Newham London

Exceptions Report

December 2020/21

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Children & Young People (DCS)

												Good Performance	Poor Performance	Other reason for selection

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
13P1	% of re-referrals within 12 months Numerator Referrals which were within 12 months of a previous referral (for the same child) Denominator Number of referrals received in the month	Negative	19.1%	Dec	🔴	↑	15.6%	16.8%	16%		The rate of re-referrals have increased to 19% in December. There has been a steady increase in re-referrals in the past three, which will need to be monitored. This could be due to Covid-19 and the overall increased contacts received by MASH from September to December 20 compared to the previous year. Although there has been an increase in the past three months, the data shows that the overall re-referrals year to date is at 16.8%, which is lower than our statistical neighbours, London and England Average. Reason for exception: performance below equivalent 2 periods last year. Direction of Travel: compares Q3 to Q2. **BENCHMARKING:** **England Average = 22.6%** **London Average = 18.5%** **Statistical Neighbours Average = 18.5%**
15P1	Child protection plans lasting 12 months or more Numerator = number of children subject of a CPP continuously for 12 months or longer as of the snapshot date Denominator = number of children subject of a CPP as of the snapshot date	Negative	17.7%	Dec	🔴	🔺	25.7%	17.7%	15.0%		At the end of December 2020, 17.7% of children on Child Protection Plans (67 children) had been on a plan for 12 months or more, which is a reduction in the previous month. The percentage is now on a par with our statistical neighbours and England averag eand the target needs to be adjusted to match stat neighbours. The impact of multi agency practice correlates to the duration of plans of intervention on the lives of children and therefore the overall rise in duration of Child Protection Plans beyond 12 months is a reflection of the quality of practice combined with the impact of turnover in social workers as this is a factor that delays progress, however the Child Protection Chairs as a team have provided a level of consistency. Reason for exception: not meeting target and performance worse than the same period last year (though note target needs adjusting in line with Stat Neighbours). Direction of Travel: compares Q3 to Q2. **BENCHMARKING:** **England Average = 17.1%** **London Average = 19.9%** **Statistical Neighbours Average = 21.0%**
18P1	Stability of placements of looked after children: length of placements. Snapshot indicator - the percentage of looked after children under 16 who had been looked after continuously for at least 2.5 years in the reporting period (denominator) who were living in the same placement for at least 2 years, or are placed for adoption and their adoptive placement together with their previous placement together last for at least 2 years (numerator)	Positive	61.6%	Dec	🔴	↑	60.2%	61.6%	68%		61.6% i.e. 53 Looked After Children who had been looked after for at least 2.5 years were living in the same placement for at least 2 years at the end of December 2020. This indicator has remained largely stable in this reporting year. Ensuring stability of placement is dependent upon the quality permanency planning and the sufficiency of placements in line with the needs analysis of the children in care cohort. This is an area of particular focus in the improvement planning; progress is beginning to show although the whole system level of change required combined with the nature of this indicator means that sustained improvement will be gradual over the following two years. Reason for exception: Indicator does not meet target and performance worse than same periods last year. Direction of Travel: compares Q3 to Q2. **BENCHMARKING** **England Average = 69%** **London Average = 68%** **Statistical Neighbours = 68%**

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
19P1	Care leavers in suitable accommodation (reported 1 month in arrears) Numerator = Number of Young people in suitable accommodation Denominator = Number of young people whose birthday falls in month *Number of young people we have been 'in touch' with*	Positive	49.8%	Nov	🔴	↓	78%	50%	100%		Of the young people that are eligible for support, according to the data 49.8% are in suitable accommodation. This figure is not understood to be an accurate reflection of actual performance, there is a known recording issue in the service resulting in an underreporting of actual performance. We have an action plan in place to address the historic poor recording and a robust process to ensure data is monitored to ensure it is accurate and up to date. It is expected that as recording issues are addressed reported performance should increase and reflect actual performance. The Service Manager will review performance within Pod & Service Meetings to ensure oversight over accurate recording. Performance will be monitored by the Head of Service through the monthly Practice and Outcomes meeting. Reason for exception - does not meet target and performance below the same period last year Direction of Travel: Compares November to October. **BENCHMARKING** **England Average = 85.9%** **London Average = 84.6%** **Statistical Neighbours Average = 83.4%**
20P1	Care leavers in employment, education or training (reported 1 month in arrears) Numerator = Number of young people who are EET Denominator = Number of young people whose birthday falls in month *Number of young people we have been 'in touch' with*	Positive	31.30%	Nov	🔴	↓	50%	31%	55%		Of the young people that are eligible for support, according to the data 31.3% are in employment, education or training. This figure is not understood to be an accurate reflection of actual performance, there is a known recording issue in the service resulting in an underreporting of actual performance. This figure is not understood to be an accurate reflection of actual performance, there is a known recording issue in the service resulting in an underreporting of actual performance. We have an action plan in place to address the historic poor recording and a robust process to ensure data is monitored to ensure it is accurate and up to date. It is expected that as recording issues are addressed reported performance should increase and reflect actual performance. The Service Manager will review performance within Pod & Service Meetings to ensure oversight over accurate recording. Performance will be monitored by the Head of Service through the monthly Practice and Outcomes meeting. The leaving care service is working with the Newham Virtual School to ensure that plans are in place to track and assist all young people who are NEET into employment education or training. Reason for exception: does not meet target and performance is below the same periods last year. Direction of Travel: compares Nov to Oct. **BENCHMARKING** **England Average = 55.3%** **London Average = 57.2%** **Statistical Neighbours Average = 58.8%**

CORPORATE PI

	ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
CORPORATE PI	21P1	SEN: % of Education, Health and Care Plans(EHCPs) issued within 20 weeks from initial request	Positive	0.0%	Dec	🔴	↑	33.5%	8.6%	75%		The impact of Covid-19 on the assessment process and timeliness is now evident. Affected cases have been low until recent, however in December 77% (10 out of 13) of the total EHCP's issued were delayed as a result of late advice received from professionals (EP, Medical and Social Care). Going forward, we expect this trend to continue until some normality to life is restored. The performance has further been affected as the team has been unable to use its draft plan writing service (outsourced) since October 2020. The impact of this is forecasted to continue until April 2021 when the flow of draft plans will return.

The average number of new EHCP's issued each month in 20/21 is 39 with a total of 714 EHCP's issued over an 18 month period, of those 20% were issued within the statutory timeframe. The performance for quarter 3 in 20/21 is an improvement to quarter 1 and 2 and overall performance for 20/21.

* Data is taken from Impulse system and is open to change as officers continue to update assessments. Data is refreshed each month.
BENCHMARKING
England avarage = 60% |

Children & Young People (Brighter Futures)

