

Committee: Community and Children's Services Committee	Dated: 11/06/2021
Subject: DCCS Business Plan Performance: 2020–21 Quarter 4	Public
Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?	1,2,3,4
Does this proposal require extra revenue and/or capital spending?	No
Report Of: Andrew Carter, Director of Community and Children's Services	For Information
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Summary

This report sets out the progress made during Quarter 4 (Q4) – January to March 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 Q4 2020–21
- Note the status of Departmental Risks at Q4 2020–21

Main Report

Background

1. Progress on the Departmental Business Plan is monitored and reported against a set of 59 Key Performance Indicators (KPIs). A full list of these KPIs and performance can be found in Appendix 1. These KPIs were agreed in 2018 and were designed to reflect changing priorities and demonstrate improved outcomes for our community, residents and workers.
2. 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.
3. 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.
4. The current version of the Departmental Business Plan ends in 2022. There may be changes to Departmental Business Plans 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.

5. At the January 2021 Community and Children's Services Committee Meeting, Members considered the annual headline Business Plan for the Department. This contained a selected list of KPIs that reflected the work of the Department.
6. The departmental business KPIs are drawn from wider suites of performance information across the Department, and more detailed suites of KPIs and information is considered in various relevant committees, including the Safeguarding Sub-Committee, Education Board and Housing Management and Alms houses Sub-Committee.

DCCS Business Plan KPI Performance

7. Overall performance in Q4 2020–21 shows the departmental KPIs as:

RAG status	Traffic light description	Total KPIs*
Green	KPIs for which the set target was achieved or exceeded	19 (32%)
Amber	KPIs within the tolerance of 10% of the set target	5 (8%)
Red	KPIs that are below the tolerance of 10% of the set target	9 (15%)
Not provided	KPIs where there is no update for the quarter report – these could not be reported due to lack of data	26 (44%)

* Percentages based on share of RAG-rated indicators

8. Please note that, due to the COVID-19 pandemic, many KPIs have been impacted, and reporting suspended in some cases. For example, there were no Standard Assessment Tests (SATs) administered in the summer of 2020 due to the first national lockdown. As a result, there was an increase in the number of KPIs which were a nil return (44% of the total), with some other KPI reporting cycles being affected.
9. It should be noted that performance outturns for all four quarters have been provided for context and to better understand the direction of travel.
10. Commentary on the Red and Amber rated indicators for Q4 of 2020–21 is set out below.

Amber and Red Performance Indicators: Commentary

11. ***BP13 (Amber) – The library offers a good range of learning opportunities for individuals and groups of people.*** It is recognised that, in the current

context, surveys need to be shared more widely in different ways, and staff need to explain to library users the importance of relevance of the surveys. This is underway and it is expected that figures will improve. The lower outcome from the survey is also likely to be impacted by the way services have had to change in response to the various lockdowns.

12. Currently all events are online and very popular – most are over-subscribed. However, the service experienced problems in getting attendees to complete the online evaluation forms and, consequently, the low returns are proving problematic.
13. **BP26 (Amber) – Increased proportion of service users live within the community (not residential or nursing)** At Q4 2020-21 – of the 107 Clients; 82 (77%) were from the community; and 25 (23%) were from a nursing and residential service (15 residential and 10 nursing).
14. **BP35 (Amber) – Increase in average energy-efficiency rating for our housing stock** Although there was no change from the previous financial year, improvement is expected over the succeeding quarters.
15. **BP39 (Amber) All properties are fully compliant with gas safety regulations** The outturn was less than 1% below target. There were only 10 properties, from 1710, which were non-compliant in the year.
16. **BP45 (Amber) – Proportion of people with learning difficulties supported to live independently** There were 11 from 14 which were supported to live independently, which represented only 1% below the annual target.
17. **BP7 (Red) – Proportion of people age 65+ who require less support following a period of reablement (at home 91 days after discharge from hospital)** The indicator is reported locally on a cumulative basis. Of the 10 who finished reablement, seven people (70%) required reduced or no level of support following a period of reablement; three required the same level of support, four required less support; and another three required no support.
18. **BP8 (Red) – Proportion of completions of City apprenticeships and positive destinations (employment or further training)** The outturn represented 39 from 45 completions. Whereas the remaining six could either not be contacted or were looking for work.
19. **BP15 (Red) – The number of residents taking up an NHS health check** The underperformance was due to no delivery in Q1. All practices were advised to stop all contract delivery of NHS health checks in order to focus on COVID-19.
20. **BP19b (Red) – Number of construction starts (number of units given) –** There were two units at the Great Arthur House residential conversion, which started in January to provide social housing and an estate office for completion in July 2021 – which is on track/on plan. Whereas Isleden had three large units

