

ADULT SERVICES

KPI AS1: Social work assessment allocated to worker within 7 days of the decision that a SW assessment is needed

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: GREEN	
Service:		Adult Services		Indicator Type: Local		Benchmark: N/A			
RAG Threshold:		Green if 75% or more		Amber if between 68 and 75%		Red if less than 75%			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	79.3%	New indicator		↑	Improved				
Q2 2018/19	43.3%			↓	Deteriorated				
Q3 2018/19	34.3%			↓	Deteriorated				
Q4 2018/19	60.4%			↑	Improved				
2018/19 Full year	50.1%			↑	Improved				
Q1 2019/20	80.9%	75.0%	Green	↑	Improved				
Q2 2019/20	76.6%	75.0%	Green	↓	Deteriorated				
Q3 2019/20	84.2%	75.0%	Green	↑	Improved				
Q4 2019/20	80.3%	75.0%	Green	↓	Deteriorated				
2019/20 Full year	80.2%	75.0%	Green	↑	Improved				

Commentary: Performance remains strong and above target. Ongoing locum staffing ensured that the team could maintain this level of performance. This indicator refers to an 8-weekly allocation plan; there is a weekly allocation meeting and urgent and safeguarding cases are allocated outside of these meetings. Even though the COVID emergency hit in the final month of this quarter, we adapted quickly to ensure that good performance was maintained.

KPI AS2: The percentage of Deprivation of Liberty Safeguards (DoLS) completed and authorised within 90 days

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: AMBER	
Service:		Adult Services		Indicator Type: National		Benchmark: N/A			
RAG Threshold:		Green if better than 75%		Amber if between 70% and 75%		Red if less than 70%			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
2018/19 Full year		New indicator		New indicator					
Q1 2019/20	57%	75%	Red						
Q2 2019/20	75%	75%	Green	↑	Improved				
Q3 2019/20	78%	75%	Green	↑	Improved				
Q4 2019/20	76%	75%	Green	↓	Deteriorated				
2019/20 Full year	70%	75%	Amber		N/A				

Commentary: Improved performance in this area has been achieved in part through the use of the external Best Interest Assessors. Increased focus on this indicator has assisted the team in ensuring they prioritise cases that are nearing 90 days, balancing against other priority applications. We consistently outperformance our neighbours in this area.

KPI AS3: People aged 65 and over who received reablement from the START Team following a discharge from hospital and remained at home 91 days later

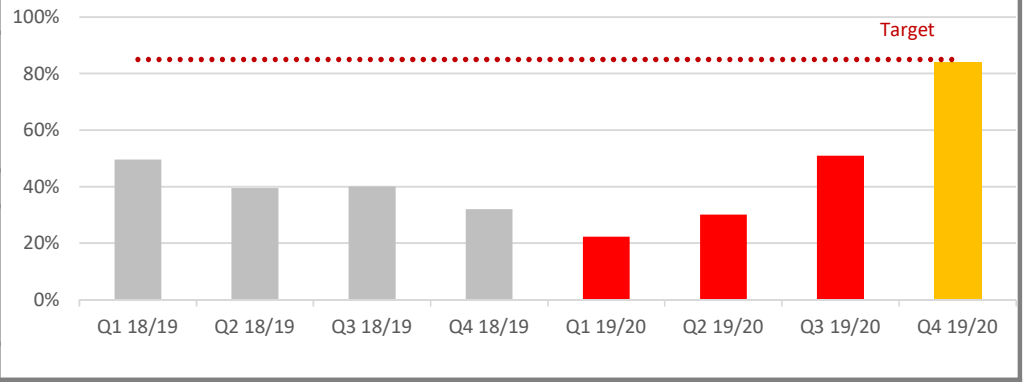
Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: AMBER	
Service:		Adult Services		Indicator Type: Local		Benchmark: National 2017/18 : 82.9%			
RAG Threshold:		Green is 90% or more		Amber if between 85% and 89%		Red if less than 85%			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	81%	New indicator		↓	Deteriorated				
Q2 2018/19	100%			↑	Improved				
Q3 2018/19	86%			↓	Deteriorated				
Q4 2018/19	91%			↑	Improved				
2018/19 Full year	89%			↑	Improved				
Q1 2019/20	90%	90%	Green	↑	Improved				
Q2 2019/20	92%	90%	Amber	↑	Improved				
Q3 2019/20	84%	90%	Red	↓	Deteriorated				
Q4 2019/20	86%	90%	Amber	↑	Improved				
2019/20 Full year	88%	90%	Amber	↓	Deteriorated				

Commentary: Increased capacity in reablement and home care in response to higher levels of need has helped reverse the decrease in Q3; which was affected by some deaths in the period.

KPI AS4a: Safeguarding timeliness - concerns completed within 2 working days

Reporting frequency:	QUARTERLY	Director:	Matt Pope	Executive Member:	Charles Margetts	RAG:	RED
Service:	Adult Services	Indicator Type:	Local	Benchmark:	N/A		
RAG Threshold:	Green if 85% or more		Amber if between 80 and 85%		Red if lower than 80%		

Period	Actual	Target	RAG	Direction of Travel (Trend)	
Q1 2018/19	49.6%	New indicator		New indicator	
Q2 2018/19	39.5%			↓	Deteriorated
Q3 2018/19	40.1%			↑	Improved
Q4 2018/19	32.0%			↓	Deteriorated
2018/19 Full year	40.2%			New indicator	
Q1 2019/20	22.3%	85%	Red	↓	Deteriorated
Q2 2019/20	30.1%	85%	Red	↑	Improved
Q3 2019/20	50.9%	85%	Red	↑	Improved
Q4 2019/20	84.1%	85%	Amber	↑	Improved
2019/20 Full year	51.2%	90%	Red	↑	Improved

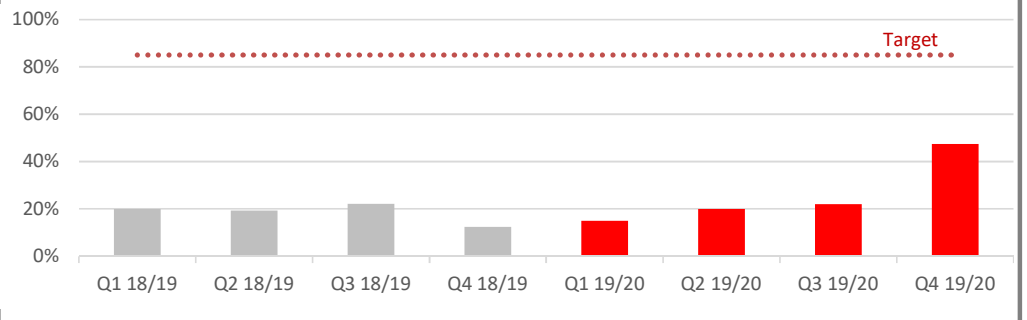


Commentary: Q4 demonstrates significant progress over Q3. All concerns now being managed within the Adult Safeguarding Hub has ensured more consistent and timely responses. The focus on applying the CA criteria has refined the work that is required at this stage, and more closely aligned it with the legal framework. Performance will have been impacted by turnover in locum staff, which will have impacted on the speed some duty workers have worked at. A more stable and permanent workforce would further improve this and is what the Adult Safeguarding Hub is aspiring to. A further two concerns completed in 2 working days would have meant that the target was met for this indicator.

