

Appendix A:
Corporate Performance Management Report Q3 (end of December) 2024/2025

Introduction

This appendix provides the Corporate Performance Management Report for Q3 2024/2025, consisting of the following Corporate Priority areas.


- A Greener, More Sustainable Somerset
- A Healthy & Caring Somerset
- A Flourishing & Resilient Somerset
- A Fairer, Ambitious Somerset
- An Effective, Efficient & Sustainable Council

The performance indicators in this report form part of the interim approach agreed by Executive pending the implementation of a new suite of corporate indicators.





Each Corporate Priority section below sets out:




- A summary overview of performance, including context, areas for improvement, and/or achievements during the period.
- An outturn table with key performance indicators with Red Amber Green (RAG) rating where possible.
- Direction of Travel (DoT) arrows show where performance is improving or declining between the most recent reporting periods whether November to December or Quarter 2 to Quarter 3. Up arrows show improvement and down arrows show deterioration – sometimes this may not correlate to figures increasing/decreasing as the aim of some indicators is to have a lower figure. Where data is cumulative, the DoT is based on the same quarter of the previous year, for example Council Tax collection.


A Greener, More Sustainable Somerset

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/CP01 Waste - Residual household waste per household (N191) cumulative outturns (Kg)		+ / - 5kg over the year	313.15	425.68	110.49	212.09	Data not available yet	
SC/CP02 Waste - % of household waste reused, recycled or composted (NI 192)	59.13%	+ 4% / - 1% per year	54.09%	51.14%	58.18%	57.67%	Data not available yet	
SC/CP03 Waste - Total amount of food waste (tonnes)	N/A	N/A	5,687.79	5,694.02	5,406.42	5,501.39	Data not available yet	
SC/CP04 Waste - % of food treated at Somerset's anaerobic digester	N/A	N/A	100%	100%	100%	100%	Data not available yet	
SC/CP05 Waste - Total number of visits to recycling centres	N/A	N/A	366,801	378,060	520,194	542,810	Data not available yet	
SC/CP06 Waste - Total amount of waste received at recycling centres (tonnes)	N/A	N/A	17,435.41	19,177.76	24,673.45	22,958.19	Data not available yet	
SC/CP07 Waste - % of waste received at recycling sites that is recycled (incl composted, recovered, residual and hardcore)	N/A	N/A	54.4%	52.2%	65.2%	64.7%	Data not available yet	
SC/CS11 Reg & Op - Fly-tipping - incidents responded to within 5 working days (Somerset Wide)	90%	Amber within 10% of target	96.8%	87.0%	95.6%	96.0%	96.1%	

A Healthy & Caring Somerset

Key Performance Indicators	Target	Tolerance	Outturn (Months)						DoT
			Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	
			Value	Value	Value	Value	Value	Value	
SC/AS01 ASC - Sourcing Care: Number of care packages on unmet need list	15	TBC	3	1	4	0	0	0	
<p>Figures are as of last working day of the month. Somerset has continued to see the impact of additional investment and focused commissioning activity, as well as some pick up in care provider recruitment, with sustained low levels of unmet homecare this financial year.</p> <p>No homecare packages were marked as 'unmet need' / waiting to be sourced after a week of advertising as of end of December 2024.</p>									
SC/AS02 ASC - Number of returned packages of care (homecare 'hand backs')	14	TBC	15	10	17	6	8	6	
<p>Care package contract handbacks place additional pressure on Local Authority staff to find replacement care within a stretched care market and is therefore an indicator we monitor closely as part of both commissioning and quality activity. Although occasional care package handbacks are not uncommon and can occur for a variety of reasons, most commonly staffing capacity issues within the provider, these rose sharply during the pandemic as evidenced by annual stats below but pleasingly reduced by 34% when comparing 2023 numbers to those in 2022:</p> <p>2020 – 54 package handbacks 2021 – 233 package handbacks 2022 – 238 package handbacks 2023 – 157 package handbacks.</p> <p>There have been 109 contract handbacks so far in 2024.</p>									
SC/AS03a ASC - No of new placements in residential and nursing care in month (18- 64)	0	TBC	5	1	0	4	1	3	
SC/AS03b ASC - No of new placements in residential and nursing care in month (65+)	52	TBC	69	56	71	62	55	48	
<p>New placements (both permanent and temporary) into residential and nursing care are closely tracked and monitored by the service.</p> <p>During 2023/24 we averaged 68.9 new placements per month for people aged 65+ (this compares to an average 64.2 placements per month in 2022/23).</p> <p>So far in 2024/25 we are averaging approx. 64.5 placements per month (65+).</p> <p>Our 'My Life My Future' transformation programme is focused on seizing opportunities to support practice and continue to promote people's independence, ensuring people receive the right support at the right place at the right time in line with our Strategic ambitions.</p>									

