

Appendix A

North Northamptonshire Council Performance Report - October 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

	ion of Travel Key
An acc	eptable 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
Т	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
仓	Actual increased - neither higher or lower is better
⇔	Actual has stayed the same since the last period - neither higher or lower is better
Û	Actual decreased - neither higher or lower is better
Childre	en'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	e Terminology key
ТВС	To be confirmed
ТВО	To be determined
n/a	Not applicable
	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.
	The total number which the numerator is divided by in a percentage. See example below.
EXAMPLE Performance Indicator	
Numerator	Number of calls answered
Denominator	Total number of calls received

Place & Economy															
Key Commitment	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	Quarter 1 23-24	Quarter 2 23-24	Year to Date 2023-24	<u>September</u> 2023/24	October 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Growth & Regenerat	tion														
Safe and thriving		Percentage of major planning applications determined within 13	100% 80%	Yes (we have set the target higher	94% (Mean Average CIPFA Near	92.31%	82.35%	85.71%	100%	83.33%	₩R	Higher is	90%	85% - 90%	Performance this month has dropped. This is as a result of determining a relatively large number of major applications this month and that comparatively low overall case numbers for major applications mean that
places		weeks (or within agreed extension of time)	60% pst_4pt 55 52 pts-58 00 40 40 55 55 45 45 45 45 45 45 45 45 45 45 45	than statutory level)	Neighbours - LG Inform Q4 2022/23)	12 out of 13	14 out of 17	36 out of 42	5 out of 5	10 out of 12	• K	better			percentage performance remains volatile. Year-to-date performance remains within tolerance.
Safe and thriving	thriving STP16 applications determined within	applications determined within 8	100% 90% 80% 70%	Yes (we have set the target higher	87% (Mean Average CIPFA Near	73.91%	84.54%	79.82%	85.19%	82.05%	Т	Higher is	85%	80% - 85%	Performance this month has dropped slightly but is within tolerance, although a significant number of applications have been determined this month. Planning officer capacity remains challenging, but a recruitment
places	511 10	weeks (or within agreed extension of time)	60% ఇచ్ఛితో లో ' స్ఫోల్లికి రోళ్లో లో 'టో (లో 'టో (లో 'టో -▲- Actual 2022/23 Target -▲- Actual 2022/23 Trend 2021/22	than statutory level)	Neighbours - LG Inform Q4 2022/23)	68 out of 92	82 out of 97	182 out of 228	23 out of 27	32 out of 39	•	better	00 /6	0078 - 0378	comparing is in progress to increase the number of permanent planning staff which it is hoped will assist in improvements with longer-term performance.
Safe and thriving		Percentage of other (including householder applications) planning	100% 90% 80% 70%	Yes (we have set the target higher	88% (Mean Average CIPFA Near	83.81%	85.83%	83.36%	83.51%	75.27%	₩R	Higher is	88%	83% - 88%	Performance has dropped this month but remains within tolerance. Planning officer capacity remains challenging, but a recruitment campaign is in
places	STP17 applications determined within 8 40 40 40 40 40 40 40 40 40 40 40 40 40	60% p ⁴ ₂ t ⁴ ₂ t ⁴ y ⁵ y ³ ₂ p ³⁶ ₂ g ³⁶ O ¹ y ⁵ d ⁵ y ⁵ d ³⁰ y ⁴⁵ Target - Actual 2022/23 - Actual 2023/24	than statutory level)	Neighbours - LG Inform Q4 2022/23)	233 out of 278	218 out of 254	521 out of 625	81 out of 97	70 out of 93	▼K	better	UU 76	0078 - 0076	progress to increase the number of permanent planning staff which it is hoped will assist in improving longer-term performance.	

Place & Economy	Ref. Description of Description of Direction														
Key Commitment	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	Quarter 1 23-24	Quarter 2 23-24	Year to Date 2023-24	September 2023/24	October 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Highways & Waste	r			n			1		-					1	
		Number of Defects Outstanding on the network (at end of period), split by category	5500 4500 4500 4500			4069	1982	1788	1982	1788	∳G				The total number of defects reduced in October which has allowed Kier to
		P1 (Target response time within 24 hours)	3500 30000 2500 2500			0	0	0	0	0	→				implement P4 repairs earlier, resulting in a reduction from the previous
Safe and thriving places	STP29	P2 (Target response time within 7 days)	2000 1500 1000 500	No - Contractual	n/a 0 2 1	15	2	15	∱R	Lower is better	No target - tracking indicator only	N/A	month of outstanding P4 from 1889 to 1626. There was an increase in P2 from 2 to 15 and an increase in P3 from 91 to 147. This reflects the defect mix rather than contractor performance as STP31 shows that the		
		P3 (Target response time within 28 days)	" " " " " " " " " " " " " " " " " " "			608	91	147	91	147	♠R				contractor is exceeding target performance for repair timescales.
		P4 (Target response time within 26 weeks)	₩ 410 50 3 pr 30 0 42 00 50 60 40 			3461	1889	1626	1889	1626	∳G	1			
	net	Number of Defects Repaired in the network in period, split by category	4000			4953	3957	10258	1010	1348	∱G				
Safe and thriving			2000			6	0	6	0	0	≯	Higher is	No target - tracking		The total number of carriageway defects repaired in October increased as
places	STP30	P2 (Target response time within 7 days)		No - Contractual	n/a	217	202	442	21	23	∱G	better	indicator only	N/A	Kier have continued to speed up P4 repairs ahead of the likely increase in defects as we enter the winter period.
		P3 (Target response time within 28 days)	bet they me my braces of they bee the test the			2863	1410	4544	362	271	₩R	Ī			
		P4 (Target response time within 26 weeks)	Actual 2022-23Actual 2023-24			1867	2345	5266	627	1054	G	Ī			
		Percentage of defects responded to within the timeframes specified, split by category	100%			86.81% (3737 out of 4305)	97.28% (3178 out of 3267)	92.10% (8193 out of 8895)	98.27% (797 out of 811)	98.31% (1278 out of 1323)	∱G		P1 and P2 97.5% P3 and P4 90%		
		P1 (Target response time within 24 hours)	90%			100% (6 out of 6)	100% (0 out of 0)	100% (6 out of 6)	100% (0 out of 0)	100% (0 out of 0)	→		97.5%		
Safe and thriving places	STP31	P2 (Target response time within 7 days)	85%	No - Contractual	n/a	99.09% (217 out of 219)	100% (209 out of 209)	99.55% (449 out of 451)	100% (24 out of 24)	100% (23 out of 23)	→	Higher is better	97.5%	No Tolerance	All targets have been significantly exceeded this month which has brought the cumulative P3 percentage above the target resulting in all targets for the year currently being met.