(family size 3-beds), which started onsite in February 2021 and will finish in February 2022. There were 110 units in Sydenham, which were originally due for a start in Q4 2020–21, which were delayed by a Judicial Review outside of the City of London's control.

21. **BP19c (Red) – Number of completions (number of units given)** There were no completions in the period. The completions for Great Arthur House and Isleden House are due in the next financial year 2021–22.
22. **BP29a (Red) – Child in Need (CIN) – On a CIN Plan for one year but less than two years (% and number)** There were 19 children in the cohort at Q2; 17 at Q3; and 21 at Q4. In Q4, 12 had been open for 12 to 24 months, of which four were in the closure process at 31 March.
23. **BP29c (Red) – Child Protection Plan (CPP) – On a CPP for one year but less than two years (% and number)** There were six children in the cohort at Q2 and three at Q3 and Q4. By the end of Q4, two children had been subject of their CPP for just over a year.
24. **BP31 (Red) – Improved timeliness of pathway plans (three months for initial plan, followed by every five months).** The measure for reporting Care Leavers and Looked-after Children from an 'initial three months, followed by five months' is not part of the reporting framework in Children's Services. The service uses the statutory six-month duration for Care Leavers, for which outcomes were positive in 2020–21.
25. **BP33 (Red) – Increased proportion of new rough sleepers who sleep out just once** There were 19 individuals out of 29 seen for the first time, who were only seen on one occasion by outreach in the City of London.

Departmental Risk Register Summary

26. Appendix 2 contains a summary of the Departmental Risk Register. As can be seen, the Department **has no red risks at Q4 and one risk (Safeguarding) is also a corporate risk.**

Corporate & Strategic Implications

27. **Strategic implications:** 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.

28. **Financial implications:** not applicable.
29. **Resource implications:** not applicable.
30. **Legal implications:** not applicable.
31. **Risk implications:** not applicable.
32. **Equalities implications:** not applicable.
33. **Climate implications:** not applicable.
34. **Security implications:** not applicable.

Conclusion

35. This report updates Members on performance as at Q4 2020–21 against a suite of departmental business KPIs.
36. The COVID-19 pandemic has had an impact on some of our reporting where services have changed or where reporting has been suspended.
37. This report also gives Members further detail about any performance rated Amber or Red.

Appendices

- Appendix 1 – Q4 2020–21 Key Performance Indicators (KPIs) Update.
- Appendix 2 – Q4 2020–21 Departmental Risk Register Summary.

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Appendix 1 – Q4 2020-21 Key Performance Indicators Update

Key:

DOT: Direction of travel
Frq: Frequency of reporting
YTD: Year to date
Nat'l: 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	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved/New)
1	BP1	All City-sponsored academies achieve and maintain good or outstanding Ofsted ratings	100%	100%	N/A	100%	100%	100%	Green	External examinations will not take place again this year and KS2, KS4 and KS5 results will be based on centre-assessments, and not publicly published in national datasets. Ofsted inspections have also been on hold during the pandemic and so there would not be any updates there either.	↔	Q	Improved
1	BP2	Pupils make good progress at KS4 in City-sponsored academies (*Progress 8 measure) (FFT Aspire estimate provided where GCSE discontinued)	-0.64 *	Above 2020 national benchmark	N/A	N/A	N/A	N/A	No RAG	SATs were cancelled due to the national lockdown. (*The FFT Aspire estimate for the cohort based upon prior attainment was 0.08).	↔	A	New
1	BP3	Pupil premium children (FSP, LAC, adoption, SGO) at City sponsored academies make good progress at KS2 and KS4 (KS2 & KS4 Progress measures; FFT Aspire estimates provided where SATs discontinued).	KS2: Redriff - Read -3.3, Writ+3.2, Maths +0.9 - KS4: Highgate Hill 0.3, Hackney -0.08, Islington -0.24, Southwark -0.54, Hig Grove -0.56	Above 2020 national benchmark	N/A	N/A	N/A	N/A	No RAG	SATs were cancelled due to the national lockdown. At KS4 the FFT Aspire estimates for the cohorts based upon prior attainment were: Highgate Hill 0.32, Hackney 0.09, Islington -0.15, Southwark -0.24, Highbury Grove -0.15.	↔	A	New
1	BP4	Progress and attainment at school stages (KS2) that is considerably above national levels	Aldgate School 82%, Redriff 69% (RWM)	Above 2020 national benchmark	N/A	N/A	N/A	N/A	No RAG	SATs were cancelled due to the national lockdown.	↔	A	No

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	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved/New)
2	BP5a	Reduction in delayed transfers of care (DTOC) (discharges) from hospital – accredited to the NHS	291	Target set nationally and not yet confirmed	N/A	N/A	N/A	N/A	No RAG	DTOC reporting has been suspended, due to the impact of COVID-19 and the national lockdown n restrictions in place at the time.	↔	Q	No
2	BP5b	Reduction in delayed transfers of care (DTOC) (discharges) from hospital – accredited to Adult Social Care (ASC)	2	Target set nationally and not yet confirmed	N/A	N/A	N/A	N/A	No RAG	DTOC reporting has been suspended, due to the impact of COVID-19 and the national lockdown n restrictions in place at the time.	↔	Q	No
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.	363	Target not confirmed	41	44	49	31	No RAG	Q4: 31 people were supported by City Connections through the care navigators and a community support assessment (additionally 15 people were supported through carers services, befriending services and digital buddy services provided by City Connections).	↓	Q	New
2	BP6b	Proportion of clients reporting improved quality of life as a result of Early Intervention and Prevention services (EIP)	77%	Target not confirmed	75%	72%	74%	83%	No RAG	Overall satisfaction scores were 9.1, 9.0, 8.6 and 6.8 for questions relating to safety, neighbourhood, independence and quality of life. As with previous quarters, it is possible that the Covid-19 situation has had an impact on these results.	↑	Q	New
2	BP6c	Proportion of residents/carers who got in contact with the City that are referred onwards to other relevant services	35%	Target not confirmed	N/A	N/A	52%	93%	No RAG	Please note that 22 of the 30 referrals into the service were from Adult Social Care and 6 were self referrals. Onwards referrals were made to a variety of services with the top three: the Digital Buddy scheme, Befriending services and City Connections Wellbeing activities.	↑	Q	New
2	BP7	Proportion of people age 65+ who require less support following a period of reablement (at home 91 days after discharge from hospital)	78% (n=9)	85%	100% (3/3)	66% (4/6)	63% (5/8)	70% (7/10)	Red	The indicator is reported locally on a cumulative basis. Of the ten that finished reablement, seven people (70%) required reduced or no level of support following a period of reablement; three required the same level of support, four required less support and another three actually required no support.	↑	Q	No

