

Public Document Pack



Meeting: Scrutiny Commission
Date: Tuesday 9th May, 2023
Time: 7.00 pm
Venue: Council Chamber, Corby Cube, George Street, Corby, NN17 1QG

The meeting will be available for the public to view live at the Democratic Services North Northants YouTube channel:
<https://www.youtube.com/c/DemocraticServicesNorthNorthantsCouncil>

To members of the Scrutiny Commission

Councillors Wendy Brackenbury (Chair), Kevin Watt (Vice Chair), Valerie Anslow, Robin Carter, John Currall, Mark Dearing, Jim Hakewill, Philip Irwin, Zoe McGhee, Andy Mercer, Gill Mercer, Geoff Shacklock and Lee Wilkes

Substitutes: Councillors Ken Harrington, Ian Jelley, Tom Partridge-Underwood, Lyn Buckingham, Anne Lee and Sarah Tubbs

| Agenda | | | |
|--|--|---------------------------|-----------------|
| Item | Subject | Presenting Officer | Page no. |
| 02 | Apologies for non-attendance | | |
| 03 | Members' Declarations of Interest | | |
| 04 | Notification of requests to address the meeting | | |
| 05 | Minutes of the meeting held on 4 April 2023 | | 5 - 8 |
| 06 | Consideration of any matter referred to the Commission for Call-in | | |
| 07 | Housing Voids and Repairs | David Watts | 9 - 66 |
| 08 | Performance Indicators Report (Period 11) <i>Members are requested, where possible, to identify those area they wish to understand in further detail with the report author at least three working days prior to the meeting.</i> | Tom Barden | 67 - 98 |
| Urgent Items | | | |
| To consider any items of business of which notice has been given to the Proper Officer and which the Chair considers to be urgent pursuant to the Local Government Act 1972. | | | |
| 08 | Close of Meeting | | |

Adele Wylie, Monitoring Officer
North Northamptonshire Council



Proper Officer
Friday 28 April 2023

This agenda has been published by Democratic Services.
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The Council has approved procedures for you to request to address meetings of the Council.

| ITEM | NARRATIVE | DEADLINE |
|---|---|--|
| Members of the Public Agenda Statements | Requests to address the meeting must be received by 5pm two clear working days before the meeting. Statements must relate to matters detailed on the meeting agenda. You will have a maximum of three minutes in which to make your statement and you will make it at the start of the agenda item. | 5pm Wednesday 3 rd May 2023 |
| Member Agenda Statements | Requests to address the meeting must be received by 5pm two clear working days before the meeting. Statements must relate to matters detailed on the meeting agenda. You will have a maximum of three minutes in which to make your statement and you will make it at the start of the agenda item. | 5pm Wednesday 3 rd May 2023 |

If you wish to register to speak, please contact the committee administrator

Members' Declarations of Interest

Members are reminded of their duty to ensure they abide by the approved Member Code of Conduct whilst undertaking their role as a Councillor. Where a matter arises at a meeting which **relates to** a Disclosable Pecuniary Interest, you must declare the interest, not participate in any discussion or vote on the matter and must not remain in the room unless granted a dispensation.

Where a matter arises at a meeting which **relates to** other Registerable Interests, you must declare the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but must not take part in any vote on the matter unless you have been granted a dispensation.

Where a matter arises at a meeting which **relates to** your own financial interest (and is not a Disclosable Pecuniary Interest) or **relates to** a financial interest of a relative, friend or

close associate, you must disclose the interest and not vote on the matter unless granted a dispensation. You may speak on the matter only if members of the public are also allowed to speak at the meeting.

Members are reminded that they should continue to adhere to the Council's approved rules and protocols during the conduct of meetings. These are contained in the Council's approved Constitution.

If Members have any queries as to whether a Declaration of Interest should be made please contact the Monitoring Officer at – monitoringofficer@northnorthants.gov.uk

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Any press or media enquiries should be directed through the Council's Communications Team to communications@northnorthants.gov.uk

Public Enquiries

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Minutes of a Meeting of the Scrutiny Commission

At 7:00pm on Tuesday 4 April 2023

Held in the Council Chamber, Corby Cube, George Street, Corby

Present:

Members

Councillor Kevin Watt (Vice Chair, in the Chair)

Councillor Valerie Anslow

Councillor Robin Carter

Councillor John Currall

Councillor Mark Dearing

Councillor Jim Hakewill

Councillor Philip Irwin

Councillor Zoe McGhee

Councillor Tom Partridge-Underwood

Councillor Geoff Shacklock

Officers

George Candler – Executive Director of Place and Economy

David Watts - Executive Director of Adults, Health Partnerships and Housing

Iain Smith – Assistant Director of Regulatory Services

Rob Atkins – Interim Head of Performance, Intelligence and Partnerships

Russ Howell – Health Services Manager

Louise Tyers – Senior Democratic Services Officer

69. Apologies for Non-Attendance

Apologies for non-attendance were received from Councillors Wendy Brackenbury, Andy Mercer, Gill Mercer and Lee Wilkes. Councillor Tom Partridge-Underwood attended as a substitute member.

70. Members' Declarations of Interest

The Chair invited those who wished to do so to declare any interests in respect of items on the agenda.

| Councillors | Item | Nature of Interest | DPI | Other Interest |
|-------------------------|--|-------------------------------------|-----|----------------|
| Tom Partridge-Underwood | Green Burial Options in North Northamptonshire | Was registered to conduct funerals. | | Yes |

71. Notification of Requests to Address the Meeting

There had been no requests to address the meeting.

72. Minutes of the Meeting Held on 28 February 2023

RESOLVED:

That the minutes of the meeting held on 28 February 2023 be approved as a correct record and signed.

73. Consideration of Any Matter Referred to the Commission for Call-In

There had been no requests for call-in.

74. Green Burial Options in North Northamptonshire

The Scrutiny Commission considered a report of the Assistant Director of Regulatory Services which set out the current position as to green burial options in North Northamptonshire.

Full Council, at its meeting on 24 November 2022, approved the following motion:

“This Council resolves to scrutinise the current options for residents to choose a green burial in North Northamptonshire. Further, to develop a Green Burial Ground Policy to enable appropriate guidance to be given to interested operators with potential areas identified.”

Currently within North Northamptonshire there was an area dedicated to green burials at Rothwell Cemetery and a woodland ashes scattering area at Warren Hill Crematorium. The current capacity and uptake at the green burial ground at Rothwell was:

- 113 plots
- 68 internments
- 2 internments expected per year

During discussion on the report, the following key points were made:

- i. The Rothwell site had not been developed in any way and was not conducive to peaceful reflection. It needed to be made more attractive.
- ii. People did not know what options were available in relation to green burials.
- iii. It was suggested that a task and finish group should be established to take this work forward, including talking to residents and undertakers etc.
- iv. There was already a flourishing private market for green burials, and it was not for the local authority to provide competition in this area.
- v. Funeral directors were the gate keepers for burials and if more green burial options were available locally, uptake may be higher. There were a lot of unknowns around green burials and we should undertake future work to explore whether this was an area NNC should develop.

- vi. Members welcomed the report as a good start, but it took no account of the parishes who had their own green burial sites, e.g. Bozeat.
- vii. It was noted that funeral directors in Thrapston were actively encouraging local farmers for burial sites and there was currently a planning application in for a green burial site.
- viii. Officers confirmed that more could be done to maximise this area, and this would be looked at as part of the Service Plan which was about to be developed.

It was moved by Councillor Jim Hakewill and seconded by Councillor Valerie Anslow that a task and finish group be established to inform and develop a green burial policy. On being put to the vote, the motion was approved.

RESOLVED:

To establish a task and finish group to inform and develop a green burial policy.

75. Performance Indicator Report 2022/23 (Period 10)

The Scrutiny Commission considered a report of the Executive Director of Finance and Performance which provided an update on the Council's performance across a wide range of services, as measured by performance indicators. The report provided a summary of the performance of Council services and further detail including trend lines and exception reports.

Comments on several specific indicators were made, including:

- Number of E-Scooter trips (GSE01) – were accidents on e-scooters reported to the Police?
- Would data on the take up of green waste collections be included in the future? The Interim Head of Performance, Intelligence and Partnerships undertook to take the comment away about whether it would be included.
- Was information on the number of insurance claims for damage to vehicles, the number of successful claims and the amount paid in compensation available?

RESOLVED:

To note the performance of the Council and its services.

76. Close of Meeting

The Chair thanked members and officers for their attendance and closed the meeting.

The meeting closed at 8.17pm.

Chair

Date

Scrutiny Commission Tuesday 09 May 2023

| | |
|-----------------------|---|
| Report Title | Housing Voids and Responsive Repairs |
| Report Authors | David Watts, Executive Director of Adults, Health Partnerships and Housing (DASS) Evonne Coleman-Thomas, Assistant Director Strategic Housing, Development and Property Services |

List of Appendices

- Appendix A – Reducing the Responsive Repairs Backlog
- Appendix B – Preparing Void Properties for re-letting
- Appendix C – Lettable Standard

1. Purpose of Report

- 1.1. Following Scrutiny Commission requesting officers to attend a Scrutiny Commission meeting to provide information on, and answer members questions, around the housing responsive repairs backlog, and preparing void properties for re-letting, the following report and appendices provides reference material for members to aid the scrutiny discussion.

2. Executive Summary

- 2.1. The report, and in particular the appendices, provide reference material to aid the scrutiny discussion on the two housing related subjects they will be discussing during the Scrutiny Commission meeting.
- 2.2. The material has been prepared by Strategic Leads responsible for the improvement plans that have been put in place by Housing Services.
- 2.3. Three appendices are included:
 - i) Appendix A – Reducing the Responsive Repairs Backlog
 - ii) Appendix B – Preparing Void Properties for re-letting
 - iii) Appendix C – Lettable Standard
- 2.4. Appendix A and B provide both data and narrative explanations around the subject areas they relate to.

- 2.5. Appendix C is a copy of the Lettable Standard the Council has in place for housing stock. Void properties are expected to meet this standard, before being re-let to tenants.

3. Recommendations

- 3.1. It is recommended that the Scrutiny Commission:
- a) Note and consider the information provided in Appendices A – C.
 - b) Consider any areas that members would wish to discuss, ask questions of, and provide feedback to officers in the meeting in relation to the information provided.
 - c) Consider if any further progress updates should be added to the forward plan for the Scrutiny Commission.
- 3.2. Reason for Recommendations:
- a) To undertake effective scrutiny of the work of a service area.
 - b) To inform the future forward plan of the Scrutiny Commission.

4. Report Background

- 4.1. The report background for each area being considered is set out in the contextual information within Appendices A and B appended to this report.

5. Issues and Choices

- 5.1. The main considerations for the Scrutiny Commission are:
- (a) To establish an understanding of the two subject areas, the challenges being faced, and the work being undertaken by the service area
 - (b) To consider if further updates on progress are required to be added to the forward plan, particularly in relation to the progress and impact associated with the additional funding that has been made available with the aim of reducing the responsive repair backlog

6. Next Steps

- 6.1. The service is in the progress of recruiting the additional staffing that will form the team that will aim to reduce the responsive repair backlog and therefore sufficient time needs to be given to get those staff members in post and enable them to start working on the responsive repairs.
- 6.2. With a newly created Assistant Director role and the officer in place, further reviews and options appraisals of the performance and transformation of these services will be undertaken.

7. Implications (including financial implications)

7.1. Resources and Financial

- 7.1.1. There are no direct resources and financial implications because of this report to Scrutiny Commission, however the papers do summarise additional investment that has been put in place through a previous Executive decision.

7.2. Legal and Governance

- 7.2.1. Whilst there are standards and legal requirements in relation to Housing Services, there are no direct legal implications arising from this report to the Scrutiny Commission

7.3. Relevant Policies and Plans

- 7.3.1. The work of the housing department contributes to several areas within the Corporate Plan including:
- a) **Active, fulfilled lives:** We will help people live healthier, more active, independent, and fulfilled lives.
 - b) **Better, brighter futures:** We will care for our young people, providing them with a high-quality education and opportunities to help them flourish.
 - c) **Safe and thriving places:** We will enable a thriving and successful economy that shapes great places to live, learn, work and visit.
 - d) **Green, sustainable environment:** We will take a lead on improving the green environment, making the area more sustainable for generations to come.
 - e) **Modern public services:** We will provide efficient, effective, and affordable services that make a real difference to all our local communities.

7.4. Risk

- 7.4.1. The service has risk registers in place and as part of undertaking this activity will consider how those risks are affected by the work undertaken.
- 7.4.2. The Assistant Director, in consultation with the Executive Director, will review the service risk register and consider whether any specific risks associated with the two areas being considered should be escalated to the Corporate Risk Register.

7.5. Consultation

- 7.5.1. Voids and Responsive Repairs have been subject to recent internal audits. Whilst Void Turnaround received a satisfactory assurance, responsive repairs received a limited assurance audit and was considered and discussed at the Audit and Governance Committee on 24 April 2023.

7.6. Consideration by the Executive

- 7.6.1. The information, in the format being presented to Scrutiny Commission, has not been presented to Executive. However, the challenges identified were considered during the budget setting for the 2023 – 2024 financial year resulting in releasing additional budgets to implement the dedicated backlog reduction team.
- 7.6.2. A further report will be considered at the Executive in relation to the re-procurement of external contracts that undertake a number capital works on the councils housing stock at its meeting on 11 May 2023.

7.7. Equality Implications

7.8. Climate Impact

- 7.8.1. Many of the housing capital programmes intend to positively reduce the impact of the councils housing stocks on the climate. Where capital programmes have an impact, this is usually possible to demonstrate through improved EPC ratings.

7.9. Community Impact

- 7.9.1. With over 8,000 tenanted properties, improving both responsive repairs and void property turnaround impacts on a significant number of households in North Northamptonshire, aiming to improve outcomes individually and for the community.

7.10. Crime and Disorder Impact

- 7.10.1. There are no direct impacts on crime and disorder. However, work undertaken can often reduce the risk of crime to tenants and their properties, through either repair to, or replacement of, doors and windows that could be used as entry points for criminals into properties.

8. Background Papers

- 8.1. Appendix C: Lettable Standard provides background information in relation to the standards that the teams adhere to prior to re-letting a property to tenants.

Reducing the Responsive Repairs Backlog

Scrutiny Commission – 09 May 2023



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**Dan Hannam –
Interim Strategic Lead for Housing Property Services**

Appendix A

Introduction

- Each month, the Council completes over 1,300 non emergency responsive repair requests.
- The nature of these responsive repairs requests are varied from dripping taps, to damaged doors, leaking roofs and therefore the time and materials required to rectify them differ greatly by job.
- During the Covid-19 national lockdowns/tier 4 restrictions in 2020 and 2021, the legacy Councils in Corby and Kettering were limited to emergency repairs and external work only, causing a backlog of outstanding repairs.
- Since April 2021, NNC have been working hard to resolve the backlog of repairs, alongside of the new repair requests received, with the same resource levels as pre Covid-19.
- The allocation of an additional £900,000 from HRA reserves will be used to increase resources in 2023/24 to reduce the number of outstanding repairs.

Stock Profile

- The two property services teams are responsible for the Council's 8,084 homes (4,572 within the former Corby area and 3,512 within the former Kettering area)
- There are some major differences between the stock of the two former Councils (note the figures below are based on 2021 data), as shown below:

Corby

| Property Type | No of beds | Total |
|---------------|------------|-------|
| Bedsit | 0 | 124 |
| Bungalow | 1 | 309 |
| | 2 | 179 |
| | 3 | 42 |
| Flat | 1 | 654 |
| | 2 | 478 |
| | 3 | 43 |
| | 4 | 10 |
| House | 1 | 1 |
| | 2 | 672 |
| | 3 | 1682 |
| | 4 | 210 |
| | 5 | 37 |
| Maisonette | | 183 |
| | Total | 4624 |

| Year | Total |
|-----------|-------|
| Pre 1945 | 516 |
| 1945-1964 | 1983 |
| 1965-1974 | 1130 |
| Post 1974 | 995 |
| Total | 4624 |

Kettering

| Property Type | No of beds | Total |
|---------------|------------|-------|
| Bedsit | 0 | 40 |
| Bungalow | 1 | 197 |
| | 2 | 276 |
| | 3 | 3 |
| Flat | 1 | 930 |
| | 2 | 586 |
| | 3 | 4 |
| House | 1 | 28 |
| | 2 | 502 |
| | 3 | 1040 |
| | 4 | 39 |
| | 5 | 1 |
| Maisonette | | 10 |
| | Total | 3656 |

| Year | Total |
|-----------|-------|
| Pre 1945 | 973 |
| 1945-1964 | 1368 |
| 1965-1974 | 494 |
| Post 1974 | 815 |
| Unknown | 6 |
| Total | 3656 |



Issues we often see in particular property build periods or types



Pre 1945

- Solid walls – more costly to insulate
- Dated layouts – don't meet modern ways of living with small kitchens etc.
- Previous modernisations require further upgrades – rear addition bathrooms

1945 – 1964

- Mixture of cavity wall and rendered solid walls – difficulties with damp and mould
- Split WCs and bathrooms – need to modernise

1965 – 1974

- Non-standard construction methods – harder to source materials
- Non-standard property designs – harder to resolve repairs

Post 1974

- Properties constructed by developers – different standards of construction adopted
- Property dimensions significantly reduced

The Responsive Repairs Backlog

| Job Priority | Number of jobs awaiting completion 01/03/23 | Of which, number outside of target timescale 01/03/23 |
|--------------|---|---|
| Coby | 3369 | 2887 |
| Kettering | 2619 | 2426 |
| Total | 5988 | 5313 |

- The figures shown indicate the number of Responsive Repairs jobs outstanding as of 1st March 2023 in both of the HRA Neighbourhood Areas and of these, how many are out of target timescale.
- The 1st of March 2023 has been chosen as the date by which any repairs outstanding before this date will be categorised as part of the backlog project.
- This means that the repairs received after this date will be handled by the regular team.
- This approach is designed to give us an opportunity to break the responsive repairs backlog cycle that we have been in since Covid 19.
- It is not possible to provide figures for the number of outstanding jobs on vesting day due to the IT systems not being able to provide retrospective data.
- In addition, by having a clear list of jobs covered by the backlog project we will be able to clearly monitor progress over the next year.



Our approach to reducing the backlog

- A project group has been established with Transformation team support, reporting into the Adults, Health Partnerships and Housing Transformation Board and the Member Transformation Board.
- Outstanding repairs from before the 1st March 2023 have been exported from the two IT systems used in the HRA Neighbourhood Areas and merged into a single document with analysis undertaken to group the repairs by property, area and type.
- Four multi-skilled operatives, a surveyor and an administrator have been recruited to undertake the repairs and the administration work of booking appointments.
- An estate-based approach to the order in which repairs will be completed is being taken to ensure the most efficient use of resources, with all outstanding repairs in that property completed at the same time, where possible.



