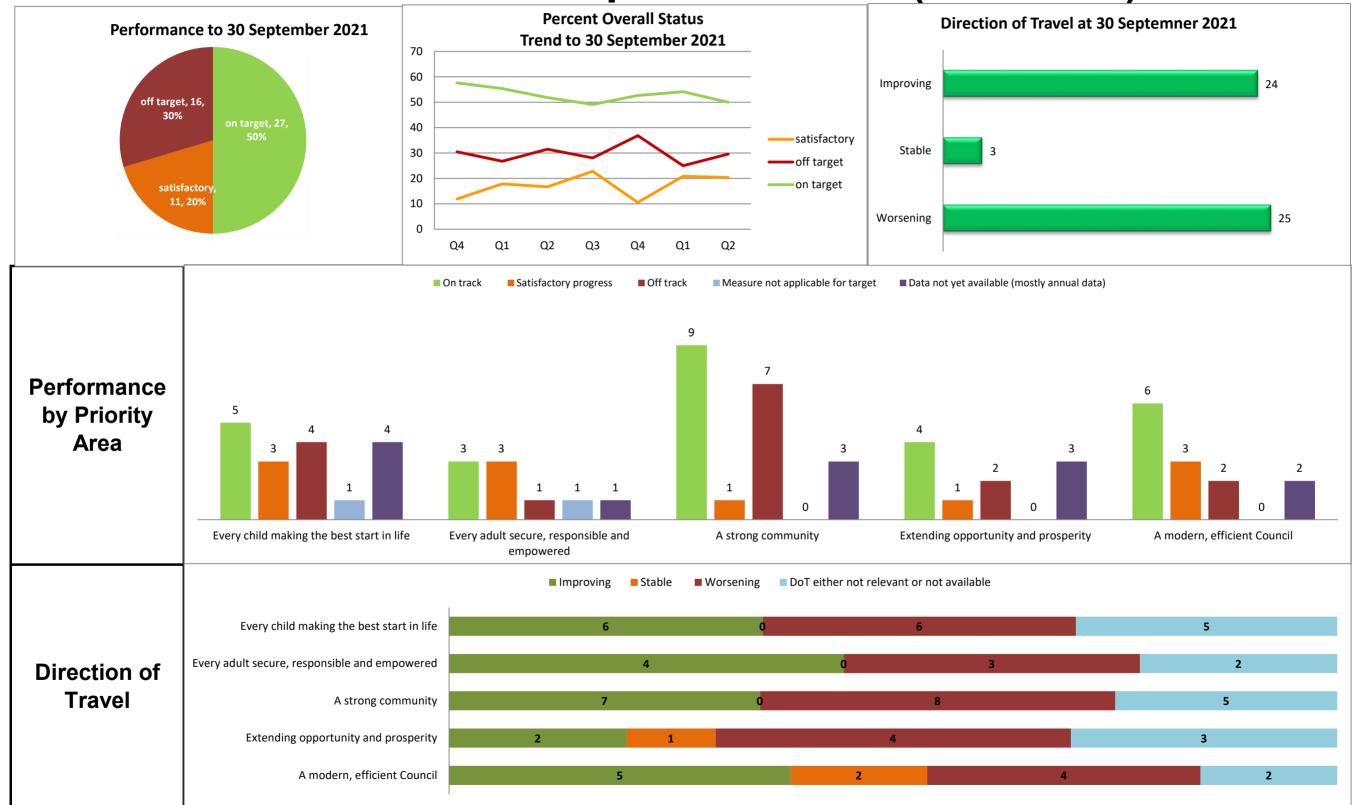
# Council Plan 2021/22 Performance Report Dashboard at September 2021 (Quarter 2)







# Council Plan 2021/22 Performance Report

# Quarter 2 Performance Scorecard (data to 30 September 2021)

Please note: Although care is taken to ensure data is as accurate as possible, delays in data input can result in changes in figures when reports are re-run retrospectively.

#### Document Details

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#### Summary

<b>~</b>	Measure progressing above or in line with target set	27	39.1%
•	Measure progress has been satisfactory but is not fully reaching target set	11	15.9%
×	Measure has not progressed in accordance with target set	16	23.2%
*	Measure under development (e.g. awaiting data collection or target-setting)	0	0.0%
	Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target)	2	2.9%
	Measure information not available (e.g. due to infrequency or timing of information/data)	13	18.8%

**Note** - the percentages are different to those on the dashboard as these include meaures under development, measures not applicable for a target and those where data was not available.

0	Numbers have improved	24
$\bigcirc$	Numbers are stable	3
U	Numbers have got worse	25
	Direction of Travel is not applicable	17

## Corporate Priority 1 – Every child making the best start in life

			tatus (relevant to target)										1							
	~	>	Measure progressing above or	in line with target set		*	Measure under	r development (	e.g. awaiting	data colle	ction or target-	setting)	1							
	Key	•	Measure progress has been sa	tisfactory but is not fully reaching target set			Measure not a specific target)	pplicable for tar	get (e.g. base	eline year,	or not appropri	iate to set a	1							
		×	Measure has not progressed in	accordance with target set				mation not avail	able (e.g. due	e to infrequ	uency or timing	l of								
													-							
	Lead Accountability	Ref No.	Action	Measure	Lead officer	Good performance	Frequency of reporting	Target	Overall				А	nnual					Quarterly	
Outcome	(Strategic Director)					performance	reporting		status	DOT	Year end 2015/16	Year end 2016/17	Year end 2017/18	Year end 2018/19	Year end 2019/20	Year end 2020/21	Q2 Jul - Sep 2020/21	Q3 Oct - Dec 2020/21	Q4 Jan - Mar 2020/21	Q Apr - 202
		1.A1		Children in Need rate (rate per 10K population under 18)	Ailsa Barr - Assistant Director Safeguarding CYPS	low	Monthly	375.5	•	0	426.4	481.1	563.3	495.0	459.6	410.3	459.7	442.1	410.3	40
nd neglect		1.A2	Early Help – Supporting	The number of children subject to a CP plan (rate per 10K population under 18)	Ailsa Barr - Assistant Director Safeguarding - CYPS	low	Monthly	85	~	0	65.4	65.6	114.5	89.0	78.8	75.3	80.3	80.7	75.3	80
protected and safeguarded from all forms of abuse, violence and neglect		1.A3	Children, young people and families at the right time with the right care	The number of Looked After Children (rate per 10k population under 18)	Ailsa Barr - Assistant Director Safeguarding - CYPS	low	Monthly	98.7	•	U	76.6	86.6	110.8	112.7	104.5	103.8	106.4	106.0	103.8	97
cted and safeguarded fron	Suzanne Joyner, Strategic Director Children and Young People's Services	1.A4		The proportion of families who rate the Early Help service as Good or Excellent.	David McWilliams - Assistant Direct Early Help & Family Engagement - CYPS	high	Monthly	95%			Not Available	Not Available	Not Available	97.2%	94.3%	95.6%	100.0%	100.0%	100.0%	Not av see dat
families are		1.A5	Children's Social Care Improvement – Ensure that all Child Protection Plan work is managed robustly and that appropriate decisions and actions are agreed with partner agencies	(within 24 months)	Ailsa Barr - Assistant Director Safeguarding - CYPS	low	Monthly	9%	×	U	7.9%	9.2%	9.5%	6.5%	8.6%	7.9%	5.9%	6.3%	7.9%	10.
A. Children, young people and		1.A6		Number of children and young people who are currently assessed as having a medium to high risk of CSE (CSE cohort)	Ailsa Barr - Assistant Director Safeguarding - CYPS	Not applicable	Monthly	No target - not applicable			Not Available	64	85	63	50	47	49	49	47	5
		1.A7	Placements - Improve Quality	The proportion of LAC experiencing disrupted placements (Definition: % of LAC who have had 3 or more placements - rolling 12 months)	Ailsa Barr - Assistant Director Safeguarding - CYPS	Low	Monthly	10.0%	•	U	13.0%	11.9%	13.4%	13.3%	11.1%	8.9%	7.8%	9.3%	8.9%	9.1
		1.A8	of Care for looked after children	The proportion of LAC placed within a Family Based setting	Ailsa Barr - Assistant Director Safeguarding - CYPS	high	Monthly	85.0%	×	U	Not Available	81.1%	81.0%	81.9%	81.5%	81.1%	81.2%	80.7%	81.1%	81.

