Produced on: 12 December 2023



Performance Report

Quarter 2

2023/24 financial year

Communities, Social Mobility and Inclusion Committee

Governance & Performance Cambridgeshire County Council



Data Item	Explanation
Target / Pro Rata Target	The target that has been set for the indicator, relevant for the reporting period
Current Month / Current Period	The latest performance figure relevant to the reporting period
Previous Month / previous period	The previously reported performance figure
Direction for Improvement	Indicates whether 'good' performance is a higher or a lower figure
Change in Performance	Indicates whether performance is 'improving' or 'declining' by comparing the latest performance
Change in Ferrormance	figure with that of the previous reporting period
Statistical Neighbours Mean	Provided as a point of comparison, based on the most recently available data from identified
Statistical Weighbours Wear	statistical neighbours.
England Mean	Provided as a point of comparison, based on the most recent nationally available data
	• Red – current performance is off target by more than 10%
	• Amber – current performance is off target by 10% or less
	• Green – current performance is on target by up to 5% over target
	, , , , , , , , , , , , , , , , , , , ,
	• Blue – current performance exceeds target by more than 5%
RAG Rating	Baseline – indicates performance is currently being tracked in order to inform the target setting
	process
	Contextual – these measures track key activity being undertaken, to present a rounded view of
	information relevant to the service area, without a performance target.
	• In Development - measure has been agreed, but data collection and target setting are in
	development
Indicates Description	Provides an overview of how a measure is calculated. Where possible, this is based on a nationally
Indicator Description	agreed definition to assist benchmarking with statistically comparable authorities
Commentary	Provides a narrative to explain the changes in performance within the reporting period
Actions	Actions undertaken to address under-performance. Populated for 'red' indicators only
Useful Links	Provides links to relevant documentation, such as nationally available data and definitions

Indicator 36: Number of active library users <u>Return to Index</u> December 2023

Target	Direction for	Current	Previous	Change in	
	Improvement	Quarter	Quarter	Performance	
107,236		96,326		Improving	

RAG Rating



Indicator Description

The Indicator is total number of unique people who have used their library card to access services in the last 12 months.

This is measured by our library management system, when someone interacts with it using their library card. This includes anyone who has borrowed a book, used our eBooks, borrowed a library pc or used Open Plus to access a staffless library. It does not include unique users who may simply visit library space and use services without making a transaction such as event attendance, wi-fi usage or studying.

This is important for defining how well used library services are and our engagement with the community. The target is based on our position in March 2020 before the pandemic and reflects the work to re-engage all portions of the community with the library service again after a lengthy break



Commentary

A strong quarter reflects the work of the library service during the summer period, this is shown with a 16.67% increase from Q2 last year. The Summer Reading Challenge represents a large project that involves visits to school assemblies and active drives throughout the holiday season, this saw over 7,000 starters (up 16% on last year), 4,000 finishers (up 20% on last year) and 569 new members joining to complete the challenge. There were also opportunities to attend several summer events with both the book bike and mobile libraries visiting events such as Strawberry Fair in Cambridge and Wisbech Festival.

Actions

Q3 will see the launch of Open plus pilots in Rock Road, Soham and March, as well as a refresh of the warm hub offer to engage more communities. The Library Presents will launch their autumn season with a larger program of events building on the success of the summer.

Q4 will see pilots of auto enrolment of school children in Wisbech, Know Your Neighbourhood funded project looking at volunteering in Fenland and EverySpace project launching in March.

Useful Links

The local area benchmarking tool from the Local Government Association

Indicator 37: Number of visits made to library sites reported quarterly

Return to Index

December 2023

Target	Direction for	Current	Previous	Change in
	Improvement	Quarter	Quarter	Performance
475,381	↑	380,018	351,220	Improving

RAG Rating



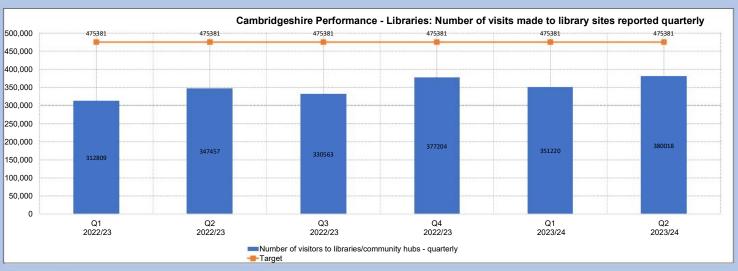
Indicator Description

The indicator represents the total number of visits made to libraries.

This is measured through electronic gate counters in libraries that record people entering the buildings. It represents attendance at library venues, but does not include engagement from outreach events or activities that take place outside or in other venues.

It is an important indicator for how well used library buildings are and ability to attract people into our services.

Targets are based on performance in pre-pandemic year as we look to recover the service or understand any fundamental changes in behavior that have occurred during this time.



Commentary

Previously reported figures may have changed as estimated or missing data is replaced with actual data. Use of libraries remains seasonal with variations due to weather and bank holidays etc. so quarters should be reviewed against previous year rather than previous quarter.