Our approach to reducing the backlog

- Tenants with outstanding repairs will be contacted by letter to inform them that Operatives will be working in their area over a defined period.
- Repair appointments will be made with tenants via telephone calls, which will also be used as an opportunity to confirm that the repairs we have outstanding are still required.
- If an appointment is missed by a tenant then a yellow card will be left asking them to rebook. If a second appointment is missed a red card will be left and the job closed on the backlog spreadsheet.
- Tenants will need to contact NNC and raise a new repair if they miss two backlog appointments.
- If a new repair is raised by a tenant, we will check if there is an outstanding repair within the backlog project before accepting it.
- Contractors will be used to support the team of four operatives with specialist work, such as fencing.



Progress monitoring

- The Assistant Director is part of the Responsive Repairs Backlog Project group which meets weekly.
- This will enable swift action to be taken to resolve any issues that are encountered.
- Progress will be reported into the Adults, Health Partnerships and Housing Transformation Board, Tenant Advisory Panel and the Member Transformation Board.
- Two new cost centres have been created, one in each of the HRA neighbourhood accounts, to monitor the spend.
- The commencement of this project coincides with the opening of the Corby stores, meaning we do not foresee any issues with obtaining stock affecting progress.
- We aim to clear the backlog over the next year. However, we will need to establish if this aim is achievable as we progress with the project. The information we have on outstanding jobs and estimated costs will be tracked to establish if we have sufficient budget to clear all outstanding jobs.

Thank you.
Any questions?



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Preparing Void Properties for re-letting Scrutiny Commission – 09 May 2023

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Dan Hannam – Interim Strategic Lead for Housing Property Services
Leona Mantle – Interim Strategic Lead for Tenancy Services
Carly Hohn – Interim Strategic Lead for Housing Strategy and Solutions

Appendix B

Introduction

- Each year NNC receives on average 550 sets of keys from out going tenants who are vacating their Council home.
- Without void properties NNC would not be able to house those applicants to whom the Council owes a Housing duty via Keyways.
- The reasons for a property becoming void are varied from tenants transferring to larger or smaller homes, to those that move into residential care or pass away.
- The condition in which the property is returned to NNC, ultimately dictates how long it takes for the property to be made available for reletting.
- Preparing void properties for re-letting is therefore a multiteam responsibility within Housing.

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The key in, to out journey

- The **Tenancy Services Team** receive the Notice to Quit and visit the outgoing tenant to check the condition of the property.
- The **Housing Property Services Team** survey the property to establish if the property requires standard or major void repairs.
- The **Keyways Allocations Team** advertise the property once an estimated completion date for the repair works is provided by the Housing Property Services Team and the advert details have been provided by the Tenancy Services Team.
- The **Housing Property Services Team** undertake the clearance and repair works to the property in line with the NNC Lettable Standard.
- The **Keyways Allocations Team** allocate the property to the successful bidder once their circumstances are verified.
- The **Tenancy Services team** carry out further verification of the applicant's circumstances and are responsible for viewing and letting the property.



TIMELINE

Pre-void

Week 1

Week 2

Week 3

Week 4

Week 5

Week 6

Week 7

Week 8

PROPERTY

Pre void inspections

-

Keys received from Tenancy and property inspected

Safety checks completed

Trades Work

Trades Work

Trades Work

Clean, post inspect and keys to Tenancy

-

TENANCY

End of tenancy visit and advertise sheltered accom

Keys received from tenant

Add General Needs advert

-

-When nomination received – verify nomination

Accompanied Viewing when safe to do so

Welcome Meeting

-

Ready to Let and sign up

ALLOCATIONS

Approve Advert (sheltered)

Keyways cycle

Approve Advert (General Needs)

Keyways cycle

Shortlisting & Nomination to Landlord

-

-

-

-

Stock Profile

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- There are some major differences between the stock of the two former Councils (note the figures below are based on 2021 data), as shown below:

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| Total | 3656 |



LAHS data – vacant properties

| Total vacant HRA dwellings | 18/19 | 19/20 | 20/21 | 21/22 | 22/23* |
|----------------------------|------------|------------|------------|------------|------------|
| Corby area | 29 | 40 | 52 | 51 | 85 |
| Kettering area | 103 | 83 | 73 | 59 | 58 |
| North Northants | 132 | 123 | 125 | 110 | 143 |

** Please note 22/23 is a provisional figure and is still to be validated and submitted*

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The data provided is the number of HRA owned council properties vacant on 31st March each year as published in the Local Authority Housing Statistics data return (LAHS) which is published on www.gov.uk and is a mandatory return that the Council completes on an annual basis.



LAHS data – council lets

| Total LA dwellings let | 18/19 | 19/20 | 20/21 | 21/22 | 22/23* |
|--------------------------------|------------|------------|------------|------------|------------|
| Corby area | 403 | 294 | 260 | 281 | 206 |
| Kettering area | 267 | 262 | 303 | 249 | 247 |
| North Northants Council | 670 | 556 | 563 | 530 | 453 |

** Please note 22/23 is a provisional figure and is still to be validated and submitted*

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The data in the table shows the number of HRA council properties let each year as published in the Local Authority Housing Statistics data return (LAHS).

- This data includes all council lettings across North Northamptonshire at social or affordable rent levels on secure or introductory tenancies so does not include properties being used for temporary accommodation.



LAHS data – average re-let time in days

| Average re-let time | 18/19 | 19/20 | 20/21 | 21/22 | 22/23* |
|------------------------|------------|------------|------------|------------------|------------|
| Corby area | 18 days | 22 days | 24.6 days | 65.35 days | TBC |
| Kettering area | 98 days | 81 days | 110 days | 90.05 days | TBC |
| North Northants | N/A | N/A | N/A | 75.3 days | TBC |

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The data provided within the Local Authority Housing Statistics data return (LAHS) records the average re-let time in days from when the tenancy is terminated up to and including the date the new tenancy agreement starts, so the whole period the property is void. This does not include properties undergoing major works.



Void performance measures

- For 2023/24 the following performance measures will be reported in the Corporate Performance Report that is taken to Executive:

| | |
|--------|--|
| STP37a | Average time taken to re-let NNC <u>standard</u> void properties |
| STP37b | Average time taken to re-let NNC <u>major</u> void properties |

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- Work has been undertaken to implement a process to enable data to be provided on an NNC footprint broken down by major and standard void properties.
- This will help ensure the data provides a clearer picture of how long standard properties are being taken to let.



New void performance target

- For 2023/24 a target for the length of time taken to re-let a standard void property is **56 days** which is the equivalent of 8 weeks
- This is based on an average re-let time taken from a peer group of 52 Local Authorities provided by HouseMark which is 51.6 days
- The performance range within this peer group is from 13.9 days up to 151.9 days



Income Loss due to Voids

| | Number of Voids Let | Cumulative days void (working days) | Average Weekly rent 2022/23 | Void loss |
|-----------|---------------------|-------------------------------------|-----------------------------|-----------|
| Kettering | 210 | 20,248 | £85.54 | £346,400 |
| Corby | 272 | 25,483 | £81.07 | £413,180 |
| Total | | | | £759,580 |

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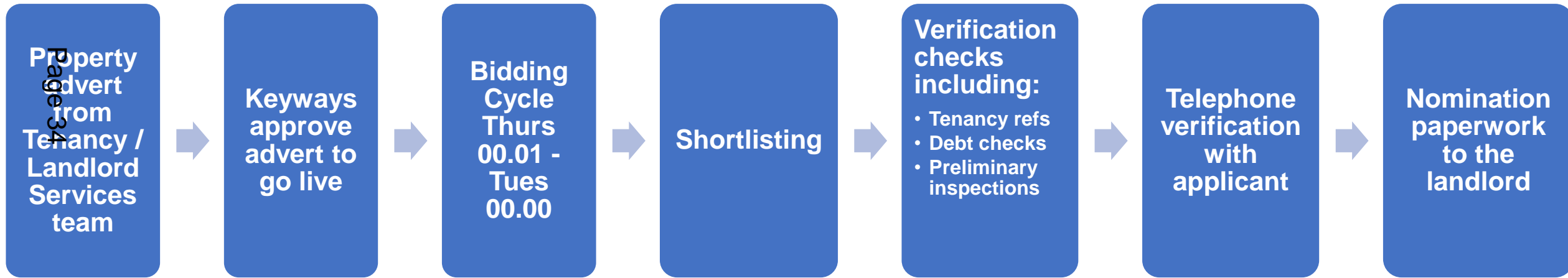
Annual Debit of £35,159,000 **Void loss of 2.16%**

Note: We only know the length of time a property is void when property is re-let. The snapshot of number of voids at end of month March 2023 (Kettering 58, Corby 85) gives approx weekly rent losses of (Kett 58 x £85.54 = £4,961.32) (Corby 85 x £81.07 = £6,890.95) £11,852.27 per week.



The role of the Allocations Team

- Attendance and rotating chair at NNC weekly voids meeting



Allocations Data

- In 2022/2023 an average of 556 new housing applications per month (rising to 745pcm in Q4)
- 1183 lettings in 2022/23, of which
 - 438 NNC
 - 745 Registered Provider stock
- 307 refusals since August 2022, of which 118 are NNC council properties (27% refusals as a proportion of lettings)
- Current outstanding nominations is 70 (50% are council properties) reduced from a peak of ~120 in October 2022
- There is current one outstanding nomination for a council property that is ready to let (RTL)
- 15.5 FTE staff in the Keyways team of which 45% are temporary staff.



Allocations – achievements

- NN Keyways Housing Allocation Scheme and software launched on Day 1
 - Enabling projects since vesting day include harmonising and streamlining customer contact routes into the team
 - Backlog of 2,200 housing applications cleared July-Dec 2022
 - Suspended applications reduced from over 700 to 322 currently
- Housing and Community Occupational Health meetings;
- 8 households with complex needs supported to secure housing solutions in NNC council stock via this multi-disciplinary approach using the NNC voids process
 - Includes one family waiting for suitable accommodation since 2019

• Page 36



Ensuring best use of stock: Adapting homes to those on Keyways with complex needs

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Allocations – challenges and priorities

Current challenges

- Staff resources
- Increasing demand – current active register is 5,143 household, compared to 4,000 combined total pre-vesting day (includes households with no housing need in Corby and East Northants)
- Receiving 26 high level enquiries per month in 22/23 (Councillor and MP enquiries, complaints, reviews)

Current priorities

- To restructure the Allocations Team and increase staff resource
- To clear backlogs in customer contact and nominations workstreams:
 - Aim to respond to customers within adopted service standards
 - Aim to nominate within 3 working days of advert cycle closing or refusal



The role of the Tenancy Services Team

- Attendance and rotating chair at NNC weekly voids meeting

Carry out end of tenancy visit. Advice and inspection.

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Prepare advert for Keyways

Verify Nomination. Includes affordability assessment and home visit

Accompanied Viewing

Welcome Meeting

Prepare sign-up pack and sign up new tenant.



The Tenancy Services Team also...

- Are actively involved in preparing, chairing and attending weekly voids meetings – and respond urgently to actions arising from the meeting.
- **Manage current tenancies:**
 - Provide advice and support throughout the lifetime of a tenancy (starting pre-tenancy)
 - Periodic Tenancy Visits – on a 5-yearly cycle
 - Manage requests for improvements or alterations to properties
 - Promote Mutual Exchanges
 - Work with multi-disciplinary team to provide Aids & Adaptations where possible to keep people in homes that are suitable for their household needs
 - Property inspections for all Keyways applicants before applicants can bid or proceed with nomination to new property
 - **Support Tenancy Sustainment**



Challenges for the Tenancy Services Team in the voids process

| Issue | Mitigation / current process | Further work in progress |
|---|---|--|
| <p>Items left within the property at the end of a tenancy.</p> <p>Provision – duty to take reasonable care of belongings while tracking tenant.</p> | <p>Housing Officers visit tenants within notice period to provide help and advice on how to return property.</p> <p>We store belongings for 28 days within property to reduce costs of removal and storage.</p> | <p>Review working practices of all staff to ensure consistency – as part of the end-to-end voids review.</p> <p>Cost and review removal and storage options.</p> |
| <p>Probate matters - when tenant dies intestate or challenge to will.</p> | <p>To end tenancy, notice served on Office of the Public Trustee. (cost and time) Regularly promote the benefit of having a will.</p> | <p>Consider partnership to provide free or low-cost will writing.</p> |
| | | |

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The role of the Voids Repairs Team

- The team are responsible for renovating, repairing and cleaning our void properties ready for reletting.
- Voids are categorised as standard or major depending on the type of work that is required in line with the NNC Lettable Standard.
- Standard voids don't require a key component to be replaced, such as a kitchen or wiring, whereas majors do. The majority of repairs are completed by our in-house Operatives. With specialist contractors only used where we don't have in house skills.
- A Landlord Gas Safety Record (LGSR), an Electrical Installation Condition Report (EICR), an Asbestos report and an Energy Performance Certificate (EPC) is completed for each property prior to it being let.

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Before



After



Challenges faced by the Voids Repairs Team

Properties returned containing belongings by outgoing tenants



- Properties that are returned with belongings left in them cause a significant delay to the process of completing the void works.
- The amount of belongings varies by property.
- Until a property is clear of belongings it is not possible to start the repair works.
- In cases of abandonment and probate, the Council has a legal duty to store the belongings for a set period of time.
- The Council incurs significant costs each year to dispose of belongings.

Challenges faced by the Voids Repairs Team

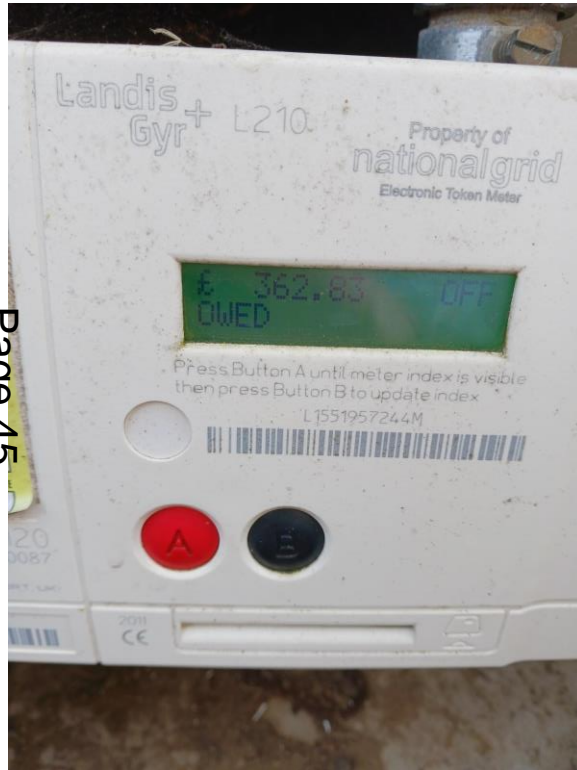
Properties returned containing poor quality DIY



- Properties that are returned with unauthorised and poor quality DIY add to the void time.
- The alterations have to either be made safe or removed and replaced.
- This ranges from replacement kitchens to conservatories.
- Where DIY is authorised and of a good standard then this is left in situ with the tenant being made responsible for replacement of non standard items, such as fitted ovens.

Challenges faced by the Voids Repairs Team

Properties returned with meter debts



- Properties that are returned with meter debts delay the letting of the property, as until they are in credit we are not able to complete the gas and electric safety checks.
- We have a contract with a company to replace the meters with debts and provide a small amount of credit, however, during the recent energy price crisis, it has been nearly impossible to get companies to take on new customers.
- A corporate credit card has been sourced for the team to help clear debts, but we still require the card key to be able to top up debts.

Challenges faced by the Voids Repairs Team

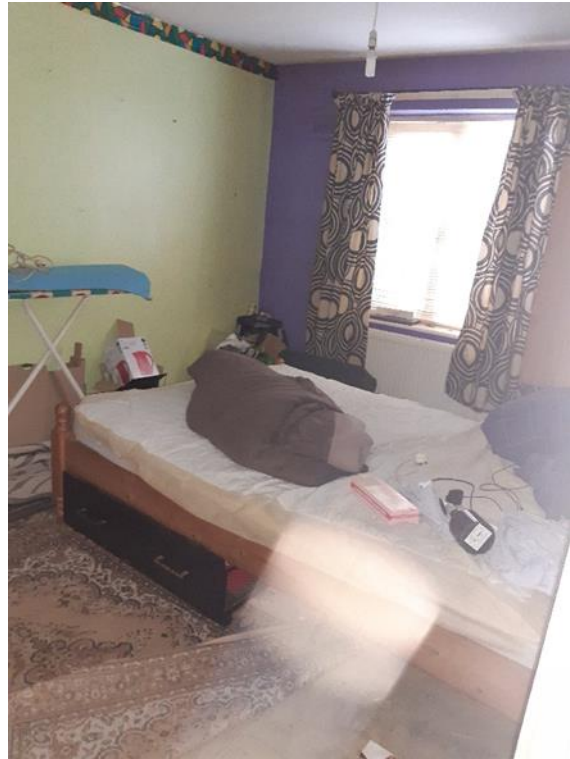
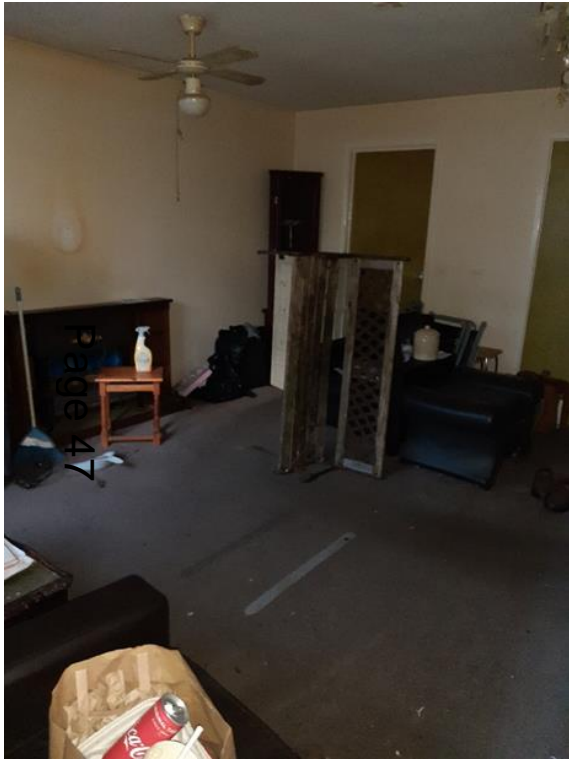
Properties returned with gardens in a poor condition



- Properties that are returned with gardens in a poor condition need to be cleared to a manageable level for incoming tenants.
- Often, sheds are found to be in an unsafe condition and therefore need to be removed.
- Overgrown trees that can cause structural damage to our properties need to be pruned, often at high cost, by tree surgeons.