		P3 (Target response time within 28 days)	80%			86.72% (2293 out of 2644)	95.53% (1132 out of 1185)	90.05% (3758 out of 4173)	96.3% (260 out 270)	96.8% (333 out of 344)	∱G	Ī	90%		
		P4 (Target response time within 26 weeks)	နာင်္ပ္စာ၏ လုိ လုိန္တာမိန္တ၏ ဝ ^{င်} န္တာ ⁴ တုိန္တာ နာင္စိုန္တာ ⁴ → Actual 2022-23 → Actual 2023-24			85.03% (1221 out of 1436)	98.08% (1837 out of 1873)	93.31% (3980 out of 4265)	99.23% (513 out of 517)	97.84% (922 out of 956)	≯		90%		

Customer &	Governa															
Key Commitmen t	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	<u>Year to Date</u> 2023-24	<u>Quarter 1</u> <u>23-24</u>	Jul-23	<u>Aug-23</u>	<u>Sep-23</u>	Quarter 2 23-24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Modern Public		% of Freedom of Information (FOI) Requests	100% 90% 80% 60% 50%	Statutory duty	80.08% (Average of 40 Unitary Councils 2021/22 -	85.84%	86.73%	87.61%	83.00%	83.91%	85.00%	Ţ	Higher is	90%	85% - 90%	The year-to-date figures, though below target, are within tolerance levels. The new Case Management System will enhance processing efficiency moving forwards and fluctation is
Services	012	completed in 20 working days	40% % ન 48 ਮੁੱਖ ' ਮੁੱਖ ' ਮੁੱਖ ਦੂਲੇ ਦੁੱਲੇ ਹੁੰ ' ਹੁੱ ' ਹੁੱ ' ਪੁੱ ' ਪੁੱ Target 2022/23 Actual 2022/23 Actual 2022-24		benchmarking exercise conducted by Brighton and Hove Council)	497 out of 579	242 out of 279	99 out of 113	83 out of 100	73 out of 87	255 out of 300	•	better			expected with any new system, the Information Governance team recent restructure and recruitment process when implemented will imporve processing methods.
Modern Public Services	MPS13		100% 90% 80% 60%	Statutory duty	TBD	98.00%	98.35%	93.44%	100.00%	100.00%	97.63%	₩	Higher is better	90%	Tolerance 85% - 90%	Although there has been a slight decline in the number of processed cases, volumes remain high and performance significantly exceeds target. During July there were x8
		Requests completed in 20 working days	50% ApMayJun Jul AugSepOctNoxDecJanFebMar Target Actual 2022/23 			688 out of 702	359 out of 365	114 out of 122	109 out of 109	106 out of 106	329 out of 337		bondi		5570	responses which were sent x1 day late.
Modern Public	MPS14	% Individual Rights requests completed within statutory timescale (Data Protection (DP) Right	100% 80% 60% 20%	Statutory duty	TBD	84.31%	89.55%	68.75%	72.73%	87.50%	74.29%	₩R	Higher is	90%	85% - 90%	The overall quarterly figure is below target and tolerance levels however, measures have been put in place to avoid a single point of failure across the team. This has resulted in an improvement in performance during September. It is anticipated that the figures will
Services		to Access requests)	0% 분 값 특 특 분 없 당 것 없 특 등 분 뿐 다 분 Target Actual 2022/23 Actual 2023-24			86 out of 102	60 out of 67	11 out of 16	8 out of 11	7 out of 8	26 out of 35	•	better			stabilised as a result of efficiencies created by the Information Governance team case management system.
Modern Public Services	MPS21	% Transparency publications completed on time.	2 1 6 0	Statutory duty	n/a	87.50%	87.50%	(Reported quarterly)	(Reported quarterly)	(Reported quarterly)	87.50%	→	Higher is better	100%	No variation	The over £500 expenditure for the month of September has not yet been published but is in progress. There have been technical issues with accessing the data provided by Cambridgeshire. The Social Housing Asset values figures avialable are for the year ending April 30, 2022.
						28 out of 32	14 out of 16				14 out of 16	7				The figures for April 2023, are not yet accessible to our Finance colleagues.

Communitie	s & Public	: Health										
Key Commitme nt	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	<u>Year to Date 2023</u> 24	Quarter 1 23-24	Quarter 2 23-24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Public Health		n	1	1 1	1			1		1		
Active, fulfilled lives	AFL22	Smoking quit rate at 4 weeks	80% 70% 60% 40% 30% Q1 Q2 Q3 Q4 Target 2022-23 2023-24	2,225 per 100,000 (Mean average CIPFA near neighbours 2019/20)	60.2% (Apr-Sep 2023) 470 out of 781	64.8% (Apr-Jun 2023) 221 out of 341	56.6% (Jul-Sep 2023) 249 out of 440	↓ 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 Quarter 2, however we are thrilled to see we ar e on track to meet our annual quit rate target. We will endeavour to go beyond this objective and look for ward 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	100% 95% 90% 85% Q1 Q2 Q3 Q4 − Target → 2022-23 → 2023-24	75.7% 88.2% (Mean average (England CIPFA near neighbours 2020/21 - LG 2020/21) Inform)	93.2% (Apr-Sep 2023) 1555 out of 1668	91.6% (Apr-Jun 2023) 754 out of 823	94.8% (Jul-Sep 2023) 801 out of 845	∱G	Higher is better	90%	5%	This indicator represents North Northamptonshire. July -September 2023 data. October+November data will be available in January 2024 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 94.8% of the National Best Value mandated target, higher than last quarter 91.6 % they are above the English average of 81.2 % The service is seeing the most of the remaining children by 28 days. The service how has a skill mix of staff in the 0-19 team to enable the service to increase their capa city and ability to see every child for their mandated health checks
Active, fulfilled lives	AFL20		30%, 25%, 26%, 0%, 0%, 0%, 0%, 0%, 0%, 0%, 0%, 0%, 0	4.9% (Maan average 27.3% CIPFA near (England - Q1 neighbours Q4 2023/24 - PHOF) 2022/23)	50.6% (Apr-Sep 2023) 11869 out of 23465	27.3% (Apr-Jun 2023) 6400 out of 23465	23.3% (Jul-Sep 2023) 5469 out of 23465	₩R	Higher is better	25% (100% annual target)	5%	Further detail on ALF20 and ALF21:- The main issues providers have sencountered in Q2 are around capacity and vaccination pressures. Recruitment in particular has been a huge issues, with healthcare assistent and nursing teams being understaffed accross North Northamptonshire, and NHS Health Checks being de-prioritised as a result. Some practices have cited issues around the recruitment processes, with obd Centres sending a lot of people through to apply for Healthcare Assistant roles where advertised, and applicants not showing up or being suitable, causing significant delays to filling posts. GP practices have also needed to direct capacity to Covid-19 vaccination, a pressure that will continue and grow as we move into winter and flu vaccination picks up.