Key Performance Indicators	Target	Tolerance	Outturn (Months)						DoT	
			Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024		
			Value	Value	Value	Value	Value	Value		
SC/AS04 ASC - % of total contacts handled and resolved with no costed service by Somerset Direct	60%	TBC	60.5%	60.9%	61.1%	60.1%	59.1%	57.9%		
<p>We are closely monitoring new residential starts seen this financial year to date but this is partly associated with improved productivity across adult social care operational teams and our work addressing waiting lists.</p> <p>During the 2023/24 financial year, the average number of adult social care calls received per month was 5,205 – this is a decrease of approx. 10% when compared to 2022/23. The overall resolution rate in relation to total contacts handled and resolved with no costed service (e.g. through signposting, advice or information) for 2023/24 was 61.1%. This compares to 63.7% for 2022/23. Latest performance for December 2024 stands at 57.9% - just below our 60% target. The resolved rate has reduced in the last 2 months due to a change in process agreed between our Ops Teams and Customer Contact. This change means that all progress chasers are now sent to Ops Triage Teams – previously only those where there was a change of circumstance were sent. The average number of calls received per month so far in 2024/25 is 5,303. Where people are signposted to information, advice, and guidance, the customer contact centre follows up one week later to check this met their outcomes; this was recognised by our LGA March 2024 Assurance peer challenge as good practice. Work is planned during 2024/25 to improve the Council’s public-facing website to ensure it is easier to navigate and obtain information people require supported by the Council’s web team.</p>										
SC/AS05 ASC - Safeguarding risk outcomes – proportion of individuals for whom the risk was reduced or removed following safeguarding intervention	90%	TBC	86.4%	85.3%	85%	86.1%	85.8%	85.3%		
<p>The full year 2023/24 conversion rate overall was 38.6% - above the 2022/23 national average conversion rate of 33%. Latest performance for December was 38.7%.</p> <p>85.3% of Safeguarding Enquires resulted in the identified risk being reduced or removed between April and December 2024 – just below our 90% target. This is a cumulative figure for the 9 month period.</p> <p>Routine validation work takes place to confirm outcomes are appropriate depending on the specifics of the case itself though it is notable that the majority of cases where risk ‘remained’ the alleged perpetrator was known to the individual (in a non-professional capacity) and acknowledge the person’s choice where they have capacity to make decisions about the preferred outcome.</p>										
SC/AS06 ASC stakeholder feedback - % rating service received from ASC as ‘Good’ or ‘Excellent’ overall	75%	TBC	93.3%	90%	96.4%	100%	91.3%	100%		
<p>Our ASC Feedback form responses have offered valuable insights on the experience of service users and carers, partner colleagues and other key stakeholders, and opportunities for learning and improvement. We know the single biggest element and influencer of both positive and negative feedback is communication – how clear, responsive, professional and compassionate we are in our respective job roles makes a fundamental difference to the experience of those we engage with and support.</p>										

Key Performance Indicators	Target	Tolerance	Outturn (Months)						DoT
			Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	
			Value	Value	Value	Value	Value	Value	
SC/AS07 ASC - Total number of overdue Care Act Assessments	200	TBC	424	435	407	384	379	400	

In December 2024 91.3% of the feedback received via this route rated the overall service received from our staff and teams as good or excellent – with performance continuing to trend well above our 75% target so far this financial year (92% cumulatively between April and November 2024).

Last financial year (from April 2023 to March 2024) 273 submissions were received and 77% of those were rated good or better overall, with some teams’ feedback exceeding this average. We are also now capturing feedback from people receiving services as part of our monthly practice quality auditing approach. The experience of people is critical to our understanding of our performance and plays an important part in future CQC assessment.

A detailed report on the experience of people using adult social care services during 2023/24 was presented to our Practice Quality Board in November and will inform any CQC assessment as part of required evidence.







The methodology for this measure changed from 1 April 2024. This measure now reflects the number of pending Care Act Assessments – that is assessments where more than 28 days has elapsed since the start date and where the assessment does not have an allocated worker.

It is worth noting that during 2023/24 a total of 3,994 Care Act assessments were completed. The figure for March 2024 was 386 - the highest monthly figure during the 23/24 financial year.