Case Study of a Major Void

Before



- The property required a new kitchen and Level Access Shower, in addition to the standard void works.
- Some minor adaptations were also required for the incoming tenant (ramping to the property and widening of internal doorways).
- A large amount of replastering and decoration was also needed.
- The works were completed by the DLO team.



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Case Study of a Major Void

After

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Successes to date and ongoing challenges for the Voids Repairs Team

Successes

- Successfully joined up our two neighbourhood area Void Repairs Teams into one NNC team.
- Developed a number of new procedures for the team to work to based on the new NNC Lettable standard.
- Created a Major Voids team working across Neighbourhood areas.
- Procured a contract for Meter changes to facilitate swift action on meter debts.

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Ongoing challenges

- Making better use of the notice period to identify remedial works that tenants should put right.
- Exploring options for outgoing tenants to leave their property in a clean and tidy condition.
- Greater planned investment in our stock to reduce the amount of major voids received.



Conclusions

- Wider end to end review of voids processes to ensure minimum delays
- Cross team oversight and responsibility for voids is essential to a successful voids service
- Weekly oversight of operational voids management at Strategic Lead level
- Do we have the right resource levels across all teams in the process to deliver the service that we want to?



Any questions?



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Lettable Standard

January 2022

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Appendix C



Content

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Introduction

North Northamptonshire Council (NNC) is committed to providing high quality homes.

The NNC Lettable Standard is designed as a standard that will be applied to all council owned properties before they are let. Our standard has been designed in consultation with tenants and has been tested with our teams to ensure it is fit for purpose.

The focus of the standard is to provide safe, clean, and secure homes that are in good repair when we let them to new tenants.

Sometimes repairs and external works that do not prevent a tenant from moving in and enjoying their home may be done after the property is let to the tenant. An example of this would be re-glazing a window that has been made safe where the glass is on order. We aim to complete any such repairs within 28 days of the new tenant moving in.

The Lettable Standard sets out the expected condition of homes when we let them. How we manage the condition of the property during tenancies is set out further within our Tenants Handbook and Repairs Handbook.

Safe and Compliant

NNC will only let homes that have passed the required tests and safety checks. This section sets out the different legal requirements

A Gas Safety Check will be completed & a Landlords Gas Safety Record left at property

An Electrical Safety Check will be completed

An Energy Performance Certificate will be completed and provided at sign up to inform both the Council and the tenant how energy efficient the property is

Best practice on water hygiene will be followed when our properties are empty to ensure water is safe and hygienic. This will include running all taps, flushing all systems and draining down any longer term voids.

Asbestos will be managed as part of the void process. Where we do not have up-to-date certificates, we will carry out an asbestos test where applicable.

Smoke and heat detectors will be clean and fully operational with a hard-wired smoke detector fitted on each floor of the building and one heat sensor in the kitchen

Any fire hazards found will be removed

A housing health and safety rating system (HHSRS) assessment will be completed, and any Category 1 hazards removed.



Security



Homes will always be safe and secure prior to letting.

- All external locks will be changed including outhouses and stores
- Minimum 2 sets of keys will be supplied at sign up
- External doors will be secure, watertight, and fully operational
- Doors and windows will be secure
- Windows will open freely
- All handles and restrictors will be operational
- Window keys will be present
- Broken glazed units will be replaced
- Security lights will be supplied and fitted where appropriate for sheltered accommodation

Kitchen

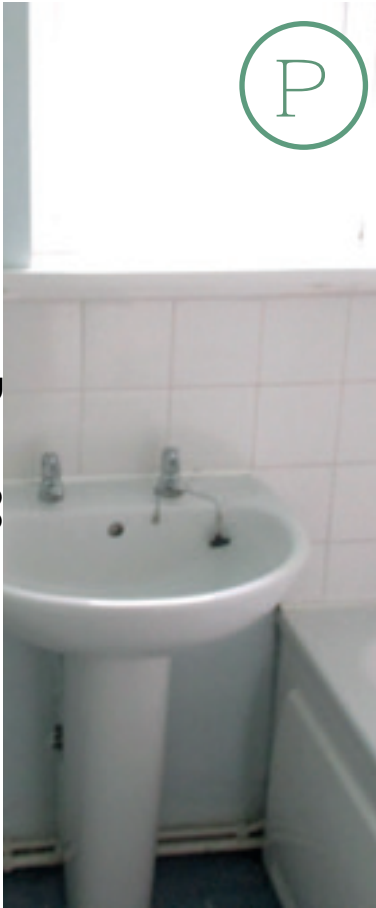
Kitchens will be in good workable condition and hygienically clean prior to letting.

- There will be a suitable amount of worktop space and units, appropriate for the number of bedrooms in the property and suitable to the size and layout of the kitchen
- All door and drawer units will be adjusted to open and close freely
- All internal shelves to units will be present and secure
- The plumbing and stop cock will be effective and accessible
- Suitable floor covering will be fitted and in good condition
- Worktops will be clean and hygienic and free from major damage
- The sink will be clean and free from rust and stains
- Scratching in stainless steel sinks is acceptable, small dents are passable but unsightly large dents are not
- Plug and chain will be fitted to sink
- Taps will operate easily and be labelled hot and cold
- Where space allows there will be provision to site a fridge, washing machine and cooker
- Appropriate splashbacks (tiles, aqua boards, etc) will be provided behind sink and cooking area
- A cold feed and waste pipe will be supplied for a washing machine
- A gas or electric point will be supplied for a cooker



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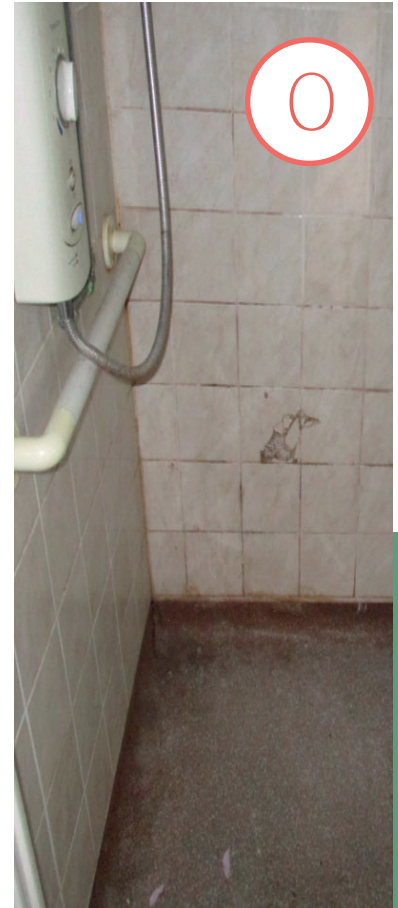


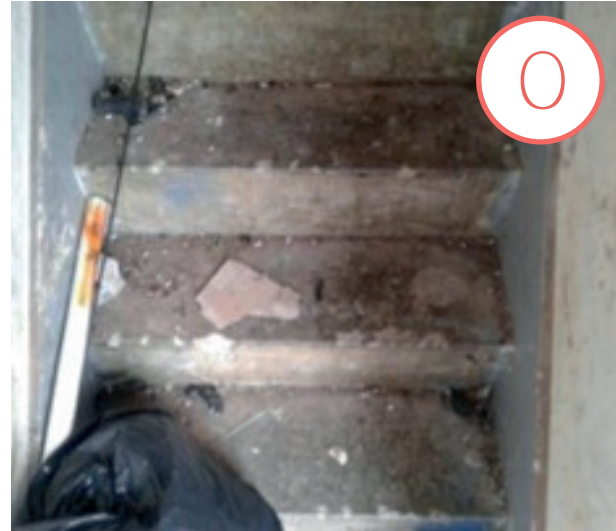
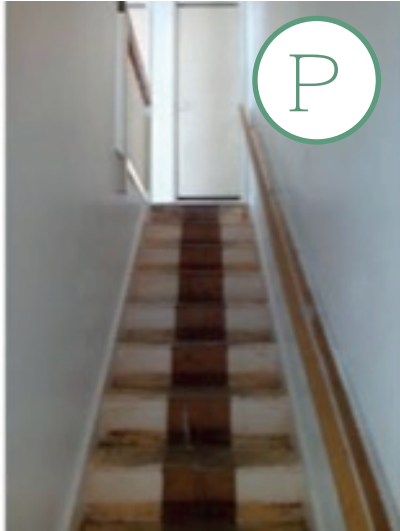


Bathroom

Bathrooms will be in good workable condition and hygienically clean prior to letting.

- The plumbing will be effective and accessible
- All toilets will work properly, easy to flush, no cracks, and securely fixed
- The toilet seat will be renewed, unless already in very good condition
- Any damaged silicone seals will be renewed
- Plug and chain will be fitted to sink
- Appropriate tiling or alternative splashback will be fitted to the rear of the basin and bath area
- Suitable floor covering will be fitted and in good condition
- A hot and cold-water supply will be provided to the wash hand basin, bath, and shower where fitted
- Taps will operate easily and labelled hot and cold
- Where a shower is left in situ appropriate tiling or alternative splashback will be in place

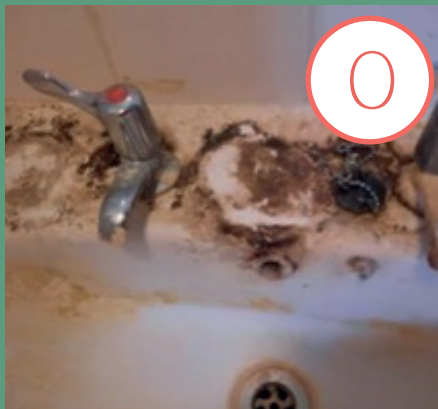




General

Homes will be in a good condition of general repair prior to letting.

- Walls will be de-nailed, and any holes filled
- Stair treads will be free of nails, etc
- Loose floorboards, stair treads, balustrades and risers, handrails will be secured
- Skirting boards, architrave, internal doors, and windowsills will be replaced or repaired
- Any wires and cables will be tied back and secure
- A television aerial point will be available in sheltered schemes and flats, but not in houses



Cleanliness

Homes will be clear and cleaned to a reasonable standard prior to letting, with the kitchen and bathroom having had a full hygienic clean.

- Clear of all goods, possessions, debris, and rubbish
- Free from vermin and insect infestation
- Fully cleaned prior to letting, all surfaces wiped down and hygienic
- Any areas of mould will be removed and treated
- Deep hygienic clean to kitchen and bathroom, particularly sanitary units

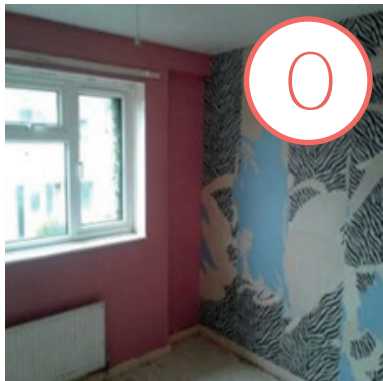
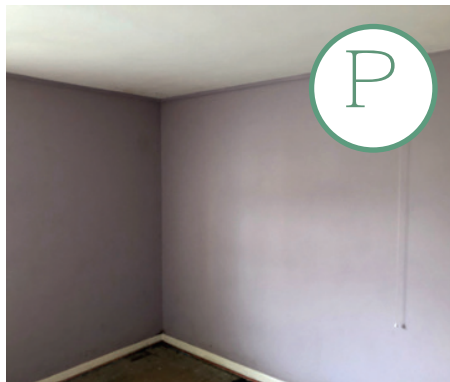
P

External Areas

External areas will be clear of debris and in a manageable condition for the new tenant prior to letting.

- Sheds / outbuildings in an unsafe condition will be removed, where in useable condition a shed may be gifted to the new tenant with their consent (not the Council's ongoing responsibility)
- Where necessary and possible hedges and trees will be cut back to a manageable level and all debris cleared away. Grass areas will be strimmed back.
- Dangerous, dead, or diseased trees will be removed
- External boundaries, fencing and walls adjacent to the public area (pavement/ alleyway) will be installed or replaced where required
- Where the Council are responsible, internal boundaries will be denoted and a suitable boundary will be provided where applicable.
- Footpaths (within the boundary) providing essential access and egress to the property will be re-paired

O



Decoration

Homes will be prepared ready for decoration for the new tenant prior to letting.

- The property will be prepared for decoration for the incoming tenant
- All walls and ceilings will be free from cracks, holes, mould and defects and prepared ready for decoration
- Where dark paint has been left or there is new plaster, walls will be given a mist coat to help pre-prepare the surface for decorating.
- Windows, UPVC frames, sockets and switches will be free from paint.
- Where applicable wallpaper and textured surfaces will be assessed, if heavily damaged remedial work will be undertaken.



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SCRUTINY COMMISSION 9th May 2023

| | |
|-------------------------|--|
| Report Title | Performance Indicator Report Period 11 2022/23 |
| Report Author | Janice Gotts, Executive Director of Finance Email: Janice.Gotts@northnorthants.gov.uk |
| Executive Member | Cllr Lloyd Bunday Portfolio Holder for Finance and Transformation |

List of Appendices

Appendix A –Detailed Performance Indicator Report for Period 11 2022/23
(February 2023)

Appendix B- Human Resources Workforce Data Period 11 2022/23 (February 2023)

1. Purpose of Report

- 1.1. To provide members with an update on the Council's performance across a wide range of services, as measured by Key Performance Indicators, with the aim of informing scrutiny.
- 1.1 Set out some of the actions the Council is taking to develop its performance monitoring arrangements.

2. Executive Summary

- 2.1 The Scrutiny Commission identified the need for regular performance reports on the Council's services and key local outcomes at its Scrutiny Conference back in October 2021. Performance reporting has been built into the Scrutiny Work Programme as a routine and regular feature.
- 2.2 This report provides an assessment of the Council's performance in relation to Key Performance Indicators for 2022/23 as at period 11.
- 2.3 A detailed assessment of the performance of services as measured by Key Performance Indicators for period 11 has been included as **Appendix A**.
- 2.4 Human Resources workforce data for period 11 is provided within **Appendix B**. A definition key is also included to facilitate understanding of the data and guide accurate and efficient decision making in respect of the Council's workforce moving forward.

- 2.5 Members of the Scrutiny Commission are advised to flag up areas they wish to understand in further detail with the report author at least three working days prior to the meeting. This is by no means essential but given the broad range of information included within the appendices of this report, it will help ensure a more thorough answer is provided at the meeting.

3. Recommendations

- 3.1 It is recommended that the Scrutiny Commission note the performance of the Council and its services as outlined in the appendices of this report, and use the information provided to aid the process of scrutiny.

4. Report Background

Context

- 4.1 The availability of accurate, timely and relevant information about the performance of services is good practice. It enables operational and policy decisions to be made, and it informs healthy debate and scrutiny of services.

Performance Report

- 4.2 A detailed assessment of the performance of services as measured by Key Performance Indicators for period 11 has been included as **Appendix A**. This includes comments / exception reports on each of the performance indicators reported.
- 4.2 In keeping with previous reports, the enhanced Human Resources Workforce Data for the same period has been provided as **Appendix B**. The format and presentation of this data continues to develop to ensure it is meaningful for members so it can accurately inform strategic decision making.
- 4.3 A definition key for HR workforce data is provided within **Appendix B**. This is to facilitate better understanding of the data and help guide accurate and efficient decision making in respect of the Council's workforce.
- 4.3 The Council have identified that the data underpinning vacancy statistics provided in previous reports is not currently accurate. The Human Resources team are working with service managers, and with systems colleagues from across the ERP partnership, to review and revise its vacancy data and our approach to managing it. The 'vacancies' statistics included in previous workforce performance information has therefore been excluded from this report. We expect complete and accurate vacancy statistics to be available from Period 3 2023/24. Similarly, the data underpinning total agency spend (with the exception of Opus spend) is undergoing a data cleanse to ensure that it can be reported in line with the KPI proposal for 2023/24.
- 4.4 Queries raised by Scrutiny Members on the content of this report will be responded to within 12 working days of the Executive meeting, as agreed with the Executive Member for Finance and Transformation.

Developing the Council's performance management arrangements

- 1.1. The latest information about the Council's approach to performance management is set out within [item 6 of the meeting of the Executive on 16th March 2023](#).
- 1.2. We have continued to identify and develop indicators through the annual performance indicator review process. The Council's agreed set of Key Performance Indicators for 2023-24 can be found within [item 6 of the meeting of the Executive on 16th March 2023](#).

5. Issues and Choices

- 5.1 There are no issues or choices arising from this report.

6. Implications (including financial implications)

6.1 Resources and Financial

- 6.1.1 There are no direct resource or financial implications arising from this report. However, the financial performance of the Council is an important metric when gauging how the Council is performing. The scarcity of resources inevitably means there is a trade-off between performance and economy. The goal is to ensure that efficiency, economy and effectiveness are maximised within realistic parameters.

6.2 Legal

- 6.2.1 There are no legal implications arising from this report.

6.3 Risk

- 6.3.1 There are no significant risks associated with the recommendations of this report.
- 6.3.2 There are risks associated with not scrutinising the performance of the Council. The Council's Key Performance Indicators and associated reporting regime form an important part of the Council's corporate governance arrangements. Robust scrutiny and challenge is a healthy feature of any large, outcome-focused organisation.
- 6.3.3 There are other risks associated with performance indicators. Data quality, for example, is an important consideration. The decisions the Council makes will be impaired by poor quality information. The Council is therefore working to ensure that data quality arrangements are built into the chain of information that underpins performance reporting. This will continue to be an area of careful focus for the Council as it further embeds and develops its performance management arrangements.

6.4 Consultation

- 6.4.1 Formal consultation was carried out in the development of the Corporate Plan.
- 6.4.2 Informal consultation with relevant stakeholders, including Executive Members was completed for the Key Performance Indicators included in this report and for the new suite of Key Performance Indicators for 2023/24.
- 6.4.3 Informal consultation with relevant stakeholders will continue to take place as we continue to develop the Council’s Performance Management Framework.

