

<b>Committee:</b>	<b>Dated:</b>
Community and Children's Services Committee	<b>17/12/2021</b>
<b>Subject:</b> DCCS Business Plan Performance: 2021–22 Quarter 2	<b>Public</b>
<b>Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?</b>	<b>1, 2, 3, 4</b>
<b>Does this proposal require extra revenue and/or capital spending?</b>	<b>No</b>
<b>Report of:</b> Andrew Carter, Director of Community and Children's Services	<b>For Information</b>
<b>Report author:</b> Robert Wood, Senior Performance Analyst, Department of Community and Children's Services	

### Summary

This report sets out the progress made during Quarter 2 – July to September 2021 against the 2017–2022 Department of Community and Children's Services (DCCS) Business Plan. It also comments on the Departmental Risk Register.

### Recommendations

Members are asked to:

- note this report and progress of the DCCS Business Plan for Quarter 2 2021–22
- note the status of Departmental Risks at Quarter 2 2021–22

### Main Report

#### Background

1. Progress on the Departmental Business Plan is monitored and reported against a set of 65 Key Performance Indicators (KPIs). The full list of these KPIs and performance can be found in Appendix 1. The majority of KPIs (58 in total) were agreed in 2018 and were designed to reflect changing priorities and demonstrate improved outcomes for our community, residents and workers.
2. Following an internal departmental review, two of the 58 indicators were revised for financial year 2021–22 and one indicator was discontinued. In addition, there are seven indicators which are new to the 2021–22 Business Plan, which were agreed by DCCS service managers and are listed as 'New KPI' in Appendix 1.
3. DCCS is committed to collaborative working with our partners, commissioned providers, and organisations. This requires a broader and more transparent reporting framework that assures us of good progress achievements and realisation of our action plans.

4. An outcomes-based accountability framework requires that we measure volume and activity, and that we demonstrate the positive effect of services and the impact on all sections of the community, ensuring equality of access, participation and satisfaction.
5. The current version of the Departmental Business Plan ends in 2022. There may be changes to the plan in line with the new Target Operating Model and any review of the Corporate Plan in 2023. As a result, it is likely that there will be a significant review of the Departmental KPI suite going forward.
6. At the January 2021 Community and Children's Services Committee meeting, Members considered the Department's annual headline Business Plan. This contained a selected list of KPIs that reflected the Department's work.
7. The Departmental Business KPIs are drawn from wider suites of performance information across the Department. More detailed suites of KPIs and information are considered in various relevant committees, including the Safeguarding Sub-Committee, Education Board, and Housing Management & Alms-houses Sub-Committee.

### **DCCS Business Plan KPI Performance**

8. Overall performance in Quarter 2 2021–22 shows the departmental KPIs as:

<b>RAG status</b>	<b>Traffic light description</b>	<b>Total KPIs*</b>
<b>Green</b>	KPIs for which the set target was achieved or exceeded	18 (28%)
<b>Amber</b>	KPIs within the tolerance of 10% of the set target	4 (6%)
<b>Red</b>	KPIs that are below the tolerance of 10% of the set target	12 (18%)
<b>Not provided</b>	KPIs where there is no update for the quarter report – these could not be reported due to lack of data	31 (48%)

\* Percentages based on share of RAG-rated indicators

9. Please note that, due to the COVID-19 pandemic and the restrictions that were implemented, many KPIs have been impacted, and reporting was suspended in some cases. For example, there were no Standard Assessment Tests (SATs) administered in the summer of 2020 and 2021 due to the ongoing impact of the COVID-19 restrictions.
10. It should be noted that, due to the absence of information, many KPIs were effectively a nil return (48% in total). This is because some services have changed in the pandemic period or are no longer operational. However, it should be noted that, at the end of Quarter 1, 36 indicators (55%) were a nil return, reflecting that some services have resumed and can be reported on.

