |  |        |        |             |          |                   | O8-B-011 | Average number of days for the Council to receive payment                          | -      | -      | -                         | -        | -            |  |  |

| Finance  |   |        | 75%   |            |          |                   |          | People  |        |       | 100%       |          |              |  |  |
|--|---|--------|-------|------------|----------|-------------------|----------|---|--------|-------|------------|----------|--------------|--|--|
| Ref  | Measure   | Target | Perf. | Period     | Quartile | Trend             | Ref      | Measure   | Target | Perf. | Period     | Quartile | Trend        |  |  |
| 08-F-001   | Projected performance against revenue budget (O8) | 100%   | 92%   | Q2 2015-16 | -        | $\uparrow$        | O8-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O8) | 95%    | 95%   | 2015-16    | -        | $\downarrow$ |  |  |
| 08-F-001a*   | Projected expenditure as % of budgeted (O8)       | 100%   | 100%  | Q2 2015-16 | -        | $\leftrightarrow$ | O8-P-002 | Managers scoring Level 3+ for MM competencies (O8)    | 90%    | 94%   | 2015-16    | -        | -            |  |  |
| 08-F-001b*   | Projected income as % of budgeted (O8)            | 100%   | 101%  | Q2 2015-16 | -        | $\uparrow$        | O8-P-005 | Employees scoring Level 3+ for ME competencies (O8)   | 90%    | 93%   | 2015-16    | -        | -            |  |  |
| 08-F-003   | Attainment of savings targets (O8)                | 100%   | 95%   | Q2 2015-16 |          | _                 | 00 0 003 | Sickness absence (O8)                                 | 3.75   | 2.98  | To Sept    |          |              |  |  |
| U8-F-003   | Attainment of Savings targets (O8)                | 100%   | 95%   | Q2 2015-16 | -        | 1 08              | U8-P-003 | Sickless absence (O8)                                 | 3./3   | 2.90  | 2015       | -        | _            |  |  |
| O8-P-004 Staff satisfaction (Feel valued) proxy measure (O8) |   |        |       |            |          |                   |          |   | 70%    | 77.7% | 2012 (Cal) | -        | -            |  |  |

| Outcome 9                     | Ensuring that the democratic and governance processes of the Council are robust and that our staff and organisational support meets the needs of the services. |
|-------------------------------|--|
| Owner                         | Karen Whitmore   |
| Period                        | Q2 2015-16   |
| Overall scorecard performance | 73%  |

| Customer  |  |        | 83%    |            |          |                   |          | Business  |        |       | 67%        |          |       |  |  |
|-----------|--|--------|--------|------------|----------|-------------------|----------|---|--------|-------|------------|----------|-------|--|--|
| Ref       | Measure  | Target | Perf.  | Period     | Quartile | Trend             | Ref      | Measure   | Target | Perf. | Period     | Quartile | Trend |  |  |
| O9-C-001  | % of FOI requests responded to by the deadline (Democratic Services) | 95%    | 93.85% | 2015/16    | -        | 1                 | O9-B-001 | Change Programme projects projected to meet milestones (O9) | 100%   | 67%   | Q2 2015-16 | -        | ↓     |  |  |
| O9-C-003  | Average customer rating of support services                          | 70%    | -      | -          | -        | -                 | O9-B-002 | Capital projects projected to meet milestones (O9)          | -      | -     | -          | -        |       |  |  |
| O9-C-005  | Website quality (SOCITM)   | 3      | 3      | 2015-16    | -        | $\leftrightarrow$ | O9-B-003 | Risk mitigation actions on target (O9)                      | -      | -     | -          | -        |       |  |  |
| 09-C-004* | Upheld complaints (service area overall) (O9)                        |        | 2      | To Sept 15 |          |                   | O9-B-006 | Service transactions undertaken via website                 | 18000  | 28096 | To Q2      | -        |       |  |  |
| 09-0-004  | Opheia complaints (service area overall) (09)                        | -      |        | 10 зері 13 | -        | -                 |          | Service transactions undertaken via website                 | 18000  | 28090 | 15/16      |          | 1.    |  |  |
| ICT-C-005 | Respond and Fix service responses within timescales                  | 95.5%  | 99.93% | Sep 15     | -        |                   | O9-B-008 | UD activities which are used addressed according            | 90%    | 100%  | At Sept    |          | _     |  |  |
| IC1-C-005 | Respond and Fix service responses within timescales                  |        | 99.93% | 3eh 13     |          | 1 -               |          | HR policies which are up to date and compliant.             |        | 100%  | 2015       | -        | 1 1   |  |  |

| Finance    |   |        | 50%   |             |          |                   |          | People  |        |        | 90%        |          |            |  |  |
|------------|---|--------|-------|-------------|----------|-------------------|----------|---|--------|--------|------------|----------|------------|--|--|
| Ref        | Measure   | Target | Perf. | Period      | Quartile | Trend             | Ref      | Measure   | Target | Perf.  | Period     | Quartile | Trend      |  |  |
| 09-F-001   | Projected performance against revenue budget (O9) | 100%   | 96%   | Q2 2015-16  | -        | 1                 | O9-P-001 | Staff with current appraisal, as at 30 Sept 2015 (O9) | 95%    | 94%    | At Sept 15 | -        | $\uparrow$ |  |  |
| 09-F-001a* | Projected expenditure as % of budgeted (O9)       | 100%   | 97%   | Q2 2015-16  | -        | $\downarrow$      | O9-P-002 | Managers scoring Level 3+ for MM competencies (O9)    | 90%    | 100%   | At Sept 15 | -        | -          |  |  |
| 09-F-001b* | Projected income as % of budgeted (O9)            | 100%   | 100%  | Q2 2015-16  | -        | $\leftrightarrow$ | O9-P-005 | Employees scoring Level 3+ for ME competencies (O9)   | 90%    | 99%    | At Sept 15 | -        | -          |  |  |
| 09-F-003   | Attainment of savings targets (O9)                | 100%   | 94%   | Q2 2015-16  | _        |                   | U0-b-003 | Sickness absence (O9)                                 | 3.75   | 3.14   | To Sept    | _        |            |  |  |
| 03-1-003   | Attaniment of savings targets (03)                | 10070  | 3470  | Q2 2013-10  |          | '                 | 03-1-003 | Sickless absence (OS)                                 | 3.73   | 3.14   | 2015       |          |            |  |  |
| O9-F-002   | Projected performance against capital budget (O9) | 100%   | 69%   | At Q2 15/16 | -        | -                 | O9-P-004 | Staff satisfaction (Feel valued) proxy measure (O9)   | 70%    | 81.08% | 2012 (Cal) | -        | -          |  |  |