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

Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved /New)
3	BP8	Proportion of completions of City apprenticeships and positive destinations (employment or further training)	80%	100%	N/A	N/A	84%	87%	Red	The outturn represented 39 from 45 completions. Whereas the remaining six could either not be contacted or were looking for work.	↑	A	Improved
3	BP9	Percentage of City young people (aged 16 and 17) not in education, employment or training (NEET & unknown)	3.8% (from cohort of 50) NEET, in employment without additional training/education and not known	Below 2018/19 national average (5.5%)	N/A	N/A	0%	N/A	Green	The outturn at the end of Q3 represents the most recently available data at the point of publication.	↓	Q	No
3	BP10	Increased number and percentage of apprentices employed by the City from Black and Minority Ethnic backgrounds	36%	Target not confirmed	N/A	40%	39%	41%	No RAG	This represented 33 from 81 apprentices. Furthermore it should be noted that the City of London has relatively little influence over the outturn as recruitment is not conducted directly.	↑	Q	New
3	BP11a	Adult enrolments for adult learning and skills courses (accredited and non-accredited)	3,608 (Target: 2,500)	Target not confirmed	N/A	105	211	223	No RAG	The information provided includes term 3 for academic year 2019/20 and the first two terms of 2020/21.	↑	A	No
3	BP11b	Annual proportion of adult learners who pass an adult skills course	n/a	Target not confirmed	N/A	78%	N/A	N/A	No RAG	The information will not be available until the end of the academic year.	↔	A	No
3	BP12	The library's services and activities have a positive impact on my family's health and wellbeing	94%	86%	N/A	N/A	N/A	100%	Green		↑	Q	Improved
3	BP13	The library offers a good range of learning opportunities for individuals and groups of people	85%	90%	N/A	N/A	76%	85%	Amber	Currently, all events are online and very popular - most are over-subscribed. However, we are having problems in getting attendees to complete the online evaluation forms and consequently, the low returns are proving perverse	↑	Q	New

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

				2020/21 Progress								Changed	
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary	DOT	Freq	(Yes/No/Improved /New)
4	BP14	Percentage of people engaging in City smoking cessation programmes w ho quit smoking	57% (n=143)	52% (n=500)	N/A	N/A	N/A	N/A	No RAG	Activity w as suspended in 2020/21 due to the impact of COVID-19 and the national lockdown n restrictions in place at the time. There is now a new service contact w hich started in Q1 2021/22.	↔	Q	No
4	BP15	Residents taking up an NHS health check	196	191	N/A	11	100	38	Red	The underperformance was due to no delivery in Q1. All practices w ere advised to stop all contract delivery of NHS health checks in order to focus on COVID-19.	↓	Q	No
4	BP16	Number and proportion of participants w ho completed the w eight management programme in period	68% (n=31)	70% (n=30)	N/A	N/A	N/A	N/A	No RAG	The reporting cycle w as interrupted due to the impact of COVID-19 and the national lockdown n restrictions in place at the time.	↔	Q	New
4	BP17	Use of the Golden Lane Sport and Fitness Centre by young people	Q1– 4 (averaged): 5,895 (Q4 data w as not available due to centre staff being furloughed)	7282	N/A	N/A	N/A	N/A	No RAG	The reporting cycle w as interrupted due to the impact of COVID-19 and the national lockdown n restrictions in place at the time. The service reopened in Q1 2021/22.	↔	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	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved/New)
5	BP18 a	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	74%	70%	79%	75%	68%	77%	Green	124010 kits were requested in the quarter, of which 95224 were returned for testing within 21 days. Impact of Royal Mail disruption on the KPI has dissipated. During this quarter the provider moved the return of kits onto Royal Mail's tracked 24-hour service, further reducing future risk to performance.	↑	Q	No
5	BP18 b	Increased satisfaction with e-services for sexual health testing (%)	99%	90%	99%	99%	99%	99%	Green	9313 users (responding to an SMS survey) said they would recommend it to friends or family. Only 107 said they would not recommend it	↔	Q	New

6. Delivering more homes and better meet social housing needs

Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved/New)
6	BP19 a	Number of planning consents (no. units given)	0	115	N/A	N/A	N/A	N/A	No RAG	There were no planning consents obtained in the period.	↔	A	No
6	BP19 b	Number of construction starts (no. units given)	0	115	N/A	0	0	5	Red	There were two units at the Great Arthur House residential conversion, which started in January to provide social housing and an estate office for completion in July 21 - which is on track/on plan. Whereas Isleden had three large units (family size 3-beds), which started onsite in February 21 and will finish in February 22.	↑	A	Improved
6	BP19 c	Number of completions (no. units given)	10	5	N/A	0	0	0	Red	There were no completions in the period. The completions for Great Arthur House and Isleden House are in fact due in the next financial year 2021/22.	↔	A	No