	Exception Criteria	
Good Performance	Poor Performance	Other reason for selection

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
BF01	% of infants who turned 30 days in the quarter who received a face-to-face New Birth Visit (NBV) within 14 days from birth, by a Health Visitor with mother (and ideally father). Numerator: Number receiving visits Denominator: Number turning 30 days	Positive	94%	Quarter 4 (2019/20)	🔴	⬆	94.7%	N/A	96%		There have been lengthy delays in obtaining the Q1 to Q4 19/20 health data from ELFT for all the Children's Health measures so this is the first time it has been presented in this report. Reports have now been received from ELFT and outturns revised accordingly. Note Q1 and Q2 data has not been received. There have been delays to procuring our own clinical system so a decision was made to extend the contract with ELFT until Oct 2021, allowing us time to develop a clinical system under the LAs control by the end of the financial year (April 2021). The data therefore remains to be from RIO, via our ELFT contract. The data shows 94.7% of infants who turned 30 days in 9/20 received a face to face New Birth Visit by a Health Visitor within 14 days. Reason for exception: under target, though improved on last year. Considerations should be made for 94.7% to be considered Amber, given the 96% target will be rag rated green Direction of travel: 19/20 compared to 18/19 (91.5%) BENCHMARKING - AWAITING FROM SERVICE
BF02	% of face to face contacts made with new mothers by a health visitor at 28 weeks or above (in relation to the number of post 28 week notifications received).	Positive	29.4%	Q4 18/19	⚫	N/A	N/A	N/A	50%		Data on the number of post 28 week notifications has not been received by ELFT, therefore only the number of face to face contacts made with new mothers by a health visitor at 28 weeks or above is recorded. The service is therfore doing a manual count to determine the denominator (not in time for this report) There have been lengthy delays in obtaining the Q1 to Q4 19/20 health data from ELFT for all the Children's Health measures so this is the first time it has been presented in this report. Reports have now been received from ELFT and outturns revised accordingly. Note Q1 and Q2 data has not been received. There have been delays to procuring our own clinical system so a decision was made to extend the contract with ELFT until Oct 2021, allowing us time to develop a clinical system under the LAs control by the end of the financial year (April 2021). The data therefore remains to be from RIO, via our ELFT contract. Reason for execption: Issues with data.Please note there isn't a national target for antenatal contacts, although a mandated intervention. Due the the small number of miscarriages before 28 weeks and notifications (denomintor) arriving in the team before 28 weeks, the % achieved requires adjustment Direction of Travel: 19/20 compared to 18/19 (36%) BENCHMARKING - AWAITING FROM SERVICE
BF03	% of children due a 6-8 weeks review by the end of the quarter, who received a 6-8 weeks review by the time they turned 8 weeks.	Positive	66.5%	Quarter 4 (2019/20)	🟢	⬆	66.3%	N/A	60%		There have been lengthy delays in obtaining the Q1 to Q4 19/20 health data from ELFT for all the Children's Health measures so this is the first time it has been presented in this report. Reports have now been received from ELFT and outturns revised accordingly. Note Q1 and Q2 data has not been received. There have been delays to procuring our own clinical system so a decision was made to extend the contract with ELFT until Oct 2021, allowing us time to develop a clinical system under the LAs control by the end of the financial year (April 2021). The data therefore remains to be from RIO, via our ELFT contract. The data shows that 66.3% of children due a 6-8 weeks review by the end of the quarter, who received a 6-8 weeks review by the time they turned 8 weeks. The service is taking steps to reconcile this performance with infant feeding data reporting at this milestone Reason for exception: performance above target consistently. Direction of travel: 19/20 compared to 18/19 (62.9%). BENCHMARKING - AWAITING FROM SERVICE

										Good Performance	Poor Performance	Other reason for selection

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
BF04	% of children who turned 15 months in the quarter, who received a 12 month review, by the age of 15 months.	Positive	77.2%	Quarter 4 (2019/20)	🔴	↑	77.2%	N/A	80%		There have been lengthy delays in obtaining the Q1 to Q4 19/20 health data from ELFT for all the Children's Health measures so this is the first time it has been presented in this report. Reports have now been received from ELFT and outturns revised accordingly. Note Q1 and Q2 data has not been received. There have been delays to procuring our own clinical system so a decision was made to extend the contract with ELFT until Oct 2021, allowing us time to develop a clinical system under the LAs control by the end of the financial year (April 2021). The data therefore remains to be from RIO, via our ELFT contract. Reason for exception: an indicator which have failed to meet target during 19/29.Considerations should be made for 77.2% to be considered Amber, given the 80% target will be rag rated green Direction of Travel: 19/20 compared to 18/19 (72.5%) BENCHMARKING - England Q3 19/20 84.5% London Q3 19/20 81.1%
BF05	% of children due a review by the end of the quarter, who received a 2-2.5 year review, by the age of 2.5 years. Numerator: Number receiving a review Denominator: Number turning 2.5 years	Positive	72.6%	Quarter 4 (2019/20)	🟢	↑	76.4%	N/A	55%		There have been lengthy delays in obtaining the Q1 to Q4 19/20 health data from ELFT for all the Children's Health measures so this is the first time it has been presented in this report. Reports have now been received from ELFT and outturns revised accordingly. Note Q1 and Q2 data has not been received. There have been delays to procuring our own clinical system so a decision was made to extend the contract with ELFT until Oct 2021, allowing us time to develop a clinical system under the LAs control by the end of the financial year (April 2021). The data therefore remains to be from RIO, via our ELFT contract. The 2-2.5 year review is offered to all parents by the Health Visiting service as it's a mandated intervention as outlined by the Healthy Child Porgramme. The service is currently also implementing a 2 1/2 year integrated review. There is also a speech and language communication project aligned to current reviews in 19/20. The service has also been conducting an optional Speech and Communication language needs HV project in the quarter joint with the 2-2.5 year health review. This extends each 2 year clinic appointment slot to 1 hour (double the usual time) in order to give enough time to complete the speech and language element. This has reduced the time slots available for 2-2.5 year health reviews which may account for the slight decrease from Quarter 2. Reason for exception: Indicator where performance has significantly improved for the last three periods or/and is above the end of year performance achieved in the previous year Direction of travel: 19/20 compared to 18/19 (66.5%) BENCHMARKING -Q3 19/20 London 78.5%
BF06	% of children who received a 2-2½ year review during the quarter for whom the ASQ-3 is completed as part of their 2-2½ year review	Positive	91.2%	Quarter 4 (2019/20)	🔴	↓	90.9%	N/A	100%		There have been lengthy delays in obtaining the Q1 to Q4 19/20 health data from ELFT for all the Children's Health measures so this is the first time it has been presented in this report. Reports have now been received from ELFT and outturns revised accordingly. Note Q1 and Q2 data has not been received. There have been delays to procuring our own clinical system so a decision was made to extend the contract with ELFT until Oct 2021, allowing us time to develop a clinical system under the LAs control by the end of the financial year (April 2021). The data therefore remains to be from RIO, via our ELFT contract. Reason for execption: Indicators which have failed to meet target for two consecutive months, or projections suggest the end of year target will not be met for annual indicators. The service is investigating this reduction with the reporting team, as there is no internal rationale for the decrease in quarter 4 Direction of travel: 19/20 compared to 18/19 (95.2%) BENCHMARKING - Q3 19/20 London 91.6%

	Good Performance		Poor Performance		Other reason for selection

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
BF07	% of infants recorded as being totally and partially breastfed at 6-8 wks in Newham as a % of those who were due a Review by the end of the period. Numerator: Number recorded as breastfed Denominator: Total number of infants	Positive	41.4%	18/19	⬤ (grey)	N/A	0.0%	N/A	N/A		Breastfeeding data supplied by ELFT in Nov 20 for Q1 to Q4 19/20 is incorrect and the Children's Health team have requested a new report. Note: The denominator used is that of all children due a 6-8 week check rather than just those who choose to take up the 6-8 week check (as not all parents do). This means the reported % may be artificially low as mothers may breastfeed and not have taken up the 6-8 week check, so their status is unknown. The above data is from the NHS England data set. GPs in Newham have historically refused to record breastfeeding data so the data available is incomplete. The only data available is that from 6-8 week checks by Health Visitors which is a mandatory check, and therefore isn't taken up by all families. The HSCIC Portal which requires Newham to submit breastfeeding data uses a different definition to the data that NHS England requires Providers to collect, and therefore data for Newham is not shown on the portal. Reason for exception: flagging data issues.The reports recieved from ELFT in in question as did not concur with the service internal audits of records, therefore current data recieved was rejected. BENCHMARKING - AWAITING FROM SERVICE
BF08	% of unique children attending Children's Centres (unique to quarter and unique in the year to date) Numerator: Number of unique children Denominator: 0-4 population	Positive	5.3%	Quarter 2	⬤ (red)	↓	35.1%	7.8%	33% (2019/20)		Approximately 5.3% of the 0-4 population were contacted by the children centres during 2020/21 Q2. This is lower than the same quarter in the previous year by 11.2% points. Figures will have been impacted by Covid-19 as universal ace to face sessions could not be held. During Q2, the programme focused on family support, keeping in touch calls, targeted face to face work such as Health Visitor clinics for identified vulnerable families, and started to roll out online/zoom sessions to pilot new access methods. While the online sessions did see some increase in engagement, generally they did not prove overly popular due to a variety of reasons including digital poverty and families' concerns over the amount of screen time children were getting at home. Quarters 2 and 3 are historically expected to be lower than quarters 1 and 4; this is due to the summer holidays and Christmas shutdown periods resulting in less attendance/delivery. The 19/20 year end figure of 9,541 unique attendances is lower than the last financial year by 2.8% points. Attendance was significantly impacted by Covid-19 during quarter 4 which seems to be the main driver in the reduction. Note an annual target alone is set for this indicator. The 0-4 population is the figure from the ONS mid year estimate (2019) published in June 2020. This PI cannot be RAGGED against target until the end of year as it looks at unique numbers. Reason for exception: Significantly below the same period last year. Covid impacted. Direction of Travel: Q2 20/21 vs Q2 19/20.