Visitors continue to rise following increased confidence in the libraries programmes post pandemic. The strong quarter reflects the hard work and excellent results seen in this year's Summer Reading Challenge, despite a key children's focused library in the city being closed for refurbishment vs the same time last year (Cherry Hinton). Visitor numbers also benefitted from a near sold out summer season for The Library Presents (90% tickets sold).

Total visits still sit below pre-pandemic figures with High Street libraries mirroring the same lower footfall experienced in retail. Furthermore, the change in use of Libraries IT facilities being notable factors i.e. fewer frequent visits to check emails as smart devices become more readily available vs. fewer longer stays for working from home or studying in the library. The buildings remain well used but footfall is lower. Community and branch libraries have returned to pre-pandemic levels of use with notable successes, such as Histon and Sawston, exceeding this. It is unlikely that the target will be reached this year, with a series of library closures scheduled for minor building works due to impact quarter 3 and 4, but the general trend is improving and will put us in a strong position next year.

Actions

Q3 will see a slight shift in focus as Open Plus is launched in 3 libraries, Warm hub offer is revitalised and celebrate National libraries Week as well as a larger season for The Library Presents. However it is also expected that temporary closures for essential maintenance works at Ramsey, St Neots, Barnwell, Rock Road and Yaxley, alongside EverySpace project at March Library this financial year will impact visitor numbers in Q3 & Q4. It is now predicted that Cherry Hinton and Darwin Green Libraries will not launch until summer 2024 and will not impact visitor figures this year.

Useful Links

The local area benchmarking tool from the Local Government Association

Indicator 38: Total digital engagements quarterly - Library Service

Return to Index

December 2023

Target	Direction for	Current	Previous	Change in
	Improvement	Quarter	Quarter	Performance
361,311	1	276,954	274,962	Improving

RAG Rating



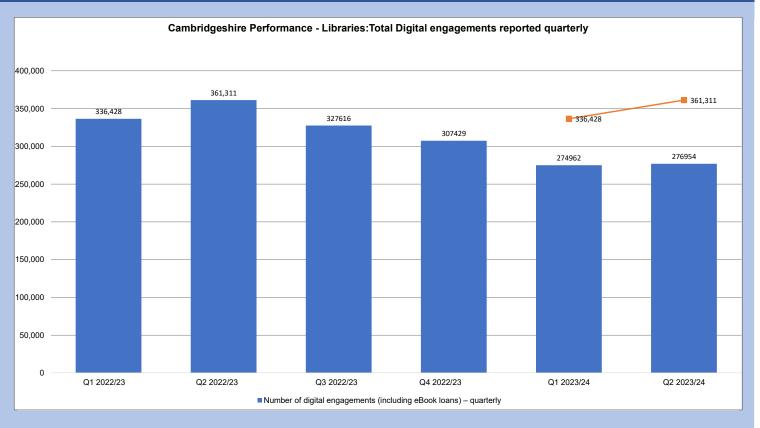
Indicator Description

This indicator represents total digital engagements with the library service. It does not include online use of library accounts or e-services.

It is a measure of engagements with social media channels and the e-newsletter.

It is an indicator of new ways of engaging as services move onto different channels and represents the additional reach libraries can have beyond their physical environments.

Targets are based on performance in previous year as we look to sustain the service that developed quickly over the last couple of years.



Commentary

There is growth along targeted channels such as the families Facebook page. X/Twitter remains a cause for concern with figure unrecognizable from a year ago as use of the platform plummets.

However, there is increased active engagement from this platform (more people following links) so while visibility remains down as the platform renegotiates how it shares information with other partners, those who are using it are active and so it remains an important platform for the service.

The service is also seeing the impact of a full return of physical library offer and events, with less capacity to devote to creating bespoke digital content and greater use of the platforms to advertise the physical offer. The families page saw increased growth as a major avenue for promoting the popular Summer Reading Challenge and associated events.

Useful Links

The local area benchmarking tool from the Local Government Association

Actions

New training on creating video content to improve use of YouTube and Instagram Reels for libraries is being rolled out to staff. Libraries closed for maintenance work is also offering an opportunity to roll out further training.

Indicator 136: Number of learners from across Cambridgeshire and Peterborough that have been enrolled onto a course

Return to Index

December 2023

Target	Direction for	Current	Quarter 2	Change in
	Improvement	Quarter	22/23	Performance
1128	↑	608	1107	Declining

RAG Rating



Indicator Description

The actual figure includes learners engaged by direct delivery and our internal and external delivery partners. The target and actual figures are cumulative.

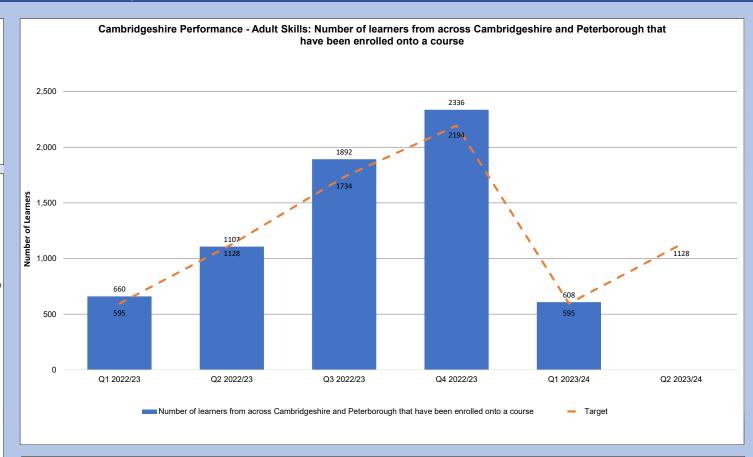
This indicator refers to the total number of learners engaged and recruited onto courses. This is because a single learner can have multiple enrolments.