KPI AS4b: Safeguarding timeliness - enquiries completed within 28 days

Reporting frequency:	QUARTERLY	Director:	Matt Pope	Executive Member:	Charles Margetts	RAG:	RED
Service:	Adult Services	Indicator Type:	Local	Benchmark:	N/A		
RAG Threshold:	Green if 85% or more		Amber if between 80 and 85%		Red if lower than 80%		

Period	Actual	Target	RAG	Direction of Travel (Trend)	
Q1 2018/19	20.0%	New indicator		New indicator	
Q2 2018/19	19.4%			↓	Deteriorated
Q3 2018/19	22.2%			↑	Improved
Q4 2018/19	12.4%			↓	Deteriorated
2018/19 Full year	18.7%			New indicator	
Q1 2019/20	14.9%	85%	Red	↑	Improved
Q2 2019/20	20.0%	85%	Red	↑	Improved
Q3 2019/20	22.1%	85%	Red	↑	Improved
Q4 2019/20	47.4%	85%	Red	↑	Improved
2019/20 Full year	31.4%	90%	Red	↑	Improved



Commentary: Please see the covering report for service narrative about the performance of this indicator.

KPI AS5: Provisions in the borough rated by CQC as good or better									
Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: GREEN	
Service:		Adult Services		Indicator Type:		Local		Benchmark: Above England total of 84% Q4 2019/20	
RAG Threshold:		Green if in the top quartile			Amber if in the second highest quartile			Red if in the bottom two quartiles	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2019/20	96%	87%	Green	New indicator					
Q2 2019/20	93%	87%	Green	↓	Deteriorated				
Q3 2019/20	93%	87%	Green	→	Static				
Q4/Year end 2019/20	88%	87%	Green	↓	Deteriorated				

Commentary: The slight drop from the previously consistent rate is the result of 'requires improvement' reports for some of the providers. Where people have been placed with providers who require improvement, Adult Social Care is working closely with them to ensure that a high quality of care is still being delivered.

KPI AS6: Proportion of people receiving long term care who were subject of a review in the last 12 months									
Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: RED	
Service:		Adult Services		Indicator Type:		Local		Benchmark: N/A	
RAG Threshold:		Green if 85% or more			Amber if between 80 and 85%			Red if lower than 80%	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q4 2018/19	68%	85%	Red	New indicator					
Q1 2019/20	69%	85%	Red	↑	Improved				
Q2 2019/20	70%	85%	Red	↑	Improved				
Q3 2019/20	65%	85%	Red	↓	Deteriorated				
Q4/Year end 2019/20	68%	85%	Red	↑	Improved				

Commentary: Please see the covering report for service narrative about the performance of this indicator.

KPI AS7: Overall satisfaction of people who use services with their care and support (reported from the annual Adult Social Care User Experience Survey - ASCOF measure 3A)									
Reporting frequency:		ANNUAL		Director: Matt Pope		Executive Member: Charles Margetts		RAG: 2019/20 Pending	
Service:		Adult Services		Indicator Type:		National, Annual		Benchmark: Above England average - 65% (2017/18)	
RAG Threshold:		Green if 67% or more			Amber if between 66% and 67%			Red if less than 65%	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
2015/16	67.3%	67%	Green	↓	Deteriorated				
2016/17	65.8%	67%	Amber	↓	Deteriorated				
2017/18	63.9%	67%	Red	↓	Deteriorated				
2018/19	67.1%	67%	Green	↑	Improved				
2019/20					Pending				

Commentary: 2019/20 data has not yet been published. Performance for this indicator will be updated once the data is available. Since this measure is based on a sample of service users' views, it is challenging to take action that directly impacts on the level of performance.

KPI VP1: Permanent admissions to residential or nursing care homes per 100,000 population (65+ population)

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: GREEN	
Service:		Adult Services		Indicator Type: National		Benchmark: 65+ WOK 18/19: 363.3. National 17/18: 568.5			
RAG Threshold:		Green if 130 or less per quarter		Amber if between 130 and 145 per quarter		Red if more than 145 admissions per quarter			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	86.7	119	Green	→	Static				
Q2 2018/19	79.5	119	Green	↓	Improved				
Q3 2018/19	47.0	119	Green	↓	Improved				
Q4 2018/19	72.3	119	Green	↑	Deteriorated				
2018/19 Full year	285.5	476	Green	↓	Improved				
Q1 2019/20	101.2	130	Green	↑	Deteriorated				
Q2 2019/20	75.9	130	Green	↓	Improved				
Q3 2019/20	105	130	Green	↑	Deteriorated				
Q4 2019/20	137	130	Amber	↑	Deteriorated				
2019/20 Full year	419.2	520	Green	↑	Deteriorated				

Commentary: A spike of norovirus in the Royal Berkshire Hospital in January and efforts to free beds during March in advance of Covid-19 have contributed to the increase in admissions.

KPI VP2a: Delayed Transfers of Care (DToc) (delayed days)

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: RED	
Service:		Adult Services		Indicator Type: National		Benchmark: Wok 238, Rdg 462, WB 668 (Mar-19)			
RAG Threshold:		Green is less than 864 / 576				Red if greater than 864 / 576			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	927	960	Green	↑	Deteriorated				
Q2 2018/19	591	960	Green	↓	Improved				
Q3 2018/19	537	486	Red	↓	Improved				
Q4 2018/19	946	486	Red	↑	Deteriorated				
2018/19 Full year	3,001	2,892	Red	↓	Improved				
Q1 2019/20	858	864	Green	↓	Improved				
Q2 2019/20	1067	576	Red	↑	Deteriorated				
Q3 2019/20	887	576	Red	↓	Improved				
Q4 2019/20	1104	864	Red	↑	Deteriorated				
2019/20 Full year	3,916	2,880	Red	↑	Deteriorated				

Commentary: Please see the covering report for service narrative regarding performance of this indicator.