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
BF09	Number of visits to children's centres (total volume of contacts)	Positive	19,073	Quarter 2	🔴	↓	170,320	29,210	180,000 (2019/20)		There were 19,073 total contacts during 2020/21 Q2, which is a 49% decrease in comparison to the same quarter last year. This is not measuring unique children but the total volume of contacts with families, this includes contacts in the family home and community locations. The large reduction is due to impact of Covid and sites having to cease delivering universal face-to-face activities. Although some targeted face-to-face activity has continued to be delivered wherever possible, as it is mostly on a 1:1 basis we simply cannot reach the same volumes. The year end volume of contacts for 19/20 has fallen by 9.2% compared to the previous year. Again, the impact is mostly attributed to Covid-19 during quarter 4. Note an annual target alone is set for this indicator.. Reason for exception= Q2 performance significantly lower than the same period last year. Covid impacted. Direction of Travel: Q2 20/21 vs Q2 19/20
10P1	Number of unique service users receiving Family Support (unique to quarter and unique in the year to date)	Positive	1074	Quarter 2	🟢	↑	2,289	1,497	2,000		There were 1,074 service users who received family support in 2020/21 Q2 - this is an increase on the same period the previous year of 63%. Although Covid has generally seen a negative impact on services and access, family support has remained a focus for BSiL during this crisis to ensure that our msot vulnerable families do not fall through the net. The children's centres have also taken on additional responsiilities during this time and have supported Keeping in Touch calls with families of SEND children, as well as some acting as distribution hubs for food parcels/family boxes/formula milk etc. In total, 2,289 service users received family support in 2019/20 which is a 8.3% decrease on the previous year. Anecdotal evidence from providers attributes this fall in numbers partly to the rise of complex cases requiring longer intervention. Delivery has also been impacted as low staffing numbers also means that any vacancies or absences (annual or sick leave etc.) in Family Support has a large impact on numbers reached. Family support has continued to be delivered virtually via Zoom and telephone calls during Covid. Family support workers have also been supporting Keeping In Touch calls with SEND children which started at the tailend of quarter 4.Family Support work is targeted at vulnerable families who are more likely to meet thresholds for statutory services if early intervention is not received, or may be undertaken alongside statutory services in order to step families down e.g. as part of a CP Plan. Referrals for family support work will come from a number of sources including Triage, Children's and Adults Social Care, Nurseries/Schools and Health Visiting. Children's Centre staff will also work with families in other sessions to identify needs for Family Support. On a Neighbourhood level, the numbers receiving Family Support fluctuate, but this reflects the different needs and preferred methods of engagement of residents in each Neighbourhood. The variance also reflects Neighbourhoods refining their approach quarter to quarter to improve engagement. Some areas find that their families are less likely to seek support and need more time to build relationships with practitioners during other sessions before they will engage with Family Support. An annual target has been set for this indicator but cannot be RAGGED until year end as it is cumulative and unique to quarter. Direction of Travel: Q2 20/21 vs Q2 1920

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (YTD or end yr outturn)	2020/21 (YTD)	2020/21 Target	Chart	Commentary
11P1	Number of unique users 0-4 attending stay and play sessions (unique to quarter and unique in the year to date)	Positive	1,432	Quarter 2	🔴	↓	6,629	TBC	7,300 (2019/20)		There were 1,432 unique children aged 0-4 that attended Stay and Play sessions in 2020/21 Q2. This is a reduction of 54.2% compared to the same quarter the previous year. This decrease is due to Covid-19 and children's centres having to stop providing universal face-to-face sessions which account for the majority of our contacts. This data has started to improve for Q2 with the implementation of the online summer programme, however we have seen issues with engagement due to digital poverty, language barriers to accessing tech, family concerns over screen-time for young children at home etc.

The total number of unique 0-4 year olds attending a stay and play session in 2019/20 was 6,629, which is a 7.4% decrease compared to the previous year. Work has been undertaken to increase the number of Stay and Play sessions on offer, as they are the core source of turning families away from provision.

The target for this PI has been set at 75% of unique 0-4 contacts (CBS5.0), this is as not every family who attends a Health Clinic or other activity at a Children's Centre will necessarily wish to take up the offer of Stay&Play sessions, but the aim is to have the majority of registered families attend at least one session. The target was not met for 2019/20 with only 69.5% of unique 0-4 contacts attending at least one stay and play session; this is a 0.2% increase compared to the previous year.

Stay and Play sessions include a range of activities including baby singalong, messy play, music and movement, parent and toddler and singing and craft. Note some sessions in the Stay and Play category are also included in other categories e.g. parenting. Attendance will therefore also be counted within that category.

Reason for exception: Q2 performance significantly down compared to Q2 19/20 - Covid impacted.