The indicator does not refer to the total number of enrolments, as a single learner can have multiple enrolments and outcomes.

The target number of learners to engage and enrol onto skills provision has been aligned with the delivery plan that has been submitted to the CPCA against the Adult Education Budget Contract.

Numbers provided against this indicator is our learner target for our allocation of the Cambridgeshire and Peterborough devolved Adult Skills budget.

Learners can only be counted under this target if they are residents of Cambridgeshire and Peterborough.



Commentary

Following a new Information management system being implemented during Q2. This has resulted in a delay with validating the performance figures for Q2. A full set of Q2 performance information will be provided alongside Q3 information within the next Performance Monitoring Report.

Useful Links

Actions

Indicator 137: Number of enrolments which support skills development to aid progression

Return to Index

December 2023

Target	Direction for	Current	Quarter 2	Change in
	Improvement	Quarter	22/23	Performance
1466	1	829	1676	Declining

RAG Rating



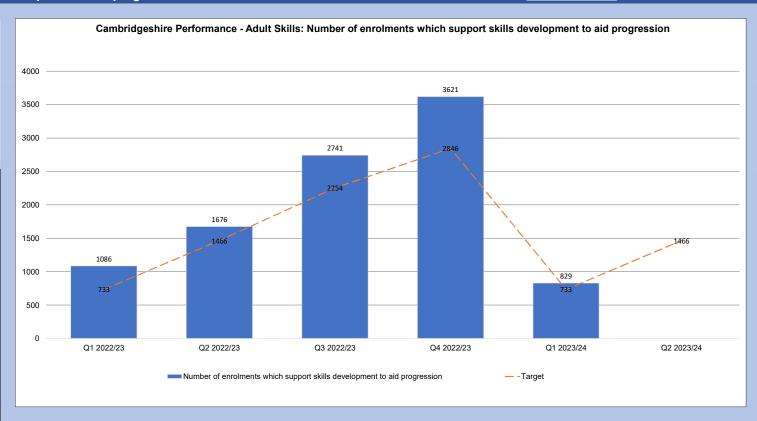
Indicator Description

The enrolment figure used includes delivery from both our direct delivery and our internal and external partner delivery. The actual figure provided are the number of new enrolments from learners during April to June and validated via the ILR.

The target and actual figures are cumulative. This indicator links to the total number of enrolments completed by a learners. Learners can undertake a number of enrolments.

The target number of enrolments has been aligned with the delivery plan that has been submitted to the CPCA against the Adult Education Budget Contract.

Numbers provided against this indicator is for enrolments onto courses that support local priority sectors identified in the LSIP and the CPCA Skills Strategy.



Commentary

Following a new Information management system being implemented during Q2. This has resulted in a delay with validating the performance figures for Q2. A full set of Q2 performance information will be provided alongside Q3 information within the next Performance Monitoring Report.

Useful Links

Actions

Indicator 138: Percentage of courses that have been achieved

Return to Index

December 2023

Target	Direction for Improvement	Current Quarter	Quarter 2 22/23	Change in Performance
94%	1	93%	95%	Declining

RAG Rating



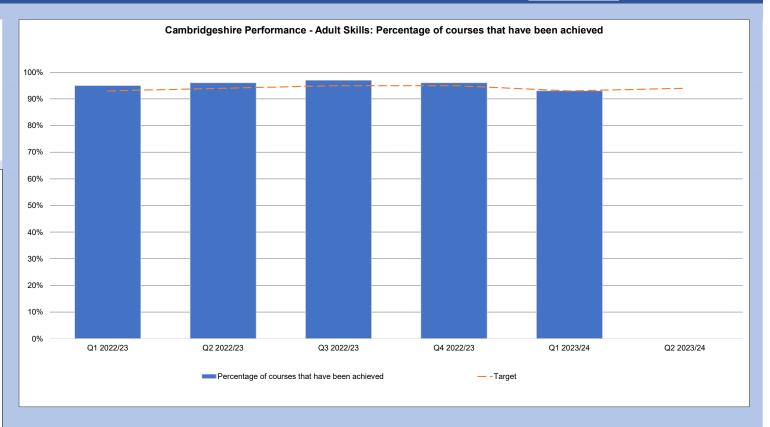
Indicator Description

The figure provided is the percentage of learners who completed the full length of the course (retained) and also achieved the required course outcome (set course aims/qualification)

The number includes those courses delivered by the whole service delivery.

The target and actual figures are cumulative. The retention figure in this indicator refers to the number of course enrolments where the course was fully attended, out of the total enrolments.