KPI VP2b: Delayed Transfers of Care (DToc) (delayed days) SOCIAL CARE ONLY

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: GREEN	
Service:		Adult Services		Indicator Type: National		Benchmark: Wok 105, Rdg 48, WB 150 (Mar-19)			
RAG Threshold:		Green is less than 270				Red if greater than 270 a quarter			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	293	New indicator							
Q2 2018/19	42			↓	Improved				
Q3 2018/19	70			↑	Deteriorated				
Q4 2018/19	282			↑	Deteriorated				
2018/19 Full year	687			↓	Improved				
Q1 2019/20	146	270	Green	↓	Improved				
Q2 2019/20	290	270	Red	↑	Deteriorated				
Q3 2019/20	194	270	Green	↓	Improved				
Q4 2019/20	398	270	Red	↑	Deteriorated				
2019/20 Full year	1,028	1,080	Green	↑	Deteriorated				

Commentary: Severe winter pressures on the Royal Berkshire Hospital compounded by outbreaks of norovirums and flu are causing delays attributable to the health service.

KPI VP3: Proportion of adults with a learning disability who live in their own home or with their family (ASCOF measure 1G)

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: GREEN	
Service:		Adult Services		Indicator Type:		National		Benchmark: Better than England (77.2%, 2017/18)	
RAG Threshold:		Green if 78% or more		Amber if between 75% and 77%		Red if less than 75%			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q4 2018/19 Year end	78.8%	78%	Green	↑	Improved				
Q1 2019/20	83.6%	79%	Green	↑	Improved				
Q2 2019/20	83.2%	79%	Green	↓	Deteriorated				
Q3 2019/20	82.6%	79%	Green	↓	Deteriorated				
Q4 2019/20 Year end	81.2%	79%	Green	↓	Deteriorated				

Commentary: There continues to be little movement within the cohort between quarters, reflecting Adult Social Care's continued strong commitment to supporting those with a learning disability to live within the community.

KPI VP5: Proportion of people who use services who feel safe (reported from the annual Adult Social Care User Experience Survey - ASCOF measure 4A)

Reporting frequency:		ANNUAL		Director: Matt Pope		Executive Member: Charles Margetts		RAG: 2019/20 Pending	
Service:		Adult Services		Indicator Type:		National, Annual		Benchmark: Above England average - 69.9% (2017/18)	
RAG Threshold:		Green if 70% or more		Amber if between 66% and 69%		Red if less than 66%			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
2015/16	67.3%	70%	Amber	↓	Deteriorated				
2016/17	69.4%	70%	Amber	↑	Improved				
2017/18	69.4%	70%	Amber	→	Static				
2018/19	73.9%	70%	Green	↑	Improved				
2019/20					Pending				

Commentary: 2019/20 data has not yet been published. Performance for this indicator will be updated once the data is available. Since this measure is based on a sample of service users' views, it is challenging to take action that directly impacts on the level of performance.

KPI VP9: Number of initial carers assessments completed

Reporting frequency:		QUARTERLY		Director: Matt Pope		Executive Member: Charles Margetts		RAG: GREEN	
Service:		Adult Services		Indicator Type:		Local		Benchmark: N/A	
RAG Threshold:		Green if 53 or more per quarter		Amber if between 42 and 52 per quarter		Red if less than 42 per quarter			
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	42	53	Amber	↓	Deteriorated				
Q2 2018/19	50	53	Amber	↑	Improved				
Q3 2018/19	49	53	Amber	↓	Deteriorated				
Q4 2018/19	80	53	Green	↑	Improved				
2018/19 Full year	221	212	Green	↑	Improved				
Q1 2019/20	37	53	Red	↓	Deteriorated				
Q2 2019/20	73	53	Green	↑	Improved				
Q3 2019/20	76	53	Green	↑	Improved				
Q4 2019/20	116	53	Green	↑	Improved				
2019/20 Full year	302	212	Green	↑	Improved				

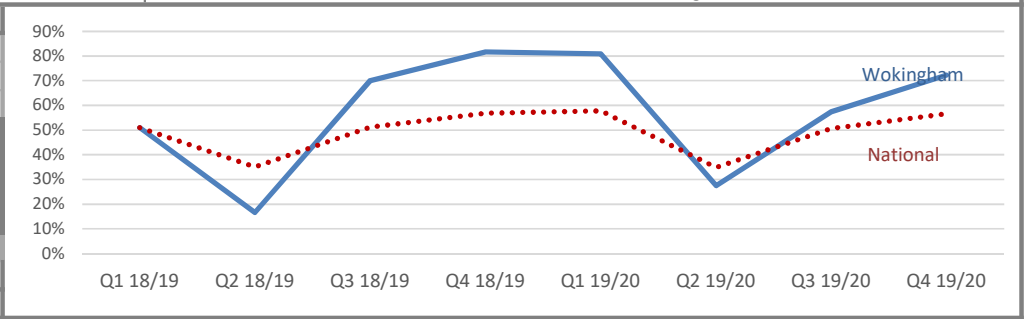
Commentary: The sharp increase in assessments is the results of them being more actively promoted and captured from all areas of the social care pathway.

CHILDREN'S SERVICES

KPI Ch1: Percentage of young people with statements or Education, Health and Care Plans (EHCPs) participating in Employment, Education or Training

Reporting frequency:	QUARTERLY	Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	GREEN
Service:	Children's Services	Indicator Type:	National	Benchmark:	Better than national (56.6%) as at Q4 19/20		
RAG Threshold: Green if equal to or above the national figure				Red if below the national figure			

Period	Actual	Target	RAG	Direction of Travel (Trend)	
Q1 2018/19	51.0%	51.0%	Green	New indicator	
Q2 2018/19	16.6%	35.1%	Red	↓	Deteriorated
Q3 2018/19	70.0%	51.2%	Green	↑	Improved
Q4 2018/19	81.7%	56.9%	Green	↑	Improved
2018/19 Full year	53.6%	50.0%	Green	N/A	
Q1 2019/20	80.9%	57.8%	Green	↓	Deteriorated
Q2 2019/20	27.6%	34.9%	Red	↓	Deteriorated
Q3 2019/20	57.4%	50.6%	Green	↑	Improved
Q4 2019/20	72.3%	56.6%	Green	↑	Improved
2019/20 Full year	59.1%	50.0%	Green	↑	Improved