		Data notes – please explain any relevant information about the data presented. This might reference the end of year position (status and DOT), improvements
Q1 Apr - June	Q2 Jul - Sep	and benchmarking where necessary to aid understanding
<b>2021/22</b> 409.4	2021/22 399.8	The measure is improving with a upwards DOT and therefore rated as Amber.
80.4	78.0	
97.8	99.2	Target revised and updated, however the CYPS approval process is still underway.
Not available, see data notes.	Not available, see data notes.	This measure is no longer monitored.
10.7%	15.3%	
51	48	
9.8%	10.2%	
81.0%	80.2%	

	Lead	Ref No.	Action	Measure	Lead officer	Good	Frequency of	Target					Α	nnual					Quarterly			Data notes This might
Outcome	Accountability (Strategic Director)	Kei NO.	Action	medsure	Leau Onicer	performance	reporting	Taiget	Overall status	DOT	Year end 2015/16	Year end 2016/17	Year end 2017/18	Year end 2018/19	Year end 2019/20	Year end 2020/21	Q2 Jul - Sep 2020/21	Q3 Oct - Dec 2020/21	Q4 Jan - Mar 2020/21	Q1 Apr - June 2021/22	Q2 Jul - Sep 2021/22	and bench
		1.B1		The proportion of pupils reaching the expected standard In reading, writing and mathematics combined at the end of Key Stage 2	Nathan Heath Assistant Director Education and Inclusion - CYPS	high	Academic Year	65%	•		53.9%	60.8%	62.0%	61.0% (Final)	No tests due to Covid-19	No tests due to Covid-19						The Educati be taking pl: absences. T for 2019/202
_		1.B2	Sustainable Education and Skills	The average attainment 8 score at the end of Key Stage 4 .	Nathan Heath Assistant Director Education and Inclusion - CYPS	High	Academic Year	46	•		48.8	45.0	43.3	44.4 (Final)	No tests due to Covid-19	No tests due to Covid-19						The Educat be taking pl absences. T for 2019/20:
supported to reach their potential	Suzanne Joyner, Strategic Director	1.B3		The progress 8 measure from the end of primary school (KS2) to the end of secondary school (KS4)	Nathan Heath Assistant Director Education and Inclusion - CYPS	high	Academic Year	Above National Average	•		0.04	0.06	-0.11	-0.14 (Final)	No tests due to Covid-19	No tests due to Covid-19						The Educat be taking pl absences. 1 for 2019/20
oeople are	Children and Young People's Services	1.B4 (a)	Sustainable Education and Skills – Reduce the number of school days lost to exclusion	The number of permanent exclusions in secondary schools	Nathan Heath			38	>	0	43	30	41	38	53	38	4	12	5	13	11 (8 - 2021/22 Academic Year)	,
B. Children and Young I		1.B4 (b)		F	Assistant Director Education and Inclusion - CYPS	low	Monthly	8	*	0	9	8	3	14	11	9	0	2	2	4	1 (0 - 2021/22 Academic Year)	•
		1.85	Sustainable Education and Skills – Enable hard to reach young people to achieve their full potential through educatior employment or training	Training (NEET) or whose activity is Not Known (NK)	David McWilliams - Assistant Direct Early Help & Family Engagement - CYPS	low	Monthly	5.7% combined i) 3.5% (NEET) ii) 2.2% (Not Known)	×	U	Not Available	5.7% combined i) 3.1% (NEET) ii) 2.6% (Not Known)	5.9% combined i) 3.3% (NEET) ii) 2.6% (Not Known)	5.8% combined i) 3.3% (NEET) ii) 2.5% (Not Known)		1 5.6% combined i) 4.0% (NEET) ii) 1.6% (Not Known)		6.2% combined i) 4.1% (NEET) ii) 2.1% (Not Known)	6.4% combined i) 4.1% (NEET) ii) 2.3% (Not Known)		16.8% combined i) 2.6% (NEET) ii) 14.2% (Not Known)	The Q2 figu October and These targe
		Special Educational Needs and Disabilities (SEND) – improve personal outcomes for our young people with SEND to enable them to make choices that lead to successful adult lives	The proportion of Education and Health Care Plans (EHCPs) that are completed in statutory timescales	Nathan Heath Assistant Director Education and Inclusion - CYPS	high	Monthly	Qtr 1 - 55% Qtr 2 - 70% Qtr 3 - 85% Qtr 4 - 90% (cumulative)	×	U	58.30%	52%	57.0%	57.1%	69.5%	66.4%	62.5% (cumulative - 63.3%)	67.7% (cumulative - 64.4%)	80.6% (cumulative - 66.4%)	72.6%	50.5% (cumulative 59.4%)		
milles are enabled to live healthier /es	Ben Anderson, Director Public	1.C1	choices that lead to successfu adult lives	Smoking status at time of delivery (women smoking during pregnancy)	Gilly Brenner, Consultant in Public Health	Low	Quarterly	18%	>	0	18.1%	17.1%	19.9%	17.9%	16.20%	14.00%	13.10%	13.80%	14.40%	11.5%	Data to be published 14 December 2021	
C. Children, young people and families (	Health	1.C2	and families to achieve and maintain healthier lifestyles	Childhood immunisation - % of eligible children who received 3 doses of DTaP / IPV / Hib vaccine at any time by their 2nd birthday (diphtheria, tetanus and pertussis/polio/Haemophilus influenza type b)	Gilly Brenner, Consultant in Public Health		Quarterly	95%	>	0	96.7%	96.7%	97.2%	96.6%	97.30%	96.70%	96.80%	97.40%	96.00%	96.3%	Data to be published December 2021	Despite sig face care th stable and