6.5 Climate Impact

- 6.5.1 The Council declared a Climate Emergency in 2021 and has developed a range of actions to address this challenge. The Council continues to develop a set of indicators that provide information about how it is meeting its key commitment to helping deliver a green and sustainable environment.
- 6.5.2 The Council currently measure and report on the following Greener, Sustainable Environment performance indicators:

| Indicator Reference Number | Indicator Name |
|----------------------------|---|
| GSE01 | Number of E-Scooter trips |
| GSE02 | Number of E-Scooter users |
| GSE03 | Co2 savings from E-Scooters |
| GSE04 | Number of electric vehicle charging points publicly available |
| GSE05 | Number of electric vehicles per charge point |
| GSE06 | Fly tipping: number of fly tips reported |
| GSE07 | Percentage of waste diverted from landfill |

6.5.3 The Assets & Environment service area have developed a Carbon Management Plan which was considered and approved by Executive at their meeting on the 22nd December 2022. The Tree Management and Care Policy and Pollinator Strategy was considered and approved by the Executive at an earlier meeting on the 25th August 2022. These policies will consider the Council’s commitment to achieving Net Zero by 2030 and provide appropriate performance indicators to measure progress to achieving this target. This will include indicators that measure the councils carbon emissions along with other environmental projects currently being developed.

6.6 Community Impact

6.6.1 Council services that are performing well will have a significant positive impact on the local community. The monitoring and scrutiny of the Council’s

performance plays an important role in both understanding this impact and in driving future performance improvement.

7. Background Papers

- 7.1 [Performance Indicator Report Period 10 2022-23](#) reported at the Scrutiny Commission meeting on the 4th April 2023.
- 7.2 [Performance Management and Reporting Arrangements 2023-24](#) reported at the Executive Meeting on the 16th March 2023.

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North Northamptonshire Council Performance Report - February 2023

Key to Performance Status Colours

| Progress Status Key: |
|--|
| Green - On target or over-performing against target |
| Amber - Under-performing against target but within 5% corporate tolerance (or other agreed tolerance as specified) |
| Red - Under-performing against target by more than 5% (or other agreed tolerance as specified) |
| Dark Grey - Data missing |
| Grey - Target under review |
| Turquoise - Tracking Indicator only |
| Children's Trust Progress Status Key: |
| Green - At target or better |
| Amber - Below target - within tolerance |
| Red - Below target - outside tolerance |
| Grey - No RAG |

| Direction of Travel Key | |
|--|--|
| An acceptable range = within 5% of the last period's performance | |
| ↑G | Performance has improved from the last period – Higher is better |
| ↓G | Performance has improved from the last period – Lower is better |
| ↑ | Performance has deteriorated but is still on or above target or within an acceptable range of 5% of the last period – Lower is better |
| → | Performance has stayed the same since the last period |
| ↓ | Performance has deteriorated but is still on or above target or within an acceptable range of 5% of the last period – Higher is better |
| ↑R | Performance has deteriorated from the last period – Lower is better |
| ↓R | Performance has deteriorated from the last period – Higher is better |
| ↑ | Actual increased - neither higher or lower is better |
| ⇔ | Actual has stayed the same since the last period - neither higher or lower is better |
| ↓ | Actual decreased - neither higher or lower is better |
| Children's Trust Direction of Travel Key | |
| ↑G | Performance improved since last month |
| → | Performance the same as last month |
| ↓A | Performance declined since last month |

Performance Terminology key

| | |
|-------------------------------|--|
| TBC | To be confirmed |
| TBD | To be determined |
| n/a | Not applicable |
| Actual | The actual data (number/percentage) achieved during the reporting period |
| Benchmark | A comparator used to compare the Council's performance against. The 2020/21 average for Unitary Councils in England has been used where available unless otherwise stated. |
| Numerator | Number as part of the percentage calculation which shows how many of the parts indicated by the denominator are taken. See example below. |
| Denominator | The total number which the numerator is divided by in a percentage. See example below. |
| EXAMPLE Performance Indicator | % Calls answered |
| Numerator | Number of calls answered |
| Denominator | Total number of calls received |

Customer & Governance

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to | December | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|-------------------------------|---------|--|---------------------|--|----------------|----------------|----------------|------------------|--------------|---------------|------------------------------------|--|------------------|-------------------------------------|---------------------|--|
| | | | | | 22-23 | 22-23 | 22-23 | Date | 2022/23 | 2022/23 | 2022/23 | | | | | |
| Information Governance | | | | | | | | | | | | | | | | |
| Modern Public Services | MPS12 | % of Freedom of Information Requests completed in 20 working days | | 80.08% (Average of 40 Unitary Councils 2021/22 - benchmarking exercise conducted by Brighton and Hove Council) | 91.73% | 90.18% | 82.55% | 82.91% | 75.92% | 45.00% | N/A as reported a month in arrears | ↓R | Higher is better | 90% | 85% - 90% | We have seen a significant increase in the number of requests received since the start of the year. Additional resource has been secured and the impact of this will be reflected during the next reporting period. |
| | | | | | 233 out of 254 | 202 out of 224 | 175 out of 212 | 655 out of 790 | 41 out of 54 | 45 out of 100 | N/A as reported a month in arrears | | | | | |
| Modern Public Services | MPS13 | % Environmental Information Regulation Requests completed in 20 working days | | TBD | 97.44% | 95.76% | 98.25% | 95.57% | 98.27% | 75.82% | N/A as reported a month in arrears | ↓R | Higher is better | 90% | Tolerance 85% - 90% | Whilst this is below target, performance is expected to return to target levels for the next reporting period. The new case management system due to commence on 1 April 2023 will also assist in streamlining procedures. The new system is expected to impact positively on the teams performance. |
| | | | | | 494 out of 507 | 407 out of 425 | 281 out of 286 | 1251 out of 1309 | 57 out of 58 | 69 out of 91 | N/A as reported a month in arrears | | | | | |
| Modern Public Services | MPS14 | % Individual Rights requests completed within statutory timescale (Data Protection (DP) Right to Access requests) | | TBD | 90.2% | 96.4% | 91.9% | 89.8% | 84.62% | 61.11% | N/A as reported a month in arrears | ↓R | Higher is better | 90% | 85% - 90% | Resources in the team (as above) have been limited for this period in a small team. It is expected that performance in this area will return to target over the next reporting period. The team are actively seeking to mitigate this fall and expect the performance levels to recover over the coming period. |
| | | | | | 55 out of 61 | 53 out of 55 | 57 out of 62 | 176 out of 196 | 11 out of 13 | 11 out of 18 | N/A as reported a month in arrears | | | | | |
| Modern Public Services | MPS15 | Total number of data breaches <i>A personal data breach is a security incident that has affected the confidentiality, integrity or availability of personal data.</i> | | n/a | 16 | 28 | 27 | 89 | 4 | 6 | 12 | ↑R | Lower is better | No target - tracking indicator only | N/A | Whilst there has been an increase in non-reportable breaches (to the ICO) since the last reporting period, the team is in continuing discussions with the responsible teams to support and help review systems and process to prevent recurrence. The Data Protection team continues to monitor levels of data breaches and the causes of them. Appropriate training and / or discussions with the relevant services is undertaken, particularly for those services that are considered to be higher risk. Data breaches are also broken down by team and shared internally, to highlight and provide mitigating action, based on trends or issues. |
| | | There are two types of breaches: - A 'Non-reportable breach' has a low or no impact on | | | 0 | 1 | 0 | 1 | 0 | 0 | → | | | | | |
| | | a) Reportable breaches (ICO) <i>(This was MPS23 reported quarterly, now included monthly as part of this performance indicator)</i> | | | 16 | 27 | 27 | 88 | 4 | 6 | ↑R | | | | | |
| | | b) Non-reportable breaches | | | | | | | | | | | | | | |

Customer & Governance

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to | December | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|-----------------------|---------|---|---|--|----------------|----------------|----------------|------------------|----------------|----------------|----------------|--|------------------|--------|-------------|---|
| | | | | | 22-23 | 22-23 | 22-23 | Date | 2022/23 | 2022/23 | 2022/23 | | | | | |
| Registrations | | | | | | | | | | | | | | | | |
| Connected communities | CNC03 | % of Deaths registered within 5 calendar days | <p>Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb</p> <p>▲ Actual - - - Target — Trend</p> | (Benchmarking available if needed as all authority performance data can be downloaded) | 66.7% | 70.6% | 75.4% | 71.7% | 72.9% | 71.9% | 77.0% | ↑G | Higher is better | 80% | 70% - 80% | On review of the performance statistics, the Service consulted the General Register Office for clarification on which GRO data set they monitor the service for completed Death Registrations within 5 calendar days. The data submitted by the Service previously included deaths reported to the Coroner for a judicial decision, which naturally adds an additional layer resulting in an increased time prior to final Death Registration. The GRO have confirmed with the Service the relevant data set to use for this KPI. Please note the performance attainment figures for the service have increased with using the relevant data set. The performance of the service is now joint 1st in the region year to date. |
| | | | | | 364 out of 546 | 356 out of 504 | 473 out of 627 | 1531 out of 2134 | 156 out of 214 | 194 out of 270 | 144 out of 187 | | | | | |
| Connected communities | CNC04 | % of Births registered within 42 days | <p>Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb</p> <p>▲ Actual - - - Target — Trend</p> | (Benchmarking available if needed as all authority performance data can be downloaded) | 92.2% | 84.0% | 97.4% | 92.5% | 99.1% | 93.5% | 96.4% | ↑G | Higher is better | 90% | 86.5% - 90% | The service hasn't noticed any delays in birth registrations after increasing death registration capacity by 50% throughout January. Birth registrations are available within the district 7-10 days after 1st contact with the service. |
| | | | | | 683 out of 741 | 795 out of 946 | 821 out of 843 | 2816 out of 3043 | 220 out of 222 | 244 out of 261 | 243 out of 252 | | | | | |

Customer & Governance

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to | December | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|--------------------------|---------|---|---------------------|-----------|---|---|--|---|---|--|--|--|------------------|-------------------------------------|-------------------------------------|---|
| | | | | | 22-23 | 22-23 | 22-23 | Date | 2022/23 | 2022/23 | 2022/23 | | | | | |
| Customer Services | | | | | | | | | | | | | | | | |
| Modern public services. | MPS30 | Total number of Stage 1 complaints received by NNC (excluding children's services complaints) | | n/a | 413 | 436 | 425 | 1604 | 104 | 187 | 143 | ↓G | Lower is better | No target - tracking indicator only | No target - tracking indicator only | Fewer complaints were received in February, however no specific trend identified. |
| Modern public services. | MPS32 | Total number of complaints escalated to stage 2 | | n/a | 22 | 36 | 39 | 136 | 16 | 31 | 8 | ↓G | Lower is better | No target - tracking indicator only | No target - tracking indicator only | Fewer customers were dis-satisfied with the Council's stage 1 replies than normal last month and asked for their cases to be escalated. However no specific service areas saw the bulk of the change. |
| Modern public services. | MPS31 | Total number of complaints received by NNC | | n/a | 435 | 472 | 464 | 1740 | 120 | 218 | 151 | ↓G | Lower is better | No target - tracking indicator only | No target - tracking indicator only | Less complaints were received in February as noted above. |
| Modern public services. | MPS34 | % of complaints answered within the Service Level Agreement (20 Working days or agreed extension) | | TBD | 57% | 65% | 61% | 61% | 62% | 61% | 65% | ↑G | Higher is better | 90% | 81% - 90% | Performance improved in February. Many cases are complex and require longer investigations. This is a perennial issue with services and complaints responses can be delayed for a number of reasons. Common issues include: Children's – most complaints we deal with involve schools not under our control and also issues regarding matters such as Educational learning plans, that take several days to gain further detail on, then to take a view on the way forward. Adults – care plans where we need to liaise with busy social work teams, care homes and relatives in often demanding and emotional settings. Housing – where we need to talk to customers who may be homeless or in temporary accommodation, where investigations can be lengthy and need longer than the 20-day standard. Despite these issues, all efforts are being made to improve response times. We are about to increase resource in complaints to provide a more robust complaints management mechanism, by putting more capacity into chasing complaints in service areas so that they hit complaints standards. |
| Modern public services. | MPS35 | % of complaints upheld | | TBD | 26% | 26% | 3% | 17% | 4% | 7% | 5% | ↓G | Lower is better | 20% | 20% - 22% | Numbers of complaints upheld remains low. No concerning trends have been identified and services are working hard to prevent recurrences. |
| Modern public services. | MPS37 | Total number of notices received of complaints under investigation by Ombudsman | | n/a | 10 | 10 | 9 | 36 | 3 | 3 | 4 | ↑ | Lower is better | No target - tracking indicator only | N/A | The volume of customers contacting the Ombudsman after exhausting the Council's complaints process remain low. |
| Modern public services. | MPS39 | % of calls answered out of total calls received in customer services | | n/a | 84.50% | 82.82% | 86.91% | 84.73% | 86.31% | 83.77% | 87.05% | ↑G | Higher is better | 90% | 81% - 90% | Performance improved in February. |
| Modern public services. | MPS40 | % Calls answered within 60 seconds in customer services | | TBD | 77.09% | 72.41% | 79.98% | 75.56% | 78.19% | 72.93% | 75.95% | ↑G | Higher is better | 80% | 72% - 80% | Performance improved in February. |
| Modern public services. | MPS41 | Number of customers helped by customer services | | n/a | 138303 | 146069 | 126705 | 503621 | 36648 | 46576 | 45968 | N/A | N/A | No target - tracking indicator only | N/A | These are the volumes of the different types of customer contact that Customer Services had in January. |
| Modern public services. | MPS42 | Number of customer interactions to customer services - split by telephone/face-to-face, email and online form | | n/a | Telephone 90829 Face to Face 7120 E-Forms 9098 Emails 29528 Web Chat 1728 | Telephone 98611 Face to Face 7739 E-Forms 8838 Emails 29592 Web Chat 1289 | Telephone 84472 Face to Face 7422 E-Forms 6173 Emails 19669 Web Chat 978 | Telephone 332400 Face to Face 30458 E-Forms 29350 Emails 107388 Web Chat 4325 | Telephone 25149 Face to Face 2879 E-Forms 1802 Emails 6537 Web Chat 281 | Telephone 30078 Face to Face 3496 E-Forms 1527 Emails 11131 Web Chat 344 | Telephone 28410 Face to Face 3225 E-Forms 1786 Emails 12547 Web chat 0 | ↑ | N/A | No target - tracking indicator only | N/A | |
| Modern public services. | MPS43 | % of Face-to-Face Customers with an appointment seen within 5 minutes (within customer services team) | | TBD | 99.8% | 99.9% | 99.8% | 99.8% | 99.8% | 99.8% | 100.0% | ↑G | Higher is better | 95% | 85.5% - 95% | |

Finance Services

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date 2022/23 | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb or Latest) | Polarity | Target | Tolerance | Comments | | |
|--------------------------------|---------|--|---|--|--------------------|--|--|--|---|---|---|---|------------------|---|--|---|--|
| Finance | | | | | | | | | | | | | | | | | |
| Modern Public Services | MPS01 | % of invoices paid within 30 days |  | n/a | 97.87% | 97.1% | 98.1% | 97.80% | 98.1% | 97.9% | ↓ | Higher is better | 95% | 95% subject to change from SLA review (Tolerance TBC) | Whilst there is a minor downward movement, this KPI has maintained a high level of output again this month and over-achieved target again which has continued throughout the year. | | |
| | | | | | 9,342 out of 9,545 | 9,477 out of 9,761 | 9,456 out of 9,635 | 34,367 out of 35,158 | 3,157 out of 3,219 | 2,935 out of 2,998 | | | | | | | |
| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | February 2021/22 | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date 2022/23 | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb or Latest) | Polarity | Target | Tolerance | Comments | |
| Revenues & Benefits | | | | | | | | | | | | | | | | | |
| Modern Public Services | MPS05 | % of council tax collected in the year debit raised |  | 95.92% (All English Authorities 2020/21 - LG Inform) | 94.94% | 29.31% (YTD) 104.60% achieved of the monthly target (28.00%) | 57.69% (YTD) 103.22% achieved of the monthly target (56.00%) | 84.67% (YTD) 100.80% achieved of the monthly target (84.00%) | 95.37% (YTD) 99.3% achieved of the monthly target (96.00%) | 93.53% (YTD) 99.5% achieved of the monthly target (94.00%) | 95.37% (YTD) 99.34% achieved of the monthly target (96.00%) | ↓ | Higher is better | 96% (to date) 98.5% (Annual target) | No tolerance | The collection rate has dropped slightly below target. Close monitoring will continue to determine if this is a change in payment behaviours due to the cost of living crisis or other changes which are resulting in delays in payments. YTD - The % is the same as the current month reported, as the collection rate is based on the 'estimated net collectable debit' for the whole year. The amount collected is cumulative. | |
| | | | | | £4,017,008.87 | £66,714,521.73 (collected in Q1) | £64,645,502.55 (collected in Q2) | £61,925,143.03 (collected in Q3) | £218,084,593.50 (collected YTD) | £20,344,024.41 (collected in Jan) | £4,255,391.78 (collected in Feb) | | | | | | |
| Modern Public Services | MPS04 | % of business rates collected in the year debit raised |  | 93.74% (All English Authorities 2020/21 - LG Inform) | 91.89% | 28.87% (YTD) 103.11% achieved of the monthly target (28.00%) | 56.80% (YTD) 101.43% achieved of the monthly target (56.00%) | 83.12% (YTD) 98.95% achieved of the monthly target (84.00%) | 93.83% (YTD) 97.74% achieved of the monthly target (96.00%) | 89.36% (YTD) 95.06% achieved of the monthly target (94.00%) | 93.83% (YTD) 97.74% achieved of the monthly target (96.00%) | ↑G | Higher is better | 96% (to date) 98.5% (Annual target) | No tolerance | The collection rate has dropped below target, however there have been some significant changes from the Valuation Office Agency which has led to large Rateable Value reductions and subsequent refunds which impacts the collection rate in the short term, however the direction of travel has improved and movement is back towards target. Monitoring will continue. YTD - The % is the same as the current month reported, as the collection rate is based on the 'estimated net collectable debit' for the whole year. The amount collected is cumulative. | |
| | | | | | £6,489,318.24 | £42,054,046.57 (collected in Q1) | £46,434,431.64 (collected in Q2) | £36,816,402.19 (collected in Q3) | £134,378,576.52 (collected YTD) | £6,696,480.66 (collected in Jan) | £6,375,215.46 (collected in Feb) | | | | | | |