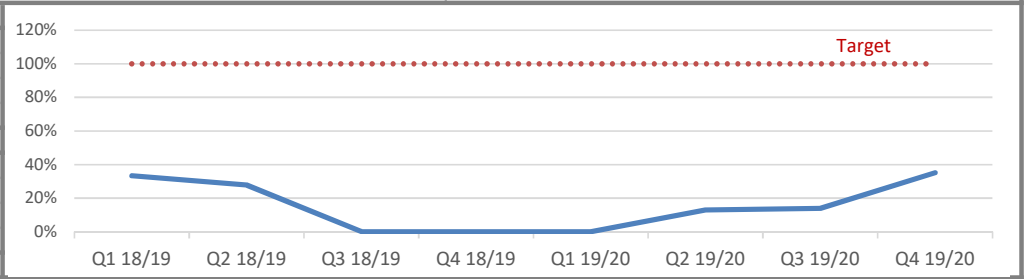


Commentary: Work has continued to identify those with a current EHCP on the CCIS database and then target work with those who have an unknown destination by the NEET Team. This has led to a continued fall in the number with unknown destinations and an increase in those known to be participating. An unknown destination is defined by one of three scenarios: either the current situation of the young person is not known (normally following the end of a course or following confirmation that they have left their previous activity), the young person cannot be contacted, or the young person has refused to disclose their activity.

KPI Ch2: Percentage of Education, Health and Care Plan Assessments completed within 20 weeks of referral

Reporting frequency:	Quarterly	Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	RED
Service:	Children's Services	Indicator Type:	National, Local	Benchmark:	National: 58%		
RAG Threshold:		Green if 100%		Amber if between 95% and 99%		Red if less than 95%	

Period	Actual	Target	RAG	Direction of Travel (Trend)	
Q1 2018/19	33.3%	100%	Red	↓	Deteriorated
Q2 2018/19	27.8%	100%	Red	↓	Deteriorated
Q3 2018/19	0.0%	100%	Red	↓	Deteriorated
Q4 2018/19	0.0%	100%	Red	→	Static
2018/19 Full year	16.2%	100%	Red	N/A	
Q1 2019/20	0.0%	100%	Red	→	Static
Q2 2019/20	12.9%	100%	Red	↑	Improved
Q3 2019/20	14.0%	100%	Red	↑	Improved
Q4 2019/20	35.1%	100%	Red	↑	Improved
2019/20 Full year	19.4%	100%	Red	↑	Improved



Commentary: Please see the covering report for service narrative on this indicator.

KPI Ch3: Percentage of Former Relevant Care Leavers (up to the age of 21) Not in Education, Employment or Training (NEET)

Reporting frequency:		QUARTERLY		Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	AMBER
Service:		Children's Services		Indicator Type:		Local		Benchmark: N/A	
RAG Threshold:		Green if 40% or below		Amber of between 40% and 45%				Red if above 45%	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
2018/19 Full year	41.7%	40%	Amber	New Indicator					
Q1 2019/20	37.3%	40%	Green	↓	Improved				
Q2 2019/20	44.3%	40%	Amber	↑	Deteriorated				
Q3 2019/20	37.2%	40%	Green	↓	Improved				
Q4 2019/20	30.9%	40%	Green	↓	Improved				
2019/20 Full year	37.2%	40%	Amber	↑	Deteriorated				

Commentary:

The service takes steps to understand the reasons why Care Leavers are not in education, employment or training – some will be due to a disability, parenting young children or maternity leave which means they will remain NEET for a longer period of time. Care Leavers are visited regularly and supported to engage and remain in education, employment or training as appropriate. Monthly multi-disciplinary meetings to review NEET Care Leavers are held with strategic oversight to enable managers and practitioners from social care and education to consider possible barriers and solutions to help encourage and support our Care Leavers into education, training or employment. Early intervention work with support from the Virtual Head Teacher is being explored to enable the services to identify and intervene with those at risk of future NEET at an earlier age.

KPI EA2: Percentage of children who attend a Wokingham borough state-funded school (Primary, Secondary or Special) which is Ofsted rated Good or Outstanding

Reporting frequency:		QUARTERLY		Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	RED
Service:		Children's Services		Indicator Type:		National, Cumulative		Benchmark: Above national average of 85.3% (as at March 2020)	
RAG Threshold:		Green if improved or 100%		Amber if less than 100% or no change				Red if deteriorated	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	89.04%	100% or improvement	Amber	→	Static				
Q2 2018/19	87.07%		Red	↓	Deteriorated				
Q3 2018/19	88.47%		Green	↑	Improved				
Q4 2018/19 Year end	89.56%		Amber	→	Static				
Q1 2019/20	89.70%		Green	↑	Improved				
Q2 2019/20	89.58%		Red	↓	Deteriorated				
Q3 2019/20	89.60%		Green	↑	Improved				
Q4 2019/20 Year end	87.69%		Red	↓	Deteriorated				

Commentary: Please refer to the covering report for service narrative regarding the performance of this indicator.

KPI EA3: Percentage of early years settings in Wokingham borough with an Ofsted rating of Good or better

Reporting frequency:		TRI-ANNUALLY		Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	AMBER
Service:		Children's Services		Indicator Type:		National, Cumulative		Benchmark: National - 95.6% (Dec-19)	
RAG Threshold:		Green if improved or 100%		Amber if less than 100% or no change				Red if deteriorated	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
P1 17-18 (Aug17)	97%	100% or improvement	Amber	New indicator					
P2 17-18 (Dec 17)	96%		Red	↓	Deteriorated				
P3 17-18 (Mar 18)	97%		Green	↑	Improved				
P1 18-19 (Aug 18)	96%		Red	↓	Deteriorated				
P2 18-19 (Dec 18)	97%		Green	↑	Improved				
P3 18-19 (Mar 19)	98%		Green	↑	Improved				
P1 19-20 (Aug 19)	99%		Green	↑	Improved				
P2 19-20 (Dec 19)	99%		Amber	→	Static				
P3 19-20 (Mar 20)					Pending				

Commentary: Data is released three times a year hence the measure reports performance at each of these three periods. Next release will be for period 3 19/20 (Mar 20)- data pending. Performance at Dec-19 remains high compared to national figures (95.6%).

