HM Passport Office

General Register Office

Local Authority Annual Performance Report 2021-22

Local Authority: Cambridgeshire

Introduction

GRO acknowledge that 2021/22 has, again, been an extremely challenging year for the Local Registration Service in England and Wales. Civil Registration continues to maintain a high profile, playing a critical role in supporting society's response to the COVID-19 pandemic. It is as a result of the flexibility, hard work, dedication and professionalism of your teams that the delivery of this key public service has been maintained.

Whilst Proper Officers are required to provide annual assurance to the Registrar General it is recognised that your current focus will be on maintaining service delivery and planning pandemic recovery activity. Following feedback from the National Panel for Registration on the pressures currently faced by the local registration service GRO have extended the submission date for the annual report to 1st June 2022 to help support local authorities.

In order to complete your Annual Performance Report, you should refer to 'The Proper Officers Guide to Registration Service Delivery' (the PO Guide) and associated appendices. For guidance log on to the Registrar's Website. For ease of reference, the relevant sections of the PO Guide have been listed within each element of this template.

If you have any problems in completing the report, please contact your Compliance Officer - Dale Mason. dale.mason@hmpo.gov.uk tel – 07771378257.

Part A: Key Performance Indicators and Key Performance Targets

In this section you are required to report on your performance in terms of registration timeliness for 2021/22. In the "comments" section of the tables please explain the reasons for any under-performance, trends identified between the two years and where appropriate provide details of any proposed remedial action or good practice. To assist in the completion of this section, refer to PO Guide 6.2-6.5 and appendices B1: Good Practice Guide: Statutory Standards and B2: Good Practice Guide: Operational Service Delivery and Performance Standards.

Part A (i). Key Performance Targets / Indicators		
Registration timeliness (national target)	**2020-2021** (CPU to populate)	**2021-2022** (Please provide percentage attainment level)
Births - 98% registered within 42 days	74%	97%
Still births - 98% registered within 42 days	100%	98%
Deaths with MCCDs (no coronial involvement) - 90% registered within 5 days	78%	73%

Part A (ii). Key Performance Targets – Appointments			
	Electronic diary reports (tick)	Periodic diary checks (state the frequency)	Other (please specify)
Confirmation you have an appropriate appointment monitoring mechanism in place	✓	Every weekday	

Part B: Customer Engagement Strategy

In this section you are required to confirm that a customer engagement strategy is in place. Refer to PO Guide 6.30-6.32 and appendix A4: Customer Engagement Strategy Framework.

Part B: Customer Engagement Strategy	Yes (tick)	No (tick)	Comments
i. Do you have a Customer Engagement Strategy in place?	✓		This is due for review during 22023 (delayed due to impact of pandemic)
ii. If you measure Customer Satisfaction and you have numerical values please provide the latest figures for 2021/22			N/A - all feedback recorded but no numerical data collated

Part C: Public Protection and Counter Fraud (PPCF) Framework

Before completing this section, you should self-assess against **all** elements of the PPCF Assurance Framework.

Your findings from the self-assessment should be provided in the table below. In the "comments" box below, please provide details of remedial action being taken for elements of the PPCF framework that are not currently being met.

If a local authority has undertaken self-assessment against the PPCF framework and created its own assessment document <u>and where the document provides sufficient information to meet the reporting requirement below</u> you may simply attach a copy. There is no need to attach associated evidence.

The GRO Compliance & Performance Unit will undertake local field checks to ensure that the information provided is accurate and appropriately reflects local authority performance.

To assist in the completion of this section, please refer to PO Guide 6.6-6.29 and appendix A3: Public Protection and Counter Fraud Assurance Framework.

Criteria	Monitoring in place for each element		Number of elements…	…of which	
	Yes	**No** Please detail, by number and title, elements not being monitored and proposed remedial action / work in progress (e.g. 7.3 Data protection: technical audits to be introduced)		**Compliant**	**Not compliant** Please detail, by number and title, non-compliant elements and proposed remedial action / work in progress (e.g. 1.1 Statutory deadlines: Training to be introduced to ensure earliest appointment offered)
1. Pre-Registration	✓		6	6	
2. Point of Registration	✓		8	8	

3. Post-Registration	✔		12	12	
4. Certificates	✔		4	4	
5. Service Models (where applicable)	✔		5	5	
6. Sham Marriage	✔		4	4	
7. Data Protection	✔		10	10	
8. Registration Online (RON)	✔		5	5	
9. Stock and Security	✔		8	8	
10. Fraud	✔		4	4	
11. Other	✔		3	3	

Part D: Statutory and Operational Service Delivery Standards

In this section you should be working to **all** statutory and operational service delivery standards. To assist in the completion of this section, refer to PO Guide 6.2-6.5 and appendices A1: Good Practice Guide: Statutory Standards and A2: Good Practice Guide: Operational Service Delivery and Performance Standards.