Q1 Apr - June 2021/22	Q2 Jul - Sep 2021/22	Data notes – please explain any relevant information about the data presented. This might reference the end of year position (status and DOT), improvements and benchmarking where necessary to aid understanding
		The Education Secretary announced that all key stage attaintment testing would not be taking place as a result of the coronavirus pandemic, school closures and pupils absences. Therefore there is no published performance data around these measures for 2019/2020 & 2020/2021.
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		The Education Secretary announced that all key stage attaintment testing would not be taking place as a result of the coronavirus pandemic, school closures and pupils absences. Therefore there is no published performance data around these measures for 2019/2020 & 2020/2021.
13	11 (8 - 2021/22 Academic Year)	
4	1 (0 - 2021/22 Academic Year)	
2% combined 4.6% (NEET) ) 1.6% (Not Known)	16.8% combined i) 2.6% (NEET) ii) 14.2% (Not Known)	The Q2 figures are not verified and are subject to a return extension of the end of October and are therefore subject to change. These targets are revised and updated each year. Performance is measured annually using a 3 month average between December and February.
72.6%	50.5% (cumulative 59.4%)	
11.5%	Data to be published 14 December 2021	Despite the changes to delivery of the service, good progress has been made in reducing smoking prevalence at time of delivery; a reduction of 20.7% compared to the average of the previous four quarters.
96.3%	Data to be published December 2021	Despite significant impact on primary care of the pandemic, and reduction in face-to- face care through lockdown periods, childhood vaccination uptake has remained stable and above target.

## Corporate Priority 2 – Every adult secure, responsible and empowered

	Overall s	status (relevant to target)		
	>	Measure progressing above or in line with target set	*	Measure under development (e.g. awaiting data collection or target-setting)
Key	•	Measure progress has been satisfactory but is not fully reaching target set		Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target)
	×	Measure has not progressed in accordance with target set		Measure information not available (e.g. due to infrequency or timing of information/data)

Outcome	Lead Accountability (Strategic	Ref No.	Action	Measure	Lead officer	Good performance	Frequency of reporting	Target	Overall status	DOT	Year end	Year end	Anı Year end	nual Year end	Year end	Year end	Q2	Q3	Quarterly Q4	Q1	Q2
	Director)										2015/16	2016/17	2017/18	2018/19	2019/20	2020/21		Oct - Dec 2020/21		Apr - June 2021/22	Jul - Sep 202
A. Adults are enabled to live healthier lives	Ben Anderson, Director of Public Health	2.A1	Implement Health and Wellbeing Strategy to improve the health of people in the borough	Successful completion of drug treatment – a) opiate users (aged 18-75)	Gilly Brenner, Consultant in Public Health	High	Quarterly	1.5% absolute increase on the value at new provider starting point in April 2018 (Target = 5.8%)	×	0	6.3% (2015)	3.9% (2016)	4.2% (2017)	4.1% (2018)	n/a Expected end- September 2020	3.90%	4.30%	3.00%	2.60%	2.33%	2.24%
		2.B1	Make <b>safeguarding</b> personal	The proportion of Safeguarding Adults at risk who felt their outcomes were met.	lan Spicer - Assistant Director of Independent Living and Support	High	Monthly	(Cumulative) 97%	>	U	72%	85%	98.3%	97.13%	97.90% (Cumulative)	97.4%	96.0%	96.7%	97.4%	100.0%	97.9% (cumulative
and support		2.B2	Ensure that information, advice and guidance is readily available (e.g. b increasing self assessment) and there are a wide range of community assets which are accessible	The proportion of people contacting adult social care who are provided with information and advice at first point of contact, (to prevent service need).	lan Spicer - Assistant Director of Independent Living and Support	High	Monthly	No longer applicable for target, see data notes.			N/A	N/A	N/A	38.8%	36.4%	27.8%	29.39%	21.66%	26.53%	26.2%	25.1%
personalised model of care a		2.B3	Improved approach to personalised services – always putiling users and	The proportion of Adults receiving long term community support who received a direct payment (excludes managed accounts)	lan Spicer - Assistant Director of Independent Living and Support	High	Monthly	25%	•	0	17.5%	19.2%	20.30%	23.28%	24.3% Final published % 25.5%	22.8%	23.5%	22.9%	22.9%	23.2%	23.8%
t and resilient within a	Anne Marie Lubanski, Strategic	2.B4	carers at the centre of everything we do	Number of carers assessments	lan Spicer - Assistant Director of Independent Living and Support	High	Quarterly	567	•	U	2,420	771	2,051	556	583	426	124	105	86	120	116
afe, independer	Director Adult Social Care and Housing	2.B5	Modernise <b>Enablemen</b>	The proportion of people (65+) offered the reablement service after discharge from hospital	lan Spicer - Assistant Director of Independent Living and Support	High	Annual	2.6%			1.7%	1.8%	2.24%	1.70%	2.24%	Not known					
and carers are supported to be s		2.B6	Services to maximise independence, including: • Intermediate care • Enabling • Prevention agenda • Developing community assets		Ian Spicer - Assistant Director of Independent Living and Support	High	Monthly	79% (Cumulative)	>	0	86.1%	81.9%	88.50%	93.50%	87.80%	93.10%	95.24%	85.00%	100.00%	89.0%	91.5%
B. Individuals		2.87	Commission services effectively, working in partnership and co- producing with users and carers; use resources effectively.		lan Spicer - Assistant Director of Independent Living and Support	Low	Monthly	<314 (Cumulative)	•	O	432	356	334	303	327	227	36	47	81	88	83
		2.B8		All age total number of people supported in residential/nursing care for adults	lan Spicer - Assistant Director of Independent Living and Support	Low	Monthly	860	>	U	1,288	1,111	1,023	933	885	771	774	759	749	815	828

2021/22	Data notes – please explain any relevant information about the data presented. This might reference the end of year position (status and DOT), improvements and benchmarking where necessary to aid understanding
%	The target was very close to being met just as we entered the pandemic, with the provider having worked hard to safely prepare services users for discharge. However the pandemic has had a significant impact on service users and their treatment. National guidance changed treatment protocols over lockdown periods to reduce face-to-face monitoring, with risk assessments for most service users favouring maintaining safely in treatment rather than discharge. Recovery from the impact of the pandemic is likely to be complex and medium-term.
% tive)	In quarter performance for quarter 2 was 94.4%, which has brought the year-to-date position down to 97.9%. However retaining 100% for this measure would be unrealistic and performance remains high and consistently above target.
%	Although this measure is no longer classed as a priority key measure performance is broadly inline with previous quarters. The overall demand for the First Point of Access within adult case is continues to be high in the current year and it is anticipated that by the 2021/22 year-end they will have received approx 22,000 contacts in total, (over 1500 increase on 2020/21). Additionally the service are reporting an increase in the complexity of needs within the cases.
%	Direction of Travel for this measure since last year end remains upwards whilst broadly stable. The outcome and action plan from the Direct Payments service review may impact on this measure in the future. This will be monitored and mitigating actions taken if concerns arise.
5	Service has identified various actions that will positively impact during the year to support total number of carer assessments through remaining quarters. This will switch 'practice' reporting from currently mainly joint assessments to individual Carer assessments, that will then be eligible to be counted in this area of activity support. The target was set prior to the pandemic remains a challenge. It is a measure of volume rather than performance. A monthly data report demonstrates that, on average, more carers assessments are being completed each month compared to last year therefore the year-end position should be above last year's position but lower than the number completed in 2019/20 (pre-pandemic). This measure requires data to be submitted by Health partners via their reporting systems. The measure's performance is not known by all Council's until published in the Autumn (October/November) by NHS Digital.
%	Reablement continue to operate taking on customers with a wider range of challenges and people who look likely to be optimised but also continue to need ongoing care and support. This ensures people are as independent as possible for them. Working with this wider cohort of people will lower performance levels over time from the high baseline of 93.1% to be more in line with national performance average figures of circa 80%, which is positive as the service supports those more complex customers to optimise. The Service also acknowledge that monthly fluctuations will reflect agreed actions for Reablement to flex support (up/down) with hospital discharges or assessment processing.
	Last year's admissions to care were impacted by the Covid-19 pandemic with numbers being significantly lower than previous years, therefore this should be considered when making any comparisons. In 2021 these figures have once again increased as confidence returns and Covid prevention and management procedures have been normalised. Quarter 2 numbers are slightly lower, but broadly inline with the previous quarter. This continues to be monitored regularly by senior management teams. Target amended in Q2 to align to Better Care Fund.
8	During 2020 during the heights of the pandemic, the number of adults within Residential or Nursing care fell significantly. During 2021 these numbers have slowly risen and as at the end of October they were at 828, however this is still well below pre-Covid levels (2019/20) of 885 and new admission numbers are not as high as those seen in the early summer. Our people (all age) living in residential care homes remains less than the comparable period in 2019/20 and this is reflective of the increased focus within adults' services to prevent, reduce and delay adult's need for care and support and that residential / nursing care must be always be last resort with all lesser restrictive options exhausted first.