7. Improving outcomes and services for children and young people with special educational needs and disabilities (SEND)

				2020/21 Progress								Changed	
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary	DOT	Freq	(Yes/No/Improved /New)
7	BP20	Proportion of EHC plans completed for SEND children within 20 weeks' timeframe.	100%	100%	N/A	100%	N/A	100%	Green	1 EHC Plan was finalised within the 20-week statutory timescale	↑	Q	New
7	BP21	Proportion of SEND children receiving SEN support at school (primary and secondary)	Information not currently available	In line with Inner London Average 2019	N/A	N/A	N/A	N/A	No RAG	The figures are unavailable for City of London residents attending establishments maintained by other Local Authorities, as the DfE does not provide the information to this level of detail. To mitigate this the Ed&EY service have a school tracker that is updated annually, however, data accuracy is not 100% on this.	↔	A	New
7	BP22	Educational progress of children with SEND at KS2	Information cannot be reported due to small number	In line with Inner London average 2019	N/A	N/A	N/A	N/A	No RAG	There were no Statutory Assessment Tests undertaken in the summer of 2020 because of the national lockdown restrictions in place at the time. Summer 2021 tests in Q1 2021/22 have also been cancelled	↔	A	No
7	BP23	Increased number of SEND children take up use of youth services (youth services (Universal, holiday, IAG, NEET, City youth forum, young carers)	5	Target not confirmed	N/A	3	3	8	No RAG	The breakdown was as follows: City YMCA - 0, Prospects - 8, Tower Hamlets - 0.	↑	Q	New

8. Improving outcomes and experience for adult social care users

				2020/21 Progress								DOT	Freq	Changed
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary	(Yes/No/Improved /New)			
8	BP24	Adult Social Care service user and carer reported quality of life (survey outcome)	7.5 (carers) * -- 19.3 (users) *	Above 2018/19 London average	N/A	N/A	N/A	N/A	No RAG	*19/20 outturn refers to the 2018/19 CoL Survey of Adult Social Care Service Users and Carers in England statutory return. Due to the impact of COVID-19 and the national lockdown n restrictions, NHS Digital have postponed the return until 2021/22.	↔	A	No	
8	BP25	Proportion of adult social care service users who say services have made them feel safe and secure (survey outcome)	87.9% *	Above 2018/19 London average	N/A	N/A	N/A	N/A	No RAG	*19/20 outturn refers to the 2018/19 CoL Survey of Adult Social Care Service Users in England statutory return. Due to the impact of COVID-19 and the national lockdown n restrictions, NHS Digital have postponed the return until 2021/22.	↔	A	No	
8	BP26	Increased proportion of service users live within the community (not residential or nursing)	76%	80%	N/A	75%	77%	77%	Amber	At Q4 2020/21 – of the 107 Clients; 82 (77%) Community; 25 (23%) Nursing & Residential (15 residential & 10 nursing).	↔	Q	New	
8	BP27	Reduction of average cost of residential social care	£692	£700	N/A	£749	£824	£691	Green	Q4 2020/21 incidentally was -£1 below the 2019/20 YTD outturn (£692) and below target although the average from Q2 to Q4 2020/21 was £754.80. This is comparable with the 2018/19 YTD outturn (£756). Availability of placements has decreased during the pandemic while costs of new placements have risen considerably.	↓	Q	Improved	
8	BP28	Increased proportion of clients (services users) are on direct payments (DP)	31%	National 2018/19: 28.3%; (2019/20: 27.3%)	N/A	40%	39%	38%	Green	Q4 2020/21 – 31 of the 82 in the community received Direct Payments (38%). The service actively promotes and supports people to use DP as a way of managing their own services. However, there is strong management oversight (as evidenced in the DP Audit) to ensure DP is used effectively and within the guidelines.	↓	Q	New	