Significant work has been undertaken to address the waiting times for assessments and reviews in Somerset, ensuring that our practice is robust and consistent across our frontline operational teams. We have focused on improving data visibility and control to support us in this work, and on improving productivity across our teams. In January 2024 we initiated a weekly Operational Oversight Meeting to develop a consistent set of indicators to minimise and monitor waiting lists and waiting times. We provided guidance issued by the LGA to support in monitoring how we are managing waiting lists and mitigating any risks to ensure individuals receive the support they require, whilst focusing on strength-based approaches.

Whilst we remain above desired target, there is a downward trend evident in the total number of overdue assessments, with more assessments being completed by our teams over recent months.

We continue to present updates on a quarterly basis to the Somerset Safeguarding Adults Board also as part of wider governance arrangements.

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/CP12 Highways & Transport - No. of people killed and seriously injured (KSI) in road collisions	TBC	TBC	41	26	26	33	20	
Personal Injury Collision data totals for this quarter are incomplete because of ongoing Avon and Somerset Police Niche software upgrade issues. These issues are preventing usual SC Validation submission processes, including updating the DfT, from being completed. 5-year average data for October to December indicates that we should expect up to 36 KSI collisions in this period. It is therefore likely to be well past April 2025 before we can confirm Q4 figures.								
SC/CS06a Customer Services - Out of Hours Somerset Lifeline - Number of calls received in total within period	N/A	N/A	74,829	73,457	71,847	69,137	80,614	N/A
SC/CS06b Customer Services - Out of Hours Somerset Lifeline - Percentage of calls answered within 60 seconds	97.5%	No threshold as it is a pass / fail	95.14%	94.86%	93.05%	94.39%	93.39%	
The Lifeline service target of percentage of calls answered in 60 seconds is set by the Technical Services Association. There are no concerns about the delivery of the service as it whilst it is performing below the target set, it is still doing well to respond to 93% of calls within 60 seconds. The service has recently completed the merger of three Lifeline Services and is introducing a new combined staffing rota and with additional capacity will seek to close the gap between our performance and the target set.								
SC/CS09 Environmental Health - Food Hygiene - Carry out 100% of all programmed high risk food hygiene inspections and interventions each quarter	100%	Amber within 10% of target	104%	100%	80%	56%	54%	
SC/CS10 Environmental Health Requests - Responding to 95% of all service requests about Environmental Health, Private Sector Housing and Licencing within 7 working days	95%	Amber within 10% of target	82%	90%	91%			
Data not currently available due to issues retrieving data from the multiple systems of the legacy councils, combined with a loss of several support staff during the last year.								
SC/CSH16 - HAM15 Housing - Percentage of homes that do not meet the Decent Homes Standard	0.5%	0.5%-2.4% Amber, above 2.4% Red	6.25%	5.31%	3.39%	3.27%	3.6%	
When we compare the performance of our HRA against the data collected by Housemark, we are currently performing below median quartile. Top Quartile is 0.58%, Median Quartile is 2.4% and Lower Quartile is 5.48%. <i>Quartile data is based of Districts and ALMOs with total properties under 10,000.</i>								
SC/PH01 Public Health - Breastfeeding - Gold Award working to gold accreditation in July 24 RAG	Green	No tolerance as an assessment	Green	Green	Green	Green	Green	
SC/PH02 Public Health - Mental Health Promotion RAG based on range of metrics	Green	No tolerance as an assessment	Amber	Amber	Amber	Amber	Amber	

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/PH03 Public Health - Coverage of 2.5 years developmental check	85%	Amber within 10% of target	84.1%	75.8%	77.2%	77.3%	78.3%	↑
SC/PH04 Public Health - Rolling 12-month total of adults in structured treatment for substance use. RAG against a target of 20% increase to be achieved by March 2025, from a baseline in December 2021	2,680	Amber within 10% of target	2,328	2,344	2,393	2,478	2,506	↑
<p>Performance is showing as amber down from green this quarter because the target was staggered over a three-year period. The target has now been updated to reflect a final goal of 2,680 by March 2025. Performance has improved on Q2, and we are continuing to see an increase in numbers of adults in treatment with SDAS, as we work towards the targeted 20% increase. Although we remain below the required trajectory to meet this target in March 2025, the latest quarter's figures bring us closer to this ambition.</p>								
SC/PH05 Public Health - Smoking: Number of people who are quit at four weeks (SC Commissioned Services Go Smoke Free and Smoke Free Families)	250	Amber within 10% of target	247	275	241	141	226	↑
<p>We are pleased to have increased the number of quits reported this quarter. The 2023/24 methodology counted all four-week quits for anyone who set a quit date in the reported quarter, even if they finished quitting in the next quarter. Q1 & 2 2024/25 only counted four-week quits for those referred in the same quarter. As smokers are given 2 weeks from entry to service to setting a quit date, this meant that anyone entering service after the mid-point of the quarter was not counted. We have returned to the previous method, counting all four-week quits based on the quit date. This includes recent quarters, allowing all subsequent four-week quits to be counted in the quarter the quit date was set. Current Status: 54 people have set a quit date this quarter but haven't completed their four-week quit yet. Some will quit by the end of this quarter, others in the next quarter, but they will be counted in the current one.</p>								