11. It should be noted that the performance outturns from 2020–21 have been provided for context and to better understand the direction of travel.
12. Commentary on the Red and Amber rated indicators for Quarter 2 of 2021–22 is set out below.

### ***Amber and Red Performance Indicators: Commentary***

13. ***BP14 (Red) Percentage of people engaging in City smoking cessation programmes who quit smoking*** – A new service began on 1 April 2021; the pandemic has been a contributory factor to the low number of people accessing the service to date.
14. ***BP15 (Red) Residents taking up an NHS health check*** – The KPI has been reduced to 163 for the year due to the impact of COVID-19 on face-to-face services and practice workload. The contracts team are working with the Neaman Practice to ensure that the KPI is met.
15. ***BP16 (Red) Number and proportion of participants who completed the weight management programme in the period*** – A new service is scheduled to begin in January 2022.
16. ***BP18a (Amber) Take-up of e-services for sexual health testing – % and number of people who return a kit and receive their results within 21 days of ordering it*** – Analysis of data indicated that users who know and trust us are pre-ordering kits and sending them back after a longer gap. No change in new users' responsiveness and no change in supplier's performance.
17. ***BP19a (Red) Number of planning consents (no. of units given)*** – A resolution to grant planning permission was approved for 91 units at York Way by London Borough of Islington on 27 July 2021.
18. ***BP19b (Red) Number of construction starts (no. of units given)***
19. ***BP19c (Red) Number of completions (no. of units given)*** – This target is made up of three new units at Isleden House and two new units at Great Arthur House. Both projects have been unavoidably delayed because of changes in design, contractual negotiations, and the requirement for further consultation.
20. ***BP26 (Amber) An increased proportion of service users live within the community (not residential or nursing)*** – At Quarter 2 2021–22, of the 107 clients: 16 were residential (15%); eight were nursing (7.4%); 83 community (77.6%); and 24 nursing and residential (22.4%).
21. ***BP27 (Red) Reduction of average cost of residential social care*** – Quarter 2 2021/22 (£830) is comparable with the Q3 2020/21 outturn of £824 but higher than the 2020/21 year to date (YTD) outturn (£700) and above target. The availability of placements has decreased during the pandemic, while the costs of new placements have risen considerably.

22. **BP31 (Red) The improved timeliness of pathway plans (three months for the initial review followed by every five months)** – Work is currently being undertaken on the pathway plan workflow and reporting for children in care, therefore the data here for Quarter 2 is only for the number of Care Leavers. As of 30 September, there were 47 care leavers, 16 of whom had a most recent pathway plan review that had been delivered within five months of the previous review, providing a rate of 34%. The statutory timescale measure is six months from the previous review.
23. **BP33 (Red) An increased proportion of new rough sleepers who sleep out just once** – There has been a London-wide increase in rough sleeping in Quarter 2. This means a greater number of new or 'flow' clients arriving in the City, many of whom are not willing to disclose their identity. This increases the proportion of new rough sleepers counted as sleeping out just once as they are never seen again.
24. **BP34 (Red) Number and proportion of people deemed 'living on the streets' is below Inner London average** – The 'Everyone In' initiative throughout the pandemic has led to increased urgency and persistence from the Outreach team in engaging rough sleepers. This accelerates the speed at which new rough sleepers qualify for 'Living on the streets' if they are resistant to service offers.
25. **BP35 (Amber) Increase in average energy-efficiency rating for our housing stock** – It should be noted that project work will not be complete until the Energy Performance Certificate data has been updated. Project work will provide improvements that would increase energy efficiency, such as replacement windows and doors. Until this work is complete, any assessment (Energy Performance Certificate) of the properties will show no change.
26. **BP39 (Amber) All properties are fully compliant with gas safety regulations** – There were 12 properties which were non-compliant as of 30 September. Property Services continue to work closely with Housing management to gain entry to these properties.
27. **BP48 (Red) Proportion of Portsoken Pavilion Café employees from the local community** – The café closed at the end of Quarter 3 2020/21. Statistics therefore remain unavailable. It should be noted that the provider has now ended its lease to manage the Portsoken Pavilion Café.
28. **Group 11 (New KPI) 'Average time taken to re-let local authority housing (days)' (Red)** – It should be noted that the outturn at Quarter 2 includes non-routine voids. This means the following properties were included: a) Homes not let to be used as major works test properties (these can be out of circulation for several months, but for legitimate reasons); b) Homes requiring extensive works between tenancies, there were several in Quarter 2. Going forward, the Housing team plan to distinguish between the void types. The parameters of the reporting will be agreed with the City of London Repairs Team.