#### Corporate Priority 3 – A strong community in a clean safe environment

	Overall s	status (relevant to target)		
(ey	>	Measure progressing above or in line with target set	*	Measure under development (e.g. awaiting data collection or target-setting)
x	•	Measure progress has been satisfactory but is not fully reaching target set		Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target)
	×	Measure has not progressed in accordance with target set		Measure information not available (e.g. due to infrequency or timing of information/data)

_											1												
	Outcome	Lead Accountability	Ref No.	Action	Measure	Lead officer	Good performance	Frequency of reporting	Target	Overall	DOT		1	_ 	Innual					Quarterly		02	Data note (status an
		(Strategic Director)								status		Year end 2015/16	Year end 2016/17	Year end 2017/18	Year end 2018/19	Year end 2019/20	Year end 2020/21	Q2 Jul - Sep 2020/21	Q3 Oct - Dec 2020/21	Q4 Jan - Mar 2020/21	Q1 Apr - June 2021/22	Jul - Sep 2021/22	
			3.A1(a)		Public perception of ASB (via the "Your Voice Counts" quarterly survey)	Tom Smith - Regeneration and Environment	Low	Quarterly	43% or lower	~	U	30%	32%	34%	44%	39% (based on average of the 3 quarters where data is available)	39% (average for the year)	39%	38%	39%	39%	43%	Rotherhan (46% & 51
			3.A1(b)	Ensure that the	Reduce the number of repeat victims of ASB	Tom Smith - Regeneration and Environment	Low	Quarterly	50 or fewer repeat callers per quarter	~	0			309 (total for year)	138 (total for year)	125 (total for year)	199	53	31	42	44	32	Repeat vic
			3.A2	Safer Rotherham Partnership is robust and fit for purpose. Develop an effective Community Safety Strategy and Performance	The proportion of positive outcomes over the year, for reported Hate Crime cases	Tom Smith - Regeneration and Environment	High	Quarterly	20%	×	U	38%	22%	Currently not available, see data notes	15%	18.95%	16.83% (average for the year)	17.90%	21.80%	4.2%	9.5%	8.4%	Improved the Com the increa investiga contactin
			3.A3(a)	Management Framework	Total number of referrals to Domestic Abuse support services	Tom Smith - Regeneration and Environment	High	Quarterly	700 per quarter	~	0				2.855	3,046	4,692	1210	1172	1108	1226	1660	There were
		Paul Woodcock, Strategic Director Regeneration and Environment	3.A3(b)		The proportion of people receiving Domestic Abuse support who are satisfied with the service	Tom Smith - Regeneration and Environment	High	Annual	80%						71%, (further 20% partly satisfied)	80% (Further 16% agreed)	95%						Due to low referals th
		Environment	3.A4(a)	Ensure an robust, effective and	The number of on the spot inspections of taxis	Tom Smith - Regeneration and Environment	High	Quarterly	10% of licensed vehicles and drivers annually (110 and 80 respectively)	×					127	121 cumulative	N/a	N/a	N/a	N/a	N/a	36	Inspection
	ple to feel safe		3.A4(b)	efficient licensing service	The proportion of a) licensed vehicles b) drivers found to be compliant with licensing requirements during in the spot inspections	Tom Smith - Regeneration and Environment	High	Quarterly	85% (Vehicles and drivers)	•					75%	Rolling Average Vehicles = 70% Drtivers = 83%	N/a	N/a	N/a	N/a	N/a	a) 81% b) 86%	
	trong and help pec		3.A5 a)	Rotherham residents are satisfied with their	a) How satisfied or dissatisfied are you with your local area as a place to live	Christopher Burton, Assistant Chief Executive's office	High - very or fairly satisfied	6 monthly	Equal to or >79%	•	U	79% June 2015 82% December 2015 satisfied or fairly satisfied	81% December	79% June 2017 75% February 2018 Very or fairly satisfied	79% (Wave 8 December 2018)Very or fairly satisfied		84% (Wave 10 June 2020) very or fairly satisfied				80% (Wave 11 June 2021) very or fairly satisfied.		The first R The most i Satisfactio responden national av (16%) exp
	A. Communities are s		3.A5 b)	local area and borough as a place to live	<li>b) Overall, all things considered, how satisfied or dissatisfied are you with Rotherham Borough as a place to live</li>	Christopher Burton, Assistant Chief Executive's office	High - very or fairly satisfied	6 monthly	>69%	×	U	69% June 2015 61% December 2015 very or fairly satisfied	66% December	56% February 2018 Very or Fairly Satisfied	61% (Wave 8 December 2018) Very or Fairly Satisfied		64% (Wave 10 June 2020) Very or Fairly Satisfied.				62% (Wave 11) June 2021) very or fairly satisfied.		Satisfactio although th as a place only 55% s Residents The next s
	1		3.A6		Number of engagements with the Council's Culture and Leisure facilities which help adults and children learn , develop their skills or get a job.	Polly Hamilton - Regeneration and Environment	High	Quarterly	>350,000 cumulative annual target.	×	U			400,228	465,734	483,267	220,921	125,032	N/a	N/a	39,157	69,387	As CST se Downward
		Paul Woodcock, Strategic Director Regeneration and Environment	3.A7	Create a rich and diverse cultural offer and thriving Town Centre	Customer satisfaction with culture, sport and tourism services	Polly Hamilton Regeneration and Environment	High	Quarterly	>90% across all Culture, Sport and Leisure Services	~	U			CSC) 99.% b- Heritage Sites) 91% c- Parks and Open Spaces) 84%	d- Sport & Leisure	92.32%	N/a	N/a	N/a	N/a	92.31%	91.20%	Individual Libraries 9 Heritage 8 Open Spa PFI Sport
			3.A8		Number of visits to the Councils, Culture and Leisure facilities a - Libraries b - Citifon Park Museum, archives and other heritage sites c - Civic Theatre d - County Parks (Rother Valley, Thyrbergh and Clifton Park) e - Visitor Information Centre f - Events g - Engagement and Outreach Activities h - Leisure Centres i - Other activities delivered by Third Parties	Polly Hamilton - Regeneration and Environment	High	Quarterly	3,500,000 cumulative annual target	~	0			a: 538,851 b: 110,217 c: 86,961 d: 1,034,416 e: 47,326 f: 69,660 g: 31,226,570 b: 1,320 Total no. of visits = 3,216,546	a: 616,179 b: 111,154 c: 80,578 c: 0,578 c: 0,138,798 e: 0 f: 68,460 g: 6,996 h: 1,307,965 i: 0 Total no. of visits = 4,030,130	a: 146,679 b: 13,065 c: 16,521 c: 16		a: 5,196 b: 3,010 c: 360,866 e: 0 f: 3,000 g: 225 h: 27,219 i: 0 Total no. of visits = cumulative = 789,894	a: 6,707 b: 7,959 c: 0 d: 175,808 e: 3,383 f: 150 g: 395 h: 82,774 i: 0 Total no. of visits = 277,176 cumulative = 1,067,070	a: 2.776 b: 10,801 c: 0 d: 359,299 e: 0 f: 87 g: 15 h: 3,132 f: 0 Total no. of visits = 1,443,180	e: 5,539 f: 0	a) 37.239 b) 25.222 c) 0 d) 574,311 e) 0 f) 90,000 g) 672 h) 222,110 i) 0 Total Visits = 957,663 Cumulative Visits =1.672,717	The easing pandemic.