Direction of Travel: Q2 20/21 vs Q2 19/20 |

Adults & Health

	ID	Measure	Data Period	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
	01P5	Percentage of customers with Direct Payments Snapshot	2019/25	Positive	27.1%	Dec	Red	Red (Down)	29.1%	27.1%	29.0%		27.1% of customers were in receipt of a direct payment at the end of December 2020. This is below the target of 29%, but within the benchmarking averages. National Average = 27.6%, London Average = 28.4% and Statistical Neighbours average = 27.0%. New Direct Payment start-ups were suspended in the covid-19 emergency period and ASC staff are working to address the backlog of new Direct Payments requests. Direction of travel (DoT) compared against same period last year (28.7%)
	02P5	Permanent admissions to residential and nursing care homes (Adults 18-64) (number of new admissions) Cumulative	2019/28	Negative	6.3	Dec	Red	Red (Down)	6.7	6.3	5.0		There have been 15 permanent admissions to residential and nursing for people aged 18-64. This would be reported nationally as a rate of 6.3 per 100,000 of the adult population aged 18-64.This indicator is currently above target and performing well against the London and national benchmarking averages. All of these placements have been ratified and agreed that there is no other option to meet the customer's needs. An example is a customer with a degenerative neuro condition where needs could not be met at home. There is a risk that this indicator will deteriorate as there are an increasing number of people presenting with complex long term health conditions at a younger age. Direction of travel (DoT) compared against same period last year (5.8)
	03P5	Permanent admissions to residential and nursing care homes (adults 65+) (number of admissions) Cumulative	2019/29	Negative	253.4	Dec	Green	Green (Up)	433.4	253.4	382.0		There have been 69 permanent admissions to nursing and residential care for customers aged 65+. This indicator is reported nationally as 253.4 rate per 100,000 of the population aged 65+, which is good when compared against London and national averages. The reporting of new permanent admissions into care homes for 65+ has been affected by Covid-19 operational processes, in particular temporary placements from the Integrated Discharge Hub and NHS funding for care post discharge. As a result, temporary placements that may become permanent are not reported here as they are currently funded by the NHS. Direction of travel (DoT) compared against same period last year (346.96)
CORPORATE PI		Number of people with a Learning Disability in receipt of Long Term Services in employment Cumulative	2019/31	Positive	5.8%	Dec	Red	Red (Down)	10.7%	5.8%	11.2%		39 out of 671 (5.8%) of learning disability customers are recorded as in employment this year to date. Performance for this indicator is below National (6.1%) and London (7.0%) averages. An exercise to review 72 customers who were in employment last year is in progress to improve performance and return to similar levels as last year. Direction of travel (DoT) compared against same period last year (9.8%)
	04P5	% of all customers reviewed or reassessed (Cumulative)	2019/32	Positive	52.0%	Dec	Red	Red (Down)	72.7%	52.0%	80.0%		52.0% of customers have been reviewed or re-assessed since April-20. Reviews performance is 8.3% below Q3 target (60%) and 4.17% below the same period last year. Disruption caused by Covid-19 and the increased volume of customers receiving a long term service, are the contributing factors for the review outturn. Staff from the Review Team were redeployed to other priority areas during the emergency period. However, all Adult Social Care customers have received a welfare check between March and July. A smaller priority group of ASC customers were also welfare checked in November. Direction of travel (DoT) compared against same period last year (56.2%) Local PI - no direct comparator
	05P5	Percentage of carers assessed, reassessed or reviewed Cumulative	2019/33	Positive	28.4%	Dec	Red	Red (Down)	54.6%	28.4%	60.0%		28.4% of carers have been assessed or reviewed since April-20. Performance is 16.6% points below Q3 target of 45%. Reduction in performance is linked to the temporary FastTrack covid-19 emergency assessment processes implemented during the peak of the coronavirus crisis which did not capture informal carer interventions. BAU processes were reinstated on 25th May which enable practitioners to capture joint carer assessments and reviews, and it is expected that this KPI will return to similar levels of the monthly average in line with increased customer review performance. Direction of travel (DoT) compared against same period last year (43.7%)

	Good Performance	Poor Performance	Other reason for selection

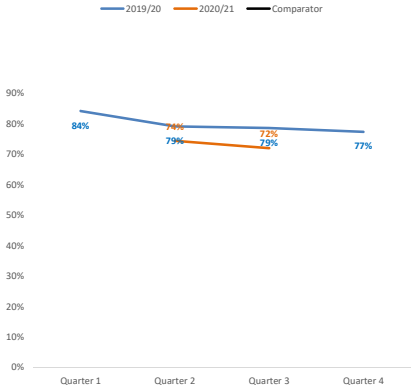|	ID	Measure	Data Period	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
CORPORATE PI		% of safeguarding concerns which led to a completed enquiry Cumulative	2019/34	N/A	24.9%	Dec	Other	N/A	28.2%	24.9%	NA		24.9% of safeguarding concerns have led to a completed enquiry this year. The conversion rate of concerns to enquiries has decreased compared to the same period last year, this is partly due to different arrangements for screening, which have been implemented with the creation of the MASH. This has led to more robust initial screening at the concern stage and the reduction in the number of s42 enquiries. ASC's Covid-19 arrangements included a robust action plan in which all its high and moderate risk customers were contacted a part of widescale welfare checks. This pro active approach led to the early identification and prevention of potential safeguarding issues, such as possible neglect before they reached the concern stage. This preventative measure will account for much of this reduction in concerns.
CORPORATE PI		Effectiveness of Safeguarding Action Percentage of safeguarding enquiries where a risk was identified and the risk was removed or reduced Cumulative	2019/35	Positive	92.8%	Dec	Green	Red (Down)	95.3%	92.8%	90.0%		92.1% of safeguarding enquiries resulted in the risk being reduced or removed this year to date. Performance is above target (90%). The number of completed enquiries has decreased compared to the same point last year due to the coronavirus visiting restrictions on practitioners, resulting in a higher numbers of active enquiries remaining open. Direction of travel (DoT) compared against same period last year (94.9%)
CORPORATE PI	06P5	Percentage of safeguarding enquiries where the desired outcomes of the person at risk were fully or partially achieved Cumulative	2019/37	Positive	96.5%	Dec	Green	Green (Up)	96.4%	96.5%	90.0%		In 96.5% of safeguarding investigations where the adult at risk (or a representative) expressed their desired outcomes, those outcomes were either partially or fully achieved. Performance is above target of 90% and against national and London averages. The number of completed enquiries has decreased compared to the same point last year, partly due to different arrangements for screening, which have been implemented with the creation of the MASH. This has led to more robust initial screening at the concern stage and the reduction in the number of s42 enquiries. Direction of travel (DoT) compared against same period last year (95.2%)
CORPORATE PI		Customer Satisfaction - ASCOF 3A Overall satisfaction of people who use services with their care and support	2019/39	Positive	55.5%	2019/20	Red	Red (Down)	59.4%	55.5%	59.3%		The latest annual customer survey was undertaken in 2019. As of Jan/Feb 2020, 55.5% of people who use services, say that they are satisfied with the care and support they are receiving. This is in comparison to 58.6% within London (3.1% lower) and 64.2% of those who live in England as a whole (8.7% lower). This result dropped by 3.9% when compared to the previous year, 59.4%, and 5% lower than the 2015/16 high of 60.5%. A cross departmental action plan will be developed to enable us to monitor and review the feedback provided in more detail. This will enable the service to target areas requiring improvement. Jan/Feb 2021 customer survey was a voluntary Return, which Newham did not take part in, due to the demands caused by Covid-19. Direction of travel (DoT) compared against same period last year (59.4%)