This target has been set to align to the national benchmark for Local Authority Adult Skills Services



Commentary

Following a new Information management system being implemented during Q2. This has resulted in a delay with validating the performance figures for Q2. A full set of Q2 performance information will be provided alongside Q3 information within the next Performance Monitoring Report.

Useful Links

Actions

Indicator 174: No of Community Youth Providers participating within our (Youth in Communities) Network

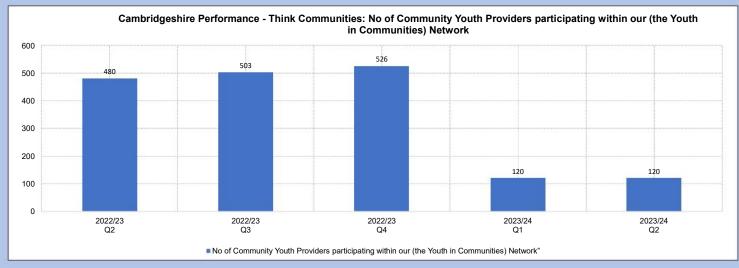
Return to Index

December 2023

Target	Direction for Current Previous Improvement Quarter Quarter			Change in Performance		
In Development	↑	120	120	Unchanged		
RAG Rating						
In Development						

Indicator Description

The Youth in Communities network works with community youth providers to build capacity in the system. This indicator is a count of the number of unique providers engaged within the network that the team has supported within each quarter.



Commentary

Historically this measure captured the number of contacts in a reporting period rather than the number of unique providers. For example, if one provider attended a training event, and made contact for support with funding, and contacted regarding a query around governance, the same provider would have been counted three times in the same quarter. There are 120 youth providers operating in Cambridgeshire being supported by the Communities Service. All are in regular contact, and some more than others depending on need at a particular time.

Actions

Indicator 175: Total number of cases opened

Return to Index

٠.		~ ~			0.0
ır	PC	ωr	m		

Baseline	Baseline Direction for Improvement		Previous Quarter	Change in Performance	
872	NA	789	944	N/A	

RAG Rating



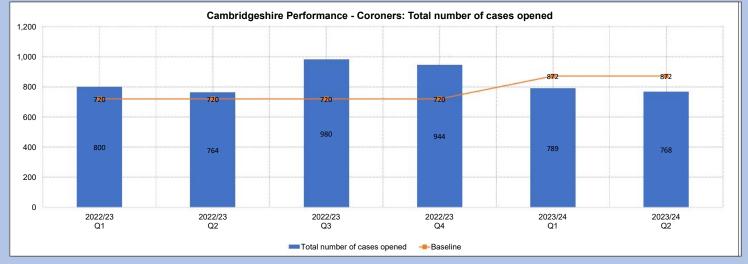
Indicator Description

A case related to a death referred to the service by partner agencies, such as the police or a doctor, in which the death is unexpected or unnatural, the deceased died while in custody or otherwise in state detention, or if any other statutory requirement is triggered (such as death due to suspected industrial disease). The Coroner will review cases and in circumstances where the cause of death is natural and the need to investigate further is not required, the case will be closed without the need for further investigation.

The KPI demonstrates the volume of cases opened, as well as providing data on trends when compared to previous Quarters / Years. The figure is all new cases opened within the quarter, not the number of active live cases, this can be seen in the commentary.

Each case is recorded on the Coroner Service Case Management System, with reports run each quarter.

Baseline is derived from 2022/23 annual figure and divided by 4 to give a quarterly baseline



Commentary

There were fewer referrals into the service in Q2 resulting in fewer cases being open. This continues the trend seen in Q1 of this year. The Service has no influence over the number of cases referred.

If this trend continues, there would be fewer cases opened in 2023/24 than the previous year.

Total number of active open cases at the close of the quarter is 740, compared to 773 in Q1.

Actions

Useful Links

There is no public facing data available for this KPI

Indicator 176: Total number of cases closed <u>Return to Index</u> December 2023

Baseline	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance	23
880	N/A	810	941	N/A	

RAG Rating



Indicator Description

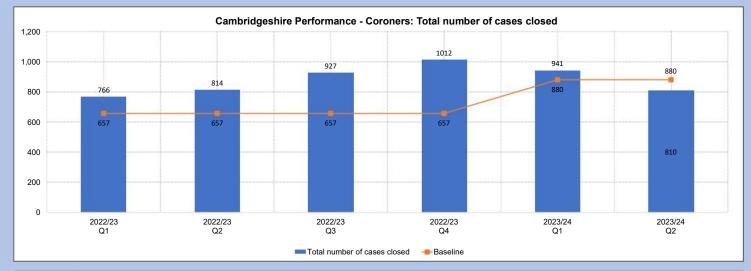
A case related to a death referred to the service by partner agencies, such as the police or a doctor, in which the death is unexpected or unnatural, the deceased died while in custody or otherwise in state detention, or if any other statutory requirement is triggered (such as death due to suspected industrial disease). The Coroner will review cases and in circumstances where the cause of death is natural and the need to investigate further is not required, the case will be closed without the need for further investigation.