Active, fulfilled lives	AFL21	% of in-year eligible population who received an NHS Health Check	10% 14% 12% 10% 8% 6% 6% 6% 7% 0% 0% 0% 01 02 03 04 - Target + 2022-23 + 2023-24	2.2% (Mean average 10% CIPFA near (England - Q1 neighbours 04 2023/24 - PHOF) 2022/23)	20.3% (Apr-Sep 2023) 4770 out of 23465	9.7% (Apr-Jun 2023) 2272 out of 23465	10.6% (Jul-Sep 2023) 2498 out of 23465	∱G	Higher is better	15% (60% annual target)	5%	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, specialts Commissioned services, laisure 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	60% 55% 40% 40% 01 02 03 04 − Target ◆ 2022-23 ▲ 2023-24	49% (Mean average 49.3% CIPFA near (England - neighbours 2021/22 - PHOF) 2021/22)	51.0% (Apr-Sep 2023) 792 out of 1553	48.3% (Apr-Jun 2023) 379 out of 784	53.7% (Jul-Sep 2023) 413 out of 769	∱G	Higher is better	55%	52.25% - 55%	This indicator represents North Northamptonshire. July -September 2023 data. October - November data will be available in January 2024 report. Benchmark updated: England 2020/21. This indicator represents North Northaptonshire. This month has seen an increase in the breastfeeding rates from 48.3% to 53.7%. The breastfeeding peer support service continues to support this work across the county. In September 2023 Public Health and partners established and implemented 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. North Northamptonshire is exceeding both the national performance and our CIPFA statistical neighbours.
Better, Brighter Futures	BBF03	% of children who received a 6-8 week view by the time they were 8 weeks	100% 95% 95% 85% 80% Q1 Q2 Q3 Q4 - Target → 2022-23 → 2023-24	81.2% (England - Q2 2021/22)	93.2% (Apr-Sep 2023) 1556 out of 1670	94.2% (Apr-Jun 2023) 786 out of 834	92.1% (Jul-Sep 2023) 770 out of 836	¥	Higher is better	90%	5%	This indicator represents North Northamptonshire. July -September 2023 data. October- November data will be available in January 2024 report. Benchmark updated: England 2020/21 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 92.1% the 6-8 weak mandated target. The service has now 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
Better, Brighter Futures	BBF04	% mothers known to be smokers at the time of delivery	14%, 13%, 17%, 9%, 8%, 01 02 03 04 Target →2022-23 →2023-24	10.8% (Mean average CIPFA near neighbours 2021/22) 2021/22 - PHOF)	10.0% (Q1-2 2023) 376 out of 3771	9.7% (Q1 2023) 175 out of 1803	10.2% (Q2 2023) 201 out of 1968	↑	Lower is better	11%	11% - 12%	This indicator represents North Northamptonshire, Tobacco dependency maternity advisors have been identified through the recruitment process, we are also looking to work with the Local Maternity & Neonatal System and Midwifery to review the local model of Long Term Plan tobacco dependency service in maternity based on the evidenced based practice in Manchester which has achieved significant reductions in their smoking at time of delivery rates, supported by the stop smoking service
Better, Brighter Futures	AFL23	% substance misuse clients waiting more than 3 weeks for their first intervention	5% 4% 2% 1% 0% ▲ 01 02 03 04 ⇒2022:23 ★2023:24	9.3% (England 02 2022/23 - NDTMS)	0% (Q1 2023)	0% (Q1 2023)	Data Unavailable	N/A	Lower is better	No target - tracking indicator only	National target will be available in April 2024	Quarter 2 data is not yet available. North Northamptonshire's Substance Misuse Programme continues to meet all demands for waiting times for patients starting treatment.

Key Commitment		Description of Performance Indicator	Statutor Reportin Required? / No)		<u>October</u> 2022/23	<u>Quarter 1</u> 23-24	<u>Quarter 2</u> 23-24	Year to Date 2023/24	September 2023/24	<u>October</u> 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Modern Public Services	MP305 % of council tax collected in the year debit raised		120%	sis CIPFA Near set Neighbours -	66.75% (YTD) 101.14% achieved of the monthly target (66.00%)	29.39% (YTD) 104.96% achieved of the target (28.00%)	56.98% (YTD) 101.75% achieved of the target (56.00%)	67.75% (YTD) 102.65% achieved of the monthly target (66.00%)	56.98% (YTD) 101.75% achieved of the monthly target (56.00%)	66.25% (YTD) 100.38% achieved of the monthly target (66.00%)	(Cumulative KPI so direction of travel is	Higher is better	98% (Annual target)	No tolerance	Performance is above target and is above the same point in time last year. We will continue to monitor closely.