A Flourishing & Resilient Somerset

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/CP15 Highways & Transport - No. of events applications received	N/A	N/A	74	134	122	74	25	N/A
SC/CP17a Planning (major applications) Decisions total and % in time or extended time within reporting period	65%	Amber within 10% of target	88.9%	68.6%	66.7%	82.9%	79.3%	↓
SC/CP17b Planning (minor applications) Decisions total and % in time or extended time within reporting period	75%	Amber within 10% of target	87.9%	87.4%	80.3%	84.1%	85.3%	↑
SC/CP17c Planning (other applications) Decisions total and % in time or extended time within reporting period	85%	Amber within 10% of target	94.5%	93%	91.1%	92.5%	91.6%	↓
SC/CS01 Library Services - Events (total of: Reading, Digital and other)	N/A	N/A	1,832	2,015	2,003	2,040	2,103	N/A
SC/CS02 Library Services - Total Visitors (in person)	N/A	N/A	202,531	226,757	209,915	215,491	206,869	N/A
SC/CS08 Licensing - 90% of valid Licensing applications processed within required timescales from receipt of a valid application	90%	Amber within 10% of target	98%	98%	93%			
Data not currently available due to issues retrieving data from the multiple systems of the legacy councils, combined with a loss of several support staff during the last year.								

A Fairer Ambitious Somerset

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/CF01 The percentage of Somerset schools rated inadequate	3%	TBC	5%	5%	5%	4%		N/A
Positive improvement from 7% in October 2022 to 4% as at the end of Quarter 2 2024/25, but measure is now not applicable as schools no longer receive a single word Ofsted judgement								
SC/CF02 Overall School Attendance	92.5%	TBC	92.5%	92%	91.9%	94.2%	92.7%	↓
Small decline over Q3, but still in line with national benchmark figures								
SC/CF02a Primary Attendance	94%	TBC	94.7%	94.3%	94.3%	95.8%	94.6%	↓
Small decline over Q3, but still in line with national benchmark figures								
SC/CF02b Secondary Attendance	90.7%	TBC	90.4%	89.9%	89.8%	92.8%	91.3%	↓
SC/CF03 Children with SEND (EHCP & SEND support) Attendance	86.7%	TBC	87.3%	86.6%	86.6%	89.6%	87.5%	↓
SC/CF04a Children with a Social Worker (Children Looked After (CLA)) Attendance	TBC	TBC	81.8%	80.7%	77%	81.6%	80.8%	↓
SC/CF04b Children with a Social Worker (Children In Need (CIN) & Child Protection (CP)) Attendance	TBC	TBC	74%	72.4%	73%	80%	76.3%	↓
Slight decline over Q3, but improvement in relation to Q3 2024 (74%)								
SC/CF08 Overall Exclusions – Rolling 12 months	120	TBC	162	138	151	141	140	↑
Continuing high school exclusion rates. Current numbers significantly lower than same reporting period last year (162). Please note that we are aware of some data omissions in the Capita exclusions data where some school data is not coming through to us. Therefore, this scorecard shows exclusion figures as per Capita but may be missing some data.SC/CF01								
SC/CF08a Children with SEND (EHCP & SEN Support) Exclusions – Rolling 12 months	75	TBC	100	75	83	76	84	↓
SC/CF08b Children with a Social Worker (CLA) Exclusions – Rolling 12 months	0	TBC	1	1	1	1	1	▬
SC/CF08c Children with a Social Worker (CIN & CP) Exclusions – Rolling 12 months	9	TBC	19	15	16	16	15	↑









Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
months	Improvement in relation to same period last year (19)							
SC/CF09 EHCPs – Request for Assessment	TBC	TBC	71	113	80	74	135	N/A
SC/CF10 Percentage of Education Health and Care (EHC) Assessments Completed within 20 weeks	64%	TBC	57.5%	31.88%	53.06%	26.09%	38.46%	↑
	Improving in relation to last quarter - continued focus on place planning (phased transfers) for this quarter to support children moving schools							
SC/CF11 Total Number of EHCPs maintained	TBC	TBC	5,403	5,289	5,427	5,584	5,669	N/A
SC/CF12a Not in Education Employment or Training (NEET) %	2.1%	TBC	3.8%	4.2%	4.2%	3.8%	3.8%	▬
SC/CF12b NEET – Unknown	6.3%	TBC	3.8%	2.8%	3.1%	4.4%	4.4%	▬
SC/CF13a Percentage of Children receiving a New Baby Review who are in receipt of a Universal Service at time of review	TBC	TBC	72.67%	68.89%	68.89%	71.94%	71.77%	↓
SC/CF13b Percentage of Children receiving a New Baby Review who are in receipt of a Targeted Level Service at time of review	TBC	TBC	22.81%	27.5%	27.5%	24.16%	22.25%	↓
SC/CF13c Percentage of Children receiving a New Baby Review who are in receipt of a Specialist Level of Support at time of review	TBC	TBC	4.5%	3.59%	3.59%	3.88%	5.25%	↑
SC/CF14a Proportion of Children receiving a New Birth Visit following discharge from midwifery at 10-14 days	82.7%	TBC	89%	83%	83%	85%	84%	↓
SC/CF14b Proportion of Children receiving a New Birth Visit following discharge from midwifery after 14 days	14.8%	TBC	9%	13%	13%	15%	12%	↓
SC/CF15 Overall proportion of children receiving their 2-2.5 year check	74.1%	TBC	82%	73%	73%	75%	77%	↑
SC/CF16 Children Looked After (Rate per 10,000)	70	TBC	54	54	55.2	54.65	56.54	↑
	The numbers of children in care have increased slightly over Q3, but Somerset remain below the England benchmark rate. We continue to focus on proportionate intervention and keeping children in their family networks wherever it is safe to do so.							
SC/CF17 Number of children open to Social Care at Risk of Child Exploitation	N/A	N/A	106	113	118	118	125	N/A
	There are increasing concerns re criminal exploitation in the county because of high levels of County lines activity and the impact this has on vulnerable children. Services continue to work in partnership with the police							





Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
			to highlight the risks to children and families via schools and in the community and to disrupt activity wherever possible					
SC/CF19 Number of children in residential care with external providers	TBC	TBC	97	98	101	91	89	
	Numbers have slightly decreased this quarter, partly due to increasing occupancy of Homes and Horizons. The general increase in children in residential care is because of sufficiency issues - there are not sufficient foster carers to meet the demand for children and children with more complex needs. We continue to focus on the recruitment and retention of foster carers.							
SC/CF19a Number of children in Homes and Horizons homes	N/A	N/A	11	11	11	10	14	
SC/CF20 Number of children in Foster Care (combined internal and external provision, including Kinship)	N/A	N/A	361	365	367	361	378	
	378 comprises:• 148 CYP in internal Foster Care• 145 in External Foster Care• 73 in Kinship Arrangements• 12 in FFA Arrangements							
SC/CF21a Ratio of children in Foster Care (Internal provision)	70%	TBC	63.99%	62.19%	62.67%	62.88%	62.8%	
SC/CF21b Ratio of children in Foster Care (External provision)	30%	TBC	36.01%	37.81%	37.33%	37.12%	37.12%	
SC/CF22 Number of children adopted over the last 12 months	N/A	N/A	35	34	44	44	38	
SC/CF23a Percentage of Children Looked After (CLA) in Residential Care who are placed outside of Somerset	TBC	TBC	38.04%	36.16%	40.96%	44%	42.47%	
	Due to a lack of sufficiency in Somerset we are being forced to place children outside of Somerset. Wherever possible we are moving children back to Somerset or close to the county and this will continue to be a focus, e.g. opening of remaining Homes and Horizons Homes, working with local providers to secure beds homes for Somerset children.							
SC/CF24 Number of households with dependent children assessed as being at risk of homelessness	TBC	TBC	15	38	49	30	17	
SC/CF25 Increased number of Foster Carer Approvals (year to date)	3 per month	TBC			0	8	19	
	Significant increase this quarter, but behind target of 24 new approvals by end of September. Of the 18 new Foster Carers approved up until the end of December, eight are offering weekend and respite care only.							
SC/CF26 Increased number of children in in-house foster placements	164	TBC			0	142	147	

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
(excludes Kinship and FFA)	Behind target of 164 by March 2025							
SC/CF27 Education - Rolling Suspensions - number of suspensions that have occurred in the previous 12 month period	N/A	N/A			12,605	11,917	10,894	↑
SC/CP08 Highways & Transport - % planning applications responded to within statutory 21-day deadline	TBC	TBC	90.35%	86.74%	59.86%	91.09%	89.32%	↓
All data includes Standing Advice applications.								
SC/CSH17 Housing - Percentage of cases where Prevention duty ended successfully in the period (note: circa 50% national average)	TBC	TBC	32%	47%	38%	38%	42%	↑
SC/CSH18 Housing - Number of households in temporary accommodation at the end of the period	TBC	TBC	233	265	279	263	252	↑
SC/CSH19 Housing - Number of families in B&B more than 6 weeks at the end of the reporting period	0	Nil	5	5	6	1	7	↓
There is a large increase in December/January that will fall to 1 case at the end of January. These cases will be reviewed on a weekly basis with all Temporary Accommodation Leads.								