The KPI demonstrates how the service is managing cases referred in terms of volumes, as well as trends when compared to previous Quarters / Years.

The figure shows the number of cases closed within the quarter, not the number of active live cases, this can be seen in the commentary.

Each case is recorded on the Coroner Service Case Management System, with reports run each quarter.

Baseline is derived from 2022/23 annual figure and divided by 4 to give a quarterly baseline



Commentary

Lower number of cases closed reflects staff leave over the summer period. The Service are on-track to equal the number of cases closed in 2022/23.

The total number of live cases as of close of Q1 was 773. Total number of live cases at the close of Q2 is 740.

Q4 figures for 2022/23 were particularly high because there was a focus on closing off cases that could be resolved quickly. This reflecting positively on the national performance return. 2023/24 Q1 figures are an improvement on 2022/23 figure, demonstrating measures that have been implemented to increase effectiveness have been working.

Actions

Useful Links

Indicator 177: Total number of Inquests opened

Return to Index

December 2023

Baseline	Direction for	Current	Previous	Change in
	Improvement	Quarter	Quarter	Performance
148	NA	120	139	N/A

RAG Rating



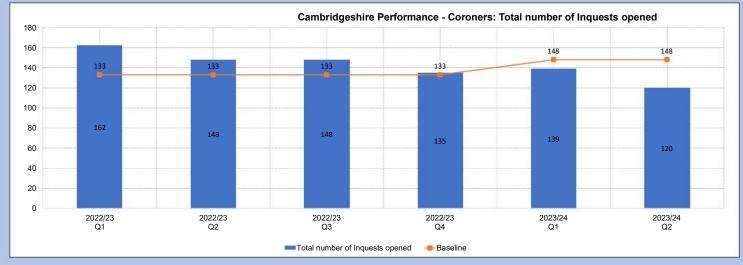
Indicator Description

A case becomes an Inquest where the death is unnatural, if the cause of death means that an Inquest is mandatory (such as deaths in state detention or at a workplace, for example), or if an Inquest is triggered by any other reason. All Inquests are heard in public at a Coroner's Court.

The KPI demonstrates the volume of Inquests opened, as well as providing data on trends when compared to previous Quarters / Years. The figure is all new Inquests opened within the quarter, not the number of active live Inquests, this can be seen in the commentary.

Each case is recorded on the Coroner Service Case Management System, with reports run each quarter.

Baseline is derived from 2022/23 annual figure and divided by 4 to give a quarterly baseline



Commentary

Fewer referrals in Q2 resulting in fewer Inquests being opened, this is in line with cases opened.

At the close of Q2 there were 500 active open Inquests. This is an increase from 454 in Q1.

Actions

Useful Links

Indicator 178: Total number of Inquests closed

Return to Index

December 2023

Baseline	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance	
160	NA	142	213	N/A	

RAG Rating



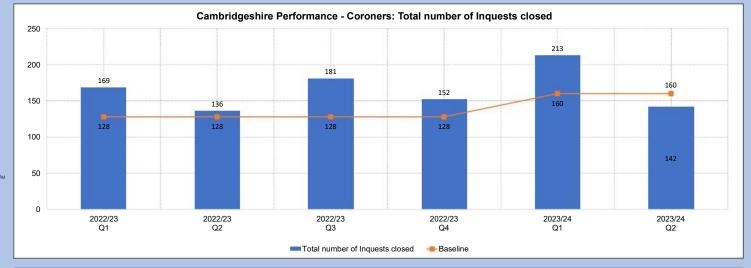
Indicator Description

A case becomes an Inquest where the death is unnatural, if the cause of death means that an Inquest is mandatory (such as deaths in state detention or at a workplace, for example), or if an Inquest is triggered by any other reason. All Inquests are heard in public at a Coroner's Court.

The KPI demonstrates the ability of the Service to manage the current demand, as well as providing data on trends when compared to previous Quarters / Years. The figure is all Inquests closed within the quarter, not the number of active live Inquests, this can be seen in the commentary.

Each Inquest is recorded on the Coroner Service Case Management System with reports run

Baseline is derived from 2022/23 annual figure and divided by 4 to give a quarterly baseline



Commentary

Fewer Inquests closed in Q2 reflects staff leave during the summer, this is in line with cases closed.

At the close of Q1 there were 500 live Inquests.

Actions

Useful Links

Indicator 179: Total number of Inquests closed that are over 12 months old

Return to Index

December 2023

Baseline	Direction for Improvement	Current Quarter (cumulative)	Previous Quarter (cumulative)	Change in Performance
67	NA	147	88	NA

RAG Rating

Contextual

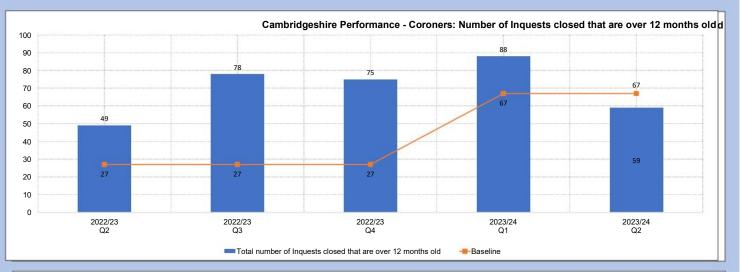
Indicator Description

Total number of Inquests closed that are over 12 months old.

