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Performance Report

Quarter 1

2024/25 financial year

Strategy, Resources & Performance Committee

Governance & Performance
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Key



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 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 neighbours.
England Mean	Provided as a point of comparison, based on the most recent nationally available data
RAG Rating	<ul style="list-style-type: none"> • 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% • 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
Indicator Description	Provides an overview of how a measure is calculated. Where possible, this is based on a nationally 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 182: Proportion of Freedom of Information requests responded to within statutory timescale

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October 2024

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
90.0%	↑	73.3%	68.7%	Improving

RAG Rating

Red

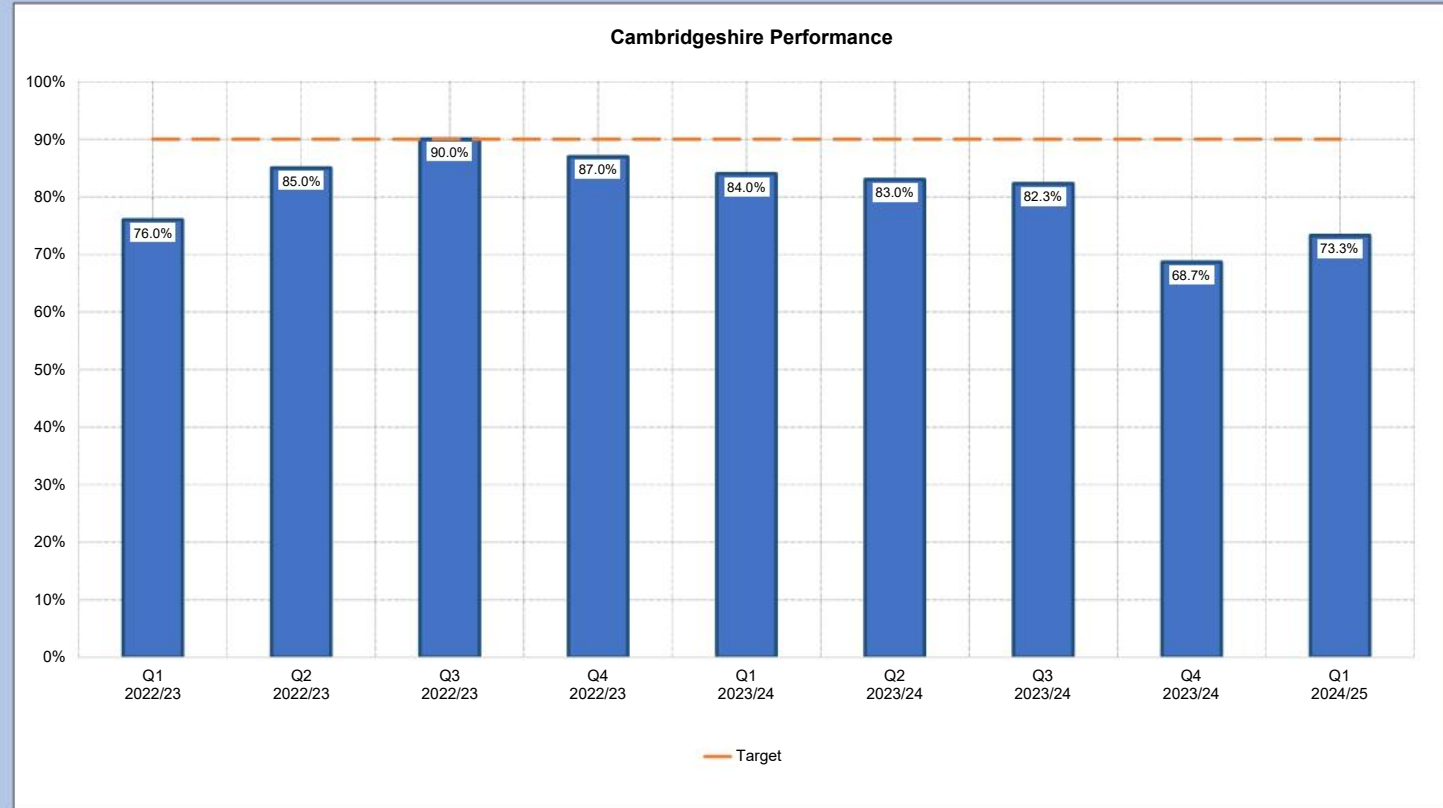
Indicator Description

The percentage of Freedom of Information (FOI) responses issued within statutory timescales of 20 working days as required by the Freedom of Information Act (2000) or if extended to 40 working days to consider the public interest test.