tes – please explain any relevant information about the data presented. This might refe and DOT), improvements and benchmarking where necessary to aid understanding

Rotherham residents perception of ASB has increased for Q2 but is still a better outturn than for both Barnsley and Doncaster residents (46% & 51% respectively).

Repeat victims of ASB in Quarter 2 were 21 cases lower than in Q2 2020-21.

Improved performance achieved from quarter 4, but still the outturn is of concern. These issues have been raised with the Community Protection Unit and South Yorkshire Police, initial feedback is that they could not identify any patterns in the increase in Hate Crime i.e. no real hot-spots or hot-times. In regard to obtaining positive outcomes to Hate-Crime investigations. SYP have identified opportunities that will minimise the delay in the crime being reported and an officer contacting the victim [currently delays of over 7-days due to a SYP process].

There were 199 more incidents recorded in Quarter 2 than in Quarter 1, and 450 more than Quarter 2, 2020-21.

Due to low levels of available data the service measure for 2021-22 is to be the engagement rate of commissioned services, i.e. the % of referals that lead to the take-up of support from that service.

Inspections started again in Q2. Licensed vehicles fall just behind the target of 85% with 81%.

The first Resident Satisfaction Survey was conducted in June 2015 The most recent survey was conducted in June 2021 Satisfaction with the local area within Rotherham as a place to live has reduced slightly but remains high and fairly stable. 80% of respondents in Wave 11 reported feeling 'vey satisfied' or fairly satisfied' which is the average recorded level across all waves. The national average is 82%, Young adults (aged 18-24 years) were the least likely to report being' satisfied' (72%) although a large percentage (16%) expressed a neutral view. People aged 55-64 years and aged 65-are the most likely to be satisfied with the local area (84%). Satisfaction with the Borough as a place to live reduced slightly to 62%. This was the same as the average of the previous surveys, although there has been considerable fluctuation between waves. Respondents aged 65-4 were most likely to feel satisfied with Rotherham as a place to live, with 68% satisfied. Respondents aged 45-24 had the lowest level of satisfaction with Rotherham as a place to live was highest amongst people aged 45 and above. Residents are slignificantly more satisfied with their own local area (average 80%) than the borough as a whole (average 62%) The next survey will be conducted in June 2022.

As CST services start to re-open the Engagement figure should steadily improve. Downward DOT due to seasonal comparison

Individual Service Figures for Q2 are; Libraries 99.74% Heritage 87.30% Open Spaces 87.77% PFI Sport & Leisure Facilities 90%

The easing of restrictions has seen an increase of 43% in visitors from Q1 to Q2. We expect these figures to continue to rise to pre-trandemic.