| Place & Economy | | | | | | | | | | | | | | | |
|---------------------------------|---------|--|---------------------|-------------------------------------|-----------------|-----------------|-----------------|--------------|-----------------|------------------|--|------------------|--------|------------------|--|
| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
| Assets & Environment | | | | | | | | | | | | | | | |
| Modern Public Services | MPS26 | % occupancy of Corby Enterprise Centre | | Benchmark/ compare to each other | 96.23% | 96.23% | 94.34% | 98.11% | 96.23% | 98.11% | ↑G | Higher is better | 95% | 90% - 95% | We have received notice on 6 units for March but have already let 3 of these units. Two taking occupancy in March and 1 in May – Several viewings completed. Currently advertising on website, social media and Rightmove. |
| | | | | | | | | | | | | | | | |
| Modern Public Services | MPS27 | % occupancy of Corby Innovation Hub | | | | | 92.45% | 88.68% | 88.68% | 88.68% | 88.68% | 88.68% | → | Higher is better | 95% |
| | | | | | 49 of 53 let | 47 of 53 let | 47 of 53 let | 47 of 53 let | 47 of 53 let | | | | | | |
| Modern Public Services | MPS28 | % occupancy of East Northamptonshire Enterprise Centre | | Benchmark/ compare to each other | 58.54% | 60.98% | 59.76% | 45.12% | 62.19% | 45.12% | ↓R | Higher is better | 90% | 85%-90% | Roof works now completed, compound being decommissioned. More tenants left in part due to economic climate. Bizspace to provide marketing strategy to increase occupancy. |
| | | | | | | | 48 out of 82 | 50 out of 82 | 49 out of 82 | 37 out of 82 | | | | | |
| | | | | | | | | | | | | | | | |
| Modern Public Services | MPS24 | Rate of return on commercial stock (%) | | n/a | 5.45% | 5.45% | 5.45% | 5.55% | 5.54% | 5.55% | ↑G | Higher is better | 5.41% | 4.91% - 5.57% | Portfolio continues to perform well with a large back rent agreed on the Wellingborough estate at the end of December. February showed a slight further increase due to the letting of 2 units completing on properties that had been void for a number of months. |

| Place & Economy | | | | | | | | | | | | | | | |
|----------------------------------|---------|---|---------------------|---|----------------|----------------|----------------|------------------|-----------------|------------------|--|------------------|-----------|-----------|---|
| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
| | | | | | 22-23 | 22-23 | 22-23 | | | | | | | | |
| Growth & Regeneration | | | | | | | | | | | | | | | |
| Modern Public Services | MPS29 | % occupancy of Chesham House Kettering | | Not relevant to benchmark as it's so unique. | 61.54% | 61.54% | 69.23% | 69.23% | 69.23% | 69.23% | ➔ | Higher is better | 70% | 65% - 70% | <p>9 of the 13 office spaces are occupied which remains the same as last month. This has occurred during a period where the facilities are undergoing significant building works externally. Assets are reviewing options for the site, linked to our rationalisation programme but also ongoing viability. This review should be complete in the next 1-2 months thereafter we will be presenting options through the AMRG.</p> <p>During February 2023 there were 2 live enquiries that would increase occupancy to 84% (one an existing tenant expanding and one new tenant enquiry). In addition there is a tentative 3rd enquiry which would take Chesham house to within one office of being FULL OCCUPANCY. Currently the target of 70% has been achieved over the last six month period in 22/23.</p> |
| | | | | | 8 out of 13 | 8 out of 13 | 9 out of 13 | 9 out of 13 | 9 out of 13 | 9 out of 13 | | | | | |
| Safe and thriving places | STP15 | Percentage of major planning applications determined within 13 weeks (or within agreed extension of time) | | 88% (Q3 021/22 All English Authorities - LG Inform) | 85% | 100% | 97% | 93.33% | 80% | 100% | ⬆️G | Higher is better | 90% | 88% - 90% | <p>Performance in the determination of 'Major' applications has improved this month and remains above target levels. The year to date performance is also above the national benchmark. Staff resourcing remains a significant issue both locally and in the wider national context.</p> |
| | | | | | 17 out of 20 | 23 out of 23 | 29 out of 30 | 84 out of 90 | 8 out of 10 | 7 out of 7 | | | | | |
| Safe and thriving places | STP16 | Percentage of minor planning applications determined within 8 weeks (or within agreed extension of time) | | 83% (Q3 2021/22 All English Authorities - LG Inform) | 89.90% | 88.07% | 75.96% | 83.17% | 80% | 76.19% | ⬇️ | Higher is better | 85% | 83% - 85% | <p>Performance in the determination of 'Minor' applications has fallen again this month. Capacity remains the key issue and the recruitment of permanent staff to address capacity issues is underway to correct this. Year to date performance remains above the national benchmark although slightly below the NNC (North Northamptonshire Council) target.</p> |
| | | | | | 89 out of 99 | 96 out of 109 | 79 out of 104 | 336 out of 404 | 40 out of 50 | 32 out of 42 | | | | | |
| Safe and thriving places | STP17 | Percentage of other (including householder applications) planning applications determined within 8 weeks (or within agreed extension of time) | | 85% (Q3 2021/22 All English Authorities - LG Inform) | 87.97% | 88.64% | 80.12% | 85.79% | 81.18% | 93.33% | ⬆️G | Higher is better | 88% | 86% - 88% | <p>Performance in the determination of 'Other' application has improved this month. Year to date performance remains above the national benchmark but marginally below the NNC (North Northamptonshire Council) target. Capacity remains an issue for the service but is being addressed through the recruitment of permanent staff which is underway and therefore we anticipate to see improvement in this particular area in the coming months.</p> |
| | | | | | 307 out of 349 | 320 out of 361 | 262 out of 327 | 1014 out of 1182 | 69 out of 85 | 56 out of 60 | | | | | |
| Safe and thriving places | STP19 | Total number of planning applications received - ALL TYPES of applications | | Not relevant to benchmark. | 633 | 576 | 519 | 2026 | 172 | 126 | ⬇️ | N/A | No target | N/A | |

Place & Economy

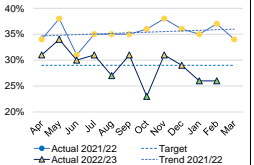
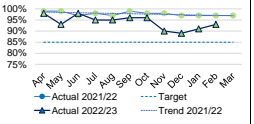
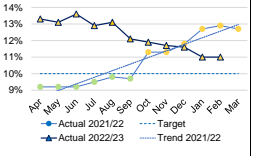
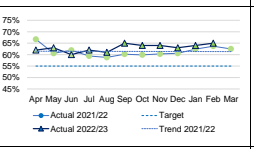
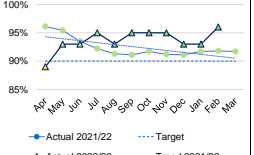
| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|----------------------------------|---------|--------------------------------------|---------------------|-----------------------------------|-----------|-----------|-----------|--------------|-----------------|------------------|--|------------------|--|---|---|
| | | | | | 22-23 | 22-23 | 22-23 | | | | | | | | |
| Safe and thriving places | STP21 | % of Full fibre coverage | | 47.3% (England) - Think Broadband | 49.2% | 55.2% | 61.1% | 63.8% | 62.8% | 63.8% | ↑G | Higher is better | 40% of Premises countywide (Dec 2023) 80% of Premises countywide (Dec 2028) | Dec 2023: <5% Green 5%-10% Amber >10% Red | Strong performance countywide when compared to the average full fibre coverage for the same period in England (63.8% across Northamptonshire compared to 47.3%). The 40% full fibre countywide coverage target by December 2023 was achieved early (March 2022) and coverage in both NNC & WNC areas respectively has now exceeded this target. Full fibre coverage in North Northants remains on an upward trajectory at 41.8% in February 2023 compared to 40.2% last month. With announced Openreach and CityFibre plans in NN, we expect to see improved growth in full fibre coverage in the coming year. Full fibre in rural NN is out-performing rural classifications for England/Wales with coverage at 47.4% compared to 39.9%, aided by Gigaclear full fibre serving rural communities. Year to date is latest position. |
| Safe and thriving places | STP22 | % of gigabit coverage | | 75.1% (England) - Think Broadband | 79.9% | 81.2% | 84.2% | 85.1% | 84.7% | 85.1% | ↑G | Higher is better | 75% of premises gigabit capable (Dec 2023) 90% of premises gigabit capable (Dec 2028) | Dec 2023: <5% Green 5%-10% Amber >10% Red | A strong performance countywide when compared to the average gigabit coverage for the same period in England (85.1% across Northamptonshire compared to 75.1% in England). The 75% countywide gigabit coverage target by December 2023 was achieved two years early (Dec 2021). We expect the upward trajectory for gigabit coverage to continue but at a much slower rate now going forward as remaining areas are largely rural or other hard to reach. Coverage in NN remains on an upward trajectory, with 83.6% availability in February compared to 83.3% last month. Coverage in urban NN has almost reached 90% (89.5% February 2023). Rural coverage in NN was 75% which strongly out-performs average rural gigabit coverage for England/Wales at only 45.4%. Year to date is latest position. |
| Greener, sustainable environment | GSE01 | Number of E-Scooter trips | | n/a | 47,178 | 54,873 | 36,514 | 508,832 | 37,390 | 37,520 | ↑G | Higher is better | Track for first year then increase trips year on year. | N/A | Monthly figures increased from January to February. Year-on-year trend shows increased popularity with 2023 figures significantly higher than for February 2022. Year to date is cumulative position. |
| Greener, sustainable environment | GSE02 | Number of E-Scooter users | | n/a | 5,155 | 5,494 | 4,250 | 53,898 | 3,833 | 3,982 | ↑G | Higher is better | Track for first year then increase users year on year | N/A | Monthly user figures increased from January to February. Year-on-year trend shows increased users than February 2022. Year to date is cumulative position. |
| Greener, sustainable environment | GSE03 | Co2 saving from E-Scooters (tonnes) | | n/a | 7.8 | 9.7 | 6.5 | 89 | 6.9 | 6.8 | ↓ | Higher is better | Track for first year then increase CO2 savings year on year | N/A | CO2 savings have decreased from January to February. Year-on-year trend shows an increase in CO2 savings with figures higher than for February 2022. Year to date is cumulative position. |

| Place & Economy | | | | | | | | | | | | | | | |
|-----------------------------|---------|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|------------------------------|------------------------------|------------------------------|--|------------------|-------------------------------------|--------------|--|
| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
| | | | | | 22-23 | 22-23 | 22-23 | | | | | | | | |
| Highways & Waste | | | | | | | | | | | | | | | |
| Safe and thriving places | STP29 | Number of Defects Outstanding on the network (at end of period), split by category | | n/a | 829 | TBD | TBD | TBD | N/A | N/A | N/A | Lower is better | No target - tracking indicator only | N/A | Unlike indicators STP30 and STP31 below it has not been possible to provide the data for this indicator owing to the change of highway contracts and a review of the monitoring system for outstanding defects on the network which has not yet been completed. This is being developed with the contractor with the intention of providing it in future months. |
| | | P1 (Target response time within 2 hours) | No P1 defects | TBD | TBD | TBD | N/A | N/A | N/A | | | | | | |
| | | P2 (Target response time within 7 days) | 13 | TBD | TBD | TBD | N/A | N/A | N/A | | | | | | |
| | | P3 (Target response time within 28 days) | 252 | TBD | TBD | TBD | N/A | N/A | N/A | | | | | | |
| | | P4 (Target response time within 26 weeks) | 564 | TBD | TBD | TBD | N/A | N/A | N/A | | | | | | |
| Safe and thriving places | STP30 | Number of Defects Repaired in the network in period, split by category | | n/a | 5462 | 4563 | 3610 | 16142 | 1259 | 1248 | ↓ | Higher is better | No target - tracking indicator only | N/A | The number of defects repaired across the highways network remains strong for this time of year when the crews are required to respond to other maintenance issues related to winter gritting. |
| | | P1 (Target response time within 2 hours) | No P1 defects | No P1 defects | 1 | 28 | 9 | 18 | ↑G | | | | | | |
| | | P2 (Target response time within 7 days) | 423 | 177 | 108 | 908 | 116 | 84 | ↓R | | | | | | |
| | | P3 (Target response time within 28 days) | 3492 | 2380 | 1654 | 8458 | 395 | 537 | ↑G | | | | | | |
| | | P4 (Target response time within 26 weeks) | 1547 | 2006 | 1847 | 6748 | 739 | 609 | ↓R | | | | | | |
| Safe and thriving places | STP31 | Percentage of defects responded to within the timeframes specified, split by category | | n/a | 98.86% 5400 out of 5462 | 97.9% 4467 out of 4563 | 87.87% 3172 out of 3610 | 95.29% 15382 out of 16142 | 90.95% (1145 out of 1259) | 95.99% (1198 out of 1248) | ↑G | Higher is better | P1 and P2 97.5% P3 and P4 90% | No Tolerance | The targets have been met across all category of defect this month |
| | | P1 (Target response time within 2 hours) | No P1 defects | No P1 defects | 100% (1 out of 1) | 100% (28 out of 28) | 100% (9 out of 9) | 100% (18 out of 18) | → | | | | | | |
| | | P2 (Target response time within 7 days) | 100% 423 out of 423 | 99.44% 176 out of 177 | 100% (108 out of 108) | 99.56% (904 out of 908) | 99.14% (115 out of 116) | 97.62% (82 out of 84) | ↓ | | | | | | |
| | | P3 (Target response time within 28 days) | 98.71% 3447 out of 3492 | 96.85% 2305 out of 2380 | 79.75% 1319 out of 1654 | 93.32% 7893 out of 8458 | 81.27% (321 out of 395) | 93.3% (501 out of 537) | ↑G | | | | | | |
| | | P4 (Target response time within 26 weeks) | 98.9% 1530 out of 1547 | 99% 1986 out of 2006 | 94.42% 1744 out of 1847 | 97.17% 6557 out of 6748 | 94.72% (700 out of 739) | 98.03% (597 out of 609) | ↑G | | | | | | |

Place & Economy

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|----------------------------|---------|---|---------------------|--|------------------|------------------|------------------|------------------|------------------|------------------|--|------------------|--------------------|-------------|---|
| | | | | | 22-23 | 22-23 | 22-23 | | | | | | | | |
| Regulatory Services | | | | | | | | | | | | | | | |
| Safe and thriving places | STP32 | % of food establishments in the area broadly compliant with food hygiene law | | n/a | 93.15% | 93.93% | 94.66% | 96.01% | 97.39% | 96.01% | ↓ | Higher is better | 95% | 90%-95% | The rate has slightly reduced, but remains above the target level. This is due to a slight decrease in the number of premises rating as broadly compliant at their recent inspection. The teams will continue to focus upon poor performing businesses which pose the highest risk to food safety and target these businesses for follow up action. |
| | | | | | 2910 out of 3124 | 2939 out of 3129 | 2942 out of 3108 | 2960 out of 3083 | 2983 out of 3063 | 2960 out of 3083 | | | | | |
| Safe and thriving places | STP33 | % of Local Land Charges searches processed within 10 working days | | n/a | 82.08% | 85.31% | 94.92% | 88.69% | 99.15% | 100.00% | ↑G | Higher is better | 95% | 85.5% - 95% | Overachieved our target performance in February 2023 with all of our four offices achieving 100% searches returned within 10 working days. |
| | | | | | 435 out of 530 | 424 out of 497 | 355 out of 374 | 1474 out of 1662 | 116 out of 117 | 144 out of 144 | | | | | |
| Safe and thriving places | STP35 | % of Rogue trading activities tackled (rogue traders subject to a Trading Standards intervention) | | Trading standards institute is the national body - look for benchmarks there | 100% | 100% | 100% | 100% | 100% | 100% | → | Higher is better | 100% | N/A | This indicator tracks the number of referrals received in respect of rogue trading and our response via a written intervention with the trader concerned. To date all referrals have been responded to, so performance remains at 100%. 1 x TN for exposing for sale food past its use by date. 1 x TN following sale of unsafe sofa 1 x TN following poultry not housed in line with AIPZ requirements. 1 x TN following trader agreeing to carry out work at two properties and obtaining a deposit before failing to carryout agreed work. 1 x TN following advertising illicit cigarettes via Facebook. 1 x TN following seizure of illegal vapes. 2 x TN following seizure of illegal cigarettes. 1 x TN following the street selling of counterfeit goods. 1 x TN following allegation of UAS vapes. 1 x TN following test purchase of vape by person under the age of 18. 1 x TN following aggressive practices both verbal and physical when consumer tries to exercise their civil rights. |
| | | | | | 36 out of 36 | 38 out of 38 | 24 out of 24 | 118 out of 118 | 8 out of 8 | 12 out of 12 | | | | | |
| Safe and thriving places | STP13 | Number of Private Sector Disabled Facilities Grants (DFG) cases on waiting list | | n/a | n/a | n/a | n/a | n/a | 45 | 16 | ↓ | N/A - Tracking | TBC | N/A | The number of DFG (disabled facilities grant) cases on the waiting list has reduced by half again in the last month and significantly fallen from the beginning of the financial year. This is as a result of the successful recruitment to the two vacant surveyor posts and the implementation of the architectural services contract. |
| Safe and thriving places | STP14 | Number of Private Sector Disabled Facilities Grants completions | | n/a | 46 | 38 | 48 | 169 | 21 | 16 | ↓ | Higher is better | 168 (14 per month) | TBD | The number of DFG (disabled facilities grant) completions has continued to demonstrate good performance again this month exceeding the monthly target, putting us on track to meet the forecasted spend under the capital budget, by the end of March. |