Useful Links

<https://ico.org.uk/for-the-public/>

<https://www.legislation.gov.uk/ukpga/2000/36/contents>

**Commentary**

This first quarter performance has improved from Q4. There continues to be a high level of responses with 445 responses issued in the first quarter. June is the first month in the last two quarters where the number of requests received has dropped below 100 which should enable the team to work on issuing more responses on time without the pressures caused by the much higher volumes received in April (160) and May (146). The process has begun around publishing data on potholes on the website to address the higher levels of requests on that topic. Meetings are taking place with our IT and Digital Service to discuss improvements to reporting, self-service and the use of AI to enable smoother processing for our residents and our workforce.

Actions

The FOI service is actively working with the directorates to support, guide and find ways of publishing data on the most common requests to reduce the impact for all. The team have been provided with means to search past requests easily to identify similar requests which can support quicker completion of requests. Any responses reaching 10 day deadlines will be flagged to the manager and any reaching 15 day deadline will be escalated to head of service to chase with the relevant service/executive director. The service are working with IT and Communications colleagues to utilise AI and a disclosure log on the website to direct requesters to self service.

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
90.0%	↑	86.0%	87.3%	Declining

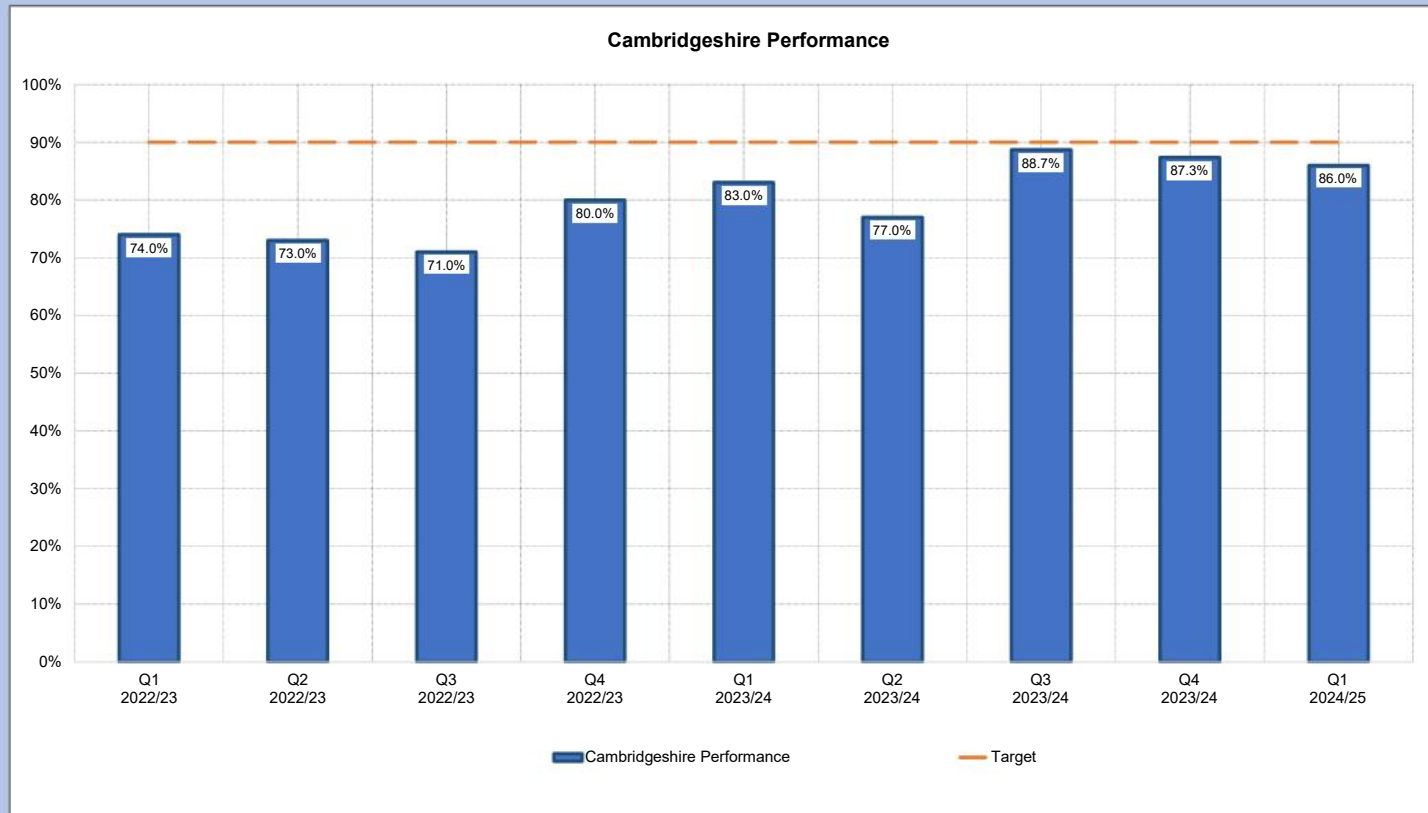
RAG Rating

Amber

Indicator Description

Percentage of Subject Access Requests completed within statutory timescales of one calendar month or if extended to three calendar months as permitted.

Subject Access Requests (SARs) are requests to access and receive a copy of personal data and other supplementary information held by the council.



Commentary

The team continues to make great progress, with continued improvement over the last three financial years to achieving 86% of responses issued on time for the first quarter of the year, this has improved compared to 74% in quarter 1 in 2022/23 and 83% in 2023/24. The team continue to make efforts to increase this response rate despite continued high volumes of requests received, averaging more than 1 per working day, some of which are resource intensive due to the timeframe or the complexity of the matter at hand.

The team closed 93 matters in Q4 with 83 responses issued. For the remaining 10, there was no response received to the request for identification or clarification.

Useful Links

<https://ico.org.uk/for-the-public/>

Actions

Indicator 184: Statutory returns completed on time

Target	Direction for Improvement	Current Quarter	Previous Year	Change in Performance
100%	↑	100.00%	95.65%	Improving