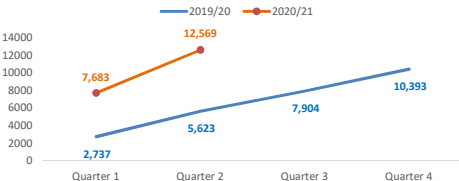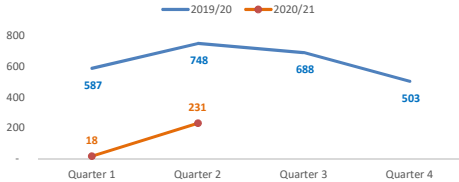| ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
05P6	Use of Leisure Centres (Attendance to Newham's 4 Leisure Centres and the Manor Park Fitness Centre) Reported by activeNewham	Positive	25,197	Oct-20	Red	N/A	1,503,104	49,015	N/A		November data will be provided with December as the service was closed in November due to Covid 19 and key staff have been furloughed. In October there were 25,197 attendances. This is up from attendances in September (17,192). All service areas increased in October indicating that customer confidence in returning to the centres was strong. This was also evident by the positive feedback received from customers. Centres closed again at the start of November due to Covid 19. There is no benchmarking data for this indicator. This indicator is impacted by Covid 19.
06P6	Number of Active Volunteers The number of individuals enrolled on the Newham Volunteers Scheme (currently commissioned to activeNewham) who have volunteered since April (1 month in arrears).	Positive	43	Sep-20	Grey	N/A	495	495	761		October data will be provided with November data as the service was closed in November due to Covid 19 and key staff have been furloughed. There were 43 new enrolments in September. The service has enrolled a high number of volunteers since April, responding to the Covid epidemic. There is no benchmarking data for this indicator. This indicator is impacted by Covid 19. No Data provided for March 2020 due to service closure.
07P6	Volunteer Hours though Newham Volunteering Programme (currently commissioned to activeNewham) 1 month in arrears)	Positive	173	Sep-20	Grey	N/A	17,362	17,362	N/A		October data will be provided with November data as the service was closed in November due to Covid 19 and key staff have been furloughed. In September there were 173 hours of volunteering. The volunteering hours are very low due to a number of organisations not having been able to submit timesheets/confirm hours. This will send be revised next month. Key projects included: 3 volunteers have undergone and completed training to be a 'Maternity Mate'. This role provides emotional and practical support during pregnancy, childbirth, and the early weeks of the family life to very vulnerable pregnant women in Newham. There is no benchmarking data for this indicator. This indicator is impacted by Covid 19. No Data provided for March 2020 due to service closure.
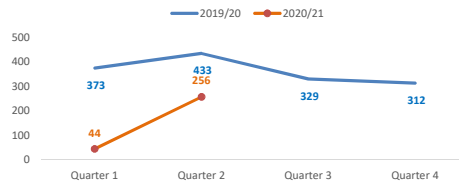
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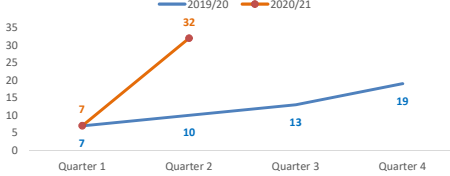
ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20	2020/21 YTD	2020/21 Target	Chart	Commentary
ENV09	Street, estate and environmental cleanliness – Local Environmental Quality Index (LEQs): Estates Internal Caretaking Definition: Percentage of blocks inspected marked acceptable	Positive	76.28%	Oct-20	Red	Red (Down)	79.20%	75.90%	75%		This indicator has been selected as an 'exception' as the service has not achieved the set target. The quarter three performance outturn at 70% is below the 75% performance target. The Cleansing service has analysed the data and has identified the main areas of concern. The analysis has highlighted the particular aspects of cleansing that require attention within the blocks; scuff marks on walls and the cleanliness of entrances. This is being addressed with the supervisors and this will then be raised with the relevant caretakers. Performance will continue to be monitored at monthly contract meetings until the service returns in-house. A number of changes have been made to the externalised business units (Ixact, Mint and PRS) including an interim taking on the role of Managing Director for all three business units. A report went to Cabinet in early November where a decision was made to terminate the existing contracts and transfer services from the Council's wholly owned Companies (Mint, Ixact and PRS) to an in-house service model at the earliest opportunity. Additionally, the Quality Assurance Team was subject to a service restructure and has been replaced with the Public Space Monitoring Team. The outcome of this has led to an increase in the number of estates being monitored from 112 and 179 in July and August to 242 and 350 in September and October. NB: Year-to-date covers June-October data only. All estates internal inspections ceased on the 23rd of March due to the governments guidelines on controlling the Covid-19 virus outbreak. Internal estate inspections resumed from the 1st of June. Note internal estate inspections require the Public Space Monitoring Team to enter inside the estate block and inspect 11 internal communal features including lobby, stairs, lighting and lift. Comparator: Local PI - no comparator.

	Good Performance		Poor Performance		Other reason for selection

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20	2020/21 YTD	2020/21 Target	Chart	Commentary
02P4	Anti-social Behaviour (ASB) levels - Police recorded CAD (Computer Aided Dispatch) calls Cumulative Indicator	Negative	16872	Dec-20	●	↓	10,393	16,872	See Commentary		Performance for the year to Dec 2020, shows a increase in police recorded ASB, 113.5%, (8968 calls) when compared with the same cumulative period last year (16872 vs 7904). In comparison council reported ASB has seen a decrease by -16.2% (-1595 calls) when compared with the same period last year. Monthly performance shows a 67.2% increase in police recorded CAD ASB calls (504 calls) when compared with the same period last year (1254 vs 750). Definition and Context Note these are calls received regarding ASB, not offences detected. CAD - ASB (Opening codes 1/2/3 = Code 11 Drug Offences or one of the Home Office ASB codes 200-216). Definition; ASB calls are recorded and dealt with in the police CAD (Computer Aided Despatch) control room and includes drugs, fireworks, nuisance/rowdy/inconsiderate behaviour, street drinking, prostitution, etc. There are no targets set by the Mayor's Office for Policing and Crime (MOPAC).
03P4	Waste in Front Gardens - Notices Issued (CPW/CPN/FPN)	Positive	400	Jan-21	●	↓	2,526	400	N/A		This indicator has been impacted by the Covid-19 pandemic. Performance for the year up till Dec 2020, shows a -82.1% decrease (1839) in waste in front gardens enforcement warnings and notices issued when compared with the same period last year (400 vs 2239). Current monthly performance shows a -80.8% reduction in total enforcement notices issued (-139) when compared with the same period last year (33 vs 172). Actions and Activity The service believes that a focused approach to neighbourhood enforcement has led to clearer guidance and better community relationships, resulting in greater compliance. In addition a CPW issued remains in force for the time a person resides at a property, and will only be re-issued if there is a change of ownership/residential status. Definition and Context Upon discovery of accumulative waste, on open land and in a front or rear garden which could include but not limited to mattresses, furniture, building waste, and other refuse/litter, a Community Protection Warning (CPW) is issued. If this notice is not complied with a Community Protection Notice (CPN) is issued. If this CPN is not complied with Fixed Penalty Notice (FPN) will be issued.
04P4	Total number of Fixed Penalty Notices issued for Flytipping, Littering and Other.	Positive	458	Dec-20	●	↓	1,447	458	N/A		This indicator has been impacted by the Covid-19 pandemic. This indicator is being included as an exception as the number of FPNs issued has declined significantly. Performance for the year up till Dec 2020, shows that 458 FPN have been issued, this compared with 1,679 for the same cumulative period last year. Monthly performance shows that 9 Fly tipping FPNs had been issued, 10 for Littering, and 17 for all other FPNs. Definition and Context This indicator measures the number of Fixed Penalty Notices issued by a Law Enforcement Officer (LEO) to a member of the public as a result of an action that is covered by governmental legislation.

			Good Performance		Poor Performance			Other reason for selection

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20	2020/21 YTD	2020/21 Target	Chart	Commentary
05P4	Number of dogs seized by LBN Animal Welfare Cumulative indicator	Positive	45	Dec-20	🟢	N/A	19	45	See Commentary		Performance for the year up till Dec 2020, shows that 45 dogs have been seized to date, compared with 13 for the same period last year. There is no target set as this is a demand led service. Definition and Context This indicator reflect the total number of dogs seized by LBN Animal Welfare. This includes dangerous dogs, aggressive dogs, dogs that may pose a threat to public safety , for examples, stray dogs on the public highway or on school property, dogs that are loose in the public domain and dogs that are subject to cruel treatment by their keepers.
07P4	Food safety enforcement actions (cumulative indicator)	Positive	294	Dec-20	⚫	N/A	1,085	294	See Commentary		Due to the pandemic there were no food premises inspections for the months of Apr-Jun. All interventions of this kind were deferred by the Food Standards Agency till July. Current performance for the latest month shows that 294 enforcement actions have been undertaken, this compared with 568 actions for the same period last year. Current total enforcement actions breakdown: 271 Warnings; 17 Notices; 0 Seizures; 6 Closures; 0 Cautions; 0 Prosecutions. The level of compliance for existing premises is improving and the service is placing a greater emphasis on supporting those businesses to achieve broad compliance.
09P4	Domestic Violence Offences (cumulative indicator)	Negative	3263	Dec-20	⚫	↓	3,780	3,263	See Comments		This indicator has been impacted by the Covid-19 pandemic. Performance for the year to date shows an increase in the number of Domestic Abuse offences (383 offences) when compared with the same cumulative period last year (3263 vs 2880), (13.3%).