Children's Services

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|---|----------------|--|--|--|---------------|---------------|---------------|---------------|---------------|---------------|--|------------------|--------|-----------|--|
| | | | | | 22-23 | 22-23 | 22-23 | | 2022/23 | 2022/23 | | | | | |
| Children's Trust (This data is for the whole of Northamptonshire) | | | | | | | | | | | | | | | |
| Better, brighter futures | BBF05 (KPI 2) | % of referrals with a previous referral within 12 months |  | 22.7% (All English Authorities 2021 - LAIT) | 32% (2,228) | 30% (2,232) | 28% (2,117) | 29% (7,990) | 26% (647) | 26% (621) | ➔ | Lower is better | 29% | 25% - 40% | Performance remains the same this month and better than target, whilst still remaining an area of ongoing focus with audit and review for learning. The dedicated education roles in MASH are working positively with schools to ensure appropriate referrals. Work with all partners continues to ensure appropriate and robust application of thresholds. Steps have been taken to strengthen the Early Help partnerships with Partnership Support Team (Early Help MASH) being placed in the MASH pods and a leaner step down process. It is anticipated that the strengthened model in MASH and developments in CFSS/Early Help will continue to support appropriate reduction going forward. The high number of cases stepping down is presenting challenges in regards to capacity in Family Support/Early help partnership. |
| Better, brighter futures | BBF06 (KPI 3) | % of single assessments authorised within 45 working days |  | 88% We are in the process of identifying more up to date benchmark data for this PI. | 96% (2,329) | 95% (2,419) | 91% (2,671) | 94% (8,884) | 91% (745) | 93% (718) | ⬆️G | Higher is better | 85% | 85% - 95% | Assessment timescales remain consistently above target and national average, increasing to 93% this month. All managers monitor this very closely via daily reports. A narrative is provided for cases that go beyond 45 days and this remains a very small minority. Whilst staffing has presented challenges due to vacancies and higher levels of staff sickness in DAAT, there is now positive move and we had a higher than average number of new starters in January 23. In addition to timeliness, we work on increasing the quality of assessments and more effective use of SoS in our interventions. |
| Better, brighter futures | BBF07 (KPI 8) | % Children in care with three or more placements in the previous 12 months |  | 9% (All English Authorities 2020/21 - LG Inform) | 13.6% (1,188) | 12.1% (1,226) | 11.6% (1,229) | 11.0% (1,232) | 11.0% (1,233) | 11.0% (1,232) | ➔ | Lower is better | 10% | 5% - 15% | Performance has remained the same this month. Consideration of various options to improve sufficiency is continuing, including exploration of capital investment, additional in house resources, as well as improved engagement with the market. Planning permission granted for two new emergency homes and valuing care project has commenced. Through improved edge of care arrangements, the close oversight on admissions to care, and the developments within placement sufficiency, we are confident we can reduce the need for child to move home as frequently. Positively, Childrens Home Capital Programme application with the DfE has been successful, and that should also support progress in this area. COVID: Placement sufficiency remains a challenge, sustained performance in this work should also have a positive impact on KPI 7 |
| Better, brighter futures | BBF08 (KPI 9) | % of young people now aged 17 - 21 and in employment, education or training who were looked after when aged 16 |  | 53% (All English Authorities 2020/21 - LG Inform) | 60% (677) | 65% (672) | 63% (666) | 65% (687) | 64% (681) | 65% (687) | ⬆️G | Higher is better | 55% | 50% - 60% | This month has seen performance increase to 65%, comparing favourably with 58% across England. Focus in this area continues to be driven through arrangements with local colleges, the virtual school and the senior personal advisor (Education and Employment) with further review of contracted arrangements (Prospects) to be undertaken to ensure we have the best approach/support for young people. Work with councils to ensure EET opportunities and support is in place for our care leavers. COVID: has had a significant impact on the mental health and wellbeing of care leavers, targeted work support care leavers to access EET |
| Better, brighter futures | BBF09 (KPI 10) | % of young people now aged 17 - 21 and living in suitable accommodation who were looked after when aged 16 |  | 89% (All English Authorities 2020/21 - LG Inform) | 93% (677) | 95% (672) | 93% (666) | 97% (687) | 93% (681) | 96% (687) | ⬆️G | Higher is better | 90% | 85% - 95% | Performance for this month increased to 96%, still above the target of 90%. We know that we have some young people in unsuitable accommodation, including a number of young people sentenced to custody, and some who have no accommodation at all. We work hard to address this, tenaciously seeking to engage with young people who may see our attempts at support as interference. The care leavers housing protocol is in place and work is being progressed under the governance of a strategic group, which includes a review of the housing panels and engagement with the housing associations. Helpful discussions with colleagues in the Councils is placing the housing sufficiency needs of care leavers as central to their housing strategies. The Accommodation Transitions Panel is now in operation and ensures all young people have a comprehensive, accommodation-focused, shared, and timely transition plan. |

Children's Services

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|---|--------------|--|---------------------|--|-----------|-----------|----------------------------------|--------------|---------|----------|--|------------------|---------------------|-----------|---|
| | | | | | 22-23 | 22-23 | 22-23 | | 2022/23 | 2022/23 | | | | | |
| Learning, Skills & Education | | | | | | | | | | | | | | | |
| Better, brighter futures | BBF14 | Number of schools rated inadequate by Ofsted | | n/a | 5 | 5 | 3 | 3 | 3 | 3 | → | Lower is better | n/a - Tracking | n/a | <p>February Comment: One new result received in Feb 2023. School moved from RI (requires improvement) to Good.</p> <p>2 primary schools and 1 secondary school remain inadequate all of which are academies.</p> <p>16 primary academies remain RI (requires improvement) and 4 Secondary Academies.</p> <p>3 LA (Local Authority Maintained) Primary Schools remain RI.</p> <p>With plans developing to share pupil outcome data with each Locality Area (begin in the Spring) and a strategy to be written in co-production which will develop cross school-working on the key areas for improvement, it is hoped that over time, measures can be agreed and achieved which will reduce the number of RI schools as well as raise standards, bringing the North at least in line with national.</p> |
| TBC | BBF12 (LS3a) | % of primary schools judged as good or outstanding by Ofsted | | 89% | 76.6% | 79.3% | 80.2% | 81.1% | 80.2% | 81.1% | ↑G | Higher is better | Target under review | n/a | <p>February Comment: One new result received in Feb 2023. School moved from RI (requires improvement) to Good taking the percentage of Good and Outstanding up to 81.1%.</p> |
| TBC | BBF13 (LS4a) | % of secondary schools judged as good or outstanding by Ofsted | | 79% | 75% | 75% | 75% | 75% | 75% | 75% | → | Higher is better | Target under review | n/a | <p>February Comment: The percentage of secondary schools judged as good or outstanding has remains at 75%, no further inspections have taken place.</p> |
| Better, brighter futures | BBF15 (LS6a) | Rate of suspensions in primary aged pupils | | 1% (All English Authorities 2019/20 - LAIT) | n/a | n/a | n/a as YTD is Academic year only | 1.08% | 0.18% | 0.15% | ↓G | Lower is better | Target under review | n/a | <p>December Comment: It can be seen that the rate of suspensions fluctuate throughout the school year. This is particularly apparent during a time of end of year exams are taking place. The EIP (Educational Inclusion & Partnership) Team are engaging with primary schools particularly where there are higher suspensions or potential suspensions being flagged up to provide support and offer services that may help the school and / or parent. The collaborative work and drive from the EIP Team with schools is having a positive effect.</p> |
| Better, brighter futures | BBF16 (LS7a) | Rate of suspensions in secondary aged pupils | | 7.43% (All English Authorities 2019/20 - LAIT) | n/a | n/a | n/a as YTD is Academic year only | 8.53% | 1.71% | 1.30% | ↓G | Lower is better | Target under review | n/a | <p>December Comment: The number of suspensions in secondary schools fluctuates throughout the school year, and in this month has fallen slightly. The EIP (Educational Inclusion & Partnership) Team are working hard with the schools to look at positive ways to lower the figures. This means engaging with schools and getting involved with other agencies to support the schools. Training/ support for schools is now being developed and discussed in the EIP Team as to how they too can increase their own PD Toolbox to support and give advice to schools.</p> |

Children's Services

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|--------------------------|-----------------|---|---------------------|--|--|--|--|-----------------|----------------|----------------|--|------------------|---------------------|-----------|--|
| | | | | | 22-23 | 22-23 | 22-23 | | 2022/23 | 2022/23 | | | | | |
| Better, brighter futures | BBF17 (NI 114a) | Rate of Permanent exclusions from school - Total | | 0.06% (All English Authorities 2019/20 - LAIT) | n/a | n/a | n/a as YTD is Academic year only | 0.080% | 0.016% | 0.011% | ↓G | Lower is better | Target under review | n/a | December Comment: EIPT (Educational Inclusion & Partnership Team) are making schools more accountable for their actions but there is still work to be done with schools where we are supporting and yet challenging them. Specialist Outreach services have been created to support inclusion and train staff to manage behavioural issues. |
| | | | | | n/a | n/a | n/a | 45 out of 55967 | 9 out of 55967 | 6 out of 55967 | | | | | |
| Better, brighter futures | BBF18 (SEN1) | % of EHC (education health care) plans completed in month issued within 20 weeks (excluding exceptions) | | 59.9% All English Authorities 2021 - LAIT) | 63.2% | 40.3% | 28.0% | 50.3% | 100.0% | 81.6% | ↓R | Higher is better | Target under review | n/a | January Comment: Greater focus this month has taken place on in-time assessments with some further clearing of out of time assessments. Whilst the action plan in place to target improved performance for assessments undertaken on time is having an overall sustained impact on performance, weekly reporting has now been established to oversee timescales and allocation of workload to ensure equity and address gaps in performance. |
| | | | | | 86 out of 136 | 93 out of 231 | 23 out of 82 | 257 out of 511 | 24 out of 24 | 31 out of 38 | | | | | |
| Better, brighter futures | BBF18b | % of EHC (education health care) plans completed in month issued within 20 weeks (including exceptions) | | 57.9% All English Authorities 2021 - LAIT) | 56.2% | 38.6% | 49.7% | 49.6% | 66.7% | 75.6% | ↑G | Higher is better | Target under review | n/a | January Comment: Greater focus this month has taken place on in-time assessments with some further clearing of out of time assessments. Whilst the action plan in place to target improved performance for assessments undertaken on time is having an overall sustained impact on performance, weekly reporting has now been established to oversee timescales and allocation of workload to ensure equity and address gaps in performance. |
| | | | | | 86 out of 153 | 95 out of 246 | 86 out of 173 | 322 out of 649 | 24 out of 36 | 31 out of 41 | | | | | |
| Better, brighter futures | BBF19 (E1) | Percentage of school age Child/Children in Care (CIC) who had a PEP in the previous academic term. | | n/a | 96% | 97% | 97% | 98% | 98% | 98% | → | Higher is better | 95% | 90% - 95% | PEP compliance remains above the 95% target. The Virtual School provide an effective system and process that ensures that PEPs are completed consistently. This includes: commissioning and maintaining an online PEP system, ensuring those who require it have access to the system, providing training and guides on using the system, providing regular communication and prompts to partners to book and hold the meeting, and providing regular reporting to NCT on the progress of meetings held. |
| | | | | | 346 out of 355 | 346 out of 355 | 346 out of 355 | 324 out of 332 | 324 out of 332 | 324 out of 332 | | | | | |
| Better, brighter futures | BBF22 | Number of children without a school place | | TBC | n/a Not reported until Nov 22 - Monthly thereafter | n/a Not reported until Nov 22 - Monthly thereafter | n/a Not reported until Nov 22 - Monthly thereafter | 102 | 128 | 102 | ↓G | Lower is better | Target under review | n/a | December Comment: Two new officers have been appointed who start at the end of August, but will take time to train. One temp has started this week to help admin to add applications to the system starting. Three further posts have been advertised to complete the new structure of the School Admissions team. Of concern is the backlog as we expect a further increase in the number of applications for a September start. |

Adults, Communities & Wellbeing

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|--------------------------|---------|--|---------------------|-----------|-----------------|------------------|-----------------|-----------------|-----------------|------------------|--|-----------------|-------------------------------------|--|--|
| Adult Social Care | | | | | | | | | | | | | | | |
| Active, fulfilled lives | AFL01 | Total number of people allocated to each team | | n/a | 5007 (June) | 5227 (September) | 5227 (December) | 5586 (February) | 5442 | 5586 | ↑ | Lower is better | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: The total caseload has increased by 2.6% compared to previous month snapshot and is 6% higher than YTD average. Increases were seen across 10 teams with the most significant for Community East Northants team (+73 people), Community Kettering team (+37 people), Community Wellingborough team (+22 people) and Community Corby team (+22 people) |
| Active, fulfilled lives | AFL02 | Number of unscheduled review requests | | n/a | 317 | 328 | 238 | 1097 | 97 | 117 | ↑R | Lower is better | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: The number of people requesting an unscheduled review has increased by 21% from previous month and is 17% higher than the YTD average. The most significant increase was for Learning Disability Wellingborough/East Northants team (+22 requests). |
| Active, fulfilled lives | AFL03 | Percentage of New Requests for Services (all ages) where Route of Access was Discharge from Hospital, that had a sequel of short term services to maximise independence (ST-MAX i.e. reablement) | | n/a | 32% | 33% | 33% | 33% | 33% | 33% | → | Lower is better | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: There were 33 new requests for people aged 18-64 (+7 from previous month) and 641 for people aged 65 and over (+68 from previous month). The proportion change from previous month was less than 1%, with no significant change seen across other sequels to request for support. |
| Active, fulfilled lives | AFL04 | Number of new safeguarding concerns received per month | | n/a | 940 | 1046 | 882 | 3466 | 322 | 276 | ↓G | Lower is better | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: There was a notable decrease in the number of new concerns received to the lowest point this year, but this still remains above the previous financial year's monthly average of 245. There still remains an overall year-on-year upwards trend which is also seen nationally in the number of concerns received as reported in the NHS Safeguarding return (SAC). There is a recognised delay from receipt to input, so this figure is almost certain to increase slightly. ASC comments - Safeguarding Process guidance has been written to implement a system of working to support efficiency. |

Adults, Communities & Wellbeing

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|-------------------------|---------|---|---------------------|--|-----------|-----------|-----------|--------------|-----------------|------------------|--|------------------|-------------------------------------|--|--|
| | | | | | 22-23 | 22-23 | 22-23 | | | | | | | | |
| Active, fulfilled lives | AFL05 | New safeguarding concerns determined to be enquiries (both s42 and other) *A S42 enquiry must take place if there is reason to believe that abuse or neglect is taking place | | n/a | 215 | 254 | 198 | 776 | 72 | 37 | ↓ | No polarity | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: There was a significant decrease in the number of new concerns received determined to be enquiries. This is however highly correlated to the number of concerns received which is also reduced this period, and is subject to a slight reporting lag, so is highly likely to increase. |
| Active, fulfilled lives | AFL06 | Total number of open Deprivation of liberty Safeguard cases | | n/a | 1910 | 1744 | 1435 | 1301 | 1346 | 1301 | ↓G | Lower is better | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: The number of open cases reduced again this month to its lowest level this financial year. This is 530 fewer cases than the lowest count in the previous financial year and 475 fewer cases than at the start of this financial year. ASC comments: There continue to be a reduction in the number of open cases as compared to the previous months. |
| Active, fulfilled lives | AFL07 | Long-term support needs met by admission to residential and nursing care homes, per 100,000 population (older people 65 years +) | | 488.3 (All English Authorities 2020/21 - LG Inform) | 148.09 | 306.87 | 490.08 | 606.11 | 557.25 | 606.11 | ↑ | No polarity | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: There have been 397 admissions; an increase of 32 from previous month; 29 new admissions following an assessment and 3 as a result of change in setting following a review. Average monthly growth is 55 per 100,000. Population figure of 68,800 gives a rate of 577.03 |
| Active, fulfilled lives | AFL08 | Number of people who were prevented from requiring statutory care, or whose need was reduced Delaying and reducing the need for care and support having received short term services to maximise independence (ST-MAX) services' | | 84.6% East Midlands Average, we are in the process of identifying more up to date benchmark data for this PI. | 76.90% | 75.50% | 76.30% | 76.20% | 75.60% | 76.20% | ↑G | Higher is better | No target - tracking indicator only | TBC The 2021-22 financial year will be used as a baseline to set benchmarks for the 2022-23 financial year. | BI comments: There was a slight increase this month. The range of change over the financial year is minor (within 3% points) and rates are significantly higher than those seen in 2021/22. |

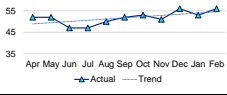
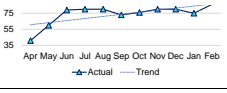
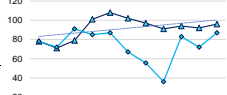
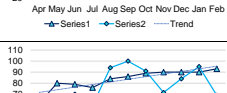
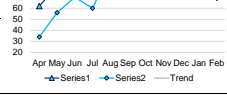

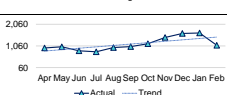
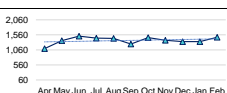