			0%	2022/23)	£20,789,291.47 (collected in Oct)	£71,233,944.18 (collected YTD)	E67,038,847.66 (collected in Q2)	£149,936,181.07 (collected YTD)	£22,264,988.31 (collected in Sep)	£22,584,568.75 (collected in Oct)	based on the % achieved of the target)				
Modern Public Services	MPS04	% of business rates collected in the year debit raised	120%. 10%. 60%. 40%. 20%.	set Neighbours - LG Inform	66.59% (YTD) 100.89% achieved of the monthly target (66.00%)	28.92% (YTD) 103.29% achieved of the target (28.00%)	55.72% (YTD) 99.50% achieved of the target (56.00%)	64.02% (YTD) 97% achieved of the monthly target (66.00%)	55.72% (YTD) 99.50% achieved of the monthly target (56.00%)	64.02% (YTD) 97% achieved of the monthly target (66.00%)	(Cumulative KPI so direction of travel is based on the %	Higher is better	98% (Annual target)	No tolerance	Performance has dropped slightly below target, this was anticipated due to the the cost of living issues and current economic climate. We will monitor this closely.
			이었다. 2012년 1월 2월 2월 2월 2월 2월 2월 2월 2012년 1월 2월 2월 2월 2월 2월 2월 2월 2월 2월 2012년 Target: 슈-Actual 2022/23 슈-Actual 2023/24	2022/23)	£12,885,005.37 (collected in Oct)	E47,126,437,48 (collected YTD)	£42,700,607.20 (collected in Q2)	£103,192,361.82 (collected YTD)	£13,318,470.59 (collected in Sep)	£13365317.14 (collected in Oct)	achieved of the target)				

Children's Service	Children's Services														
Key Commitment	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	Quarter 1 2023-24	Quarter 2 2023-24	Year to Date 2023-24	September 2023/24	October 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Better, brighter futures	BBF05 (KPI 2)	% of referrals with a previous referral within 12 months	40% 35% 30% 20% 40 gd ² yd ² yd ² yd ² gd ²	Yes (also contractual) - target is contractual but not statutory	21.9% Mean for Northamptonshire Children's Services LAIT near neighbours 2021/22	25.4% (2,585)	26.2% (1,986)	26.2% (5,453)	25.1% (642)	28.7% (882)	¥A	Lower is better	29%	25% - 40%	Re-referrals have increased this month but is still better that target. It remains an area of ongoing focus with audit and review of isany. The front door review, Ofsted focused visit and subsequent action plan being developed with the partnership in October will reduce re-referrals going forward. The dedicated education roles in the Multi Agency Safeguarding Hub (MASH) are working positively with schools to ensure appropriate referrals and complements from schoos about their roles are increasing. Work with all partners continues to ensure appropriate and robust application of thresholds. Steps have been taken to stengthen the Early Heip partnerships with Partnership Support Team (Early Heip MASH) being placed in the MASH pots and a leaner step dwm process. COVID: and cost of living crists has an impact on volume and quality of treferrals (Trust commentary, October 2023).
Better, brighter futures	BBF06 (KPI 3)	% of single assessments authorised within 45 working days	100% 80% 80% 75% 44 yel	Yes (also contractual) - target is contractual but not statutory	88% We are in the process of identifying more up to date benchmark data for this PI.	92.9% (2,792)	94.3% (2,695)	93.9% (6,317)	96.3% (630)	95.7% (830)	₩А	Higher is better	85%	85% - 95%	Assessment timescales remain consistently above target and national average, but decreasing slightly to 95.7% this month. All managers monitor this very closely vide ality reports. A narrative is provided for cases that go beyond 45 days and this remains a very small minority. While staffing has presented challenges due to vacancies and staff performance issues in Disty and Assessment Team (DAAT), there is now a positive more towards more appropriate staffing levels being achieved and sustained. In addition to timeliness, we work on increasing the quality of assessments and more effective use of Signs of Safety (SofS) in our interventions (Trust commentary, October 2023).
Better, brighter futures	BBF07 (KPI 8)	% Children in care with three or more placements in the previous 12 months	14% 13% 13% 11% 4 (1)% 11% 4 (1)% 4 (1)	Yes (also contractual) - target is contractual but not statutory	10% Mean for Northamptonshire Children's Services LAIT near neighbours 2021/22	11.1% (1,191)	12.4% (1,165)	12.0% (1,198)	12.4% (1,165)	12.0% (1,198)	∱G	Lower is better	10%	5% - 15%	Performance has improved to 12.0% this month after an increase in children in care since list month. Consideration of various options to improve sufficiency is continuing, including exploration is control 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 dego 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 more home as frequently. Positively, Childrens Home Capital Programme application with the Department for Education (DIE) 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 market on KPI 7 (Trus commentary, October 2023).
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	75% 76% 75% 85% 85% 45% Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Target — Actual 2022/23 — A-Actual 2023/24	Yes (also contractual) - target is contractual but not statutory	56.95% Mean for Northamptonshire Children's Services LAIT near Neighbours 2021/22	62.7% (684)	65.3% (678)	65.4% (677)	65.3% (678)	65.4% (677)	∱G	Higher is better	55%	50% - 60%	This month has seen performance increase to 65.4%, 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 (Prospecks) to be undertaken to ensure we have the best approach' support for young people. Work with councils to ensure Education. Employment and Training (EET) opportunities and support is in place for our care leavers. Wesk Northrangtonshine have signed up to Care leavers covenant. COVID: has had a significant impact on the mental health and wellbeing of care leavers, targeted work support care leavers to access EET (Trust commentary, October 2023).
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	100% 5% 5% 5% 5% 5% 5% 5% 5% 5% 5	Yes (also contractual) - target is contractual but not statutory	89% (All English Authorities 2020/21 - LG Inform)	95.5% (684)	96.0% (678)	96.6% (677)	96.0% (678)	96.6% (677)	∱G	Higher is better	90%	85% - 95%	Performance for this month increased to 96.6%, 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, lenaciously senting 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; this 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 a contrait 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 (Trust commentary, October 2023).