Resources

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
1	Percentage of Calls Answered by Council Tax & Benefits Contact Centre	Positive	83.67%	Dec-20	●	↓	90.90%	88.31%	95%		88.31% of calls have been answered in the year to the end of quarter 3. This remains below the 95% target level. The direction of travel (DoT) displayed here compares December 2020 (83.67%) against November 2020 (86.54%). This indicator is made up of both Benefits and Council Tax calls. The December answer rate for Council Tax calls was 92.6% and 74.2% for Benefits calls. Performance has been impacted as a result of resources being transferred to administer the new Self-Isolation support payments. Demand for this new service was far greater than forecast resulting in resource requirements being higher than originally expected. **This is a local performance measure and no benchmarking data is available.**
01P6	Percentage of council tax collected Cumulative indicator	Positive	70.99%	Dec-20	●	↓	95.93%	70.99%	96.3%		Collection rates this year have been impacted by Covid-19 with a decision taken at the start of the year to suspend recovery action and to offer payment holidays to those struggling as a result. Collection levels continue to impacted by the economic and administrative impacts of the Covid pandemic. Increases in financial stress on residents and the phased return of recovery activity mean that collection remains below normal levels. Performance reports the cumulative collection rate throughout the year, with the Direction of Travel displayed comparing December 2020 (70.99%) with December 2019 (76.21%). **Latest available London wide benchmarking data is to the end of 2019/20 which indicates that 96.5% of Council Tax was collected on average in London, compared to 95.93% in Newham.** **Benchmarking data for quarter 1 and 2 2020/21 is available based on returns from 11 London Boroughs and indicates an average collection rate of 51.9% April-September 2020 (Newham's collection rate was 48.58% in that period).**
02P6	Processing times for Housing Benefits Claims (days): New Claims	Negative	38	Dec-20	●	↓	18	27	23		New claims were processed on average in 38 days in December 2020 and in 27 days for the year to date (falling below the 23 day target). Performance has declined since October with the Direction of travel (DoT) comparing December 2020 (38 days) with November 2020 (33 days). Performance for this measure has been impacted by the increase in demand pressure on the service more broadly as a result of Covid-19. The service has seen increases in demand in other areas of benefit administration resulting from the pandemic. Council Tax Reduction claims have increased significantly and changes in Universal Credit income and increasing numbers of residents migrating away from Housing Benefit are being handled. At the same time the level of movement of residents in temporary accommodation have been prioritised to ensure income for the Council and to assist vulnerable residents. **Latest available London wide benchmarking data is for 2019/20 and indicates that Newham's processing rate (18 days) was consistent with the London average (18.9 days).**
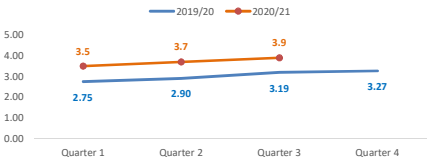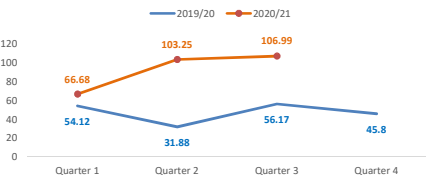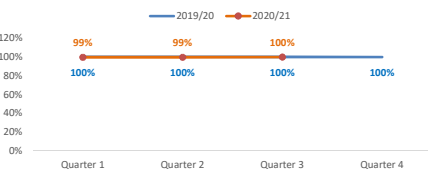
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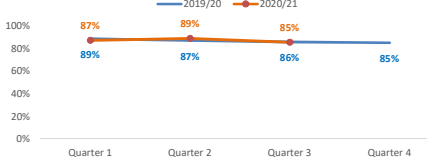
	ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
CORPORATE PI	01P2	Homelessness – Number of new applications	Negative	260	Dec-20	🔴	↑	3,740	2,911	N/A		In December there were 260 homelessness applications . As in previous months during the pandemic, the number of homeless applications isn't significantly different from previous years. However, there is a marked changed in the reason for homelessness, with almost 2/3rds being due to exclusions from family and friends, and the number of cases due to a private rented tenancy ending reducing by over 50%. We are mitigating the impact of an increase in private rented sector evictions in the coming months, by targeting a part of the service to engage in 'early interventions' - i.e. taking action now to prevent the private rented tenancy from ending, and in exchange negotiating longer tenancy terms. Currently, this is proving for successful for ~10% of cases. There should be some caution with this figure, as it's a new approach and the numbers are low as we work through those we've identified at risk. A clearer picture will become apparent in the coming months.
	02P2	Homelessness - Numbers in temporary accommodation	Negative	5780	Dec	🔴	↑	5,449	5,780	N/A		At the end of December there were 5,780 households in temporary accommodation (TA). The number in Temporary Accommodation was comprised of 1,397 in accommodation provided by Local Space Ltd and 4,383 in other forms of temporary accommodation. As in previous months during the pandemic, the number of homeless applications isn't significantly different from previous years. However, there is a marked changed in the reason for homelessness, with almost 2/3rds being due to exclusions from family and friends, and the number of cases due to a private rented tenancy ending reducing by over 50%. For the third month in a row, we have seen a reduction in the overall number of households in temporary accommodation. This is a result of targeted work streams to both prevent homelessness in the first instance, greater focus on providing quicker alternatives in the private rented sector and helping people to move out from TA with options other than social housing within the borough
	03P2	Average number of weeks tenants are in rent arrears (Snapshot) LBN Managed Properties.	Negative	4.40	Dec-20	🔴	↑	3.18	4.40	N/A		The average number of weeks that Newham tenants are in arrears at the end of December is 4.4 weeks. The HRA collection has improved this month. This is largely due to the Rent Free week over the Christmas period. (Monthly payment via Direct debit/Standing order factor in the two rent free weeks). Since the full activity or collection resumed (with the exception of evictions since entering Tier 3 restrictions, to date) the rate of collection and the level of arrears has remained stable. Additional resource will be in place for next financial year, with a focus on early intervention, to prevent residents falling into arrears.

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
04P2	Average number of weeks temporary accommodation tenants are in rent arrears (Snapshot). (Ave. gross arrears per temporary accommodation tenant)	Negative	3.90	Dec-20	● (Poor)	↓	3.27	3.90	1.65	2019/20 / 2020/21. Q1 3.5, Q2 3.7, Q3 3.9; 2.75, 2.90, 3.19, 3.27	The average number of weeks that temporary accommodation tenants are in arrears at the end of December is 3.9 weeks. Collection over the General Fund this month is lower than the previous months and remains below the forecasted collection rate, pre-COVID-19. The level of arrears will remain high as landlords cannot evict residents booked into emergency B&B style accommodation - Booking cancellations have now commenced, allowing landlords on B&B accommodation to serve notice due to the arrears, which will stem the debt levels on these cases. A reallocation of resource has been applied in the service, to focus activity on the general fund collection. In the next financial year, additional resources will be joining the service with a focus on reviewing and reducing the Aged debt from closed accounts, with an aim of stabilising and then improving the Provision for bad debt.
05P2	Average time taken to re-let Local Authority Housing - Redevelopment and Lettings, inc. Sheltered (days)	Negative	111.617647	Dec-20	● (Poor)	↓	46.35	93.76	22.00	2019/20 / 2020/21. 2020/21: 66.68, 103.25, 106.99; 2019/20: 54.12, 31.88, 56.17, 45.8	In December the average time taken to relet properties was 112 days. This KPI continues increase over the previous month and remains above target, however a significant number of properties are being let with 34 compared to 22 let last year. The reasoning for the increased turnaround still remains COVID-19 related issues in particular around tenancy termination where during the national lock down tenants could not access offices, accompanied viewings and resourcing across the process with officers having to isolate which delayed letting void properties.

The Void Improvement Plan and other service development work to the voids process means that the impact of a further lockdown will not have the same impact on turnaround time as the last because of a move away from face to face contact with the implementation of 100% virtual viewings, electronic sign ups and key safes.