KPI VP6: Percentage of children who became subject to a Child Protection Plan for a second or subsequent time **within 24 months**

Reporting frequency:		QUARTERLY		Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	AMBER	
Service:		Children's Services		Indicator Type:		Local	Benchmark:	N/A		
RAG Threshold:		Green if 10% or less			Amber if between 10 and 15%			Red if more than 15%		
Period	Actual	Target	RAG	Direction of Travel (Trend)						
Q1 2018/19	10%	10%	Green	↓	Improved					
Q2 2018/19	4%	10%	Green	↓	Improved					
Q3 2018/19	2%	10%	Green	↓	Improved					
Q4 2018/19	11%	10%	Amber	↑	Deteriorated					
2018/19 Full year	7%	10%	Green	↑	Deteriorated					
Q1 2019/20	13%	10%	Amber	↑	Deteriorated					
Q2 2019/20	22%	10%	Red	↑	Deteriorated					
Q3 2019/20	5%	10%	Green	↓	Improved					
Q4 2019/20	9%	10%	Green	↑	Deteriorated					
2019/20 Full year	11%	10%	Amber	↑	Deteriorated					

Commentary: This relates to four children in two families. In all cases, steps are taken to understand the reasons why children come back onto plans and whether any learning needs to be fed into the quality assurance cycle.

KPI VP8: Percentage of child protection visits completed on time (within 10 days of the previous visit or start of Child Protection Plan)

Reporting frequency:		QUARTERLY		Director:	Carol Cammiss	Executive Member:	UllaKarin Clark	RAG:	RED	
Service:		Children's Services		Indicator Type:		Local	Benchmark:	N/A		
RAG Threshold:		Green if 82% or more			Amber if between 78% and 81%			Red if less than 78%		
Period	Actual	Target	RAG	Direction of Travel (Trend)						
Q1 2018/19	65.4%	82%	Red	↓	Deteriorated					
Q2 2018/19	58.0%	82%	Red	↓	Deteriorated					
Q3 2018/19	60.8%	82%	Red	↑	Improved					
Q4 2018/19	71.0%	82%	Red	↑	Improved					
2018/19 Full year	65.5%	82%	Red	↓	Deteriorated					
Q1 2019/20	78.9%	82%	Amber	↑	Improved					
Q2 2019/20	73.6%	82%	Red	↓	Deteriorated					
Q3 2019/20	69.7%	82%	Red	↓	Deteriorated					
Q4 2019/20	75.9%	82%	Red	↑	Improved					
2019/20 Full year	74.9%	82%	Red	↑	Improved					

Commentary: Please refer to the covering report for service narrative regarding the performance of this indicator.

RESOURCES AND ASSETS

KPI CS1: Monitoring and reporting actions in place to address Climate emergency - *measure in development*

Reporting frequency:	ANNUAL	Director:	Graham Ebers	Executive Member:	Gregor Murray	RAG:	TBC
Service:	Resources & Assets	Indicator Type:	National	Benchmark:	N/A		
RAG Threshold:	TBC						

Period
2019/20
Commentary: Wokingham Borough's baseline carbon footprint has been established as 580.9 ktCO₂e annually as a result of direct emissions from the transport, industrial, commercial and domestic sectors (excluding the carbon emitting sectors outside the council's control). Measures are being developed to track progress against the climate emergency action plan.

KPI CS2: Number of new homes (of any tenure) delivered by Wokingham Borough Council (including WBC housing companies)

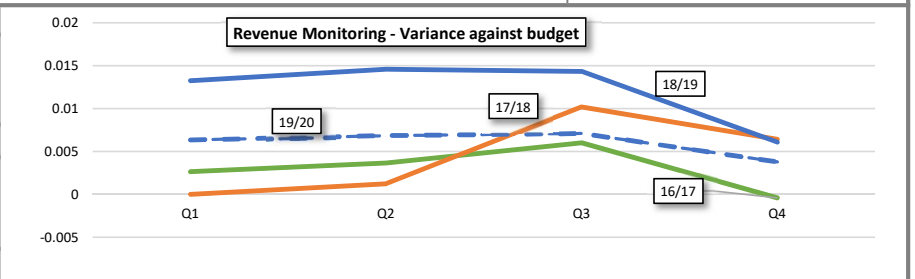
Reporting frequency:	ANNUAL	Director:	Graham Ebers	Executive Member:	John Kaiser	RAG:	TBC
Service:	Resources & Assets	Indicator Type:	Local, Cumulative	Benchmark:	N/A		
RAG Threshold:	TBC						

Period
2019/20
2020/21
Commentary: At the end of the year 2019/20, 94 new homes, of any tenure, have been delivered by Wokingham Borough Council (including WBC housing companies). The future target will be to deliver 1,000 new homes over the next four years.

KPI CE1: Revenue budget monitoring forecast position

Reporting frequency:	QUARTERLY	Director:	Graham Ebers	Executive Member:	John Kaiser	RAG:	GREEN
Service:	Resources & Assets	Indicator Type:	Local, cumulative	Benchmark:	N/A		
RAG Threshold:	Green if underspend (any), or overspend up to 1%		Amber if overspend between 1.01% to 1.99%		Red if overspend of 2% or more		

Period	Actual	Target	RAG	Direction of Travel (Trend)
Q1 2018/19	1.33% overspend	+/-1%	Amber	↑
Q2 2018/19	1.46% overspend	+/-1%	Amber	↑
Q3 2018/19	1.43% overspend	+/-1%	Amber	↓
Q4 2018/19 Year end	0.61% overspend	+/-1%	Green	↓
Q1 2019/20	0.63% overspend	+/-1%	Green	↑
Q2 2019/20	0.68% overspend	+/-1%	Green	↑
Q3 2019/20	0.71% overspend	+/-1%	Green	↑
Q4 2019/20 Year end	0.38% overspend	+/-1%	Green	↓

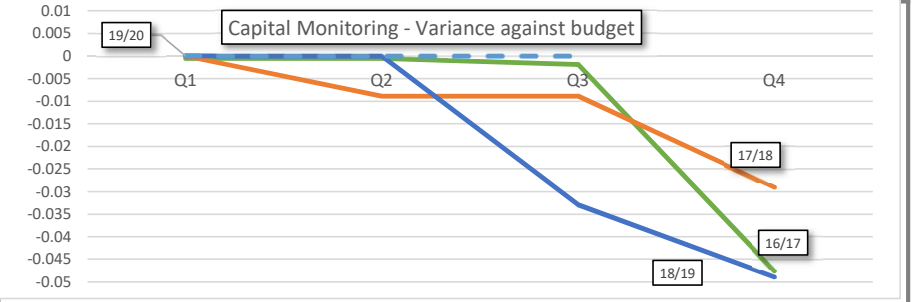


Commentary: Q4 2019/20 is reporting an overspend of 0.38% (equivalent to £0.470m). This is an improved position from Q3. Pressures continue within Children's Services. Management action plans are underway to review options for containing pressures. Corporate Services, Adult Social Care and Customer and Localities are delivering savings which are helping to reduce the overall position. Monitoring position is reported to Corporate Leadership Team on a monthly basis, and to Executive quarterly.