Better, brighter futures	BBF27 (KPI 5)	% of initial child protection conferences held within 15 days of a strategy discussion being initiated	1005 977 977 977 977 977 977 977 97	Yes (also contractual) - target is contractual but not statutory	84.3% Mean for Northamptonshire Children's Services LAIT near neighbours 2021/22	36.4% (343)	13.2% (288)	25.3% (724)	17.1% (70)	21.5% (93)	∱G	Higher is better	81%	66% - 86%	Performance improved slightly again this month, but is still well below expectations. 80% Initial Child Protection Conferences (ICPC) conversion to Child Protection (P) Plans is positive. Performance in October is negatively impacted by business support vacancies in SOAS (Safequarding & Quality Assurance Service) (24 children's conferences out of time due to capacity) recruitment is in progress. CP Chair average caselaad remains above 100 (well above recommended levels). Additional temporary CP Chair average caselaad remains above 100 (well above recommended levels). Additional temporary CP Chair average tasks will have positive impact (Cotober and further in November. There was another month of high numbers of ICPC's in August (130) all requiring 1st reviews in November. As all ICPC's have to It in already busy daries, this will continue to impact con capacity and performance. Average no. days from strat. to ICPC in October = 27. There are now lower numbers of contenences that our to delayed conventing requests from Duty and Assessment Team (DAAT) and Safeguarding, which is positive. All ICPC's are tracked and referring managers are challenged to identify causes of delay DAAT managers support SW's with additional training on process, recording and requesting strategy discussions and convening conferences. A refreshed duty CP Chair flowchant is in place to assist referring managers with threshold decision-making and this has been shared with all teams (Trust commentary, October 2023).
Better, brighter futures	BBF28	Number of children with a Child Protection Plan	000 750 750 650 650 650 600 600 64 get	Yes	565 Mean for Northamptonshire Children's Services LAIT near neighbours 2021/22	714	755	716	755	716	Û	No polarity	TBD		T16 children were subject to a Child Protection (CP) Plan in October 2023. The cohort has decreased by 39 children since last month. Yet, there were 47 children less in the cohort were months ago. Prior to June 2023, there were less than 700 children were in the cohort. June-October 2023 have produced the highest number of Children horts of the last three financial yaers. An average of 732 children had a Child Protection Plan of the last five months. By comparison, an average of 643 children were subject to Child Protection Plan during the same period of last year. There are now 44 children more in the cohort than in October 2023, and an of the site of the start set of the same first set of the start set of the set of the start set of the set of the start
Better, brighter futures	BBF29	Number of children in care	1.220 1.200 1.180 1.160 1.140 1.140 1.140 1.140 1.140 1.140 1.140 1.140 1.140 1.140 1.140 1.160 1.	Yes	1,050 Mean for Northamptonshire Childran's Services LAT near neighbours 2021/22	1,191	1,179	1,198	1,165	1,198	Û	No polarity	TBD		1,198 children were in care in October 2023, 33 children more than last month. Following a short period of decrease between March and September 2023, the population of children in care grew again this month. October 2023 marks the highest record in five months. Even so, there are now 23 children less in the cohort han a year ago. Prior to July 2022, the cohort had never exceeded 1,200. October 2023 marks the fifth consecutive month where less than 1,200 children have been recorded in this cohort. So fair 12023-24, an average of 1,112 children have been reported to be in care. September 2023 accounts for the lowest volume of children in care of the last twelve months. An average of 1,205 children have been reported to be in care in the last 12 months. This is shighly higher than the average At the end of October 2024 in the soft and the set of the last 12 months. This is shighly higher than the average At the end of October 2024 in the soft of last year (1,102) and two BK 7 Bg0 (1,153). Health Care) cohort. The number of children in care who were also in the EHC cohort has decreased by 2 since June 2023 (Intelligent Client Function commentary).

Children's Service	ren's Services														
Key Commitment		Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	Quarter 1 2023-24	Quarter 2 2023-24	Year to Date 2023-24	September 2023/24	<u>October</u> 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Learning, Skills & E Better, brighter futures		% of EHC (education health care) plans completed in month issued within 20 weeks (including exceptions)	100% 80% 60% 20% 0% 60% 60% 60% 60% 60% 60% 60% 60% 60	Yes (part of SEN 2 return)	37.8% Mean for NNC Children's Services LAIT near neighbours 2021/22	66.7%	74.2%	73.6%	78.2%	66.7%	∳R	Higher is better	Target under review	n/a	The summer has allowed the team to focus on writing and finalising plans. Again, this is the impact of the new assessment team which has been piloted as part of the new Educational Health Care (EHC) Team reorganisation. Whilst the team have written and finalised plans, mary are finalised on type due to late lead professional advices not allowing the EHC Team time to consult. RSA decisions are being made by week (in o decisions have been made after 6 weeks), advice is requested but often not returned until Week 16-17 of the process leaving the EHC team are dways to write the plan and 15 days for the draft to be commented on by the parent. To meet the statutory 20 week timescales, there is no time to send consults for pupils and staft have to amend plans naming a school once they are finalised. The EHC Team are working collaboratively with the Educational Psychology (EP) service and health to try to improve this (Service commentary, September 2023).
			-Actual 2023/24 -Actual 2022/23			96 out of 144	245 out of 330	267 out of 363	43 out of 55	22 out of 33					
Better, brighter futures	BBF22	Number of children missing education (previously named Number of children without a school place)	350 250 250 150 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	No		274	313	226	313	226	∳G	Lower is better	Target under review	n/a	A total of 226 children were missing education at the end of October 2023, 28% children less than last month. 47.8% of children missing education are in SEN Support/ EHC Services, 47.8% are in School Admissions and 19.5% are in EIP Services. So far, August 2023 accounts for the highest proportion of children missing education. While the lowest proportion of children missing education was recorded in May 2023. An average of 270 children were missing education in the last five months (Children's Performance Team commentary, October 2023).
Better, brighter futures	BBF32		200 860 860 800 760 740 720 Apr May June July Aug Sep Oct 	Not yet statutory but reported as part of "Elective Home Education/ Children missing in education" data return to DfE.		855	837	854	837	854	Û	No polarity	N/A - Tracking	n/a	854 children were electively home education in October 2023, 17 children more than last month. There were 664 electively home educated children in September 2022, so the cohort has increased by 22% in twelve months. 35.5% of electively home educated children have been educated at home for more than two years (266 children), 18.9% for 1-2 years (161 children), 20.5% for 6-12 months (175 children), 10.0% for 3-6 months (85 children) and 17.2% for 0-3 months (147 children). An average of 806 children were electively home educated in the last twelve months. By comparison, an average of 664 children were electively home educated during the same period of last year (Children's Performance Team commentary, October 2023).