Note: this PI measures voids at the point of letting and not the total number of voids the Repairs and Maintenance Service team is dealing with. It includes all properties that the LA has taken possession of but excludes properties let through mutual exchange, those undergoing major works and those that the council intends to sell or demolish. |
| 06P2 | Percentage of units with a current gas safety certificate (snapshot indicator) | Positive | 99.54% | Dec-20 | ● (Poor) | ↑ | 99.58% | 99.45% | 100% | 2019/20 / 2020/21. 2020/21: 99%, 99%, 100%; 2019/20: 100%, 100%, 100%, 100% | 99.54% of units had a gas safety certificate at the end of December 2020. The target for this PI is 100%. Gas servicing has continued to run to program taking into account Covid-19 issues. The backlog of properties caused by the lockdown and subsequent access issues has been spread out over the remaining term of the program. A revised program was approved to evenly spread out the program moving forward into 2021-2022 period which will be more manageable and reduce any peaks & troughs in the program. |

	Good Performance		Poor Performance		Other reason for selection

	ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
CORPORATE PI	07P2	Total housing repairs completed within target	Positive	85.80%	Dec-20	🔴	↑	86.57%	86.76%	90%		At the end of December performance for the percentage of housing repairs completed within target was 86%. We have continued to receive a higher than expected volume of emergency repairs running at 33% compared to the sector norm of between 10% - 15%. This has impacted on our ability to complete non-emergency routine repairs, however, performance on emergency repairs being completed within target timescales continue to exceed target. During December, the team prioritised emergency repairs over anything non-emergency, which had an adverse effect on routine repairs performance. RMS is increasing staffing resourcing to ensure we have a wide team of operatives available to meet demand. Now we are in lockdown, we are focusing solely on completing emergency and urgent repairs and expect to maintain performance against target for these repair types. During the preparation of the December KPIs it was identified that some jobs were being counted as complete in more than one month. This was linked to some manual re-processing of jobs as part of the implementation of our new system, with the effect being that a job completed in August but reprocessed in November would show as completed on time in the August KPI report and then also show as completed late in the November KPI report. This error in reporting

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
07P3	Total Claimant Count (Job Seekers Allowance plus Universal Credit Claimants actively seeking work)	Negative	26,080	Nov-20	●	↓	8,170	26,080	National data included for infor-mation.		Newham's claimant count rose by almost 18 thousand between March and November 2020, up from 8,170 in March to 26,080 in November 2020. The claimant count is a combined figure covering both Job Seekers Allowance and Universal Credit claimants actively seeking work. As a % of the working age population in Newham, claimants have risen from 3.3% to 10.5% since March 2020. Whilst Covid-19 has resulted in rises in the claimant count across the country, **benchmarking indicates that there has been a bigger impact in Newham than on average in London** with claimants making up 8.1% of the working age population overall across London. Direction of travel (DoT) compares November 2020 (26,080 claimants in Newham) with October 2020 (24,270). Comparator: London Claimant count as a % of working age (16-64) population (excl City of London) = 7.9% Newham Claimant count as a % working age population = 10.0% Rank 29/32 as a % of population. (Source: ONS, Nov 2020)
08P3	Claimant Count for residents aged 18 to 24 (Job Seekers Allowance plus Universal Credit Claimants actively seeking work)	Negative	4,480	Nov-20	●	↓	1,325	4,480	National data included for infor-mation.		This is a subset of the overall claimant count reported above. **The claimant count in Newham for residents aged 18-24 has risen from 1,325 in March to 4,480 in November 2020. Claimants in this age bracket make up 12.9% of the 18-24 aged population, which compares to 11.0% across London.** Direction of travel (DoT) compares November 2020 (4,480) with October 2020 (4,255). Comparator: London Claimants aged 18-24 as a % of 18-24 population (excl City of London) = 11.0% Newham Claimants aged 18-24 as a % 18-24 population = 12.9% Rank 24/32 as a % of population. (Source: ONS, Nov 2020)
09P3	Number of residents securing a job outcome through Workplace (Cumulative indicator)	Positive	13	Dec-20	●	↓	1,244	13	N/A		This indicator remains a red exception due to impact of Covid-19. During the first phase Covid-19 response, Workplace staff were redeployed to support residents and local businesses. This included staff deployed to the Help Newham programme, staffing the Newham Business Desk and many other activities. All staff have been fully engaging with residents on their caseload since July 2020 and are currently working remotely, supporting residents via Zoom, Skype and telephone. In the year to the end of November 2020, 46,158 interventions of this type had been undertaken. However, in terms of this specific performance measure, residents securing job outcomes are limited to just 13 for 2020-21 year to date. Please note that to be counted in this measure, the service seeks evidence of the employment start after 4 weeks using written confirmation from the employer/resident with some due diligence checks on receipt. **This is a local performance measure and no benchmarking data is available.** Performance is reported as a cumulative figure and the direction of travel (DoT) compares December 2020 (13) with December 2019 (964).

People, Policy & Performance
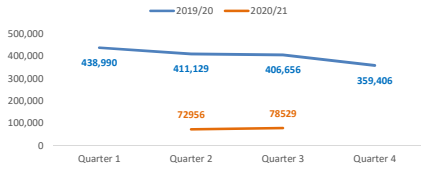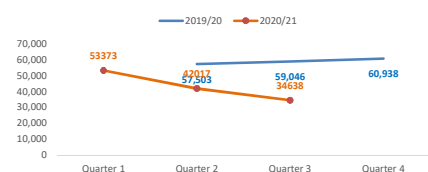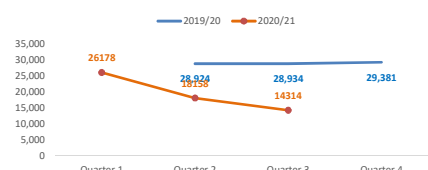
ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Full year)	2020/21 (Year to date)	2020/21 Target	Chart	Commentary
03P6	Percentage of Calls Answered by Corporate Contact Centre (Customer Services).	Positive	84.60%	Dec-20	⬤	↑	89.51%	86.61%	95%		Of the 23,308 calls received in December 2020, 84.60% (19,719) were answered, falling below the 95% target level. In the year to date 229,272 calls to the main Corporate Contact Centre have been answered - 86.61% of the total 264,708 calls received. The call performance within the Contact centre has been affected significantly due to COVID 19 since June as services previously restricted by the first national lockdown were resumed. This return to some Business as Usual increased the number of calls to the contact centre requesting a service or information. In addition, with the requirement for officers to work from home, performance has been impacted by regular ICT performance issues as officers experience slowness of systems and downtime on a daily basis. This has been stabilising due to improved support from ICT from late October. With the closure of the Customer Service Centre and the need to send out more parking permits by post until the paperless permit solution is implemented in Jan 21, there has been an increase in calls relating to parking permits. These are mainly residents calling to check that their permits have been sent as they have yet to receive them in the post. This has also led to an increase in calls due to PCN's as residents receive a fine whilst waiting for their permits to be received in the post. This will be resolved by the implementation of the paperless permit solution resulting in an improved resident experience and fewer calls to the contact centre. Performance has also further been impacted due to an increase in online complaints requiring officers to be deployed from taking calls to deal with the additional since June 2020. Finally due to a number of new initiatives, including the development of the paperless permits solution and new Dynamics CRM, officers have been fully involved in workshops, testing and project meetings which has again reduced the ability to meet service targets. This requirement will reduce when new solutions are finally implemented. The Direction of travel (DoT) displayed here compares December 2020 (84.60%) with November 2020 (83.66%). **This is a local performance measure and no benchmarking data is available.**
04P6	Average wait time for a customer in the East Ham Customer Service Centre to see an officer	Negative	No activity in 2020/21	N/A	⬤	N/A	14:14	No activity in 2020/21	15:00		The indicator measures average wait time for in person visits to the East Ham customer Service Centre. As the customer service centre has remained closed for face to face contacts due to Covid-19 this year, no actvity is being reported. **This is a local performance measure and no benchmarking data is available.**

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
5	Average days lost to sickness	Negative	6.8	Quarter 3	🟢	↑	11	7	N/A		2020/21 Quarter 3 performance at 6.8 days has improved by 1.8 days compared to the previous Quarter (Quarter 2, 2020/21 - 8.6 days). Direction of Travel (DoT): 2020/21 Quarter 3 (6.8 days) compared to Quarter 1, 2020/21 - (8.6 days)
10P6	No. of Agency Workers	Negative	624	Quarter 3	🟢	↑	788	62400%	N/A		New quarterly performance indicator with historical data included as exception for information purpose and ongoing monitoring. Number of Agency workers has progressively increased quarter on quarter since the first quarter of 2019/20. Quarter 1 of this year has seen an increase of 37% agency staff compared against quarter 1 of 2019/20 (606).
12P6	No. of new Apprenticeships starting (excluding schools & EBUs)	Positive	7	Quarter 3	🔴	↓	45	20	N/A		7 new apprenticeship starts in Quarter 3 compared to 12 in Quarter 2 (due to impact of Covid 19).