## Departmental Risk Register Summary

29. Appendix 2 contains a summary of the Departmental Risk Register. As can be seen, the Department **has no red risks at Quarter 2.**

## Implications

30. The work of the Department is wide-ranging and contributes to a range of Corporate Priorities including specifically:
- Priority 1: People are safe and feel safe
  - Priority 2: People enjoy good health and wellbeing
  - Priority 3: People have equal opportunities to enrich their lives and reach their full potential
  - Priority 4: Communities are cohesive and have the facilities they need.

## Conclusion

31. This report updates Members on performance as at Quarter 2 2021–22 against a suite of Departmental Business Plan KPIs.
32. The impact of COVID-19 restrictions, which were reinstituted in early 2021, has continued to influence some of our reporting; for example, where services have changed or where reporting has been suspended.
33. This report also gives members further detail about any performance rated Amber or Red.

## Appendices

- Appendix 1 – Quarter 2 2021–22 Key Performance Indicators (KPIs) Update
- Appendix 2 – Quarter 2 2021–22 Departmental Risk Register Summary

## Robert Wood

Senior Performance Analyst, Department of Community and Children's Services

T: 074 7716 4907

E: [Robert.wood@cityoflondon.gov.uk](mailto:Robert.wood@cityoflondon.gov.uk)

## Appendix 1 – Quarter 2 2021–22 Key Performance Indicators (KPIs) Update

### Key:

DOT: Direction of travel  
 Freq: Frequency of reporting  
 YTD: Year to date  
 National: National average

### RAG ratings:

G – Achieved or exceeded  
 A – 10% tolerance  
 R – below tolerance of 10%  
 Blank – Not available  
 Duplicated KPI



## 1. Delivering an outstanding education offer through the City of London family of schools

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
1	BP1	All City-sponsored academies achieve and maintain good or outstanding Ofsted ratings	N/A	100%	100%	100%	100%	100%	100%		Green	↔	Q	N/A
1	BP2	Pupils make good progress at KS4 in City-sponsored academies (*Progress 8 measure) (FFT Aspire estimate provided where GCSE discontinued)	N/A	N/A	N/A	N/A	Above 2020 national benchmark	N/A			N/A	↔	A	N/A
1	BP3	Pupil premium children (FSP, LAC, adopted, SGO) at City-sponsored academies make good progress at KS2 and KS4 (KS2 & KS4 Progress measures; FFT Aspire estimates provided where SATs discontinued).	N/A	N/A	N/A	N/A	Above 2020 national benchmark	N/A			N/A	↑	A	N/A
1	BP4	Progress and attainment at school stages (KS2) that is considerably above national levels	N/A	N/A	N/A	N/A	Above 2020 national benchmark	N/A			N/A	↔	A	N/A

**2. Securing efficiencies and better outcomes through the integration of health and social care commissioning across the City of London and Hackney (and with other partners)**