An Effective, Efficient & Sustainable Council

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/CP09 Highways & Transport - No. of parking penalties issued - On Street	N/A	N/A	8,123	7,681	8,383	8,203	9,154	N/A
SC/CP10 Highways & Transport - No. of parking penalties issued - Off Street (car parks)	N/A	N/A	6,664	6,544	7,935	8,053	7,721	N/A
SC/CP11 Highways & Transport - No. of parking penalties issued - Bus Gate	N/A	N/A	1,368	1,028	2,481	1,556	988	N/A
SC/CP13 Highways & Transport - No. of Street works permits processed	N/A	N/A	7,906	6,180	8,695	7,453	6,313	N/A
SC/CP14 Highways & Transport - No. of Traffic Regulation Orders (incl. TPCA's) processed	N/A	N/A	912	1,095	1,012	902	757	N/A
SC/CP16 Highways & Transport - No. of enquiries into Traffic Engineering (as logged onto SharePoint)	N/A	N/A	2,401	2,824	2,734	2,882	2,874	N/A
SC/CS03 Contact Centre - Overall volume of calls received within period	N/A	N/A	150,614	175,742	180,771	163,695	133,579	N/A
SC/CS04 Contact Centre - Resolved at first point of contact - Percentage of calls which have been resolved or signposted	65%	Green 65% + Amber 50%+ Red <50%	73%	74%	77%	82%	79%	↓
SC/CS05 Customer Satisfaction - Represents how satisfied callers are with the service they have received	75%	Green 75% + Amber 60% + Red <60%	84.59%	85.11%	83.78%	85.05%	85.13%	↑
SC/CS07a Complaints - Percentage of complaints answered within 10 working days across all services	75%	Green >75% Amber 50-74% Red <50%	53%	51%	53%	41%	48%	↑
	Completion of stage 1 complaint responses within target is significantly below where we would expect it to be. Factors in this are heavy workloads and additional pressures in some areas resulting from restructure work. Not having a fully defined structure across the organisation has also proved challenging. The central system and Customer Experience Team (CET) do provide staff with reminders around timescales but additional work is being undertaken to raise the profile of complaints and the importance of swift response. The CET will, over the coming months, be asking each head of service for nominated complaints co-ordinators within their service, who will be able to assist the them in finding the right 'owner' for each complaint in a timely manner.							
SC/CS07b Complaints - Number of Ombudsman enquiries received in period across all services	N/A	N/A	34	43	28	40	39	↑

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
SC/CS07c Complaints - Percentage of complaints which have been upheld across all services	TBC	TBC	53%	56%	50%	49%	53%	
SC/CSH12 - TSE06 Housing - Percentage of tenants are overall satisfied with the housing services provided by Somerset Council	77%	Amber within 10% of target	73%	73%	74%	74%	78%	
When we compare the performance of our In-House Landlord against the data collected by Housemark, we are currently performing above Median Quartile. Top Quartile is 79.8%, Median Quartile is 71.4% and Lower Quartile is 65.1%. <i>Quartile data is based of Districts and ALMOs with total properties under 10,000.</i>								
SC/CSH12a Housing - Percentage of tenants are overall satisfied with the housing services provided by Homes in Sedgemoor	84%	Amber within 10% of target			86.82%	84.12%	85.71%	
When we compare the performance of our ALMO against the data collected by Housemark, we are currently performing above top quartile. Top Quartile is 79.8%, Median Quartile is 71.4% and Lower Quartile is 65.1%. Quartile data is based of Districts and ALMOs with total properties under 10,000.								
SC/CSH13 - TRS01 Housing - True current tenant arrears at the end of period percentage	2%	Amber within 10% of target	1.96%	1.44%	1.36%	1.25%	1.09%	
When we compare the performance of our HRA against the data collected by Housemark, we are currently performing above top quartile. Top Quartile is 1.86%, Median Quartile is 2.61% and Lower Quartile is 3.30%. Quartile data is based of Districts and ALMOs with total properties under 10,000.								
SC/CSH14 - PSC01 Housing - Percentage of housing dwellings with a valid gas safety certificate	100%	No tolerance – Pass/Fail	100%	100%	99.52%	99.74%	99.93%	
When we compare the performance of our HRA against data collected by Housemark, we are currently performing above median quartile. Top Quartile is 100%, Median Quartile is 99.94% and Lower Quartile is 99.75%. Quartile data is based of Districts and ALMOs with total properties under 10,000.								
SC/CSH14b -PSC05 Housing - Percentage of housing dwellings with a valid electrical safety certificate.	100%	No tolerance – Pass/Fail	94.24%	95.4%	97.45%	97.21%	97.7%	
When we compare the performance of our HRA against data collected by Housemark, we are currently performing above median quartile. Top Quartile is 99.30%, Median Quartile is 95.40% and Lower Quartile is 89.72%. Quartile data is based of Districts and ALMOs with total properties under 10,000.								
SC/CSH15 - HC11 Housing - Percentage of communal areas with a Fire Risk Assessment (FRA) in place and FRA Review complete (where applicable)	100%	No tolerance – Pass/Fail	100%	100%	100%	100%	100%	
SC/CSH20 Housing - Proportion of homes for which all required legionella risk assessments have been carried out	100%	No tolerance – Pass/Fail			99.08%	100%	100%	