Better, brighter futures	BBF33	Number of children who are absent from education for prolonged periods (Previously named Number of children currently missing from education (Year 1-11))	250 200 150 50 0 Apr May June July Aug Sep Oct 	Not yet statutory but reported as part of "Elective Home Education/ Children missing in education" data return to D/E.		103	225	114	225	114	∳G	Lower is better	N/A - Tracking	n/a	114 children were absent from education for protonged periods in October 2023. Following the peak of 225 children missing from education for protonged periods in September 2023, the population of children absent has decreased by 111 children this month. 67.5% of children have been absent between 0-3 months (77), 24.6% of children have been absent between 3-6 months (28), 2.6% of children have been absent between 0-3 months (77), 24.6% of children have been absent between 1-2 years (8). The number of children absent from education between 0-3 months has significantly improved compared with last month. There are also in the two for the set of the s
Better, brighter	BBF36	% Education Health Care Plan Annual Reviews completed	90% 80% 70% 50% 40%	Statutory Duty but		66.7%	58.8%	64.3%	48.1%	N/A reported		Higher is better	N/A -	n/a	A new Annual Review (AR) template has been designed and training organised for all settings (Early Years (EY), primary, secondary, college, Out of Authority (OCA), independent, special) for the 26th September. The team feel that updated training consistent approach will be shared – this should make the amendments completed by the EHC team much more streamlined. The weekly data dishboard literates the returned amount review and we can see the types of settings where annual review are not being completed – again with the new team organisation, we will be able to contact settings and challenge this. The caseworkers have been allocated a group of settings and have issued as preadabled of the AR's due date (C222-24 academic
futures	00100	within 4 weeks of meeting	30% 20% 10% 0% Apr May June July Aug Sep -de-Actual Trend	not reported		503 out of 754	190 out of 323	693 out of 1077	39 out of 81	arrears	∱G ^{Hig}	better	Tracking	TV G	year and highlighted if previous ARs are out of time. The annual review team manager has developed a system for monitoring these moving forward. The annual review team leader will complete the weakly data databator and capture any issues arising – these will be discussed at the weakly leadership team meeting. This system will enable the team to give a % for each setting of the return R data winch again will enable to take of the ansure that RA are at taking place consistently in all The 0% result for August is due to the fact that Education Health Care Plan reviews are not carried out during August when schools are closed (Service commentary, September 2023).

Adults & Housing																
Key Commitme nt	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	<u>Quarter 1</u> 23-24	<u>Quarter 2</u> 23-24	Year to Date 2023-24	<u>August 2023/24</u>	September 2023/24	<u>October</u> 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
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)	42% 40% 30% 	No The source data is from the SALT (Statutory) return. There are no gov targets. This indicate is included in our regional benchmarking.	2021/22 SALT Report: - England: 37%	37% 229 out of 622	40% 472 out of 1184	40% 541 out of 1358	39% 388 out of 1003	40% 472 out of 1184	40% 541 out of 1358	→	Higher is better	35%	5% points	BI comments: There were 34 new requests for people aged 18-64 and 507 for people aged 65 and over. There is positive growth year to date, with the rate higher than those reported throughout 2022/23 and above year-end larget.
Active, fulfilled lives	AFL04	Number of new safeguarding concerns received per month	500 400 300 200 10 40 40 40 40 40 40 40 40 40 4	Yes (Annually in the SAC (Safeguarding Adults Collection) return)	n/a - there are differences in what authorities record as a 'concern'	1129	1112	2241	366	381	N/A Reporting one month in arrears	Û	No polarity	No target - tracking indicator only	NA	BI comments: The number of new concerns has increased by 4% compared to August 2023 and is still notably higher than the previous financial year average (318)
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)		Yes (Annually in the SAC (Safeguarding Adults Collection) return)	n/a	161	195	356	73	64	N/A Reporting one month in arrears	Û	No polarity	No target - tracking indicator only	N/A	BI comments: There was a decreased in the proportion of concerns determined to be enquiries (-9). However, this is still higher than the current year to date average (60).
Active, fulfilled lives	AFL06	Total number of open Deprivation of liberty Safeguard (DoLS) cases	2000 100 1000 1	Yes (Annually)	n/a	1267	1305	1373	1286	1305	1373	∱R	Lower is better	No target - tracking indicator only	N/A	BI comments: The number of open DoLS cases increased (+68). This still remains notably lower than the average observed across the previous financial year (252 lewer). SN Comments: There continue to be an increase in the number of open cases and this is mainly due to a surge in referma.
Active, fulfilled lives	AFL07	1		No The source data is from the SALT (Statutory) return. There are no gov targets. This indicator is included in ASCCOF. (Adult Social Care Outcomes Framework) regional benchmarking and BCF (Better Care Fund) returns.	546.17 (Mean Average CIPFA Near Neighbours - LG Inform) 2021/22 SALT Report: - East Midlands: 562 - England: 539	135.6	263.7	300.2	221	263.7	300.2	↓G (Cumualtive KPI: Sep-Oct increase is smaller than Aug-Sep)	Lower is better	Year-end target: 564 Monthly target: 47	TBD - for now applied standard 5%	BI comments: This is a cumulative measure which increases throughout the financial year, resetting in April. Admissions year to date total 1707; 140 following an exasessment for new people. 5 following an episode of reablement for administration of the same people of the same same same same same same same sam
Active, fulfilled	AFL08	Number of people who were prevented from requiring statutory care, or whose need was reduced	80% 75% 70% 65%	No The source data is from the SALT (Statutory) return.	84.6% East Midlands Average, we are in the process of identifying more up to date	71.40%	73.0%	73.5%	74.4%	73.0%	73.5%	∱G	Higher is	80%	50/	BI comments: The rate shows positive growth April - August with a slight reduction in September and Improvement this month. The rate remains lower than expected compared to 2022/23 trends, which typically ranged between 74-77%.