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
2	BP5a	Reduction in delayed transfers of care (DTOC) (discharges) from hospital – accredited to the NHS	N/A	N/A	N/A	N/A	Target set nationally and not yet confirmed	N/A		DTOC reporting has been suspended, due to the impact of COVID-19 and the national lockdown restrictions in place at the time.	N/A	↔	Q	N/A
2	BP5b	Reduction in delayed transfers of care (DTOC) (discharges) from hospital – accredited to Adult Social Care (ASC)	N/A	N/A	N/A	N/A	Target set nationally and not yet confirmed	N/A		DTOC reporting has been suspended, due to the impact of COVID-19 and the national lockdown restrictions in place at the time.	N/A	↔	Q	N/A
2	BP6a	Increased number of residents (in contact with service) supported to live independently at home as a result of Early Intervention, and Prevention Services.	41	44	49	31	Target not confirmed	41	37	Q2: 37 people were supported by City Connections through the care navigators and a community support assessment.	N/A	↓	Q	No
2	BP6b	Proportion of clients reporting improved quality of life as a result of Early Intervention and Prevention services (EIP)	75%	72%	74%	83%	Target not confirmed	87%	100%	Overall satisfaction scores were 89%, 100%, 100% and 100 % for questions relating to safety, neighbourhood, independence and quality of life. As with previous quarters, it is possible that the national COVID-19 situation has had an impact on these results.	N/A	↑	Q	Improved
2	BP6c	Proportion of residents/carers who got in contact with the City that are referred onwards to other relevant services	N/A	N/A	52%	N/A	Target not confirmed	62%	62%	There were 37 individuals which were referred to City Connections (23 from the City's Adult Social Care Service, 62%). 53 onward referrals were made to 18 different activities and organisations.	N/A	↔	Q	N/A
2	BP7	Proportion of people age 65+ who require less support following a period of reablement (at home 91 days after discharge from hospital)	100% (3/3)	66% (4/6)	63% (5/8)	70% (7/10)	85%	N/A			N/A	↔	Q	N/A

### 3. Promoting effective transitions and progression through education and fulfilling employment

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
3	BP8	Proportion of completions of City apprenticeships and positive destinations (employment or further training)	N/A	N/A	84%	87%	100%	100%	100%		Green	↔	A	N/A
3	BP9	Percentage of City young people (aged 16 and 17) not in education, employment or training (NEET & unknown)	N/A				Below 2019/20 national average (5.5%)	2.0% (cohort of 50) NEET, employment without training, education and unknown.			Green	↓	A	N/A
3	BP10	Increased number and percentage of apprentices employed by the City from Black and Minority Ethnic backgrounds	N/A	40%	39%	41%	Target not confirmed	40%		This relates to apprentices on the programme at some stage during the period from 01/04/2021 (26 of 65 apprentices). It does not include apprentices on a Level 4 or above course.	N/A	↓	Q	No
3	BP11a	Adult enrolments for adult learning and skills courses (accredited and non-accredited)	N/A	105	211	223	Target not confirmed	N/A	350		N/A	↑	A	N/A
3	BP11b	Annual proportion of adult learners who pass an adult skills course	76.7%				Target not confirmed	N/A			N/A	↔	A	N/A
3	BP12	The library's services and activities have a positive impact on my family's health and wellbeing	N/A	N/A	N/A	100%	86%	81%	87%		Green	↑	Q	Improved
3	BP13	The library offers a good range of learning opportunities for individuals and groups of people	N/A	N/A	76%	85%	90%	85%	93%		Green	↑	Q	Improved
3	New KPI	Assess the Value of our Children's Events: 'My Child has the opportunity to make friends'					Target not confirmed	100%	43%		N/A	↔	Q	N/A
3	New KPI	Assess the Value of our Children's Events: 'I have the opportunity to make friends'					Target not confirmed	50%	43%		N/A	↔	Q	N/A
3	New KPI	Assess the Value of our Children's Events: 'The library's services and activities help with my child's development (co-ordination and motor skills, speech and language)'					Target not confirmed	50%	88%		N/A	↔	Q	N/A