9. Safeguarding children, young people and adults at risk

Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved/New)
9	BP29 a	CIN – On a Child in Need Plan for one year but less than two years – % and number	0%	17%	N/A	37%	65%	57%	Red	Please note: There were 19 children in the cohort at Quarter 2; 17 at Quarter 3; and 21 at Quarter 4. In Q4 12 had been open for 12 to 24 months, of which four were in closure process at 31 March.	↓	Q	No
9	BP29 b	CIN – On a Child in Need Plan for two years – % and number	0%	31%	N/A	0%	18%	14%	Green	Please note: There were 19 children in the cohort at Quarter 2; 17 at Quarter 3; and 21 at Quarter 4. In Q4 three had been open for over 24 months.	↓	Q	No
9	BP29 c	CPP – On a Child Protection Plan for one year but less than two years – % and number	60% (<5)	17%	N/A	0%	0%	67%	Red	Please note: There were six children in the cohort at Quarter 2 and three at Quarter 3 & Quarter 4. By the end of Q4 two children had been subject of their CPP for just over a year.	↑	Q	No
9	BP29 d	CPP – On a Child Protection Plan for two years – % and number	0% (0)	2%	N/A	50%	0%	0%	Green	Please note: There were six children in the cohort at Quarter 2 and three at Quarters 3 and 4.	↔	Q	Improved
9	BP30	Percentage of assessments for children's social care carried out within 45 working days of referral	73%	Above 2018/19 Inner London average	N/A	89%	100%	100%	Green	The annual rate will be subject to review during the annual CIN Census QA process.	↔	Q	Improved
9	BP31	The improved timeliness of pathway plans (three months for initial followed by every five months)	59%	100%	33%	32%	26%	24%	Red	The measure for reporting Care Leavers and Children Looked After from an 'initial three months followed by five months' is not part of the reporting framework in Children's Services. The service uses the statutory six month duration for Care Leavers, for which outcomes were positive in 20/21.	↓	Q	New
9	BP32	Number and percentage of adults referred for safeguarding (such as abuse or neglect) whose expressed outcomes are fully or partly met	Not currently available as the Safeguarding Reports are undergoing repair.	Above 2018/19 Inner London Average	N/A	N/A	N/A	N/A	No RAG	To be confirmed: The outturn for the key performance indicator will be provided following the first mandated deadline of the SAC return (which will be updated in mid June 2021).	↔	Q	No

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

				2020/21 Progress							DOT	Freq	Changed
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary			(Yes/No/Improved /New)
10	BP33	Increased proportion of new rough sleepers who sleep out just once	65%	76%	N/A	48%	64%	66%	Red	There were 19 individuals out of 29 seen for the first time, which were only seen on one occasion by outreach in the City of London.	↑	Q	Improved
10	BP34	Number and proportion of people deemed 'living on the streets' is below Inner London average	58; (at end of Q3 19/20)	Below 2019 level	N/A	40	44	34	Green		↓	Q	Improved

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

				2020/21 Progress							DOT	Freq	Changed
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary			(Yes/No/Improved /New)
11	BP35	Increase in average energy-efficiency rating for our housing stock	64.5	69	N/A	64	65	65	Amber	There was no change from the previous financial year but improvement is expected over the succeeding quarters.	↔	A	Improved
11	BP36	Proportion of City housing stock meeting 'decent homes' standard	91%	Above 2018/19 London average (83%)	N/A	92%	90%	90%	Green		↔	A	No

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

				2020/21 Progress								Changed	
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary	DOT	Freq	(Yes/No/Improved/New)
12	BP38	Blocks of flats with a valid and up-to-date fire risk assessments	100%	100%	N/A	100%	100%	100%	Green		↔	A	New
12	BP39	All properties are fully compliant with gas safety regulations	99.8%	100%	N/A	99%	100%	99%	Amber	There were only ten properties from 1710 which were non-compliant in the year.	↓	A	New

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

				2020/21 Progress									Changed
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary	DOT	Freq	(Yes/No/Improved/New)
13	BP40	Percentage satisfaction with Business Healthy events and activities	90%	70%	N/A	99%	95%	96%	Green	2 Business Healthy events were delivered in Q4 (25 attendees) and presentations delivered at a further 4 events. Six participants shared feedback. 96% of participants rated the session "good"/"excellent" for: organisation of the session; communications from the organisers; quality of discussion/ speakers; materials; and use of the digital platform.	↑	Q	Improved
13	BP41	Dragon Café visitors strongly agree/agree that the cafe helped to improve their mental wellbeing	94%	76%	N/A	80%	100%	90%	Green	Total attendance figures for Q4 was 357, and 22 people provided feedback.	↓	Q	New


