RAG Rating

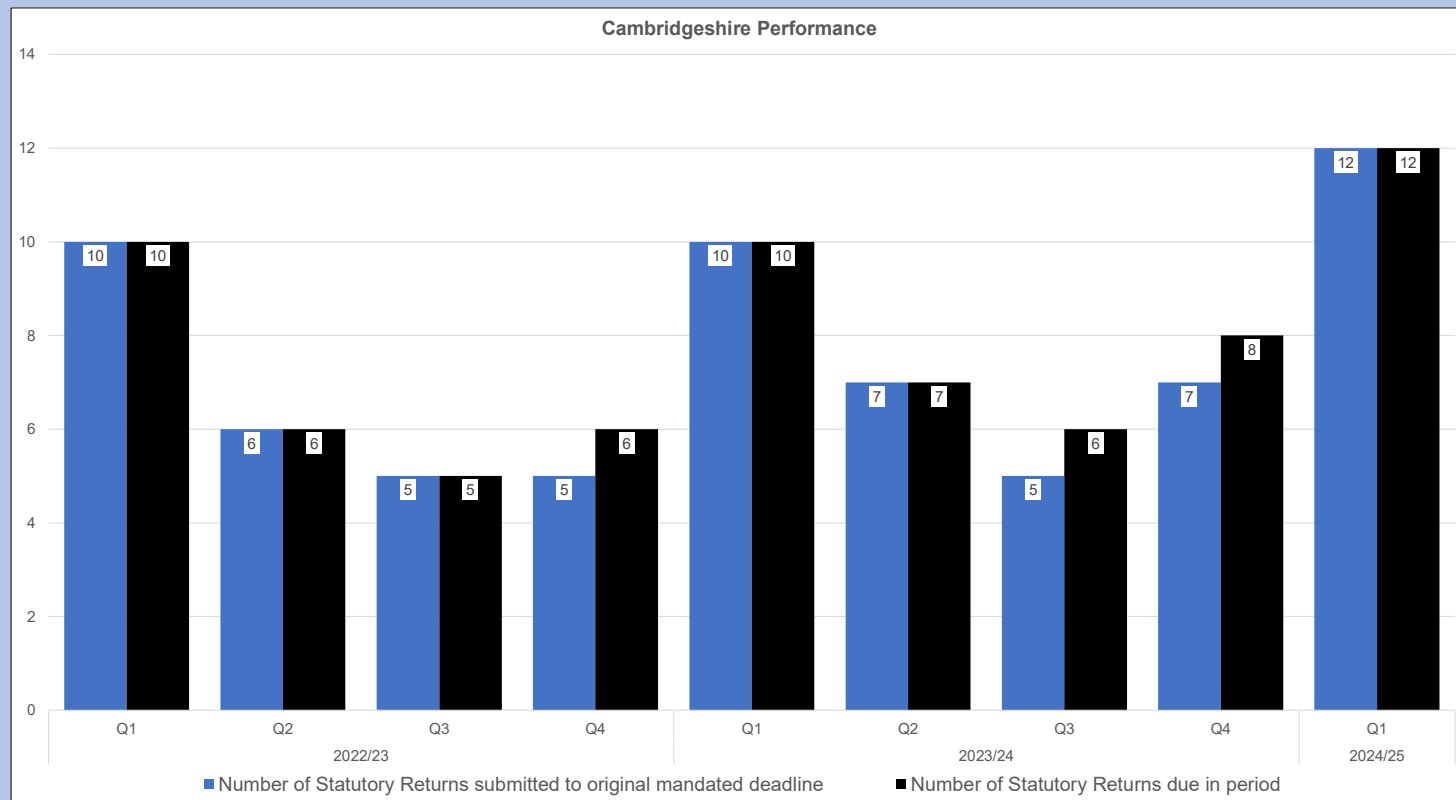
Green

Indicator Description

The Council's Policy & Insight team leads on, and supports the submission of, a number of key statutory data returns to central government departments and regulatory bodies. A list is available on request.

Useful Links