D1. Statutory Delivery Standards

1.Registration Appointments, 2.Events Registered, 3.Declarations, 4.Requisitioning, 5.MCCD Scrutiny, 6.Statistics Collection, 7.Burial Certificates, 8.Corrections/Re-registrations, 9.Notices of Marriage/CP, 10.Ceremonies/ Formations, 11.CP Conversions, 12.Marriage/CP Registered, 13.Bi-lingual Notices/Registrations, 14.Approved Premises Applications, 15.Office Plans, 16. Custody of Records, 17.Index Availability, 18.Certificate Issue, 19.Quarterly Certified Copies, 20.Notifications (weekly returns), 21.Sham Marriage Reporting, 22.Citizenship Ceremonies, 23.Citizenship Certificates

	Yes (tick)	No (tick)
Have all standards as listed above been met?		✔

If 'No' please provide comment below on any standards not achieved which are not as a direct result of COVID-19 pandemic pressures.

Of the 23 standards required the only one not met in full is item 2. This is solely in relation to death registrations (which continue to be a national and regional issue).

Throughout the year we have seen, and continue to see, an increase in part time and locum medical professionals, impacting on how soon MCCDs are issued and therefore our KPI attainment.

Prior to the pandemic the Coroner Service were already working on a series of opportunities that would have led to some improvements in relevant death metrics, and these will hopefully now be able to be realised in the coming year.

On a positive note we are pleased to state to date the local introduction of the Medical Examiner process has not had any major detrimental impact – which is credit to all the local stakeholder communication in place (currently they are in place in all relevant NHS Trusts and have recently extended to include 6 community GP practices).

D2. Operational Standards

	Yes (tick)	No (tick)
1. Customer Service 2. Business Continuity and Resource 3. Leadership and Learning & Development		
Have all standards as listed above been met?		✓

If 'No' please provide comment below on any standards not achieved which are not as a direct result of COVID-19 pandemic pressures.
Of all the requirements the only one not fully met is: Performance data is shared with staff and appropriate partners, but not wider, as corporate policy is not to do so.

Part E: Service Delivery and Business Continuity Plans

Local Authorities are required to have both Service Delivery and Business Continuity Plans established in respect of civil registration. To assist in the completion of this section, refer to PO Guide 5.1-5.5; 5.20 and appendix F: Business Continuity Plan.

E1. Service Delivery Plan

	Yes (tick)	No (tick)
Do you have a Service Delivery Plan in place?	✓	

E2. Business Continuity Plan

	Yes (tick)	No (tick)
Do you have a Business Continuity Plan in place?	✓	

If 'No' please provide comment:

If 'Yes' please provide a brief comment on the plan and if this was sufficient to respond to the challenges the COVID-19 Pandemic presented during 2021/22:

As stated in the Annual Report for 20-21 the following continued to apply in 21-22:

- *"*Whilst the Business Continuity Plan (BCP) did not explicitly cover the impact of COVID it did provide a useful framework for rapid and pragmatic decision making throughout. The only specific aspect not included was a national / local lockdown scenario."
- "Over successive years a significant investment in self-service strategies for customers has driven a large volume of channel shift, including online payments This has enabled us to be quick to respond to the challenges of COVID, giving us the ability to reconfigure our systems, moving from self-service to mediated (and back again) as Government guidance has required. In this way we have been able to proactively modulate availability of appointments to meet customer demand – including dealing with backlogs. We have also been able to manage customer and partner, expectations, and communications relatively easily."

As the pandemic continued the fact that we were able to rely upon customer self-service of our systems (within which we could also control all scripts and confirmation emails) was a major factor in enabling us to cope, as was the flexibility to turn **off** customer self-service and rely upon the support provided by our Customer Contact Centre in dealing with communications with the public.

The planned "lessons learned" review was delayed, due to the pandemic continuation, and will now be carried out and factored into the revised BCP during 2022-23.

Please provide any additional supporting information to outline your registration services response to the COVID-19 Pandemic and summarise the operational support underpinned by the Local Authority:

In addition to the comments previously made in this section of the Annual Report for 20-21 we now also note the following:

- In the early stages of the pandemic (June 2019) trust in the service enabled us to gain authority for a planned re-structure to still proceed. As we now reflect further there is no doubt that this re-organisation undoubtedly gave us the capacity and structure needed. In addition to resources in general it was another factor in the success of our response to the pandemic because it meant that there were clear lines of responsibility along three broad areas (i.e., Appointments, Ceremonies and Business Support) rather than the former geographical split – which would have only created a piecemeal response to the challenges.
- Whilst, like everyone, we had to cope with staff absence from the office (owing to the need initially to shield vulnerable staff, and more lately the impact of COVID cases amongst the team (none due to work transmission)) this was fortunately minimal compared to many other LRS.
- Despite the introduction of Marriage Schedules in Spring 2021 creating additional burdens mid pandemic (implementation and training; system / website updates; collection of religious registers; resources required (including processing all schedules after religious ceremonies and issuing those additional copy certificates) and IT issues resulting in a sustained period of RON instability) the service was able to flex as required despite budgetary challenges.
- COVID restrictions (face masks to social distancing and numbers to hygiene) continued at local level beyond national changes. This presented a range of challenges, such as space to train new staff (where virtual training was not appropriate) and high resource levels to process high volumes of customer / Councillor / MP contact around ceremonies being held in our council ceremony rooms.
- The fact that we were able to, safely, remain in our offices for the duration of the pandemic but without high excess hours for staff continues to be recognised as a major positive throughout. It has undoubtedly created resilience, enabled us to retain staff (when in many LRS there has been significant churn) and have low levels of staff absence compared to most of our peers.

As ever there are some aspects where the support was acceptable, as opposed to optimal - such as access to additional laptops. Such matters were relatively minor and will be considered as part of our wider "lessons learned" review.

Part F: Registration Scheme Issues and Service Delivery Plans

You are required, for registration scheme purposes, to confirm that the information in the tables below are included in your Service Delivery Plan. Please confirm that the following information is included and whether or not there were changes implemented during 2021-22 or if any are proposed in 2022-23. To assist in the completion of this section, refer to PO Guide 3.4-3.8 and appendix C: Code of Practice.

F1. Please confirm that the following information, which is required for registration scheme purposes, is included in your current Service Delivery Plan	Tick
The number, names and boundaries of registration districts and sub-districts within the local authority	✔
The number of principal officer posts appointed within each district and sub-district	✔
The location of register offices, head offices and other service delivery points within each registration district (e.g. including hospitals and other outstations)	✔
Access and service availability times including emergency 'out of hours' arrangements; telephone numbers	✔

F2. Changes to Registration Service Provision					
	During 2021-2022		Planned 2022-2023		If Yes please provide details below:
	Yes	No	Yes	No	
(i) Boundaries and districts		✔		✔	
(ii) Principal Officer Posts abolished and/ or created		✔		✔	
(iii) Service point locations		✔	✔		**21-22** Addenbrookes – in agreement with NHS Trust partners the office on site was temporarily closed at the start of the pandemic. This was then made permanent, to facilitate additional space for hospital use - made possible in part due to the permanent change allowing MCCDs to be transmitted to us electronically. Wisbech – this service point was closed at the start of the pandemic. All customers have been able to access alternative service delivery points, and utilise telephone death registrations until that legal option ceased in March 2022. During Autumn 2022 service provision in Fenland was reviewed. When the annual report was presented to Committee in December 2022 the review was presented, and the Councillors opted to re-open the Wisbech service point in 2023. **22-23** The Cambridgeshire Register Office relocation from the former Shire Hall site has been subject to various delays, all outside service control. It is now due to open in summer 2022, and operating hours are subject to planning conditions.

					The former Shire Hall building is now closed, and New Shire Hall is now open in Alconbury. Once Council COVID restrictions permit the plan is for large Group citizenship ceremonies to take place on site, from summer 2022.
(iv) Service opening times and telephone numbers		✓	✓		**22-23** Planning permission for the new Cambridgeshire Register Office dictates prescribed hours for some functions, primarily for ceremonies. This facilitates the pre pandemic delivery model but prevents opportunities to currently increase the days / times of ceremonies at this location. Wisbech – Revised hours have been set and a successful applicant appointed to start in May. The Council have just confirmed the building the office is located in can re-open. Service will re-commence on site no later than June 2022.

Acknowledgement	
Document prepared by (name)	Louise Clover
Role in the registration service	Head of Service
Date	10 May 2022

Declaration
I hereby confirm that this document provides an accurate reflection of civil registration performance of this local authority and declare that the local authority;   - continues to commit to meeting the national standards contained in the Good Practice Guide and the principles of the Code of Practice;   - is committed to maintaining or improving performance as appropriate in accordance with the local performance plan agreed with the GRO Regional Compliance Officer   - is committed to the local application of the Public Protection and Counter-Fraud framework in accordance with the Home Office agenda; and   - understands that GRO will make available statistical performance data amongst local authorities to support regional and national performance benchmarking and improvement.

Name: Peter Gell, Assistant Director	Date: 10/05/2022
Signature: *Pete Gell* (Proper Officer for Registration Matters)	

The completed report should be returned to **cpu@gro.gov.uk** and copied in to your Compliance Officer - Dale Mason. dale.mason@hmpo.gov.uk tel – 07771378257. **by 1st June 2022**