Outcome	Lead Accountability	Ref No.	Action	Measure	Lead officer	Good performance	Frequency of reporting	Target	Overali status	DOT			A	Innual		1			Quarterly	1	Q2	Data n (status
	(Strategic Director)	3.B1 (a)		The proportion of the principal road network classified as being in: a) Amber condition b) Red condition	Tom Smith - Regeneration and Environment	Low	Annual	a) 17% b) 3%			Year and 2015/16	Year end 2016/17 3%	Year end 2017/18 2%	Year end 2018/19	a) 15% b) 2%	Year end 2020/21 a) 17% b) 2%	Q2 Jul - Sep 2020/21	Q3 Oct - Dec 2020/21	Q4 Jan - Mar 2020/21	Q1 Apr - June 2021/22	Jul - Sep 2021/22	
	Paul Woodcock, Strategic Director Regeneration and Environment	3.B1 (b)	Deliver a cleaner, greener Rotherhan to ensure that it is a safe Rotherham to ensure that it is a safe and attractive place to live, work	a) Amber condition	Tom Smith - Regeneration and Environment	Low	Annual	a) 22% b) 6%			6%	7%	5%	4%	a) 19% b) 3%	a) 19% b) 2.5%						
		3.B1 (c)	and visit	The proportion of unclassified roads classified as being in; a) Amber condition b) Red condition	Tom Smith - Regeneration and Environment	Low	Annual	a) 34% b) 24%	•	0	24%	23%	23%	23%	a) 32% b) 22.5%	a) 27% b) 20% (average for year)	a) 28% b) 20%	a) 27% b) 19%	a) 26% b) 19%	a) 25.21% b) 18.23%	a) 24.39% b) 17.55%	Q2 retu
aintained		3.B2(a)		Effective enforcement action taken where evidence is found a) Fly Tipping (fixed penalty notices and prosecutions)	Tom Smith - Regeneration and Environment	High	Monthly	37+ (50% increase in prosecutions for the year)	~	0	Not available - baseline year	25	42	23	94 (cumulative)	65 (Cumulative)	21 (Cumulative+ 47	4 (Cumulative + 51)	14 (Cumulative = 65)	12	16 (Cumulative = 28)	As the
are clean and well m		3.B2(b)		Effective enforcement action taken where evidence is found b) Other enviro-crime (fixed penalty notices and prosecutions)	Tom Smith - Regeneration and Environment	High	Monthly	2000 (cumulative for the year)	×	0	Not available - baseline year	185	6,673	1,796	3, 036 (cumulative)	569 (cumulative)	N/a	N/a	N/a	110	367 (Cumulative 477)	Data p
B. Streets, public realm and green spaces	Paul Woodcock, Strategic Director Regeneration and Environment	3.B3	Deliver a cleaner, greener Rotherham to ensure that it is a safe Rotherham to ensure that it is a safe and attractive place to live, work and visit	Total number of customer contacts by service area and overall total. Service areas measured are a) Street Cleansing, b) Grounds Maintenance, c) Litter, d) Waste Management. Contacts measured in Official complaints i) Official complaints ii) Compliments received ii) Service Requests	Tom Smith - Regeneration and Environment	Low	Monthly	10% reduction ( target around 190 cumulative for year) in the number of official complaints received.	~	n			Waste Management i) Complaints 64 ii) Compliments 29 iii)Service	Litter i) Complaints 4 ii) Compliments 1 iii)Service Requests 1227 Waste Management i) Complaints 176 ii) Complaints 176 ii)Service Requests 39466 Overall number of	i) Compliants 6 ii) Compliants 7 iii) Compliants 23 iii) Service Requests 39 ii) Compliants 9 ii) Compliants 0 iii) Compliants 3 ii) Compliants 3 ii) Compliants 3 ii) Compliants 5 ii) Service Requests 766 Waste Management 1) Compliants 190 ii) Compliants 190 ii) Compliants 190 ii) Service Requests 47736 Total cumulative compliants figure=	iii) Service Requests 759 Street Cleansing i) Compliants 1 iii) Compliants 1 iii) Compliants 3 iii) Service Requests 1,047 Waste Management 1,047 Waste Management 13 iii) Compliants 13 iii) Compliants 13 iii) Compliants 13 iii) Service Requests 94,824	i) Compliants 5 ii) Complianents 2 iii) Complianents 2 iii) Service Requests 425 Street Cleansing i) Compliants 0 ii) Compliants 0 ii) Compliants 0 ii) Compliants 0 ii) Compliants 0 ii) Compliants 0 ii) Compliants 4 ii) Compliants 46 ii) Compliants 48 ii) Compliants 48 iii) Compliants 48 ii) Compliants 48 iii) Compliants 48 ii	Grounds Maintenance ) Complaints 1 ii) Compliments 1 iii) Service Requests 74 Street Cleansing ) Complaints 1 ii) Complaints 28 ii) Complaints 18 ii) Complaints 18 ii) Complaints 28 ii) Complaints 18 ii) Complaints 1	i) Complements 0 ii) Complements 0 iii) Service Requests 73 Street Cleansing i) Complements 0 iii) Service Requests 2,560 Lifter i) Complements 0 iii) Service Requests 510 Waste Management i) Complements 1 iii)Service Requests 53,723 Code Requests 54,724 Code Request 54,724 Code Requ	i) Compliants 5 ii) Complianents 3 iii) Service Requests 417 Street Cleansing ii) Compliants 0 ii) Compliants 0 ii) Service Requests 2,088 Litter ii) Compliments 0 ii) Compliments 0	Grounds Maintenance () Complaints 5 ii) Compliments 2 ii) Service Requests 746 Street Cleansing ) Complaints 0 ii) Complaints 0 ii) Complaints 0 ii) Complaints 0 ii) Complaints 0 ii) Complaints 0 ii) Complaints 4 iii)Service Requests 237 Waste Management 0 Complaints 46 ii)Service Requests 11,746 Overall number of compliments = 7	18 mori fewer c DOT b
		3.B4	Ensure an efficient	Number of missed bins per 100.000 collections	Tom Smith - Regeneration and Environment	Low	Quarterly	50	×	U	62.7	46.92	42.21	69.51	84.16	84.25 (average for the year)	88	76	80	46	101	The nu these fi verifica impacte of the C
		3.B5	and effective waste and recycling service	The proportion of waste sent for reuse (recycling and composting)	Tom Smith - Regeneration and Environment	High	Quarterly	45%	×	U	43.11%	45.30%	46.11%	45.60%	45% (Average for year)	38.24% (average for the year)	43.04%	35.79%	34.70%	43.26%	42.29%	Perforr

ata notes – please explain any relevant information about the data presented. This might reference the end of year position tatus and DOT), improvements and benchmarking where necessary to aid understanding
2 return demonstrates again the continued improvements made to the unclassified road network.
s the service continues to be impacted by the pandemic, performance in Q2 is starting to slightly increase.
ata provided by Kingdom indicates the service is now resuming since the pandemic.
I more complaints were received in Q2 when compared to Q1 of 20-21 but when when seasonal trends are taken into account, Q2 had 23 wer complaints then Q2 20-21 therefore Direction of travel recorded accordingly. OT based on comparison to Q2 2020/21.
ne number of Missed Bins per 100,000 collections increased by 120% in Q2, that is 101 per 100,000 in Q2 against 46 in Q1. However ese figures are subject to frication as they may include bins that werent missed, but were collected late due to driver shortages. They may also be negatively
Infrancial a si nor men induce ana vienen misseo, bui viere concetto ane de lo direta silonages. They may also be negenvery apected by the suspension the Garden Waste Service.

Performance in recycling has reduced slightly for Q2.