[A list of all the datasets that local government must submit to central government.](#)



Commentary

Within Q1, there were 12 statutory returns due and all were completed on time.

Actions

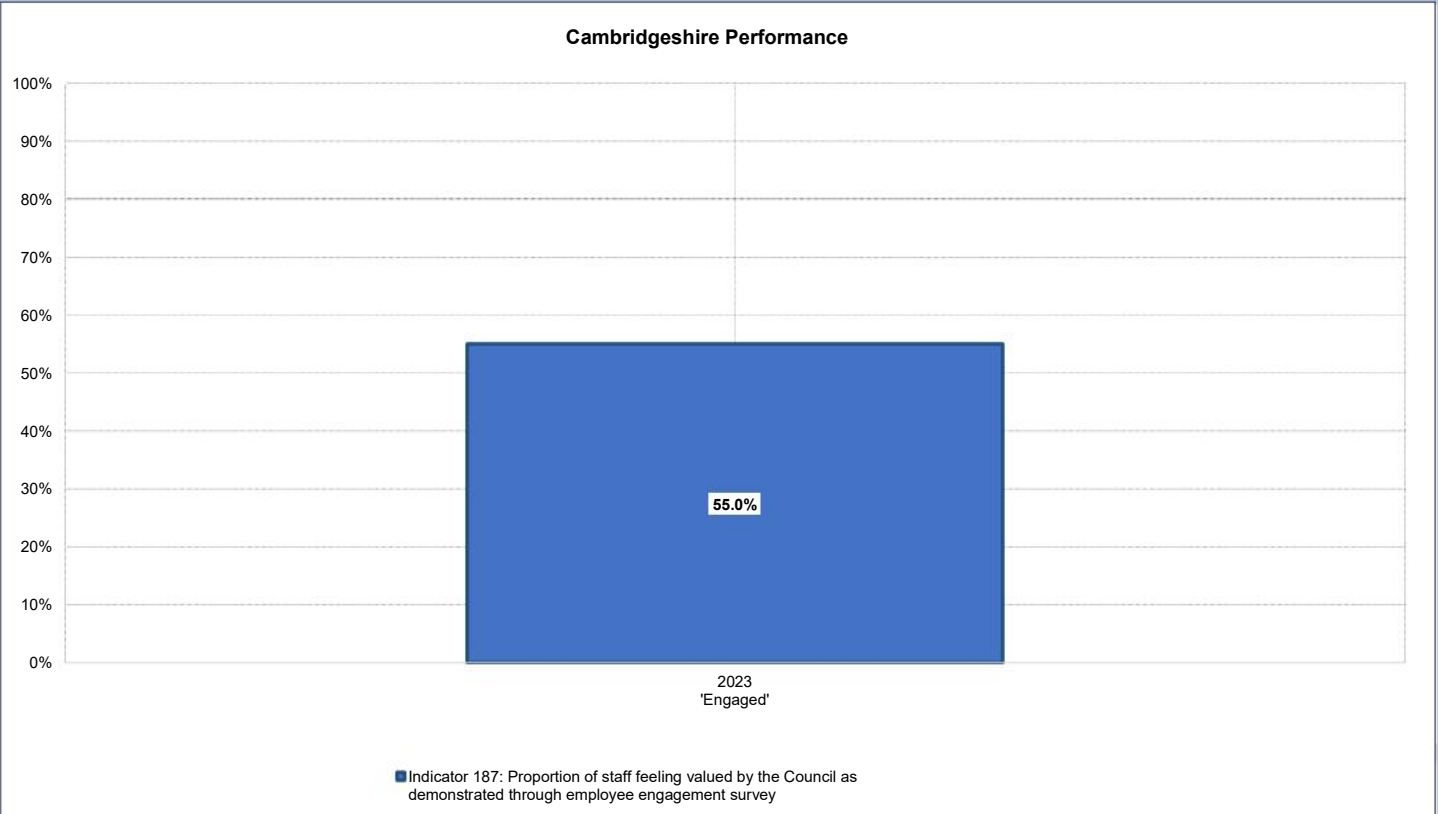
Target	Direction for Improvement	Current Year	Previous Year	Change in Performance
TBC	↑	55.0%	N/A	N/A