KPI CE2: Capital budget monitoring forecast position

Reporting frequency:	QUARTERLY	Director:	Graham Ebers	Executive Member:	John Kaiser	RAG:	GREEN
Service:	Resources & Assets	Indicator Type:	Local	Benchmark:	N/A		
RAG Threshold:	Green if underspend (any), or overspend up to 1%		Amber if overspend between 1.01% to 1.99%		Red if overspend of 2% or more		

Period	Actual	Target	RAG	Direction of Travel (Trend)
Q1 2018/19	Nil	+/-1%	Green	↓
Q2 2018/19	Nil	+/-1%	Green	→
Q3 2018/19	-3.29% underspend	+/-1%	Green	↓
Q4 2018/19 Year end	-4.89% underspend	+/-1%	Green	↓
Q1 2019/20	Nil	+/-1%	Green	↑
Q2 2019/20	Nil	+/-1%	Green	→
Q3 2019/20	Nil	+/-1%	Green	→
Q4 2019/20 Year end	-0.03% underspend	+/-1%	Green	↓



Commentary: Underspend reported at year end of £(780k). Approved budget for 2019/20 is £323m, after re-profiling into future years the budget is £231m.

KPI R1-R3: Completion to time and budget of regeneration projects (Peach Place, Elms Field and Carnival Pool Phase 2)						RAG:	GREEN	
Reporting frequency:		QUARTERLY	Director:		Graham Ebers	Executive Member:		Charlotte Haitham Taylor
Service:		Resources & Assets	Indicator Type:		Local, project	Benchmark:		N/A
RAG Threshold:		Green if projects are on time/within budget.		Amber if projects are marginally behind schedule or over budget.		Red if projects are significantly behind schedule or over budget.		
Period	Key Milestones (Target)		Delivered Actions			Time	Budget	
Q1 2019/20	Lettings and handover to new tenants. Completion of landscaping work in Peach Place square. Handover of Aldi to tenant. Completion of Elms Field park and play area. Review detailed design of Carnival Phase 2 with Places Leisure.		Peach Place: Opening of the square and various businesses. Elms Field: Aldi handed over to tenant and fit-out has commenced - expected opening Jul 2019. Work progressing well at hotel. Park and play area completed but remaining closed to allow planting to establish. Carnival: Ongoing design work with Places Leisure.			On time	Underspend	
Q2 2019/20	Completion of new public toilets at Peach Place. Opening of Aldi, opening of park and play area. Handover of Premier Inn Hotel to tenant. Prepare Carnival Pool Phase 2 tender pack.		Peach Place: Opening of further business in the square, on Peach Street and Rose Street. Further businesses commenced fit-out works. New public toilets, water fountain now open. Elms Field: Aldi store opened Jul 19 followed by new park and play area. The park and play area lease to the Town Council has been completed. Work is progressing well with tenants expected to open Nov 19. Carnival Phase 2: internal layouts of leisure centre revised to reflect Places Leisure taking on two commercial units. Procurement process has commenced with appointment expected Spring 2020.			On time	Underspend	
Q3 2019/20	Practical completion at Peach Place. Handover to tenant and opening of Everyman Cinema. Opening of Premier Inn Hotel. Public realm landscaping at Elms Field. Tender for preferred contractor for Carnival Phase 2.		Work at Peach Place predominantly completed with some minor works to finalise. Key worker apartments handed across to Wokingham Housing Limited with first tenants moved in before Christmas. Work on commercial and square completed. Main Elms Field public areas opened Dec 2019 to coincide with opening of the Everyman Cinema. Final public realm works commenced by northern block. Decision made to keep section linking through to Denmark Street closed to aid with fit out works of commercial units. Further names of businesses announced for units at Elms Field. Tender works for Carnival Phase 2 ongoing and pre-construction site clearance commenced.			On time	Underspend	
72 Q4 2019/20 Year end	Completion of public realm works at Elms Field. Commence pre-construction preparations for Carnival Phase 2.		Elms Field: Work on-site progress with public-realm opened up to allow access through to Denmark Street and commercial/residential nearing completion. This Little Piggy unit opened as the first independent tenant at Elms. Covid-19 restrictions came into force in mid-March 2020 impacting on further new tenant fit out. Programme to be reviewed to ensure prompt completion once restrictions are lifted. Appropriate works will continue during this period. Carnival Phase 2 - J Mould appointed as demolition contractor to demolish existing buildings and clear site. Main contractor due to start on site in Summer 2020 and target completion of Summer 2022 remains in place.			On time	On budget	
<p>Good news: Wokingham town centre regeneration has been named as the winner in the category for Excellence in Planning for a Successful Economy at the Royal Town Planning Institute (RTPI) Awards for Planning Excellence 2020. The RTPI Awards for Planning Excellence are the most established and respected awards in the UK planning industry. The RTPI judges commended the project saying "This project is ahead of the game. It's a transferable model for other town centres to boost their economies and community engagement."</p> <p>Commentary: Work on the regeneration projects is progressing well. Agreed milestones have been achieved in Q4 and spend remains within expected levels against allocated budget. The Regeneration projects continue to gain positive feedback and have been shortlisted for several major national awards for regeneration, development and placemaking.</p>								
KPI R4: Return on investment in commercial properties.						RAG:	GREEN	
Reporting frequency:		QUARTERLY	Director:		Graham Ebers	Executive Member:		John Kaiser
Service:		Resources & Assets	Indicator Type:		Local, project	Benchmark:		N/A
RAG Threshold:		TBC						
Period	Net yield (actual)	RAG		Details/Commentary				
Q1 2019/20	5.61%	Green		The Investment Property Portfolio continues to perform well. Despite a slight drop from Q3 to Q4, the portfolio is generating a return on investment of 5.10% with investments spread across a well-balanced range of industry sectors to lower the investment risk profile.				
Q2 2019/20	5.26%	Green						
Q3 2019/20	5.26%	Green						
Q4 2019/20 Year end	5.10%	Green						