Coronial Services are monitored nationally on the number of Inquests that remain open after 12 months, reporting this figure to the Committee along with the previous year's performance will indicate whether there is either a positive or negative direction of travel.

Each Inquest is recorded on the Coroner Service Case Management System with reports run quarterly.

Baseline is derived from 2022/23 annual figure and divided by 4 to give a quarterly baseline



Commentary

The final figure of cases older than 12 months reported to the Chief Coroner at the end of the year was 272 - a 6% improvement on the previous year, at a time when more cases were being referred. Based on Q1 and Q2 data, the Service is on-track to exceed the 2022/23 figure, despite there being fewer (59) Inquests over 12 months old closed in Q2 - this, as with cases closed and Inquests closed, reflects staff leaving during the summer months.

Increased figure to date in 2023/24 is a result of greater capacity to hear Inquests, as well as more effective management of cases.

Benchmark is amended to reflect 2022/23 figures.

Actions

Useful Links

tps://www.ludiciary.uk/courts-and-tribunals/coroners-courts/annual-reports/

Indicator 197: Number of Self Referrals to Commissioned Domestic Abuse Outreach Services (Cambridgeshire and Peterborough)

Return to Index

December 2023

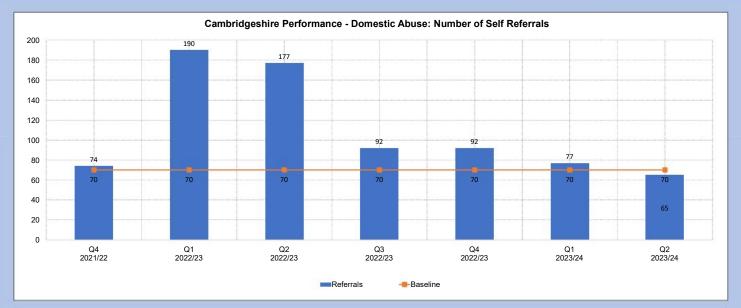
Baseline	Direction for	Current	Previous	Change in
	Improvement	Quarter	Quarter	Performance
70	1	65	77	Declining

Contextual

Indicator Description

This indicator refers to the number of people that self refer themselves to a commissioned domestic abuse outreach service. Victims are encouraged to come forward and refer themselves for support so an increase can be considered a positive. However each increase or decrease needs further contextual explanation and cannot be viewed in an entirely binary way. This is why there is no RAG rating attached and no target either.

The outreach services accept self-referrals from victims at any risk level requiring support. The number of self-referrals will be the third KPI with a baseline of 70 per quarter. Outreach services are able to promote themselves within the community to encourage referrals to service.



Commentary

Q2 2023/24 - 65 self-referrals (31 Cambridgeshire, 30 Peterborough and 4 unknown)

Q1 202324 - The breakdown of self-referral figures for Outreach is 25 Peterborough, 55 Cambridgeshire.

Q4 2022/23 - The new commissioned outreach service delivered by IMPAKT started in October 2022 and continues to build its presence and referral numbers. The breakdown of figures is 130 for Cambridge and 47 for Peterborough.

Q2 2022/23 - A new outreach service with a new provider has been commissioned and started in October 2022. This will be the Domestic Abuse Support Service delivered by IMPAKT. Q2 figures are based on the previous providers data.

Q1 2022/23 - A new outreach service with a new provider has been commissioned and will start in October 2022. This will be the Domestic Abuse Support Service delivered by IMPAKT. Q1 figures are based on the current providers data.

Actions

Indicator 198: The percentage of clients engaging with Independent Domestic Violence Advocacy (IDVA) Service

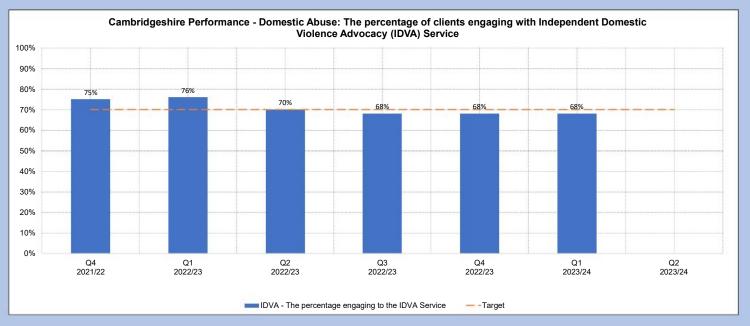
Return to Index

December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance	
70%	↑	68%	68%	Unchanged	
RAG Rating					
Amber					

Indicator Description

The IDVA Service require the consent of a victim to work with them and a victim needs to be willing to engage and accept support. In some cases the service are not able to make contact with clients (four attempts are made) and in some cases the offer of support is declined.



Commentary

Q2 2023/24 - The changeover in database for the IDVA Service has meant we are unable to report on this indicator for Q2. Q3 will produce a much more accurate statistic.