#### 4. Promoting equality in health through outreach to all the City of London communities

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22			RAG	DOT	Freq	Changed
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary				
4	BP14	Percentage of people engaging in City smoking cessation programmes who quit smoking	N/A	N/A	N/A	N/A	52% (n=500)	33% (n=3)	40% (n=10)	A new service began on the 1 April 2021; the pandemic has been a contributory factor to the low number of people accessing the service to date.	Red	↑	Q	Improved
4	BP15	Residents taking up an NHS health check	N/A	11	100	38	191	23	25	The KPI has been reduced to 163 for the year due to the impact of COVID-19 on face to face services and practice workload. The contracts team are working with the Neaman Practice to ensure the KPI is met.	Red	↑	Q	Improved
4	BP16	Number and proportion of participants who completed the weight management programme in period	N/A	N/A	N/A	N/A	70% (n=30)	0%	0%	A new service is scheduled to begin in January 2022.	Red	↔	Q	N/A
4	BP17	Use of the Golden Lane Sport and Fitness Centre by young people	N/A	N/A	N/A	N/A	7282	260	201	The centre reopened on the 12 April 2021 with COVID-19 restrictions in place.	N/A	↓	Q	No

#### 5. Increasing access to and effectiveness of pan-London sexual health services through the mobilisation of e-healthcare services

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22			RAG	DOT	Freq	Changed
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary				
5	BP18a	Take up of e-services for sexual health testing – % and number of people who return a kit and receive their results within 21 days of ordering it	79%	75%	68%	77%	70%	69%	68%	Analysis of data indicated users that know and trust us are pre-ordering kits and sending after a longer gap. There was no change in new users responsiveness and no change in supplier's performance.	Amber	↓	Q	No
5	BP18b	Increased satisfaction with e-services for sexual health testing (%)	99%	99%	99%	99%	90%	99%	99%	3,298 of the 3,333 respondents said that they were happy or very happy with the service.	Green	↔	Q	N/A

## 6. Delivering more homes and better meet social housing needs

			2020/21 Quarterly				2021/22 Target	2021/22						
Group	No.	Key Performance Indicators	Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
6	BP19a	Number of planning consents (no. units given)	N/A				115	0	91	A resolution to grant planning permission, was approved for 91 units at York Way by London Borough of Islington on 27 July 2021.	Red	⇔	A	Improved
6	BP19b	Number of construction starts (no. units given)	N/A	0	0	5	115	0	0		Red	↓	A	N/A
6	BP19c	Number of completions (no. units given)	N/A	0	0	0	5	0	0	This target is made up of three new units at Isleden House and two new units at Great Arthur House. Both of these projects have been unavoidably delayed as a result of changes in design, contractual negotiations and the requirement for further consultation.	Red	⇔	A	N/A

## 7. Improving outcomes and services for children and young people with special education needs and disabilities

			2020/21 Quarterly				2021/22 Target	2021/22						
Group	No.	Key Performance Indicators	Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
7	BP20	Proportion of EHC plans completed for SEND children within 20 weeks' timeframe, incl. exceptions.	N/A	100%	N/A	100%	100%	N/A	N/A		N/A	⇔	Q	N/A
7	BP21 (Revised)	The proportion of children receiving SEND support attending a local authority maintained school in the City of London' (primary and secondary)					12.6%	15.6%	12.9%		N/A	↓	A	New
7	New KPI	The number of Children & Young People on EHCPs maintained by the City of London'.					Target not confirmed	20	19		N/A	↓	Q	New
7	BP22	Educational progress of children with SEND at KS2	N/A	N/A	N/A	N/A	n/a (no result 2021)	N/A (no result in 2021)			N/A	⇔	A	N/A
7	BP23	An increased number of SEND children take up of youth services (universal, holiday, IAG, NEET, City youth forum, young carers)	N/A	3	3	8	Target not confirmed	12	10		N/A	↓	Q	N/A