lives	AFLUG	Delaying and reducing the need for care and support having received short term services to maximise independence (ST-MAX) services'	80%	There are no gov targets. This indicator is included in ASCOF and regional benchmarking.	benchmark data for this PI. This is an 'Office for Local Government' OFLOG Metric	152 out of 213	348 out of 477	416 out of 566	287 out of 386	348 out of 477	416 out of 566		better	60%	5% points	The rate this month is in line with the same period previous year which was at the lower end for 2022/23 performance. Service Manager comment - 13/11/2023 - The data is not yet including Reablement from TuVida contract which we are working with BI regarding how this can be collected and measured as currently not visible

Adults & Housing																
Key Commitme nt Housing Serv	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	<u>Quarter 1</u> <u>23-24</u>	Quarter 2 23-24	<u>Year to Date</u> 2023-24	August 2023/24	<u>September</u> 2023/24	<u>October</u> 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Active, fulfilled lives	AFL12	Number of rough sleepers - single night snapshot	an an an an an an an an an an	Yes (DLUHC monthly rough sleeping survey, and target agreed with our KSI adviser from DLUHC)	7 (Mean Average CIPFA Near Neighbours - LG Inform)	16	13	19	12	13	19	∱R	Lower is better	9	9 to 12	During the month of October, there has been an increase in numbers of Rough Sileepers (19 single night snapshot), 5 of which were new to the rough sleeping team, which is a high proportion. Mostly rough sleeping due to exictions, from private metals and support provisions. The team are locusing on preventions work as much as possible, linking in with our cohort that have been placed and listing with the provides if there are occared startion. David years mough two being placed within the Rough Steeping Accommodation Programme (RSAP) unts. The RSAP project is amed at our Multiple exclusion homelessness control wriking with the Housing First projeces. Our monthly rough sleeping numbers have increased to 35 which is average for this time of year.
Active, fulfilled lives	AFL13	Number of households whose homelessness was prevented	40 20 40 40 40 40 40 40 40 40 40 4	Yes (DLUHC - quarterly H-CLIC returns, no target set)	101 (Mean Average CIPFA Near Neighbours - LG Inform) Demand in some areas must be much higher.	75	63	169	17	22	31	∱G	Higher is better	252 (21 per month)	18-21	The number of households whose homelessness was prevented has increased from 22 to 31 from September to October. Performance continues to fluctuate between months due to a variety of flactors. This reflects the difficulties the Housing Options. Team are having trying to secure accommodation solutions, particularly in the private sector in order to preving Options team are having trying to secure accommodation solutions, particularly in the private sector in order to preving Options team are having trying to secure accommodation solutions, particularly in the private sector in order to updateam to maximise homelessness prevention opportunities and action plan is being developed in this regard.
Active, fulfilled lives	AFL14	Number of households whose homelessness was relieved	40 30 10 10 10 10 10 10 10 10 10 1	Yes (DLUHC - quarterly H-CLIC returns, no target set)	75 (Mean Average CIPFA Near Neighbours - LG Inform) Demand in some areas must be much higher.	86	82	198	24	36	30	¥	Higher is better	300 (25 per month)	22-25	The number of households whose homelessness was releved slightly decreased trom September to October, her how continues to fuctore access monocluster to a verter of factors. The private the control of the origin options "Takes" of the state of the state releven households homelessness locally. There is a recognised need for the team to more its focus further upstream to maximize homelessness prevention opportunities and action plan is being developed in this regard.
Active, fulfilled lives	AFL15	Total number of homeless approaches	640 540 340 450 450 450 450 450 450 450 450 450 4	Yes (DLUHC - quarterly H-CLIC returns, no target set)	n/a	1468	1404	3370	449	430	498	Û	N/A	Tracking - 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. 4778 households approached the Council as homeless during 2022/23. This is an increase of just over 900, and an average of 400 approaches per month. Currently the Housing Options Team have a live cashed of 1059 cases. During Oct there was a substantial increase in the number of approaches from 430 to 496, likely to have been caused by the end of the school holidays.
Active, fulfilled lives	AFL17	Total number of households living in temporary accommodation	المالي	Yes (DLUHC - quarterly H-CLIC returns, no target set)	202 (Mean Average CIPFA Near Neighbours - LG Inform)	n/a	n/a	n/a	230	239	239	→	Lower is better	245	No tolerance	The number of new households entering temporary accommodation remains high, with the highest number of new placements recorded this month. The team is doing all cars to meet the demand, and increase supply options, are well as support housing topicons colleagues to ensure the down of the topicon submitted on the temporary accommodation are support housing topicons colleagues to ensure the down of the down of the topicon submitted on the temporary accommodation are Applan and Utariania familia. As these placements will need to be retained on homelesses and temporary accommodation caseleades because of temporaryletimg issues, a future rise in the number of households living in "This figure is for statutory dury backments only and bean include the additional cohord of rough aleques accommodated using discretionary powers".
Active, fulfilled lives	AFL18	Number of households with family commitments' living in bed and breakfast accommodation	10 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes (DLUHC - quarterly H-CLIC returns, no target set)	11 (Mean Average CIPFA Near Neighbours - LG Inform)	n/a	n/a	n/a	2	1	4	ŕ	Lower is better	5	No tolerance	As at the end of October there were 4 households with family commitments living in B&B, with the longest stay being a pregramit woman for 12 nights. The team has identified a move on plan for all 4 households through its daily review of these cases. * Households with family commitments are al a pregnent woman; (b) with whom a pregnent woman resides or might masonably be expected to reside; or (c) with whom dependent children reside or might reasonably be expected to reside.
Active, fulfilled lives	AFL24	Number of Temporary Accommodation placements out of NN area	4 2 1 0 2 4 4 5 5 6 6 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7	Yes (DLUHC - quarterly H-CLIC returns, no target set)	TBD	n/a	n/a	n/a	1	1	0	∳G	Lower is better	3	No tolerance	As a result of the feam's efforts, there are no households placed out of area as at the end of October 2023.