Actions

Indicator 199: Number of Referrals to the Independent Domestic Violence Advocacy (IDVA) Service

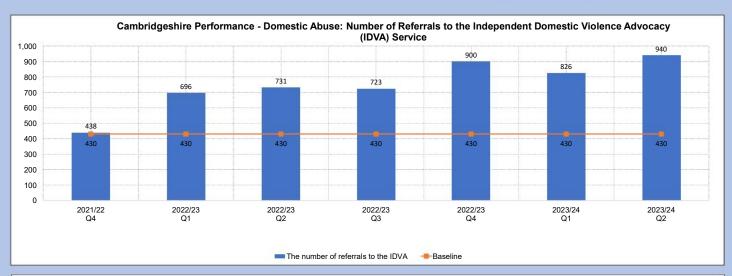
Return to Index

December 2023

Baseline	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
430	↑	940	826	Improving
RAG Rating				
Contextual				

Indicator Description

The Independent Domestic Violence Adviser (IDVA) Service is part of the County Council and works with victims of domestic abuse at high risk of domestic abuse. They also employ a number of specialist client-based IDVAs who take specific referrals at all risk levels. The team has expanded greatly during 2021/22 and referrals are expected to increase in 2022/23. The number of referrals to the service will be the first KPI, with a baseline of 430 per quarter.



Commentary

The number of referrals to the IDVA service continues to increase as the specialist client based IDVAS taking referrals from health and housing become embedded. The number of medium risk referrals from police has also increased.

Actions

Indicator 219: Registrations - All births registered within 42 days of birth.

Return to Index

December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
74%	↑	99%	98%	Improving
RAG Rating				
Blue				

Indicator Description

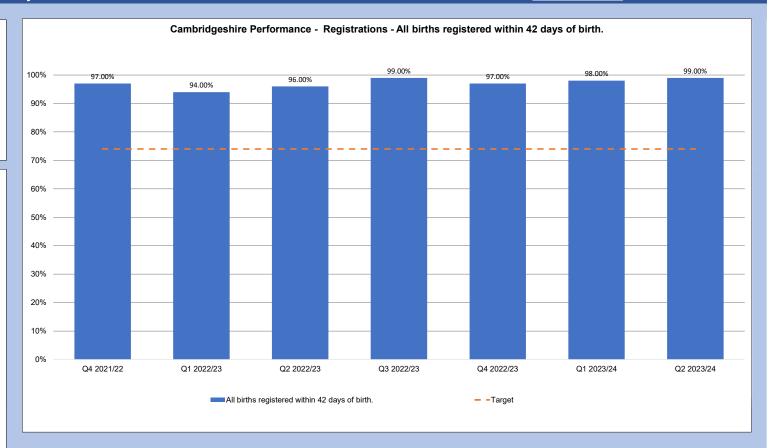
Legislation states that births must be registered within 42-days.

The KPI demonstrates the volumes and demand on the service, and the percentage of births registered within the 42-day requirement.

Population trends in the county are also demonstrated.

The target is the national average.

Births are recorded on a national database.



Commentary

The Service dealt with 12% more appointments compared to Q1.

The overall number of births for 2023/24 is now the same as for 2022/23.

1,977 births were registered, of which 1,953 were registered within 42 days.

The service continues to exceed the national average on this KPI.

Useful Links

Actions

The Service continues to offer good appointment availability to ensure that births can be registered within a timely manner, as well as having offices located across the county.

Indicator 220: Registrations - All deaths registered within 5 days

Return to Index

December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance	
60%	↑	55%	48%	Improving	
RAG Rating					
Amber					

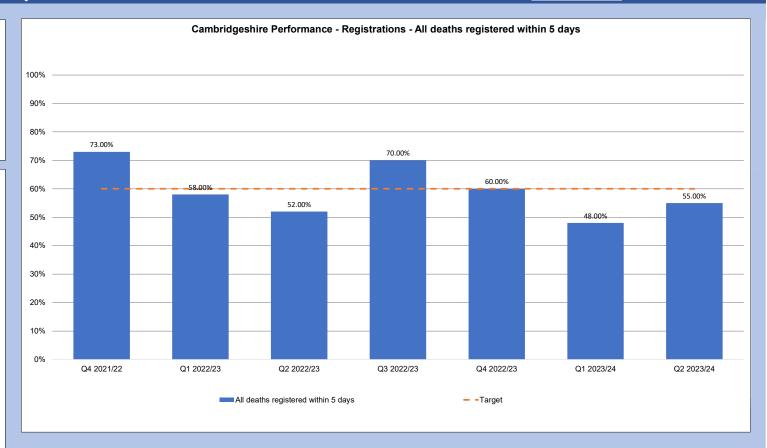
Indicator Description

The percentage of all deaths registered within 5 calendar days as per the requirement set out in legislation.

The figure refers to non-coronial deaths

The KPI demonstrates volumes and demand on the service, as well as showing population trends in the county.

The target is the national average.



Commentary

Temporary dispensation allowing for telephone death registrations that commenced during the pandemic has now finished, therefore all appointments must be in person.