Adults, Communities & Wellbeing

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest | Polarity | Target | Tolerance | Comments |
|--------------------------|---------|--|---------------------|--|---|---|---|---|--------------------------------------|--------------------------------------|---|------------------|---------------------------|--------------|---|
| Public Health | | | | | | | | | | | | | | | |
| Active, fulfilled lives | AFL22 | Smoking quit rate at 4 weeks | | n/a | 63.3% (Apr-Jun 2022) 133 out of 210 | 60.2% (Jul-Sep 2022) 142 out of 236 | 61.9% (Oct-Dec 2022) 216 out of 349 | 62% (Apr-Jan 2023) 453 out of 795 | 57.4% (Dec 2022) 70 out of 122 | n/a (data lag) | ↓R | Higher is better | 60% | 5% | Lag in data in the preceding 2 months The service is disappointed not to have met its target for January, however we are thrilled to see we are on track to meet our annual quit rate target. We will endeavour to go beyond this objective and look forward to helping far more North Northamptonshire residents quit smoking in 23/24. |
| Better, Brighter Futures | BBF02 | % of infants due a new birth visit that received a new birth visit within 14 days of birth | | 88.2% (All English Authorities 2020/21 - LG Inform) | 97.6% (Apr-Jun 2022) 854 out of 875 | 97.2% (Jul-Sep 2022) 877 out of 902 | 94.1% (Oct-Dec 2022) 858 out of 912 | 96.2% (Apr-Jan 2023) 2830 out of 2942 | 93.8% (Dec 2022) 285 out of 304 | 95.3% (Jan 2023) 241 out of 253 | ↑G | Higher is better | 90% | TBC | This indicator represents North Northamptonshire. January 2023 data will be available in February's report. Benchmark updated: England 2020/21. The Health Visiting Service is working hard to achieve their targets. Activity continues to improve, this month they have achieved a rate of 95.3% of the NBV mandated target higher than last months 93.2%, they are above the English average of 88.2%. The service is seeing the most of the remaining children by 28 days. The service has recently recruited a skill mix of staff in the 0-19 service to enable the team to increase their capacity and ability to see every child for their mandated health checks |
| Active, fulfilled lives | ALF20 | % of in-year eligible population offered an NHS Health Check | | 4.7% (All England Q2 2022/23) | 8.3% (Apr-Jun 2022) 1865 out of 22515 | 10.9% (Jul-Sep 2022) 2464 out of 22510 | 17.8% (Oct-Dec 2022) 4012 out of 22498 | 43.5% (Apr-Jan 2023) 9799 out of 22511 | 6.4% (Dec 2022) 1448 out of 22498 | 5.5% (Jan 2023) 1237 out of 22511 | ↓R | Higher is better | 8.4% (100% annual target) | TBC | Further detail on ALF20 and ALF21:- January saw continued problems with reporting issues. Multiple practices, including the large Lakeside practice in Corby, have seen their data uploads affected by third party reporting software removing the scheduled reporting jobs in practices. In addition, there are a handful of practices not 'coding' invites correctly. Both issues are being worked on. There is a significant amount of invites/checks missing from the totals. The NHS Health Check programme has suffered through Covid-19. The programme was paused multiple times on a national and local level. The issues visible in the performance data are reflected nationally, and North Northants is not an outlier. Before Covid-19, the England average for the percentage of the population offered an NHS Health Check per quarter was 4.3% (Q3, 19/20). This England average dropped to a low of 0.2% during Covid-19. The England average for percentage of the eligible population that received an NHS Health Check was 1.9% (Q3, 19/20) before Covid-19. The England average dropped to a low of 0.1% during Covid-19. |
| Active, fulfilled lives | AFL21 | % of in-year eligible population who received an NHS Health Check | | 1.6% (All England Q2 2022/23) | 3.3% (Apr-Jun 2022) 752 out of 22515 | 5.1% (Jul-Sep 2022) 1159 out of 22510 | 6.0% (Oct-Dec 2022) 1356 out of 22498 | 17.8% (Apr-Jan 2023) 4013 out of 22511 | 1.8% (Dec 2022) 409 out of 22498 | 3% (Jan 2023) 683 out of 22511 | ↓R | Higher is better | 5% (60% annual target) | TBC | North Northants now sits around the England average, which considering the NHS Health Check programme in North Northants has been delivered entirely by primary care (and further still considering the pressures primary care is under), there is a good platform to build on as we continuously work on service improvement, but also look at expanding the programme through community-based options. Primary care has been under a lot of pressure since Covid-19 and this time of year also brings winter pressures as we move through the colder months. For this reason, NHS Health Checks cannot always be a priority. When comparing with national averages, it is worth keeping in mind that local authorities all have different models for delivering NHS Health Checks, so naturally local authorities with non-primary care providers (e.g., in-house teams, specialist commissioned services, leisure providers, etc.) may not have faced the same challenges that North Northants has in their attempts to both restart the NHS Health Check programme and keep it running consistently. |
| Better, Brighter Futures | BBF01 | Breastfeeding rate at 6-8 weeks | | 49.3% (All English Authorities - 2021/22 - PHOF) | 45.4% (Apr-Jun 2022) 371 out of 818 | 47.4% (Jul-Sep 2022) 407 out of 858 | 47.2% (Oct-Dec 2022) 397 out of 841 | 47% (Apr-Jan 2023) 1311 out of 2789 | 48.1% (Dec 2022) 139 out of 289 | 50% (Jan 2023) 136 out of 272 | ↑G | Higher is better | 55% | 52.25% - 55% | This indicator represents North Northamptonshire. February 2023 data will be available in March's report. Benchmark updated: England 2021/22. This month has seen an increase in the breastfeeding rates from 48.1% to 50%. The breastfeeding peer support service continues to support this work across the county. Public Health are developing an emergency infant feeding pathway to support parents in poverty unable to afford Infant Formula & provide essential nutrition to their babies under one. Local insight is indicating that poverty is contributing to an increase in breastfeeding. |
| Better, Brighter Futures | BBF03 | % of children who received a 6-8 week view by the time they were 8 weeks | | 81.2% (All English Authorities - Q2 2021/22) | 94.6% (Apr-Jun 2022) 818 out of 865 | 94.2% (Jul-Sep 2022) 858 out of 911 | 91.7% (Oct-Dec 2022) 841 out of 917 | 93.4% (Apr-Jan 2023) 2789 out of 2986 | 92.3% (Dec 2022) 289 out of 313 | 92.8% (Jan 2023) 272 out of 293 | ↑G | Higher is better | 90% | TBC | This indicator represents North Northamptonshire. February 2023 data will be available in March's report. Benchmark updated: Q2 England 2021/22. The Health Visiting Service continues to work through this challenging period, there was a slight drop in activity in this period, however the service still remains above the England average achieving 92.8% the 6-8 week mandated target. The service has recently recruited a skill mix of staff in the 0-19 service to enable the team to increase their capacity and ability to see every child for their mandated health checks |

Adults, Communities & Wellbeing

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest | Polarity | Target | Tolerance | Comments |
|--------------------------|---------|---|---------------------|---|-----------------|-----------------|-----------------|--------------|-----------------|------------------|---|------------------|-------------------------------------|-----------------------------------|---|
| Housing Services | | | | | | | | | | | | | | | |
| Active, fulfilled lives | AFL13 | Number of households whose homelessness was prevented | | n/a | 70 | 53 | 67 | 228 | 14 | 24 | ↑G | Higher is better | 240 (20 per month) | TBD | |
| Active, fulfilled lives | AFL14 | Number of households whose homelessness was relieved | | n/a | 62 | 80 | 69 | 277 | 27 | 39 | ↑G | Higher is better | 300 (25 per month) | 276 (23 per month) | Performance continues to fluctuate between months due to a variety of factors. This reflects the difficulties the Housing Options Team are having trying to secure accommodation solutions, particularly in the private sector in order to prevent or relieve households homelessness locally. There is a recognised need for the team to move its focus further upstream to maximise homelessness prevention opportunities and action plan is being developed in this regard. |
| Active, fulfilled lives | AFL12 | Number of rough sleepers (single night snapshot figure) | | 12 (All English Authorities 2021 LG Inform) | n/a | n/a | n/a | n/a | 12 | 20 | ↑R | Lower is better | 9 | TBD | Our single night figure has increased during the month of Feb, however 2 out of the 20 have not been seen again, so may have just been passing by NNC, and 4 of the 20 have already been removed from the streets and placed into a long term provision. During the month we saw 39 people rough sleeping, 18 of which were new to the Rough Sleeper team, we are seeing an increase in evictions from Houses of Multiple Occupation (HMO) style properties. The Rough Sleeper Co-ordinator is looking at developing the work with the supported accommodation schemes to work on prevention, to hope to see where we can work with the provisions to prevent someone return to the streets. There is confidence that our single night figure for March will be lower due to the numbers we are seeing each week. SWEP was triggered during the month of Feb for a 2 night period and 11 individuals were placed in emergency accommodation, 5 of which were placed via out of hours. |
| Safe and thriving places | STP38 | Percentage of rent collected | | | 93.13% | 92.38% | 92.44% | 92.26% | 92.25% | 92.26% | ↑G | Higher is better | TBD | | The indicator measures the total amount of (gross) rent collected over the period as a proportion of the total amount of (gross) rent due that financial year. This is a combined cumulative figure. The numerator for the calculation is made up of the total rent collected from current tenants for the current and past years. This is the gross rent collected. The denominator is the total rent available. This is made up of the rent available to be collected on all tenanted properties plus the rent arrears from current tenants at the start of the year. In Kettering, the monthly figure does not include direct debit run for 28th. Performance improvement noted. In Corby, a very slight increase in collections rates for February, an improvement from last month. Still below target despite increased efforts from the Income team. |
| Safe and thriving places | STP11 | Number of council housing lets completed | | n/a | 80 | 112 | 134 | 410 | 36 | 48 | ↑ | No polarity | No target - tracking indicator only | N/A | This is a combined figure for Corby and Kettering teams to help monitor the number of council properties being let on a monthly basis. There was an increase in the number of properties let in February. |
| Safe and thriving places | STP12 | Number of council houses vacant and available to let | | n/a | n/a | n/a | n/a | n/a | 13 | 4 | ↓G | Lower is better | 29 | TBD (currently using standard 5%) | This is a combined snapshot figure for Corby and Kettering teams of the number of properties ready for tenants at the end of each month but which have not yet been allocated to customers. The aim is to keep this figure low. The figure reduced in February. Weekly meetings continue in order to monitor where properties are in the void and lettings process. |

Adults, Communities & Wellbeing

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest | Polarity | Target | Tolerance | Comments | |
|--------------------------|---------|--|---|-----------|-----------------|-----------------|-----------------|--------------|-----------------|------------------|---|------------------|-------------------------------------|-----------------|---|----|
| Safe and thriving places | STP36 | Number of voids - Kettering Area |  | n/a | n/a | n/a | n/a | n/a | 53 | 56 | ↑R | Lower is better | No target - tracking indicator only | N/A | This data provides a snapshot of the number of void properties the team are processing at the end of the month. The number of properties void at the end of February both Corby and Kettering increased from the end of January. Weekly monitoring meetings continue to take place and ensure any voids are dealt with as efficiently as possible. | |
| | | Number of voids - Corby Area |  | n/a | n/a | n/a | n/a | n/a | 75 | 86 | ↑R | Lower is better | No target - tracking indicator only | N/A | | |
| Safe and thriving places | STP37 | Void turnaround time - Kettering Area (Mean Average) |  | TBD | n/a | n/a | n/a | n/a | 92 days | 96 days | ↑ | Lower is better | No target - tracking indicator only | N/A | This performance measure monitors the time taken to turnaround a void property for both Corby and Kettering areas from keys in to keys out so covers several teams areas of work including landlord services, housing allocations and the repairs team. In February the Kettering turnaround time increased by 4 days, there were 4 major voids let during February totalling 1294 which affects the overall turnaround time. The Corby turnaround figure increased by 3 days, there was one property let during February which was void for 1091 days which has caused an increase in the turnaround time. As of April 2023 we will be reporting void turnaround time as one NNC figure which will be broken down into standard and major void to give a more accurate turnaround time for each as a small number of major voids can mask the efficiency with which the majority of voids are turned around in. We have also been asked to report the median void days for each month. This figure will fluctuate month on month as it is based on the middle number of void days for the properties let in the month. | |
| | | Void turnaround time - Kettering Area (Median Average) |  | n/a | n/a | n/a | n/a | n/a | 72 days | 87 days | ↑R | | | | | |
| | | Void turnaround time - Corby Area (Mean Average) |  | TBD | n/a | n/a | n/a | n/a | n/a | 90 days | 93 days | | | | | ↑ |
| | | Void turnaround time - Corby Area (Median Average) |  | n/a | n/a | n/a | n/a | n/a | n/a | 95 days | 69 days | | | | | ↓G |
| Safe and thriving places | STP08 | % of properties with a valid gas safety certificate |  | TBD | n/a | n/a | n/a | n/a | 99.7% | 99.6% | ↓ | Higher is better | 100% | 99.5% and above | As at the end of February there were 33 properties without a valid gas safety certificate, of the two in the Kettering area, 1 property with expired AGSR and the other is awaiting planning. 31 in the Corby area, of which: 2 properties have since been recorded as serviced (beginning of March), 1 property has a booked appointment for 17/03/2023, 1 property is void, service scheduled, 1 property has had gas disconnected by supplier, once confirmed this will be removed from programme. 18 properties have received letter and are in legal stages. 5 properties have a court date booked for 14/03/2023 to obtain warrant. 3 properties having warrants executed on 07/03/2023. Note: we are limited to the number of properties we can take to court each fortnight to obtain right of entry warrants so this is impacting compliance. | |
| Safe and thriving places | STP09 | Total number of emergency repairs completed |  | n/a | 2815 | 2804 | 4249 | 12615 | 1658 | 1089 | ↓ | N/A - Tracking | N/A - monitoring levels of demand | N/A | All emergency repairs are to be completed within 24 hours and this measure helps to monitor the level of demand for the service. During January there was a slight increase in the number of emergency repairs. At present this data includes gas, electric and responsive repairs, however from April 2023 onwards these figures will reflect responsive repairs only. Management data will also report gas and electric repairs separately. | |
| Safe and thriving places | STP10 | Total number of non-emergency repairs completed |  | n/a | 3987 | 4147 | 4183 | 15133 | 1335 | 1481 | ↑ | N/A - Tracking | N/A - monitoring levels of demand | N/A | This monitors all other repairs that are not classed as an emergency and at present Kettering and Corby have different targets for these repairs. Kettering has 7 day, 28 day and 90 day timescales and Corby has 30 day target for all non-emergency appointments. Work is underway to align these timescales. At present this data includes gas, electric and responsive repairs, however from April 2023 onwards these figures will reflect responsive repairs only. Management data will also report gas and electric repairs separately. | |

Adults, Communities & Wellbeing

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 22-23 | Quarter 2 22-23 | Quarter 3 22-23 | Year to Date | January 2022/23 | February 2022/23 | Direction of Travel (Jan-Feb) or Latest | Polarity | Target | Tolerance | Comments |
|---------------------------|---------|---|---------------------|-----------|-----------------|-----------------|-----------------|--------------|-----------------|------------------|---|------------------|---|-----------------------------------|---|
| Safe and thriving places | STP04 | Total Active applicants on the Keyways Housing Register | | n/a | n/a | n/a | n/a | n/a | 4642 | 4859 | ↑ | N/A - Tracking | N/A - monitoring levels of demand | N/A | This provides a snapshot of the number of applicants active on the Council's housing Register (Keyways). Active applications continue to increase month on month. Please note that as applications are made active, previously active applications have the status changed to pending, suspended, closed, and housed. This increase therefore is not how many applications are being assessed in total. Annual renewals are currently suspended due to staff resources. Once in place this will reduce the active total due to applicants non-contact and change of circumstances. |
| Safe and thriving places | STP05 | New Housing Applications Received | | n/a | 1395 | 2943 | 4441 | 5923 | 770 | 712 | ↓ | N/A - Tracking | N/A - monitoring levels of demand | N/A | Decrease in February 2023 however only has 28 days. 38% increase in the same period last year (516) There is an expected trend at the start of each year, however, the figures still show an increase from last year. Average for the year to date is now at 538 per month. |
| Active, fulfilled lives | AFL15 | Total number of homeless approaches | | n/a | 862 | 1095 | 1197 | 4197 | 551 | 485 | ↓ | N/A | N/A - monitoring levels of demand only | N/A | 3,863 households approached the Council as homeless during 2021/22, which is an average of 320 approaches per month. Currently the Housing Options Team have a live caseload of approx. 1214 cases and during February there was a slight decrease in the no of approaches from 551-485. NOTE - From mid November the HOA on triage has been adding the case to the system so this should reduce cases being missed and / or duplicated. |
| Active, fulfilled lives | AFL16 | Number of households accepted as owed the main housing duty | | n/a | 67 | 66 | 88 | 264 | 17 | 26 | ↑ | N/A | 288 (24 per month) | TBD (currently using standard 5%) | This measure indicates the number of households that have been accepted by the Council as homeless due to being unintentionally homeless, eligible for assistance and have a priority need and for which the Council has been unable to achieve a positive housing solution during the prevention and relief stages of the process (AFL13 and AFL14). During 2021/22 there were 284 households accepted as being owed the main housing duty. The number of decisions made increased slightly in February, back to more normal levels following leave in December and January. |
| Active, fulfilled lives | AFL17 | Total number of households living in temporary accommodation | | n/a | n/a | n/a | n/a | n/a | 209 | 221 | ↑R | Lower is better | 200 | TBD | As expected, because of a consistent high number of new households being approved for placement into temporary accommodation each week, and limited move on options, the number of households living in temporary accommodation has risen. The number of households placed outside of North Northamptonshire remains low (one household as at 14.03.2023). *This figure is for statutory duty placements only and does not include the additional cohort of rough sleepers accommodated under discretionary powers* |
| Active, fulfilled lives | AFL18 | Number of households with family commitments* living in bed and breakfast accommodation | | n/a | n/a | n/a | n/a | n/a | 4 | 1 | ↓G | Lower is better | 0 | TBD | As a result of the increased number of households being approved for placement into temporary accommodation, and lack of available self-contained accommodation in North Northamptonshire, some families have preferred to accept an offer of hotel accommodation instead of being placed outside of North Northamptonshire. The team monitors these cases on a daily basis to ensure their stay is kept to an absolute minimum (typically a few days to a week). * Households with family commitments are a) a pregnant woman; (b) with whom a pregnant woman resides or might reasonably be expected to reside; or, (c) with whom dependent children reside or might reasonably be expected to reside. The one household with family commitments in B&B for February is a pregnant woman. |
| Active, fulfilled lives | AFL19 | Number of rough sleepers rehoused into accommodation | | n/a | 26 | 39 | 20 | 102 | 7 | 10 | ↑G | Higher is better | 60 per year (5 per month) | TBD | We have supported 10 individuals in total into long term housing solutions, whether that be supported accommodation or within the Private Rented Sector. 8 of the 10 were accommodated straight from the streets. The Rough Sleeper Team work proactively to resolve an individual's situation in a fast manner to prevent any prolonged period on the streets, if we are unable to resolve fast we will then consider discretionary temporary accommodation for the interim. Currently we have 25 individuals placed in our discretionary TA, and during the month of March so far we have managed to accommodate one of our most entrenched rough sleeper, who still remains in TA with the intensive support of the Rough Sleeper Team. |
| Communities and Libraries | | | | | | | | | | | | | | | |
| Active, fulfilled lives | AFL09 | Number of physical visits to libraries | | n/a | 106,920 | 128,997 | 120,993 | 438,000 | 40,414 | 40,676 | ↑G | Higher is better | Feb Target: 16,980 Annual Target 246,187 | 0 | January Comment: We are currently at 157% of our target for visits. This is due to the recovery of consumer confidence from Covid rising more rapidly than we expected. Next year we will use this as a baseline with a stretch target of 1% increase on actuals. |

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North Northamptonshire Council Performance Report - February 2023

Key to Performance Status Colours

| Progress Status Key: |
|--|
| Green - On target or over-performing against target |
| Amber - Under-performing against target but within 5% corporate tolerance (or other agreed tolerance as specified) |
| Red - Under-performing against target by more than 5% (or other agreed tolerance as specified) |
| Dark Grey - Data missing |
| Grey - Target under review |
| Turquoise - Tracking Indicator only |
| Children's Trust Progress Status Key: |
| Green - At target or better |
| Amber - Below target - within tolerance |
| Red - Below target - outside tolerance |
| Grey - No RAG |

| Direction of Travel Key | |
|--|--|
| An acceptable range = within 5% of the last period's performance | |
| ↑G | Performance has improved from the last period – Higher is better |
| ↓G | Performance has improved from the last period – Lower is better |
| ↑ | Performance has deteriorated but is still on or above target or within an acceptable range of 5% of the last period – Lower is better |
| → | Performance has stayed the same since the last period |
| ↓ | Performance has deteriorated but is still on or above target or within an acceptable range of 5% of the last period – Higher is better |
| ↑R | Performance has deteriorated from the last period – Lower is better |
| ↓R | Performance has deteriorated from the last period – Higher is better |
| ↑ | Actual increased - neither higher or lower is better |
| ⇔ | Actual has stayed the same since the last period - neither higher or lower is better |
| ↓ | Actual decreased - neither higher or lower is better |
| Children's Trust Direction of Travel Key | |
| ↑G | Performance improved since last month |
| → | Performance the same as last month |
| ↓A | Performance declined since last month |