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

				2020/21 Progress								Changed	
Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Target	Q1	Q2	Q3	Q4	RAG	Q4 Commentary	DOT	Freq	(Yes/No/Improved /New)
14	BP42a	Percentage of children achieving good level of development in foundation stage profile (FSP)	85%	Above 2018/19 London average	N/A	N/A	N/A	N/A	No RAG	Due to the national lockdown n, EYFSP measures w ere cancelled by the DfE so there is no data available.	↔	A	No
14	BP42b	Percentage inequality gap in achievement across all the Early Learning Goals	31%	Below 2018/19 London average	N/A	N/A	N/A	N/A	No RAG	Due to the national lockdown n, EYFSP measures w ere cancelled by the DfE so there is no data available.	↔	A	No
14	BP43	Percentage of primary school offers meeting first choice	89% (n=27)	85%	89%				Green	Annual outturn: The April 2020 Primary offer rate has now been recorded in Q1: 24 out of 27 applicants w ere offered their first preference. For reference the Pan-London rate was 85%. The April 2021 Primary offer w ill be reported next quarter but for reference the rate remained 89%.	↔	A	Improved













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

Group	No.	Key Performance Indicators	2019/20 outturn	2020/21 Progress						Q4 Commentary	DOT	Freq	Changed
				2020/21 Target	Q1	Q2	Q3	Q4	RAG				(Yes/No/Improved/New)
15	BP44	Increased proportion of Bangladeshi girls/young women take up of youth services (youth services (Universal, holiday, IAG, NEET, City youth forum, young carers)	0	Target not confirmed	N/A	6	5	6	No RAG		↑	Q	Improved
15	BP45	Proportion of people with learning difficulties supported to live independently	100%	80%	N/A	73%	82%	79%	Amber	There were 11 from 14 which were supported to live independently; which represented only 1% below the annual target.	↓	Q	New
15	BP46	Percentage of participants involved in community activities and volunteering reporting an improved quality of life	87%	60%	N/A	N/A	N/A	N/A	No RAG	Information was unavailable due to the impact of COVID-19 and the national lockdown restrictions in place at the time.	↔	A	No
15	BP47	Proportion of residents involved in community activities who are new to volunteering	36%	30%	N/A	N/A	N/A	72%	Green	The numerator and denominator is being sought.	↑	Q	Improved
15	BP48	Proportion of Portsoken Pavilion Café employees from the local community	65% (n=23); (at end of Q3 19/20)	25%	N/A	N/A	N/A	N/A	No RAG	The café has been closed for the whole of quarter 4 in line with Government Covid regulations. The current tenant has given notice to end the tenancy and will not be reopening in Quarter 1. The requirement for a future tenants to monitor this performance indicator is being reviewed	↔	Q	No




Appendix 2: Q4 2020–21 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 ED 001	Failure to deliver City of London Academy expansion programme	A 	8			30/07/21	
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 002	Impact of Brexit on Local Communities	G 	4			31/09/21	

COVID-19 – Communities (including schools) Silver Risk Register

Risk Code	Title		Risk Score	Actions Assessment	Target Date	Risk Trend
CVD19 SG CM 01	Vulnerable Adults and Children	A 	6		30/09/21	
CVD19 SG CM 03	Housing and Communities	A 	6		30/06/21	
CVD19 SG CM 06	Independent Schools in the City family of schools – impact on finances	A 	6		30/09/21	
CVD19 SG CM 07	Re-opening of schools, Adult Skills and Education Service and other childcare settings	A 	6		30/09/21	

 Actions to mitigate the risk are in place and are being delivered to anticipated timescales.  Some delays in implementing planned actions

Risk Trend:  Unchanged since last report  Increased risk rating – see body of report for details  Decreased risk rating since last report

Risk Score key:

		Impact					
		Minor	Serious	Major	Extreme		
		(1)	(2)	(4)	(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		