

## Departmental Key Performance Indicators

☺	This indicator is performing to or above the target.
☹	This indicator is a cause for concern, frequently performing just under target.
☹	The indicator is performing below the target.

		Target 15/16	Q1	Q2	
<b>Transportation &amp; Public Realm</b>					
LTR2	Percentage of valid PCN debts recovered.	80%	82%	81%	☺
LTR3a	Respond to percentage of PCN correspondence within 10 days.	90%	100%	100%	☺
TPR2	No more than 3 failing KPI's, per month on new Highway Repairs and Maintenance contract.	<9 per quarter	0	0	☺
TPR3a	To reduce the number of persons killed or seriously injured in road traffic collisions to a three-year rolling average of 32.9 casualties per annum by 2016. (Base data - This represents a reduction of 33.4% from the 2004–2008 average of 49.4 killed or seriously injured casualties per annum.)	32.9 casualties per annum by 2016	12	11	☹
TPR3b	To reduce the total number of persons injured in road traffic collisions to a three-year rolling average of 294.9 casualties per annum by 2016. (This represents a reduction of 20.0% from the 2004–2008 average of 368.6 casualties per annum.)	294.9 casualties per annum by 2016	96	109	☹
<b>Comments:</b>					
<b>District Surveyor's (Building Control)</b>					

		Target 15/16	Q1	Q2	
LBC1	To monitor targets for approval turnarounds for both standard applications and report to committee quarterly. (90% within 19 working days).	90%	94%	100%	☺
LBC2	To monitor targets for approval turnarounds for non-standard applications and report to committee quarterly. (90% within 26 working days).	90%	97%	97%	☺
LBC3	To issue a completion certificate within 10 days of the final inspection of completed building work in 90% of eligible cases.	90%	92%	91%	☺
<b>Planning Policy</b>					
PP1	Implement and keep under review the City's Community Infrastructure Levy (CIL) and s106 planning obligations to support the City's economic role and statutory local authority functions	Review April 2016	Ongoing	Ongoing	☺
PP2	Scope the need for review or alteration to the Local Plan by Oct 2015, adopting revised Local Development Scheme and Statement of Community Involvement by March 2016.	March 2016	Ongoing	Scoped Sept.; report to Oct P&T cttee	☺
PP3	Publish development pipeline information bi-annually (June & Dec) and publish monitoring reports on Local Plan policies by Oct 2015.	October 2015	Published development info June 2015	Local Plan monitoring ongoing	☺
PP4	Submit address and street gazetteer updates to the national hub at new Bronze standard and maintain Green status for development monitoring submissions to the London Development Database.	New Bronze standard Green status	Bronze standard and Green status	Bronze standard and Green status	☺
PP5	Ensure internal and public-facing GIS services are available 98% of the working day	98%	100%	100%	☺

		Target 15/16	Q1	Q2	
	(excluding IS service disruptions) and implement a “mobile friendly” GIS for use internally and externally.				
PP6	Process all standard land charge searches within 6 working days.	100%	100%	100%	😊
<b>Development Management</b>					
DM1a	Process 65% of minor planning applications within 8 weeks	65%	70%	61%	😐
DM1b	Process 75% of other planning applications within 8 weeks	75%	66%	80%	😊
DM1c	Negotiate with applicants such as to be in a position to recommend 95% of all planning applications	95%	96%	98%	😊
DM2	To seek a BREEAM status of Excellent or above on all relevant planning applications	100%	66%	50%	😞
DM6	Provide access observations to 95% planning applications within 14 days of receipt of information	95%	95%	98%	😊
DM7	To manage responses to requests under Freedom of Information within 20 working days.	85%	100%	97%	😊
DM8	Investigate 90% of alleged breaches of planning control within 10 working days of receipt of complaint.	90%	90%	90%	😊
<b>Comments:</b>					
<b>DM1:</b> Significant work is being done within the division to improve decision statistics; this includes the appointment of additional Planning Officers, agreeing Extension of Time dates with applicants, working with the Planning Advisory Service and a review of processes.					
<b>DM2:</b> This % is based on just two ratings received during Q2; one was excellent and the other related to a specialist cancer care unit making straight forward compliance unrealistic.					