## 8. Improving outcomes and experience for adult social care users

			2020/21 Quarterly				2021/22 Target	2021/22						
Group	No.	Key Performance Indicators	Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
8	BP24	Adult Social Care service user and carer reported quality of life (survey outcome)	N/A	N/A	N/A	N/A	Above 2019/20 London average	TBC	TBC	To be confirmed; will be conducted during 2021/22.	N/A	⇌	A	N/A
8	BP25	Proportion of adult social care service users who say services have made them feel safe and secure (survey outcome)	N/A	N/A	N/A	N/A	Above 2019/20 London average	TBC	TBC	To be confirmed; will be conducted during 2021/22.	N/A	⇌	A	N/A
8	BP26	An increased proportion of service users live within the community (not residential or nursing)	N/A	75%	77%	77%	80%	77%	78%	Q2 2021/22 - of the 107 Clients = 16 Residential (15%); 8 Nursing (7.4%); 83 (77.6%) Community; 24 (22.4%) Nursing & Residential.	Amber	↑	Q	No
8	BP27	Reduction of average cost of residential social care	N/A	£749	£824	£691	£700	£736	£830	Q2 2021/22 (£830) is comparable with the Q3 2020/21 outturn of £824 but higher than the 2020/21 YTD outturn (£700) and above target. The availability of placements has decreased during the pandemic while the costs of new placements have risen considerably.	Red	↑	Q	No
8	BP28	An increased proportion of clients (service users) are on direct payments (DP)	N/A	40%	39%	38%	National 2018/19: 28.3%; 2019/20: 27.3%	33%	37%	Q2 2021/22 – 31 of the 83 in the community received Direct Payments (37%). The service actively promotes and supports people to use Direct Payments as a way of managing their own service. However, there is strong management oversight to ensure Direct Payments are used effectively and within the guidelines. There are times when service users, through their own health and support needs, are no longer able to manage their Direct Payment, resulting in a fluctuation in numbers.	Green	↑	Q	Improved

## 9. Safeguarding children, and young people and adults at risk

			2020/21 Quarterly				2021/22 Target	2021/22						
Group	No.	Key Performance Indicators	Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
9	BP29a	CIN – On a Child in Need Plan for one year but less than two years – % and number	N/A	37%	65%	57%	Not comparable due to cohort	68%	0%		N/A	↓	Q	N/A
9	BP29b (Revised)	CIN - 'Child in need for a duration of two or more years without an Education, Health & Care Plan' - % and number	N/A	0%	18%	14%	Not a national indicator	21%	13%		N/A	↓	Q	N/A
9	BP29c	CPP – On a Child Protection Plan for one year but less than two years – % and number	N/A	0%	0%	67%	Not a national indicator	0%	50%		N/A	↑	Q	N/A
9	New KPI	'Children Looked After with three or more placements since April'. - % and number					Below 2019/20 Inner London average (11%)	0%	0%		Green	↔	Q	New
9	BP30	Percentage of assessments for children's social care carried out within 45 working days of referral	N/A	89%	100%	100%	Above 2019/20 Inner London average (82%)	100%	100%		Green	↔	Q	N/A
9	BP31	The improved timeliness of pathway plans (three months for the initial review followed by every five months)	33%	32%	26%	24%	100%	25%	34%	Work is currently being undertaken on the pathway plan workflow and reporting for children in care, therefore the data here for Quarter 2 is at present only for the number of Care Leavers. As at 30 September, there were 47 care leavers, 16 of which had a most recent pathway plan review that had been delivered within 5 months of the previous review; giving a rate of 34%. The statutory timescale measure is 6 months from the previous review.	Red	↑	Q	Improved
9	BP32	Number and percentage of adults referred for safeguarding (such as abuse or neglect) whose expressed outcomes are fully or partly met.	N/A	N/A	N/A	N/A	96%	83% (5/6)	100% (4/4)	In relation to the 'making safeguarding personal' (MSP) indicator: of the four concluded S42 cases in the quarter, in all four cases where the client expressed an opinion, their outcome was either fully or partially achieved.	Green	↑	Q	Improved