#### Corporate Priority 4 – Extending opportunity. Prosperity and planning for the future

		Overall status (relevant to target)																		
Key		>	Measure progressi	ng above or in line with target set		*	Measure under development (e.g. awaiting data collection or target-setting)													
	-	•		has been satisfactory but is not fully reaching target set			Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target)													
		×	Measure has not pr	rogressed in accordance with target set			Measure info	re information not available (e.g. due to infrequency or timing of information/data)												
Outcome Lead Accountability (Strategic Director)																				
		Ref No.	Action	Measure	Lead officer	Good performance	Frequency of reporting	Target					Anı	ual						
Outcome						performance	reporting		Overall status	DOT	Year end	Year end	Year end	Year end	Year end	Year end	Q2	Q3	Q4	
											2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	Jul - Sep 2020/21	Oct - Dec 2020/21	Jan - Mar 2020/21	
A. Businesses supported to grow and employment opportunities expanded across the borough		4.A1		Number of new businesses started with help from the Council	Simon Moss - Regeneration and Environment	High	Quarterly	15	•	U			13.75	14.5 (average for the year)	14.25 (average for the year)	10 (Average for year)	10	15	9	
		4.A2		Survival rate of new businesses (3 years)	Simon Moss - Regeneration and Environment	High	Annual	60%			60%	60.5%	62.9%	57.70%	55.30%	Data not yet available				
	Paul Woodcock, Strategic Director	4.A3	.A6	Deliver economic growth (via the	The proportion of vacant floor space in the Town Centre area	Simon Moss - Regeneration and Environment	Low	Quarterly	18%	×	0			22.0%	24.5% Yearly average	17.3% Yearly average based on 3 quarters.	Not conducted due to pandemic.	N/a	N/a	N/a
	Regeneration and Environment	4.A4		Number of jobs in the Borough	Simon Moss - Regeneration and Environment	High	Annual	1,000 new jobs p.a. (10,000 over 10 years).			101,000	105,000	98,000 (Annual Data to Dec 17)	99,000 (Annual data to Dec 18)	98,000 (Annual data to Dec 19)	Not yet available				
		4.A5		Narrow the gap to the UK average on the rate of the working age population economically active in the borough	Simon Moss - Regeneration and Environment	Low	Quarterly	0% - achieve the National Average	>	0	1% gap	4.3%	3.23%	-0.40%	4.20%	-1.20%	3.30%	-1.20%	Data not yet released.	
		4.A6		Number of Planning Applications determined within specified Period: a) Major 13 weeks b) Minor 8 weeks c) Other 8 weeks	Simon Moss - Regeneration and Environment	High	Quarterly	All at 95%	•	9	89.9%	99.9%	a) 100% b) 100% c) 100%	a) 100% b) 100% c) 100%	a) 100% b) 100% c) 100%	a) 100% b) 100% c) 100%				
h meets their need, whether in the social rented, private A. Businesses supported to grow and employment opportunities expanded across the borough e ownership sector		4.B1(a)	Number of new homes delivered during the year via direct Council intervention	Paul Walsh - Acting Assistant Director of Housing	High	Quarterly	225	×	U				112	177	177	80	27	16		
ether	Anne Marie Lubanski, Strategic	4.B1(b)	Implement the Housing Strategy 2019-2022 to provide high quality accommodation	Number of new homes delivered during the year	Paul Walsh - Acting Assistant Director of Housing	High	Quarterly	550	Image: None role       Image: None role       Image: None role         Vjobs p.a. over 10 rs).       Image: None role       Image: None role       Image: None role         ieve the Average       Image: None role       Image: None role       Image: None role       Image: None role         95%       Image: None role         95%       Image: None role         95%       Image: None role         95%       Image: None role         95%       Image: None role       Image: None role <td>479</td> <td>427</td> <td>551</td> <td>540</td> <td>N/A</td> <td>N/A</td> <td>477</td>	479	427	551	540	N/A	N/A	477				
ity accommodation which rented or home	Director Adult Social Care and Housing.	4.B2	4.B2		The proportion of council housing stock that is classed as "decent"	Paul Walsh - Acting Assistant Director of Housing	High	Quarterly	99.5%	>	0	100%	100%	100%	100%	100%	99.95%	N/A	N/A	99.95%
People live in high	-	4.B3	Private rented housing – improving standards through selective licensing	The proportion of privately rented properties compliant with Selective Licensing conditions within designated areas	Tom Smith - Regeneration and Environment	High	Monthly	95%				85%	94.2%	95.7%	97.10%	N/a	N/a	N/a	N/a	

		Data notes – please explain any relevant information about the data presented. This might reference the end of year position
Q1	Q2	(status and DOT), improvements and benchmarking where necessary to aid understanding
Apr - June 2021/22	Jul - Sep 2021/22	
20	14	Although Q2 figures are down from Q1 it still shows a strong performance of 14 in terms of annual targets. In Quarter 2, 6 Businesses were assisted to start up in the Councils Business Centres and 8 by the Launchpad project.
		There are no scheduled publication dates as of yet by the ONS on the publication of this data. 2019-20 data was published in November 2020.
26%	25%	Information is now available for this measure.
		The number of employee jobs in Rotherham had decreased to 98,000, at the end of Dec 2019. Data is contained in the Business Registry & Employment Survey last released by the ONS in November 2020 up to the end of Dec19. The ONS notes that due to Covid some statistics have been suspended to enable them to develop Covid related information.
0.01%	Not yet available	Latest data released gives return up to the end of June 21 at which point local performance was very slightly below the national average figure of 79.4%, (Rotherham 78.3%) suggesting resilience locally continues to compare favourably when compared with the national average.
a) 100% b) 100% c) 100%	a) 100% b) 100% c) 100%	A continuation of the Planning Services good performance highlighted by another 100% return in each category of Planning application.
48	26	Some of the homes that had been projected to complete in the current financial year will now complete in early 2022/23, largely due to industry-wide labour and materials shortages. Progress is being monitored closely and all possible actions are being taken to accelerate completions.
239	125	All NHBC returns for Q2 completions125 units to 30th September 2021
99.95%	99.97%	As at 31st September a total of 6 non decent properties have been made decent through the 2021/22 Internal Refurbishment Capital programme. With 7 properties still as yet to receive their planned capital works, the percentage of housing stock that meet the decent homes standard is 99.97%, an increase from 99.94% at 1st April 2021. It is anticipated that the remaining 7 properties will be completed by 31st March 2022.
N/a	N/a	In April 21 the Selective Licensing scheme came into operation in the following areas: . Dinnington Eastwood & Town Centre . Maltby SE . Masborough . Parkgate . Thurcroft To date Inspections to provide data for this measure have yet to recommence.

## Corporate Priority 5 – A modern, efficient Council

	Overall s	tatus (relevant to target)					
ey	<b>&gt;</b>	Measure progressing above or in line with target set	*	Measure under development (e.g. awaiting data collection or target-setting)			
X	•	Measure progress has been satisfactory but is not fully reaching target set		Measure not applicable for target (e.g. baseline year, or not appropriate to set a specific target)			
	×	Measure has not progressed in accordance with target set		Measure information not available (e.g. due to infrequency or timing of information/data)			