The service has good appointment availability however performance is now in line with that prior to the dispensation and is heavily reliant on when people choose to register a death, therefore is outside the control of the service.

Locally, the trend from Q1 has continued. The Service are performing significantly better than colleagues in the East Anglia region who have achieved 42% during the same period.

889 deaths were registered, of which 570 were registered within 5 days.

Actions

The Service continues to offer good appointment availabilty and locations across the county to ensure non-coronial deaths can be recorded in a timely manner.

Indicator 221: Number of hours of business advice provided to businesses under primary authority

Return to Index

December 2023

Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
291	1	296	313	Declining

RAG Rating



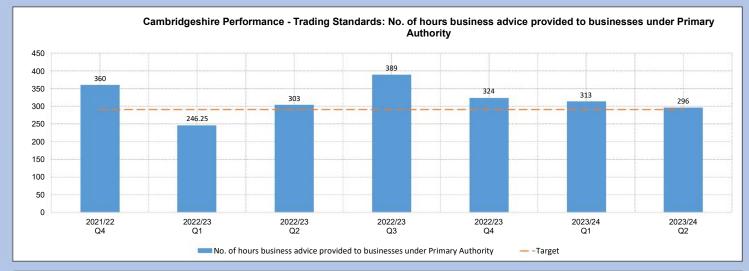
Indicator Description

Primary Authority is a national scheme overseen by the Office for Product Safety and Standards whereby national businesses can pay for assured advice from a regulator of their choice. This helps reduce the regulatory burden on businesses by ensuring they receive the appropriate advice at the outset to help them supply legally complaint consumer goods and services both in the UK and abroad. Once assured advice has been given other regulators are obliged to accept the advice given. Providing businesses follow the assured advice, the business is deemed to be compliant with legislation.

Cambridgeshire and Peterborough Trading Standards have over 100 Primary Authority Partnerships. All Primary Authority businesses are required to pay an annual fee, as well as an hourly rate for advice. This indicator demonstrates the demand for advice. The funding derived from the scheme offsets service costs.

Data is recorded on the case management system for the service and reports run quarterly.

The benchmark is based on quarterly figures from 2022/23



Commentary

There was a slight decrease in the number of hours provided in Q2 due to lower demand for services. Despite this, the Service is still on-track to meet the 2023/24 target.

Actions

The Service will continue to provide advice to those with a Primary Authority partnership with the authority, as well as ad-hoc 'pay as you go' advice to businesses. The team is recruiting to a further full-time post and support to post in order to generate more capacity and enable further partnerships to be formed.

Useful Links

Indicator 222: Percentage of business brought into compliance in all priority areas following inspection/intervention

Return to Index

December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance	
65%	↑	51%	60%	Declining	
RAG Rating					
Red					

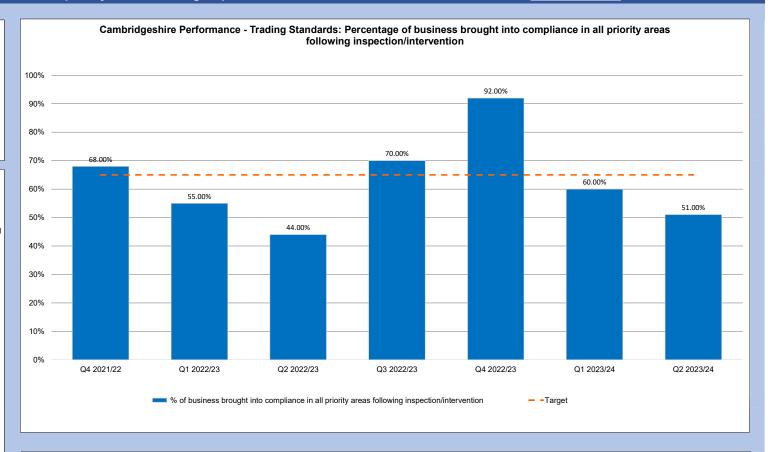
Indicator Description

Percentage of business brought into compliance in all priority areas following inspection/intervention.

Priority areas are those that present the greatest risk to public safety, health and welfare, cause significant financial detriment like rogue trading or matters that present a risk to the local economy such as animal disease oubreaks.

Premises are visited following a complaint, or as part of an annual inspection, to check compliance with legislation. Where they are found to be non-compliant support is given to reach compliance. On occasion this can be achieved during the visit, or where this is not possible follow up visits will be made. If non-compliances can not be achieved through support and advice, appropriate enforcement action will be taken.

The target is derived from 2022/23 overall performance and dived by 4 to give the quarterly target.



Commentary

39% of businesses were compliant at the time of visit with no further action required (in line with Q1 figure of 38%)

12% of businesses were non-compliant but were bought into compliance within the quarter (compared to 22% in Q1)

49% of business remained non-compliant at the end of Q2 - officers continue to work with these businesses to reach compliance (compared to 40% in Q1).

Useful Links

There is no public facing data for this KPI

The Service will continue to carry out programmed inspections alongside intelligence led visits, taking a graduated approach to enforcement by initially engaging and educating non-compliant businesses in order to bring them into compliance before taking enforcement action when necessary.