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT	
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25		
			Value	Value	Value	Value	Value		
									When we compare the performance of our HRA against the data collected by Housemark, we are currently performing at top quartile. All Quartiles are 100% for this indicator. Quartile data is based of Districts and ALMOs with total properties under 10,000.
SC/CSH21 Housing - % of housing dwellings with a valid asbestos management survey	100%	No tolerance – Pass/Fail			99.17%	99.27%	99.51%		When we compare the performance of our HRA against the data collected by Housemark, we are currently performing below median quartile. Top and Median Quartile are 100%, Lower Quartile is 99.14%. Quartile data is based of Districts and ALMOs with total properties under 10,000.
SC/CSH22 Housing - % of passenger lifts and through floor lifts with annual and 6 monthly service and inspection complete	100%	No tolerance – Pass/Fail			100%	100%	100%		When we compare the performance of our HRA against the data collected by Housemark, we are currently performing at top quartile. All Quartiles are 100% for this indicator. <i>Quartile data is based of Districts and ALMOs with total properties under 10,000.</i>
SC/RC01 Revenues - Council Tax collection rate (%)	83.77%	Amber within 10% of target	85.16%	96.68%	30%	57.04%	83.92%		The target in-year collection rate for the Council Tax for 2024/25 is 96.75%. This represents the proportion of the £486.2m net collectable debit for the year that is collected within the year. At the end of quarter 3 we have collected 83.92% against a target of 83.77%, which in monetary terms equates to £408m. Whilst the actual collection rate is slightly above target, this could drop in future quarters with the Revenues and Benefits service continuing a major project to consolidate four different software systems into a single system. This project, which is expected to be completed by December 2025, is likely to impact on collection rates at times during this period, as there will be delays in issuing bills and recovery notices whilst we are migrating data. However, work is underway to minimise any adverse effect on collection rates because of this project, including reviewing levels of staff and processes/procedures that are currently in place, as well as the overall data migration plan. There is also work underway to complete a targeted Direct Debit take-up in the latter part of the year to increase Direct Debit take up across Somerset.
SC/RC02 Revenues - Business Rates collection rate (%)	79.28%	Amber within 10% of target	79.82%	96.57%	29.17%	56.33%	81.09%		The target in-year collection rate for Business Rates for 2024/25 is 96.52%. This represents the proportion of the £181.1m net collectable debit for the year that is collected within the year. At the end of quarter 3 we had collected 81.09% against a target of 79.28%, which in monetary terms equates to £146.8m.