L				• •								-				J				
			. Action	Measure	Lead officer		Frequency of reporting	Target	Overall											
	Lead Accountability					Good performance									Annual			Quarterly		
Outcome	(Strategic Director)								status	DOT	Year end 2015/16	Year end 2016/17	Year end 2017/18	Year end 2018/19	Year end 2019/20	Year end 2020/21	Q2 Jul - Sep 2020/21	Q3 Oct - Dec 2020/21	Q4 Jan - Mar 2020/21	Q1 Apr - June 2021/22
Luse of assets and resources and services demonstrate value for money	Judith Badger, Strategic Director Finance and Customer Services	5.A1		The proportion of Council Tax collected in the current financial year	Graham Saxton - Finance and Customer Services	High	Monthly	97% (Top Quartile Met Authorities)	•	0	97.3%	97.3%	97.0%	96.8%	96.4%	96.6%	52.6%	78.7%	96.55%	27.63%
A. Maximised use of asse demonstrate		5.A2		The proportion of non-domestic (business) rates collected in the current financial year	Graham Saxton - Finance and Customer Services	High	Monthly	98% (Top Quartile Metropolitan Authorities)	•	0	98.1%	98.3%	98.5%	98.5%	97.9%	97.0%	48.5%	79.0%	96.95%	21.05%
B. Effective Governance Arrangements and decision making processes are in place	Jo Brown, Assistant Chief Executive	5.B1	The Scrutiny function is effective; engages members and improve outcomes for Rotherham residents and communities	Number of pre-scrutiny recommendations adopted	Emma Hill, Assistant Chief Executive's Directorate	High	Quarterly	90%	•	0	Not available not previously been required	100%	96%	95%	99%	100%	100%	100%	100%	100%
rs to understand		5.C1	Treating customer complaints with respect and dealing with them in an efficient and outcome-focussed way	The proportion of complaints closed and within timescale	Simon Dennis - Assistant Chief Executive's Directorate	High	Monthly	85% (Cumulative)	•	U	80%	89%	79%	87%	89%	87%	87%	87%	84%	87%
are responsive to custome and relate to their needs	Jo Brown, Assistant Chief Executive	5.C2	Resident satisfaction - Assessing overall public opinion on the way the council is working and responding to customers	The proportion of residents who feel that the Council keeps them informed	Christopher Burton, Assistant Chief Executive's Directorate	High - very or fairly satisfied	6 monthly	Equal to or >50%	•	U	44% June 2015 49% December 2015	43% June 2016 48% December 2016	49% June 2017 53% February 2018 very or fairly well informed	53% (Wave 8 December 2018) very or fairly well informed	51% (Wave 9 June 2019) very or fairly well informed	58% (Wave 10 June 2020) very or fairly well informed				50% (Wave 11 June 2021) very c fairly well informe
C. Staff listen and a	Judith Badger, Strategic Director Finance and Customer Services	5.C3	Enable customers to be active and interact with the Council in an efficient way, accessing more services online	The number of transactions online	Luke Sayers - Finance and Customer Services	High	Quarterly	3% increase year on year (2021/22 185,400 for the year (46,350 per quarter)	•	0	36%	21%	25% (average total for the year)	37% (average total for the year)	29% (average total for the year)	31% (average for the year)	30%	23%	37%	43,600
		5.D1	Staff and managers have an opportunity to reflect on performance, agree future objectives and are aware of how they contribute to the overall vision	The proportion of PDR completion	Lee Mann, Assistant Director HR and OD	High	Quarterly	95%	•	0	96%	96%	93%	96% (cumulative)	96% (cumulative)	87% (cumulative)	29.7%	54.5%	86.7%	2.3%
fture		5.D2	Sickness is managed and staff wellbeing supported	The number of days lost per FTE	Lee Mann, Assistant Director HR and OD	Low	Monthly	10.3	×	U	10.43 Days (excluding schools)	10.97 Days (excluding schools)	10.26	11.40 days (excluding schools)	10.55 days	11.34	10.77	10.96	11.34	11.44
ganisational cut		5.D3	5.D3 Reduced use of interims, temporary	Reduction in Agency cost	Lee Mann, Assistant Director HR and OD	Low	Monthly	10% reduction	×	U	£6.8m	£10.2m	£8.33m	£6.831m	£3.63m	£3.86m	£3.35m	£3.67m	£3.86m	£3.87m
workforce and or	Jo Brown, Assistant Chief Executive	5.D4	and agency staff through effective and efficient recruitment	The proportion of the children's social care establishment (social workers and team managers) who are agency staff.	Suzanne Joyner, Strategic Director CYPS	Low	Monthly	10%	~	0		22.8% (67.5)	18.6% (60)	4.93% (14)	1.60% (4)	12.53% (30)	7.30% (19)	7.84% (19)	12.53% (30)	10.14% (26.6)
sctive members.		5.D5	Members are able to fulfil their roles as effective community leaders	The proportion of members receive a personal development interview leading to a structured learning and development plan	Emma Hill, Assistant Chief Executive's Directorate	High	Annual	95%			80%	87%	100%	Not available see data notes	Not available see data notes	Not available see data notes				
D. Effe		5.D6	The Council complies with good practice in equalities	The proportion of Cabinet reports where an Equality Analysis Screening Assessment has been completed	Simon Dennis - Assistant Chief Executive's Directorate	High	Quarterly	100%	•	0					84%	99%	95.0%	100%	100%	100%
		5.D7		The proportion of Council Staff who have completed the mandatory Equality Training	Simon Dennus - Assistant Chief Executive's Directorate	High	Quarterly	Q1 - 75% Q2 - 85% Q3 & Q4 - 95%							94.3%	94%		95%	94%	92%

		Data notes – please explain any relevant information about the data presented. This might reference the end of year position (status and DOT), improvements and benchmarking where necessary to aid understanding
e	Q2 Jul - Sep 2021/22	
	53.63%	The Council Tax in-year collection rate has two targets of 97% collected and to be Top Quartille for Metropolitan Councils. For 2020/21 the total Council Tax charged was £133.8 million meaning a 0.1% change in collection rates equates to £134k. The Covid pandemic impacted the collection of council tax during 2020/21 in a number of ways. However, although the first target of 97% was not quite achieved the performance actually increased from 96.41% in 19/20 to 96.55%. The Council Tax collection rate was the 5th highest Met (out of 36) meaning it achieved the second target of top quartile Mets. The Metropolitan Council average for 2020/21 fell by 1.2% to 93.8%, demonstrating the general Covid impact. Had Rotherham performed at the Met average it would have collected 5.37 million less from last year's Council tax. The Council also collected over £3m of previous years' council tax arrears. The DoT rating is based on the fact that the 97% target was not achieved.
	48.09%	The Business Rates in-year collection rate has two targets of 98% collected and to be Top Quartile for Metropolitan Councils. For 2020/21 the total Business Rates charged was £47.8 million meaning a 0.1% change in collection rates equates to £48k. The Covid pandemic impacted the collection of business rates in 2020/21 in a number of ways. The first target of 98% was not achieved with performance decreasing from 97.89% in 2019/20 to 98.95%. The Business Rates collection rate was however 2nd highest Met (out of 36) meaning it achieved the second target of top quartile Mets. The Metropolitan Council average for 2020/21 fell by 5.8% to 91.6%, demonstrating the Covid impact generally. Had Rotherham performed at the Met average it would have collected £2.6 million less from last year's Business Rates.
	100%	The DoT rating is based on the fact that the 88% target was not achieved 6 out of 6 recommendations adopted during Q2. OSMB cancelled one meeting in Oct so no pre- decision disculsons took place.
	84%	Currently at target (five year average 84%). Q2 all directorates performing at or over 84%. However, Complaints Team will continue to work with the identified service areas to understand why complaints are being responded to out of time with a view to improving performance in Q3.
11 ry or rmed		50% of Rotherham respondents in Wave 11 said that RMBC keeps residents 'very well' or 'fairly well' informed about the services and benefits it provides. This is below the most recent national result (67%) but above the average for Rotherham surveys and 7% higher than in June 2016. The next survey will be conducted in June 2022.
	52,157	The measure for 2021/22 has been amended to the number of transactions online to provide a better reflection of progress and a target has been set of 3% increase year on year. 2021/22 has a target of 185,400 for the year (46,350 per quarter). Q2 is above target reflecting progress on digital work including new form publication and improved processes.
	11.8%	From 1 June until 30 November staff are able to complete PDRs using the new PDR template. The DOT is based on a comparison to Quarter 1 2020/21.
	12.38	Absence in frontline services still remains high and is related to the continuing pandemic. Additional management support from HR to help managers in front line services manage the absence continues. Revised Health & Wellbeing microsite launched
	£4.75m	Projected agency expenditure has increased as front line services have had to use to plug staffing shortages caused by the ongoing pandemic. Benchmarking shows the Council's usual expenditue level, around £4m each year, is in line with other Councils in the regional.
	7.2% (17.4)	
		Whilst a significant number of measures are in place to help Members fulfil their roles as community leaders, specific develeopment plans haven't been produced due to limited resources. There is an ambition to re-introduce this process in 2021/22 with support from the LGA.
	100%	19 Cabinet reports in total, all of which had completed equality screenings. Of these, 11 identified the need to complete a full Equality Analysis. 6 of these had full Analyses attached, the remaining 5 did not submit an EA with the report.
	Not available	Data not currently available as quality assurance checks being conducted.