PLACE AND GROWTH

KPI L1: Performance measure for congestion - *measure in development*

KPI CE3: Council Tax collection

Reporting frequency:		QUARTERLY		Director:	Sarah Hollamby		Executive Member:		John Kaiser		RAG:	GREEN
Service:		Place & Growth		Indicator Type:		National, Cumulative		Benchmark:		N/A		
RAG Threshold:		Green if 98.85% or more at year end				Amber if between 97.84% and 98.84%				Red if less than 97.84%		
Period	Actual	Target	RAG	Direction of Travel (Trend)								
Q1 2018/19	30.6%	30.5%	Green	↑	Improved							
Q2 2018/19	59.0%	59.0%	Green	→	Static							
Q3 2018/19	87.5%	87.8%	Green	→	Static							
Q4 Full year 2018/19	99.4%	98.9%	Green	↓	Deteriorated							
Q1 2019/20	30.4%	30.5%	Green	↓	Deteriorated							
Q2 2019/20	58.8%	59.0%	Green	↓	Deteriorated							
Q3 2019/20	87.4%	87.8%	Green	↓	Deteriorated							
Q4 Full year 2019/20	99.5%	98.9%	98.9%	↑	Improved							

Commentary: This measure is cumulative, hence direction of travel compares Q1 2019/20 performance with the same quarter in the previous year.

KPI CE4: Business Rates collection

Reporting frequency:		QUARTERLY		Director:	Sarah Hollamby		Executive Member:		John Kaiser		RAG:	GREEN
Service:		Place & Growth		Indicator Type:		National, Cumulative		Benchmark:		N/A		
RAG Threshold:		Annual				Amber if between 97.84% and 98.84%				Red if less than 97.84%		
Period	by Wokingham Bor	Annual	RAG	Direction of Travel (Trend)								
Q1 2018/19	35.2%	30.5%	Green	↑	Improved							
Q2 2018/19	59.9%	59.0%	Green	→	Static							
Q3 2018/19	85.1%	87.8%	Green	→	Static							
Q4 Full year 2018/19	99.1%	98.9%	Green	↓	Deteriorated							
Q1 2019/20	32.9%	30.5%	Green	↓	Deteriorated							
Q2 2019/20	58.3%	59.0%	Green	↓	Deteriorated							
Q3 2019/20	85.9%	87.8%	Green	↑	Improved							
Q4 Full year 2019/20	99.4%	98.9%	98.9%	↑	Improved							

Commentary: This measure is cumulative, hence direction of travel compares Q3 19/20 performance with the same quarter in the previous year.

KPI CE10: Percentage of calls answered

Reporting frequency:		QUARTERLY		Director:	Sarah Hollamby		Executive Member:		John Kaiser		RAG:	RED
Service:		Place & Growth		Indicator Type:		Local		Benchmark:		N/A		
RAG Threshold:		Green if 95% or more				Amber if between 90% and 94%				Red if less than 90%		
Period	Actual	Target	RAG	Direction of Travel (Trend)								
Q1 2018/19	92%	95%	Amber	↓	Deteriorated							
Q2 2018/19	91%	95%	Amber	↓	Deteriorated							
Q3 2018/19	95%	95%	Green	↑	Improved							
Q4 2018/19	95%	95%	Green	→	Static							
2018/19 Full year	93%	95%	Amber	N/A								
Q1 2019/20	86%	95%	Red	↓	Deteriorated							
Q2 2019/20	89%	95%	Red	↑	Improved							
Q3 2019/20	91%	95%	Amber	↑	Improved							
Q4 2019/20	92%	95%	Amber	↑	Improved							
2019/20 Full year	89%	95%	Red	↓	Deteriorated							

Commentary:

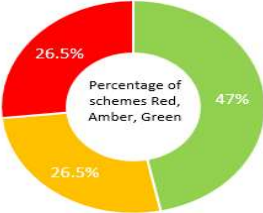
The average wait time for Q4 was 95 seconds, against a 90 second Customer Service standard. We are continuing to fix as many enquiries at first point of contact as possible, with the last quarter being 78% against a KPI of 65% for calls. We saw an increase in contact across the whole Customer Delivery service in March as a result of garden waste registrations, and from residents and businesses looking for support and guidance following the COVID-19 Government lockdown on 24th March. Due to robust business continuity and increased resilience, we have managed to maintain a full service for our residents, aside from those we have been requested to stop i.e. weddings, citizenship ceremonies, birth registrations

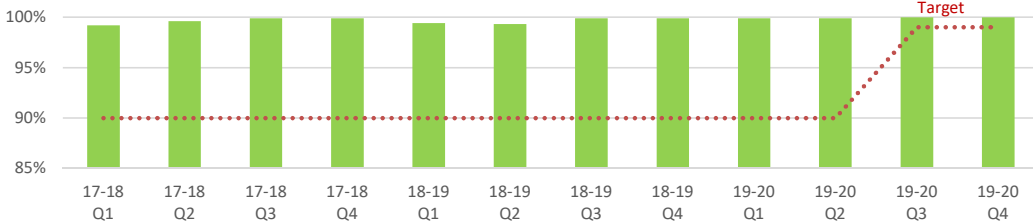
KPI R4/R5: Average percentage of Section 106 and Community Infrastructure Levy (CIL) received and allocated to schemes.									
Reporting frequency:		QUARTERLY		Director: Sarah Hollamby		Executive Member: Wayne Smith		RAG: GREEN	
Service:		Place & Growth		Indicator Type: Local		Benchmark: N/A			
RAG Threshold:		Green if 94% or more			Amber if between 90% and 93%			Red if less than 90%	
Q1 2019/20	97%	94%	Green		N/A				
Q2 2019/20	96%	94%	Green	↓	Deteriorated				
Q3 2019/20	99%	94%	Green	↑	Improved				
Q4 2019/20	99%	94%	Green	→	Static				
Q4 2019/20 Year end	99%	94%	Green	→	Static				