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
			<p>Whilst the actual collection rate is slightly above target, this could drop in future quarters with the Revenues and Benefits service starting a major project to consolidate four different software systems into a single system. This project, which is expected to be completed by December 2025, is likely to impact on collection rates at time during this period, as there will be delays in issuing bills and recovery notices whilst we are migrating data. However, work is underway to minimise any adverse effect on collection rates because of this project, including reviewing levels of staff and processes/procedures that are currently in place, as well as the overall data migration plan.</p>					
SC/RC03 Benefits - Average number of days for processing new Housing Benefit claims	15	Amber within 10% of target	12.45	11.87	14.95	13.38	12.97	↑
SC/RC04 Benefits - Average number of days for processing Housing Benefit change of circumstances	7	Amber within 10% of target	4.31	2.56	7.01	5.49	4.32	↑
			<p>The indicators measure the time taken to process new claims for Housing Benefit and Changes in Circumstances. The target for new claims is to process them within 15 days and we have achieved an average in Q3 of 12.97 days. For Changes of Circumstance the target is 7 days, and we have achieved an average of 4.32 days.</p> <p>The prompt processing of claims and changes is critical to both ensuring that claimants quickly receive help towards paying their rent and in preventing overpayments and debt problems. These indicators show the impact of performance to our customers and are monitored by the Department of Work and Pensions who will intervene if required. These indicators only cover a limited element of the overall workload undertaken within the Benefits teams.</p> <p>Whilst the processing rate of new claims and the target for Changes in Circumstances are on track, this could change in future quarters with the Revenues and Benefits service starting a major project to consolidate four different software systems into a single system. This project, which is expected to complete by December 2025, will at times impact on the speed with which we can process claims and changes of circumstance whilst we are migrating data between systems. Detailed project planning is underway, and this will include taking steps to minimise downtime.</p> <p>Processing times may also be affected by the different levels of claims we now receive, following the commencement of the migration of working age Housing Benefit claims to Universal Credit. This will be monitored and any impact assessed accordingly.</p> <p>More rounded and representative performance indicators, including those around Overpayment collections, are still under development. Once the service is on one singular system, the collection of the require performance indicator data will be simpler, easier to collect, report on and provide more detail.</p>					
SC/RC05 An average for all building compliance across Somerset Council	100%	Amber within 10% of target	91%	92.5%	87.7%	92%	90.3%	↓

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
			PAT testing overdue in some legacy SW&T sites. Several legacy SW&T EICRs carried out this year have required remedials, so the schedule has slipped behind. Some overdue legionella inspections due in legacy Sedgemoor area due to access issues - contractor asked to return. Remaining areas of non-compliance as per previous reports are where we do not have evidence that they have been completed yet but are actively chasing contractors to complete, or they have been completed, and we are actively chasing to provide completed paperwork.					
SC/SW03 FOI/EIR: The number of requests received in period	N/A	N/A	426	574	496	475	471	N/A
SC/SW04 FOI/EIR: % of requests received that were acknowledged within 2 days (when ack required)	95%	Green 95%+ Amber 80-94% Red <80%	90%	91%	93%	97%	92%	↓
SC/SW05 FOI/EIR: The number of FOI requests completed in period	N/A	N/A	399	526	477	407	435	N/A
SC/SW06 FOI/EIR: The percentage of completed requests where all information was sent	N/A	N/A	63%	62%	63%	52%	44%	N/A
SC/SW07 FOI/EIR: The number & % of completed requests where response was a full refusal	N/A	N/A	13%	11%	11%	16%	12%	N/A
SC/SW08 FOI/EIR: The number & % of completed requests where response was a partial refusal	N/A	N/A	9%	5%	6%	16%	9%	N/A
SC/SW09 FOI/EIR: The number & % of requests which did not result in disclosure for other reasons (e.g. info not held, invalid or lapsed request)	N/A	N/A	15%	22%	19%	16%	35%	N/A
SC/SW10 FOI/EIR: Percentage of requests completed within 20 working days	95%	Green 95%+ Amber 80-94% Red <80%	84%	83%	80%	86%	87%	↑
SC/SW11 FOI/EIR: The number of internal reviews requested in period	N/A	N/A	8	9	13	7	8	↓
SC/SW12 FOI/EIR: The number of requests outstanding at the end of the period	N/A	N/A	117	123	96	111	120	N/A
SC/SW13 Workforce - Staff sickness - Working Days lost per Full Time Equivalent (FTE)	2.2	2.2 days per quarter or 8.8 days per annum	2.64	2.57	2.24	2.46	2.98	↓

Key Performance Indicators	Target	Tolerance	Outturn (Quarters)					DoT
			Q3 2023/24	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	
			Value	Value	Value	Value	Value	
			Changes to staffing levels expected during the winter months with higher levels of short-term illnesses and the ongoing impact on staff of the Council restructure programme. A detailed review of long term absence will be conducted in Q1 25/26.					
SC/SW15 Workforce - Number of vacancies	N/A	N/A	911	885	1,013	1,184	1,318	N/A
SC/SW16 Workforce - Number of new starters	N/A	N/A	133	86	93	140	73	N/A
SC/SW17 Workforce - Number of leavers	N/A	N/A	182	174	187	315	197	N/A
SC/SW19 Workforce - Number of apprentices	N/A	N/A				243	270	N/A
			270 people are currently completing apprenticeship qualifications, of which 131 apprentices are in our maintained schools, and 139 within the Council. In addition, 91 members of staff have successfully completed apprenticeship qualification in the last 12 months.					