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
01P3	Use of Libraries (Attendance to Libraries)	Positive	23800	Dec-20	🔴	N/A	1,616,181	151,485	1,678,850		In December there were 23,800 attendances at libraries, taking Quater 3 performance to 78,529. The country entered a 2nd lockdown in November which restricted the services provided by the library service to a click & collect service with essential use only of Public PCs. Lockdown 3 started on 5th January. There was no data for Apil, May or June due to Covid 19 library closures. Libraries opened with reduced services and reduced hours on 13th July, this included only allowing customers in for prebooked computers, collecting books etc. Libraries are now open 10am-5pm 6 days a week with Stratford open on a Sunday afternoon. However, the second lockdown, tiering system and high infection rates have meant that residents are more reluctant to visit. Covid19 Impact on service began from Thursday 19 March which initially started with reduction of the hours the libraries were open by closing most sites at 4pm. Custom House and Green Street were closed from the 19th March, by 24 March all libraries were closed following government guidance to help slow the spread of Covid19. Newham libraries sign-posted residents to the digital library, updated online resources, adding to eBook/eAudio collections where it was possible and removing limits. Joining the library online was also made easier to allow non-members to get access to online library resources; this has resulted in an increase in digital issues. As usage of libraries remains limited during its phased reopening, this will continue to have an effect on physical visits to the building. The annual target of1,678,850 was set pre Covid 19 and as such is unlikely to be met. The target has been divided by 12 to give an average monthly target of 139,904. However, visits are seasonal and monthly figures can be affected by bank holidays / school holiday dates or the day that fixed public holidays fall on. Benchmarking: At the end of Q4 19/20 total visits per 1,000 population for newham were 4,575 (LAPS Data) (there was no data for Q1 20/21 due to Covid 19 closures). Eight boroughs returned data out of which Newham was ranked 4th. The average total visits per 1,000 population for the 8 boroughs that returned date was 4,182 visits. Preformance for this service will be impacted by Covid 19.
02P3	Active Library Users (Provides a monthly Snapshot based on the number of members using library card in previous 12 months)	Positive	34638	Dec-20	🔴	↓	60,938	34,638	N/A		In December there were 34,638 active users. This is an decrease in users from november (36,818). As physical library issues and use of Public PCs/Wi-Fi are the key library services that keep the library users active (using the service at least once a year) we have seen a decrease due to the closure of libraries during the lockdown as a result of Covid-19. As usage of libraries remains limited and was further restricted in the 2nd Lockdown, this will continue to have an effect on active usage. Active Usage figures are a snapshot of a point in time and are not cumulative. Benchmarking: Latest LAPS data (Q4 2019/20): total issues per 1000 population, Newham = 1974, 8 boroughs returned data, average 2264, 6 out of 8. NB this is issues only, not active users which is not available. This outturn will be impacted by Covid 19.
03P3	Active Library Users (16 and under) (Provides a monthly Snapshot based on the number of members using library card in previous 12 months)	Positive	14314	Dec-20	🔴	↓	29,381	14,314	N/A		In December, at the end of Quarter 3, there were 14,314 active users aged 16 and under. This is an decrease from November (15,393). As physical library issues and use of Public PCs/Wi-Fi are the key library services that keep the library users active (using the service at least once a year) we have seen a decrease due to the closure of libraries during the lockdown as a result of Covid-19. As usage of libraries remains limited and was further restricted during the 2nd lockdown, this will continue to have an effect on active usage. Active Usage figures are a snapshot of a point in time and are not cumulative. Benchmarking: There is no benchmarking available for this indicator. This indicator will be impacted by Covid 19.

ID	Measure	Polarity	Outturn	Period	Exception Criteria	DoT	2019/20 (Other)	2020/21 (Other)	2020/21 Target	Chart	Commentary
04P3	Active Library Users (17 and over) (Reports a Snapshot each month based on the number of members (aged 17 years and over) using library card in previous 12 months)	Positive	20324	Dec-20	🔴	↓	31,557	20,324	N/A		In December there were 20,324 active users aged 17 and over. This is a decrease from November (20,324)). As physical library issues and use of Public PCs/Wi-Fi are the key library services that keep the library users active (using the service at least once a year) we have seen a decrease due to the closure of libraries during the lockdown as a result of Covid-19. As usage of libraries remains limited and were further restricted during the 2nd lockdown, this will continue to have an effect on active usage. Active Usage figures are a snapshot of a point in time and are not cumulative. Benchmarking: There is no benchmarking available for this indicator. This indicator will be impacted by Covid 19.
05P3	Total issues.	Positive	61376	Dec-20	🔴	↑	700,472	175,175	166,500		Libraries opened with reduced services and reduced hours on 13th July, this included only allowing customers in for prebooked computers, collecting books etc. The country entered a 2nd lockdown in November which restricted the services provided by the library service to a click & collect service with essential use only of Public PCs. As usage of libraries remains limited during Tier 2, this will continue to have an effect on numbers of books issued. Library issues in December were 61,137, as libraries continue to open issues are expected to increase however last years performance is unlikely to be matched. July and August generally have higher book issues due to school visits and the Summer Reading Challenge. School visits did not happen due to Covid19 restrictions. Likewise the Summer Reading Challenge was reduced in scope with no physical cultural programme. The smaller number of children taking part resulted in lower book issues. However, uncertainty around a second wave and rising infection rates have meant that residents are more reluctant to visit. Covid19 Impact on service began from Thursday 19 March which initially started with reduction of the hours the libraries were open by closing most sites at 4pm. Custom House and Green Street were closed from the 19th March, by 24 March all libraries were closed following government guidance to help slow the spread of Covid19. Newham libraries sign-posted residents to the digital library, updated online resources, adding to eBook/eAudio collections where it was possible and removing limits. Joining the library online was also made easier to allow non-members to get access to online library resources; this has resulted in an increase in digital issues. Please note the target on the chart shows the average quarterly target required to achieve the end of year target of 666,000 (666,000/4 = 166,500). However, book issue is seasonal so a flat target across quarters does not reflect the key spikes across the year in book issues. Benchmarking:Latest LAPS data (Q4 2019/20): total issues per 1000 population, Newham = 1974, 8 boroughs returned data, average 2264, 6 out of 8. This indicator will be impacted by Covid 19.
06P3	% of time library PCs are utilised.	Positive	0.2431	Dec-20	🔴	N/A	51%	20%	N/A		In December PC's were utlised for 24.31% of availability. The country entered a 2nd lockdown in November which restricted the services provided by the library service to a click & collect service with essential use only of Public PCs. There was no data for Apil, May or June due to Covid 19 Closures, - Libraries opened with reduced services and reduced hours on 13th July, this included only allowing customers in for prebooked computers, collecting books etc. accordingly performance is significantly down on last year. As usage of libraries remains limited during its phased reopening, this will continue to have an effect on PC usage. There are also fewer PCs available to maintain social distancing and sessions are limited to enable PC areas to be cleaned & sanitised before the next customer. Benchmarking: There is no benchmarking data available for this indicator. This indicator will be impacted by Covid 19.