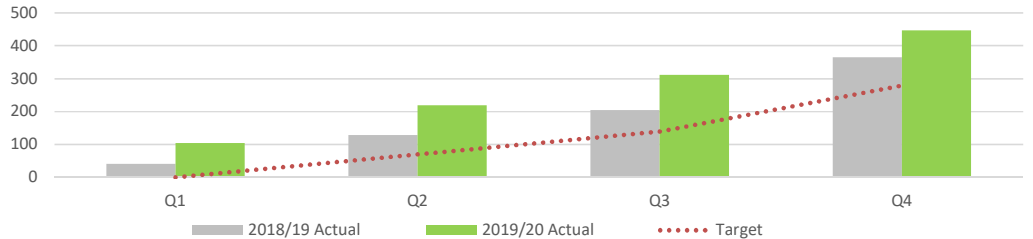
KPI SC3: Overall percentage of planning applications determined in the statutory timescales (split by timescales available in appx 7)									
Reporting frequency:		QUARTERLY		Director: Sarah Hollamby		Executive Member: Wayne Smith		RAG: GREEN	
Service:		Place & Growth		Indicator Type: Local		Benchmark: N/A			
RAG Threshold:		Green if 60% or more			Amber if between 50% and 59%			Red if less than 50%	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	96%	60%	Green	↑	Improved				
Q2 2018/19	91%	60%	Green	↓	Deteriorated				
Q3 2018/19	97%	60%	Green	↑	Improved				
Q4 2018/19	96%	60%	Green	↓	Deteriorated				
2018/19 Full year	95%	60%	Green	↑	Improved				
Q1 2019/20	99%	60%	Green	↑	Improved				
Q2 2019/20	98%	60%	Green	↓	Deteriorated				
Q3 2019/20	98%	60%	Green	→	Static				
Q4 2019/20	97%	60%	Green	↓	Deteriorated				
2019/20 Full year	98%	60%	Green	↑	Improved				

KPI SC7: Percentage of household waste reused, recycled and composted - based on quarterly estimates									
Reporting frequency:		QUARTERLY		Director: Sarah Hollamby		Executive Member: Parry Bath		RAG: AMBER	
Service:		Place & Growth		Indicator Type: National		Benchmark: Worse than England (43.2%) 2017/18			
RAG Threshold:		Green if 52% or more			Amber if between 50% - 51%			Red if 49% or less	
Period	Actual	Target	RAG	Direction of Travel (Trend)					
Q1 2018/19	42.2%	42%	Green	↑	Improved				
Q2 2018/19	39.2%	42%	Amber	↓	Deteriorated				
Q3 2018/19	39.8%	42%	Amber	↑	Improved				
Q4 2018/19	40.4%	42%	Amber	↑	Improved				
2018/19 Full year	40.5%	42%	Amber	↑	Improved				
Q1 2019/20	55.7%	52%	Green	↑	Improved				
Q2 2019/20	55.3%	52%	Green	↓	Deteriorated				
Q3 2019/20	50.9%	52%	Amber	↓	Deteriorated				
Q4 2019/20	40.7%	52%	Red	↓	Deteriorated				
2019/20 Full year	50.8%	52%	Amber	↑	Improved				

Commentary: Q4 2019/20 figures are provisional and subject to change. Final confirmed figures are expected July 2020. Despite under-performance reported for Q4 provisional data, the full year 2019/20 performance is close to target and a significant improvement on the previous year.

KPI T1-6: Percentage of Highway Infrastructure Schemes on track for project delivery							
Reporting frequency:		QUARTERLY		Director:		Sarah Hollamby	
Service:		Place & Growth		Executive Member:		Pauline Jorgensen	
RAG Threshold:		Green if schemes are on time/within budget		Indicator Type:		Local	
				Benchmark:		N/A	
						Amber if schemes are slightly behind schedule/overspend	
						Red if schemes are significantly behind schedule/overspend	
Q1 2019/20	43%	New measure		 <p>Commentary: This measure provides an overview of progress on the highway infrastructure schemes. Nine major highways schemes are being monitored comprising of Arborfield Cross Relief Road, North and South Wokingham Distributor Road, Nine Mile Ride, Barkham Bridge, Winnersh Relief Road Phase 2, Thames Valley and Coppid Beech Park and Ride and California Cross Roads. Some of these schemes include subsidiary project phases and as such a total of 15 phases contribute to this measure and each is assigned a RAG rating to indicate progress. For Q4 2019/20, 47% (7 phases) are reported as Green since they are on target, 26.5% (4 phases) are Amber since there is some time delay or risk identified and the remaining 26.5% (4 phases) are reported as Red.</p>			
Q2 2019/20	60%	Green	↑				Improved
Q3 2019/20	67%	Green	↑				Improved
Q4 2019/20	47%	Amber	↓				Deteriorated
Year end							

KPI VP10: Percentage of housing stock which meets the Decent Homes Standard						
Reporting frequency:		QUARTERLY		Director:		Sarah Hollamby
Service:		Place & Growth		Executive Member:		John Kaiser
RAG Threshold:		Green if 90% or more		Indicator Type:		Local, cumulative
				Benchmark:		N/A
						Amber if between 70% and 80%
						Red if less than 70%
Period	Actual	Target	RAG	Direction of Travel (Trend)		
Q1 2018/19	99.4%	90%	Green	↓	Deteriorated	
Q2 2018/19	99.3%	90%	Green	↓	Deteriorated	
Q3 2018/19	99.9%	90%	Green	↑	Improved	
Q4 2018/19 Year end	99.9%	90%	Green	→	Static	
Q1 2019/20	99.9%	90%	Green	→	Static	
Q2 2019/20	99.9%	90%	Green	→	Static	
Q3 2019/20	99.0%	90%	Green	↓	Deteriorated	
Q4 2019/20 Year end	99.0%	90%	Green	→	Static	

KPI VP14: Number of affordable dwellings completed						
Reporting frequency:		QUARTERLY		Director:		Sarah Hollamby
Service:		Place & Growth		Executive Member:		John Kaiser
RAG Threshold:		Green if 260 completions or more		Indicator Type:		Local, Cumulative
				Benchmark:		N/A
						Amber if between 201 - 259 completions
						Red if below 200 completions
Period	Actual	Target	RAG	Direction of Travel (Trend)		
Q1 2018/19	41	0	Green	↓	Deteriorated	
Q2 2018/19	129	70	Green	↓	Deteriorated	
Q3 2018/19	204	140	Green	↓	Deteriorated	
Q4 2018/19 Year end	365	279	Green	↓	Deteriorated	
Q1 2019/20	104	90	Green	↑	Improved	
Q2 2019/20	219	179	Green	↑	Improved	
Q3 2019/20	311	269	Green	↑	Improved	
Q4 2019/20 Year end	446	358	Green	↑	Improved	

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