## 10. Delivering and enhancing accommodation pathways and health services for rough sleepers

			2020/21 Quarterly				2021/22 Target	2021/22						
Group	No.	Key Performance Indicators	Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
10	BP33	An increased proportion of new rough sleepers who sleep out just once.	N/A	48%	64%	66%	76%	57%	64%	There has been a London-wide increase in rough sleeping in Q2. This means a greater number of new or 'flow' clients arriving in the City, many of whom are not willing to disclose their identity. This increases the proportion of new rough sleepers counted as sleeping out just once as they are never seen again.	Red	↑	Q	Improved
10	BP34	Number and proportion of people deemed 'living on the streets' is below Inner London average	N/A	40	44	34	Below 2020 average (36)	37	52	The 'Everyone In' initiative throughout the pandemic has led to increased urgency and persistence from the Outreach Team in engaging rough sleepers. This accelerates the speed at which new rough sleepers qualify for 'Living on the streets' if they are resistant to service offers.	Red	↑	Q	No

## 11. Delivering a programme of major works to maintain and improve our existing homes

			2020/21 Quarterly				2021/22 Target	2021/22						
Group	No.	Key Performance Indicators	Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
11	BP35	Increase in average energy-efficiency rating for our housing stock	N/A	64	65	65	69	65	65	It should be noted that project work will not be complete until the Energy Performance Certificate data has been updated. Project work will provide improvements that would increase the energy-efficiency, such as replacement windows and doors. Until this work is complete, any assessment (Energy Performance Certificate) of the properties will show no change.	Amber	↔	A	No
11	BP36	Proportion of City housing stock meeting 'decent homes' standard	N/A	92%	90%	90%	Above 2018/19 London average (83%)	90%	90%		Green	↔	A	N/A
11	BP37	Increased proportion of customer satisfaction with regards to major works improvement programmes	N/A	0%	98%	98%	98%	98%	98%		Green	↔	A	N/A
11	New KPI	'Average time taken to relet local authority housing (days)'					25	N/A	54.3	It should be noted that the outturn at Q2 includes non-routine voids. This means the following properties were included: -Homes not let in order to be used as major works test properties (these can be out of circulation for several months, but for legitimate reasons). -Homes requiring extensive works between tenancies (there were several in Q2). Going forward, the Housing Team plans to distinguish between the void types. The parameters of the reporting will be agreed with the City of London Repairs Team.	Red	↔	Q	No
11	New KPI	'Percentage of rent collected'					Target not confirmed	89.4%	94.3%		N/A	↔	Q	N/A

## 12. Maintaining safe homes that comply with advances in fire safety requirements

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
12	BP38	Blocks of flats with a valid and up-to-date fire risk assessments	N/A	100%	100%	100%	100%	100%	100%		Green	↔	A	N/A
12	BP39	All properties are fully compliant with gas safety regulations	N/A	99%	100%	99%	100%	99.47%	99.30%	There were 12 properties which were non-compliant as at 30th September. Property Services continue to work closely with Housing management to gain entry to these properties.	Amber	↓	A	No

## 13. Supporting City of London businesses and the Corporation to improve their employees' health and wellbeing and participation in health and wellbeing activities

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
13	BP40	Percentage satisfaction with Business Healthy events and activities	N/A	99%	95%	96%	70%	100%	92%	There were 3 online sessions hosted: City & Hackney COVID-19 advice webinar for businesses for Step 4 of the roadmap (171 attendees, 13 responses), "Acting quickly to prevent suicides" webinar (42 attendees, 5 responses), and a Suicide Prevention Awareness session (12 attendees, 5 responses). Business Healthy presented at a further 2 online webinars. When asked "How useful did you find this webinar? (1 star is very poor, 5 stars is excellent)", the average response was 4.6 (92%).	Green	↑	Q	No
13	BP41	Dragon Café visitors strongly agree/agree that the cafe helped to improve their mental wellbeing	N/A	80%	100%	90%	76%	76%	89%	Of those attendees to the Dragon Cafe in Q2 2021/22, 9 provided feedback (8 strongly agreed or agreed that attending the Cafe helped to improve their mental wellbeing).	Green	↑	Q	Improved