Safe and thriving places	STP38		100% 95% 85% 85% 70% vd yd	No	n/a	96.37 14564310.81 out of 15112272.58	97.28% 45456854.22 out of 46729345.20	96.77% 58946042.43 out of 60913738.56	97.34% 33453194.01 out of 34366033.11	97.28% 45456854.22 out of 46729345.20	96.77% 58946042.43 out of 60913738.56	¥	Higher is better	97%	5%	This is a cumulative rent collected as a percentage of rent owed figure. For both Kettering and Cotty areas the figures do not include direct debit runs on 30th and 1st, (which accounts for an extra £104,535.77 in the Kettering area alone) and payments meaked from 28th and 28th. The October Figure also does not include direct Universal Credit payments from 28th, 28th, 27th, 27th and 30th (which amounts to earl 442,625.15 in the Kettering area. Entering areas from on 3 month wait from courts. Intensive work on rent collection will continue over the bothcoming whiter months.

Adults & Housing																
Key Commitme nt	Ref No.	Description of Performance Indicator	Infographic / Chart	Statutory Reporting Required? (Yes / No)	Benchmark	Quarter 1 23-24	Quarter 2 23-24	Year to Date 2023-24	August 2023/24	September_ 2023/24	<u>October</u> 2023/24	Direction of Travel (since previous period)	Polarity	Target	Tolerance	Comments
Safe and thriving places	STP12	Number of (council house)	50 30 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes (Annual LAHS return to DLUHC, no target set)	n/a	n/a	n/a	n/a	8	8	3	∳G	Lower is better	10	10 to 15	At the end of October there were 3 properties Ready to Let. The weekly void meetings are helping to ensure that this number is kept to a minimum.
Safe and thriving places	STP36	Number of voids - Kettering Area	75 65 45 45 45 46 46 46 46 46 46 46 46 46 46	No	n/a	n/a	n/a	n/a	64	69	63	∳G	Lower is better	No target - tracking indicator only	N/A	This indicator provides a snapshot at the month end of the number of live Housing Revenue Account (HRA) voids. At the end of October there was a slight decrease in the number of voids. The overalt NVC snapshot was at 122 compared with 126 as at the end of September. Nois: This is the number of HRA voids only and does not include non-HRA temp, acquisitions or Out of Management properties
		Number of voids - Corby Area	Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Actual 2022/23 - Actual 2023/24 — Trend	No	n/a	n/a	n/a	n/a	56	57	59	♠				
Safe and thriving places	STP37a	Average time taken to re-let NNC standard void properties	00 م م م م م م م م م م م م م م م م م م	Yes (Annual LAHS return to DLUHC)	8 weeks (56 days) House Mark	60.9 days	57.8 days	55.1 days	58.8 days	57.8 days	55.1 days	∳G	Lower is better	56 days	56 to 60 days	From April 2023 onwards, void turnaround time is reported by standard and major properties for NNC. The figure reported is the cumulative average turnaround time for those properties let in the month. This will help remove the impact of a torg- term major void when it has been empty by rate long time and provide a nore accurate reflection of void turnaround for landard properties. In October 23, here were 42 standard void properties. In October 23, here were 42 standard void properties is the total number of void days for these 42 properties was 1716 days, which provides a monthly average turnaround for October of 4.09 days. This has brough the cumulative average turnaround free down 15.5.1 days, which is within the target following.
Safe and thriving places	STP37b	Average time taken to re-let NNC major void properties	560 60 γδ ψ ² γς yλ ψ ² φ ² φ ² φ ² ΦActual 2023/24	No	n/a	217 days	248 days	252 days	243 days	248 days	252 days	↑	Lower is better	No target - tracking indicator only	N/A	In October 2023 there were 12 major void properties let. These 12 properties had a total number of void days of 3223. The number of void days for these properties meent there was a slight increase in the overall cumulative average void days to 252 days. Using furniaround days for major voids are benesit mice in out the best indicator at three is no start approach to how major voids are resourced has been agreed. Number of major voids may be a more appropriate indicator to monitor.
Safe and thriving places	STP08	% of properties with a valid gas safety certificate	100%	Yes (Regulator of Social Housing - TSM, no target set)	n/a	99.8% 7884 out of 7903	99.8% 7879 out of 7898	n/a n/a	99.6% 7861 out of 7896	99.8% 7879 out of 7898	99.7% 7879 out of 7900	¥	Higher is better	100%	99.5% and above is green, 99% and above is amber	As at the end of Oxlober, 21 out of total 7 000 properties did not have a valid gas certificate. Of the 21 properties outstanding, 15 are in the Katering area, two of these properties have appointments booked and the remaining 13 properties are going through the legal process to gain access. In the Corby area, 6 properties were outstanding, 5 of these properties have court dates booked for 07/11/23, and one property has a court date booked for 24/11/23.
Safe and thriving places	STP04		6.050 5.060 5.	No	n/a	5263	5642	n/a	5527	5642	5650	Û	N/A - Tracking	N/A - monitoring levels of demand	NA	This provides a angeletot of the number of applicants active on the Council's housing Register (Keyways). Total housing applications active have increased (as at 1st November the figure is 5785) as there were some necent biliz work completed during October. New applications being resolved remains high, Please note that as applications are made active, previously active applications have the status changed to pending, supended, clock, and housed. The figure interforms in not marry applications are being assession intoll. 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	Number of new Keyways applications received	1.060 660 661 67 67 64 64 65 65 65 65 65 65 65 65 65 65	No	n/a	1850	1793	4218	582	568	575	û	N/A - Tracking	N/A - monitoring levels of demand	N/A	575 new applications last month which was a small increase on the previous month. Remains high figure of new applications each month. Average for the year to date 602 (last year for same period was 498).
Safe and thriving places	STP39	Number of repair jobs awaiting completion	1.560 1.660 560 0 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	No	n/a	n/a	n/a	n/a	Data unavailable	Data unavailable	Data unavailable		N/A - Tracking	N/A - monitoring levels of demand	NA	On review of the data, an error in the figures has been picked up. The 2023-24 data is currently being reviewed by the team and the data and commentary will be updated as soon as possible.
Safe and thriving places	STP40	Number of repair jobs awaiting completion which are outside of target timescale	1,060 560 60 60 60 60 60 60 60 60 60	No	n/a	n/a	n/a	n/a	Data unavailable	Data unavailable	Data unavailable		N/A - Tracking	N/A - monitoring levels of demand	N/A	On review of the data, an error in the figures has been picked up. The 2023-24 data is currently being reviewed by the team and the data and commentary will be updated as soon as possible.