Performance Terminology key

| | |
|-------------------------------|--|
| TBC | To be confirmed |
| TBD | To be determined |
| n/a | Not applicable |
| Actual | The actual data (number/percentage) achieved during the reporting period |
| Benchmark | A comparator used to compare the Council's performance against. The 2020/21 average for Unitary Councils in England has been used where available unless otherwise stated. |
| Numerator | Number as part of the percentage calculation which shows how many of the parts indicated by the denominator are taken. See example below. |
| Denominator | The total number which the numerator is divided by in a percentage. See example below. |
| EXAMPLE Performance Indicator | % Calls answered |
| Numerator | Number of calls answered |
| Denominator | Total number of calls received |

Customer & Governance

Human Resources

| Key Commitment | Ref No. | Description of Performance Indicator | Infographic / Chart | Benchmark | Quarter 1 | Quarter 2 | Quarter 3 | Year to Date | January | February | Direction of Travel (Jan-Feb) or Latest) | Polarity | Target | Tolerance | Comments |
|------------------------|---------|--|---|---|--------------------------------|--------------------------------|--------------------------------|--------------------------------|-------------------------------------|-------------------------------------|--|-----------------|--|--|---|
| | | | | | 22-23 | 22-23 | 22-23 | | 2022/23 | 2022/23 | | | | | |
| Modern Public Services | MPS06 | Average number of working days lost per Full time Equivalent (FTE) employee (short term) | <p>Days lost per FTE</p> | Local Government "single tier" national average - 9.2 days lost per employee over 12 months (0.77 days lost per month). ST average for 12 months is 3.8 days lost and LT is 5.4 days lost | 0.8 days lost per Fte employee | 0.9 days lost per Fte employee | 1.2 days lost per Fte employee | 3.6 days lost per Fte employee | 0.32 Fte days per Fte employee | 0.25 Fte days lost per Fte employee | ↓G | Lower is better | Target for the full year is 9.2 days combined as per the Benchmark (3.8 ST and 5.4 LT). This equates to 0.77 days lost per FTE per month . | 0.32 days (Tolerance = 15% - 0.32 - 0.37 days) | Overall, sickness has reduced from the previous month and is remaining under 1.0 Fte days lost per Fte employee over the winter months. This months absence is comparable to February 2022. |
| | MPS07 | Average number of working days lost per Full time Equivalent (FTE) employee (long term) | <p>Days lost per FTE</p> | Local Government "single tier" national average - 9.2 days lost per employee over 12 months (0.77 days lost per month). ST average for 12 months is 3.8 days lost and LT is 5.4 days lost | 1.7 days lost per Fte employee | 2.1 days lost per Fte employee | 2.2 days lost per Fte employee | 7.6 days lost per Fte employee | 0.63 Fte days lost per Fte employee | 0.64 Fte days lost per Fte employee | ↑ | Lower is better | Target for the full year is 9.2 days combined as per the Benchmark (3.8 ST and 5.4 LT). This equates to 0.77 days lost per FTE per month . | 0.45 days (Tolerance = 15% - 0.45 - 0.52 days) | |
| Modern Public Services | MPS11 | Amount of Spend on Agency Staff within each Directorate OPUS ONLY | <p>Year to date OPUS spend split by directorate</p> | n/a | £1,864,458 | £2,356,131 | £3,070,636 | £9,524,345 | £1,053,209 | £1,179,911 | ↑R | Lower is better | No target - tracking indicator only | N/A | This is 'Opus' spend only and based on a 4 week month |

February 2023 HR Workforce Data Report

Sickness Absence Data by Assistant Directorate - April 2022 - February 2023

YTD: Year to Date

FTE: Full Time Equivalent

| Assistant Directorate* | Sickness Absence | | | | | | | | | | | | Feb-22 % of workforce to have sickness | Feb-22 No' of employees to hit trigger |
|--|------------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|--------------|--------------|------------|--|--|
| | YTD Fte days lost per Fte employee | | | | | | | | | | | | | |
| | Apr-22 | May-22 | Jun-22 | Jul-22 | Aug-22 | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | | | |
| Adult Services | 1.20 | 2.51 | 3.82 | 5.33 | 7.25 | 8.96 | 10.60 | 11.87 | 13.42 | 15.50 | 16.87 | 19% | 23 | |
| Commissioning & Performance | 0.46 | 0.98 | 1.07 | 1.67 | 3.10 | 3.47 | 4.49 | 4.77 | 5.26 | 5.48 | 6.17 | 8% | 1 | |
| Housing (this included Communities prior to Nov-22) | 0.98 | 1.91 | 2.53 | 3.21 | 3.77 | 5.07 | 6.28 | 5.05 | 5.91 | 6.28 | 6.69 | 12% | 3 | |
| Communities** | | | | | | | | 8.42 | 9.59 | 10.69 | 12.86 | 14% | 17 | |
| HRA | 1.05 | 2.45 | 4.07 | 6.05 | 7.91 | 10.04 | 11.77 | 13.73 | 15.33 | 17.08 | 18.53 | 13% | 15 | |
| Public Health | 0.35 | 0.78 | 0.99 | 1.29 | 1.47 | 1.60 | 1.85 | 2.15 | 2.59 | 4.08 | 4.75 | 7% | 4 | |
| Safeguarding, Wellbeing and Provider Services | 1.01 | 1.94 | 2.84 | 4.08 | 5.08 | 6.09 | 7.84 | 10.90 | 12.97 | 14.99 | 16.70 | 17% | 30 | |
| Adults, Communities and Wellbeing Services Total | 0.95 | 1.98 | 2.94 | 4.13 | 5.34 | 6.62 | 8.05 | 9.66 | 11.09 | 12.67 | 14.08 | 14% | 93 | |
| Assistant Chief Executive | 0.41 | 0.63 | 0.43 | 0.67 | 0.77 | 0.78 | 0.76 | 0.77 | 0.78 | 0.79 | 0.77 | 0% | | |
| Chief Executive's Office | 0.00 | 0.00 | 0.00 | 1.17 | 1.18 | 1.17 | 1.17 | 1.18 | 1.27 | 1.27 | 1.27 | 0% | | |
| IT | | | | | | | 3.09 | 2.93 | 2.94 | 3.15 | 3.58 | 3% | | |
| Chief Executive Office Total | 0.29 | 0.47 | 0.30 | 0.83 | 0.90 | 0.91 | 2.09 | 2.04 | 2.06 | 2.18 | 2.42 | 2% | 0 | |
| Assistant Director Education | 0.63 | 1.13 | 1.49 | 2.48 | 2.92 | 3.04 | 3.35 | 3.73 | 4.02 | 4.45 | 4.85 | 6% | 1 | |
| Commissioning & Partnerships (includes client role for Children's Trust) | 0.00 | 0.21 | 0.20 | 0.20 | 0.38 | 0.38 | 0.39 | 0.39 | 0.38 | 0.54 | 0.54 | 8% | | |
| Schools | 0.42 | 0.84 | 1.25 | 3.08 | 3.88 | 4.82 | 5.91 | 6.85 | 7.23 | 7.68 | 8.05 | 11% | 3 | |
| Childrens Services Total | 0.50 | 0.95 | 1.31 | 2.55 | 3.12 | 3.54 | 4.12 | 4.70 | 4.98 | 5.39 | 5.74 | 7% | 4 | |
| Customer Services | | | | | | | 8.22 | 9.14 | 10.50 | 11.61 | 12.75 | 18% | 6 | |
| Human Resources | 0.10 | 0.29 | 0.67 | 0.96 | 1.16 | 1.67 | 2.85 | 3.12 | 3.41 | 3.64 | 3.96 | 8% | | |
| Legal and Democratic Services | 0.45 | 0.81 | 1.43 | 2.06 | 2.64 | 3.83 | 4.66 | 5.35 | 6.05 | 6.68 | 7.75 | 6% | 2 | |
| Customer & Governance Total | 0.24 | 0.51 | 0.99 | 1.42 | 1.78 | 2.58 | 5.32 | 5.95 | 6.79 | 7.49 | 8.33 | 12% | 8 | |
| Audit and Risk | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.15 | 0.15 | 0.74 | 0.74 | 1.47 | 13% | | |
| Finance Accountancy | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0% | | |
| Finance and Strategy | 0.64 | 1.32 | 2.57 | 3.92 | 3.97 | 4.87 | 5.13 | 6.47 | 8.25 | 9.59 | 11.27 | 8% | 3 | |
| Performance Intelligence & Partnerships | | | | | | | 0.68 | 0.67 | 1.33 | 1.32 | 1.30 | 0% | | |
| Procurement | 0.46 | 0.46 | 0.47 | 0.47 | 0.47 | 0.46 | 0.46 | 0.45 | 1.12 | 1.12 | 1.11 | 0% | | |
| Revenue and Benefits | 1.01 | 2.00 | 3.26 | 4.96 | 4.70 | 5.21 | 5.68 | 6.10 | 6.37 | 7.09 | 7.48 | 11% | 2 | |
| Finance Services Total | 0.90 | 1.57 | 2.63 | 3.57 | 3.97 | 4.51 | 4.59 | 5.21 | 5.94 | 6.68 | 7.36 | 9% | 5 | |
| Assets and Environment | 0.64 | 1.35 | 2.73 | 4.09 | 5.25 | 6.63 | 8.47 | 9.85 | 11.17 | 12.70 | 13.97 | 12% | 12 | |
| Directorate Management | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.40 | 0% | | |
| Growth and Regeneration | 0.45 | 0.80 | 1.25 | 1.66 | 1.95 | 2.29 | 2.73 | 3.40 | 3.81 | 4.00 | 4.08 | 3% | | |
| Highways and Waste | 0.98 | 2.85 | 4.45 | 5.94 | 7.02 | 7.58 | 8.35 | 8.98 | 9.83 | 10.89 | 12.03 | 12% | 9 | |
| Regulatory Services | 0.46 | 0.84 | 1.11 | 1.49 | 1.97 | 2.86 | 4.00 | 4.88 | 5.42 | 6.34 | 6.93 | 8% | 3 | |
| Place and Economy Services Total | 0.67 | 1.60 | 2.69 | 3.75 | 4.60 | 5.50 | 6.68 | 7.63 | 8.52 | 9.58 | 10.51 | 10% | 24 | |
| Transformation | 0.40 | 1.22 | 2.22 | 3.41 | 3.55 | 3.55 | 3.54 | 3.89 | 4.16 | 4.23 | 4.34 | 0% | | |
| Transformation Total | 0.73 | 1.41 | 2.40 | 3.80 | 4.37 | 5.16 | 3.54 | 3.89 | 4.16 | 4.23 | 4.34 | 0% | 0 | |
| NNC Total | 0.78 | 1.64 | 2.55 | 3.66 | 4.58 | 5.59 | 6.73 | 7.90 | 8.95 | 10.13 | 11.19 | 12% | 134 | |

| | Feb-23 | | | |
|--------------------------------|---|---|---------------------------------------|---------------------------------------|
| | Monthly Fte days lost per Fte employee ST | Monthly Fte days lost per Fte employee LT | YTD Fte days lost per Fte employee ST | YTD Fte days lost per Fte employee LT |
| Adults, Communities, Wellbeing | 0.33 | 0.85 | 4.26 | 9.82 |
| Chief Executive Office | 0.09 | 0.00 | 1.50 | 0.92 |
| Childrens Services | 0.16 | 0.16 | 2.41 | 3.33 |
| Customer & Governance | 0.28 | 0.38 | 3.35 | 4.97 |
| Finance & Performance | 0.16 | 0.30 | 1.90 | 5.46 |
| Place and Economy Services | 0.15 | 0.65 | 3.46 | 7.05 |
| Transformation | 0.00 | 0.00 | 1.68 | 2.66 |
| NNC Total | 0.2 | 0.6 | 3.6 | 7.6 |

Sickness Absence Definition - February

Fte days lost per Fte employee is a nationally used calculation where the total number of days of absence are divided by the total number of FTE (full time equivalent) employees available to work. April - February 2022/23 sickness data shows that on average each Fte employee has had 11.19 days of sickness so far this year with a projected figure for the year 2022/23 of 12.2 days.

Establishment Data by Assistant Directorate - February 2023

| Assistant Directorate | Employees | | Posts | | Agency OPUS Agency Spend (£000's)* | Voluntary Turnover*** | | | Starters | |
|---|-------------|----------------|-------------|----------------|---|-----------------------|-------------|----------------|-----------------|----------------|
| | Headcount | Fte | Number | Fte | | Rolling | Monthly | No' of Leavers | No' of Starters | % of workforce |
| Adult Services | 246 | 218.24 | 343 | 328.62 | £55 | 18.9% | 0.4% | 1 | 2 | 0.8% |
| Commissioning & Performance | 96 | 90.66 | 132 | 127.47 | £66 | 17.7% | 1.0% | 1 | 2 | 2.1% |
| Housing | 73 | 64.59 | 121 | 116.94 | £50 | 15.8% | 0.0% | | 1 | 1.4% |
| Communities | 242 | 169.21 | 349 | 367.87 | £0 | 0.0% | 0.0% | | 2 | 0.8% |
| HRA | 251 | 223.15 | 364 | 341.87 | £86 | 13.7% | 0.0% | | | 0.0% |
| Public Health | 92 | 84.70 | 226 | 218.02 | £85 | 12.0% | 1.1% | 1 | 2 | 2.2% |
| Safeguarding, Wellbeing and Provider Services | 318 | 269.32 | 404 | 381.90 | £92 | 19.6% | 1.6% | 5 | 9 | 2.8% |
| Adults, Communities and Wellbeing Services Total | 1318 | 1119.88 | 2139 | 1882.69 | £413 | 15.7% | 0.6% | 8 | 18 | 1.4% |
| Assistant Chief Executive | 14 | 13.11 | 29 | 28.48 | £2 | 20.8% | 0.0% | | | 0.0% |
| Chief Executive's Office | 12 | 11.16 | 16 | 15.54 | £15 | 0.0% | 0.0% | | | 0.0% |
| IT | 33 | 29.27 | 41 | 38.38 | £12 | 24.4% | 0.0% | | | 0.0% |
| Chief Executive Office Total | 59 | 53.54 | 86 | 82.39 | £29 | 18.9% | 0.0% | 0 | 0 | 0.0% |
| Assistant Director Education | 108 | 102.06 | 142 | 139.71 | £245 | 31.5% | 0.0% | | 1 | 0.9% |
| Commissioning & Partnerships | 16 | 14.55 | 38 | 35.58 | £35 | 19.5% | 0.0% | | | 0.0% |
| Schools | 82 | 72.38 | 99 | 90.81 | £3 | 10.1% | 1.2% | 1 | | 0.0% |
| Childrens Services Total | 206 | 188.99 | 279 | 266.10 | £283 | 21.5% | 0.5% | 1 | 1 | 0.5% |
| Customer Services | 99 | 79.54 | 119 | 105.25 | £11 | 10.6% | 1.0% | 1 | 5 | 5.1% |
| Human Resources | 74 | 65.39 | 104 | 99.31 | £18 | 17.6% | 0.0% | | | 0.0% |
| Legal and Democratic Services | 50 | 44.44 | 112 | 90.96 | £112 | 9.6% | 0.0% | | | 0.0% |
| Customer & Governance Total | 223 | 189.38 | 335 | 295.52 | £140 | 12.8% | 0.4% | 1 | 5 | 2.2% |
| Audit and Risk | 8 | 7.23 | 16 | 16.00 | | 31.6% | 0.0% | | | 0.0% |
| Finance Accountancy** | 2 | 1.04 | 22 | 34.41 | | 0.0% | 0.0% | | | 0.0% |
| Finance and Strategy | 40 | 38.06 | 37 | 35.15 | £7 | 12.9% | 0.0% | | | 0.0% |
| Performance, Intelligence & Partnerships | 10 | 9.24 | 24 | 22.90 | £12 | 0.0% | 10.0% | 1 | | 0.0% |
| Procurement | 11 | 10.19 | 15 | 15.00 | | 0.0% | 0.0% | | | 0.0% |
| Revenues and Benefits | 93 | 81.83 | 121 | 107.78 | £34 | 15.3% | 0.0% | | | 0.0% |
| Finance & Performance Total | 164 | 147.59 | 235 | 231.24 | £53 | 13.5% | 0.6% | 1 | 0 | 0.0% |
| Assets and Environment | 213 | 187.58 | 352 | 311.39 | £56 | 17.0% | 0.0% | | | 0.0% |
| Directorate Management | 5 | 5.00 | 5 | 5.00 | | 0.0% | 0.0% | | | 0.0% |
| Growth and Regeneration | 88 | 81.32 | 144 | 135.91 | £92 | 11.4% | 2.3% | 2 | | 0.0% |
| Highways and Waste | 190 | 186.07 | 271 | 260.76 | £74 | 13.3% | 0.0% | | 1 | 0.5% |
| Regulatory Services | 99 | 91.32 | 145 | 136.76 | £35 | 13.5% | 1.0% | 1 | | 0.0% |
| Place and Economy Services Total | 595 | 551.29 | 917 | 849.82 | £258 | 14.3% | 0.5% | 3 | 1 | 0.2% |
| Transformation | 28 | 27.86 | 33 | 33.00 | £4 | 15.3% | 0.0% | | | 0.0% |
| Transformation Total | 28 | 27.86 | 33 | 33.00 | £4 | 15.3% | 0.0% | 0 | 0 | 0.0% |
| NNC Total | 2593 | 2278.54 | 4024 | 3640.76 | £1,180 | 15.6% | 0.5% | 14 | 25 | 1.0% |

*Opus Agency Spend only, doesn't include any off-contract agency spend

**Related to Corporate Costs (Treasury)

*** LG average turnover benchmark (12.9%)

Establishment Data by Assistant Directorate - Further Detail and Definitions

| Establishment Data Heading | Definition |
|-----------------------------------|---|
| Employees | The headcount and Fte (full time equivalent) shows by Directorate the total number and Fte of Employees (excluding casual/zero hours) who have a contract of employment with contracted hours. |
| Posts | The number and Fte (full time equivalent) of posts in each Directorate. The number of posts can differ from the Fte due to the post type, this predominantly relates to bucket posts where the post number is unique but more than one person can occupy the post, typically a bucket post will have budgeted hours of more than 37 (1 Fte) to allow for multiple occupants. |
| Agency | Opus People Solutions are the councils preferred supplier for temporary workers and provide a breakdown of spend each month, for more specialist roles temporary workers can also be procured through off contract agencies. Only spend through Opus is currently reported. |
| Absence | Fte days lost per Fte employee is a nationally used calculation where the total number of days of absence are divided by the total number of FTE (full time equivalent) employees available to work. April - August sickness data shows that on average each Fte employee has had 4.6 days of sickness so far this year with a projected figure for the year of 11.0. |
| Voluntary Turnover | Those employees (excluding casual/zero hours) who voluntarily left the organisation (including retirement) shown as a % of the average headcount over a rolling year. |
| Starters | New employees to the organisation (excluding casual/zero hours) |

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