**14. Supporting the development of skills and learning for all ages in the community through a range of activities, resources and support, and enhance the art and culture offer in the City of London**


































Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
14	BP42a	Percentage of children achieving good level of development in foundation stage profile (FSP)	N/A	N/A	N/A	N/A	Target not confirmed	62%			N/A	↔	A	N/A
14	BP42b	Percentage inequality gap in achievement across all the Early Learning Goals	N/A	N/A	N/A	N/A	Target not confirmed	N/A			N/A	↔	A	N/A
14	BP43	Percentage of primary school offers meeting first choice	89%				87%	89%			Green	↔	A	N/A

**15. Promote and champion inclusion, diversity, accessibility and social mobility for all the communities we support**

Group	No.	Key Performance Indicators	2020/21 Quarterly				2021/22 Target	2021/22						
			Q1	Q2	Q3	Q4		Q1	Q2	Q2 Commentary	RAG	DOT	Freq	Changed
15	BP44	Increased proportion of Bangladeshi girls/young women take-up of youth services (universal, holiday, IAG, NEET, City youth forum, young carers)	N/A	6	5	6	Target not confirmed	9	6		N/A	↓	Q	N/A
15	BP45	Proportion of people with learning difficulties supported to live independently	N/A	73%	82%	79%	80%	89%	89%	During Q2 2021/22, there were 9 people with a Learning Disability accessing long-term support at YTD and 8 of the 9 (89%) were in the community.	Green	↑	Q	Improved
15	BP46	Percentage of participants involved in community activities and volunteering reporting an improved quality of life	N/A	N/A	N/A	N/A	60%	N/A			N/A	↔	A	N/A
15	BP47	Proportion of residents involved in community activities who are new to volunteering	N/A	N/A	N/A	72%	30%	71%	70%		Green	↓	Q	No
15	BP48	Proportion of Portsoken Pavilion Café employees from the local community	N/A	N/A	N/A	N/A	25%	0%	0%	The café closed at the end of Q3 2020/21. Statistics therefore remain unavailable. It should be noted that the provider has now ended its lease to manage the Portsoken Pavilion Café.	Red	↔	Q	N/A



## Appendix 2: Quarter 2 2021–22 Departmental Risk Register Summary

Risk Code	Title	Current Risk Rating	Risk Score	Actions Assessment	Risk Approach	Target Date	Risk Trend
DCCS HS 003	Lone working	A 	12		Reduce		
CR17	Safeguarding	A 	8		Accept		
DCCS 001	Departmental Emergency Response	A 	8		Accept		
DCCS HS 002	Failure to carry out and review effective fire risk assessments for residential and commercial accommodation	A 	8			31/03/22	
DCCS 006	Failure to deliver new homes programme	A 	8			31/03/25	
DCCS ED 002	Failure of the City of London Academies to meet the high performance and financial expectations of the City of London	A 	6			31/03/22	
DCCS HS 001	Health and safety procedures	A 	6			31/03/22	
DCCS HS 004	Housing finance changes	A 	6			31/03/22	
DCCS HS 005	Major works programme	A 	6		Reduce		
DCCS 003	Impact of COVID-19	A 	6			03/03/22	
DCCS 002	Impact of Brexit on local communities	G 	4			31/12/21	

Risk Score Key:

		Impact					
		Minor (1)	Serious (2)	Major (4)	Extreme (8)		
Likelihood	Likely (4)	4	8	16	32	Red (Severe)	Urgent action required to reduce rating
	Possible (3)	3	6	12	24	Amber (Significant)	Action required to maintain or reduce rating
	Unlikely (2)	2	4	8	16	Green (Manageable)	Action required to maintain rating
	Rare (1)	1	2	4	8		