RAG Rating

Baseline

Indicator Description

A fully independent and externally validated Employee Engagement survey was carried out in September 2023 with the primary objective of measuring the levels of engagement of the workforce. 'Engagement' is measured by asking questions around pride, advocacy, motivation and belonging, and is considered to be the most effective measure of assessing overall how people feel about working for their employer. The engagement index score received for the County Council of 55% was 9 percentage points lower than the 2023 public sector benchmark provided by the Survey organisation. This will be used to set the target for improvement when the next full survey will take place in September 2025. Given that the engagement measure provided from the 2023 survey offers a more holistic and benchmarked result, there is no direct correlation between the internally conducted survey in 2021 and the 2023 results. Consequently, the 2021 results are not deemed relevant as a baseline for this indicator in the future



Commentary

The County Council's first, full and wholly independent Employee Engagement Survey for well over a decade was carried out by Ipsos Karian and Box in September 2023, and had an overall response rate of 54% of employees, which provides for a statistically significant data set for all questions. Engagement, as measured by Ipsos Karian and Box is made up from a number of individual scores relating to pride, advocacy, motivation and belonging, to provide an overall engagement rating, which in this case was 55%. Other questions covered in the survey focussed on factors such as their day to day experience of working for the Council, their confidence in the leadership of the organisation, whether they feel valued and recognised for the work that they do through to whether they receive constructive feedback on their performance. It also covered questions around any barriers to being able to work effectively and whether people have opportunities to learn and develop.

Actions

The Employee Engagement Survey results have been widely communicated and shared within the Council and employee listening sessions involving members of the Corporate Leadership Team have taken place during January – March to test the results with focus groups of employees and to inform the development of the Council's action plan in response to the survey. In addition, each of the Executive Directors has been holding listening sessions within their own directorates to inform local action plans. Actions in response to the survey will be developed and considered by Corporate Leadership Team in October 2024, with Directorate actions plans developed locally. Updates will be reported to Staffing and Appeals Committee as part of regular updates on the progress of the Council's People Strategy. Relevant indicators have been included as measures of activity in the People Strategy Action Plan and in local workforce plans, such as Children's and Adults'.

Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
80.0%	↑	78.50%	81.66%	Declining

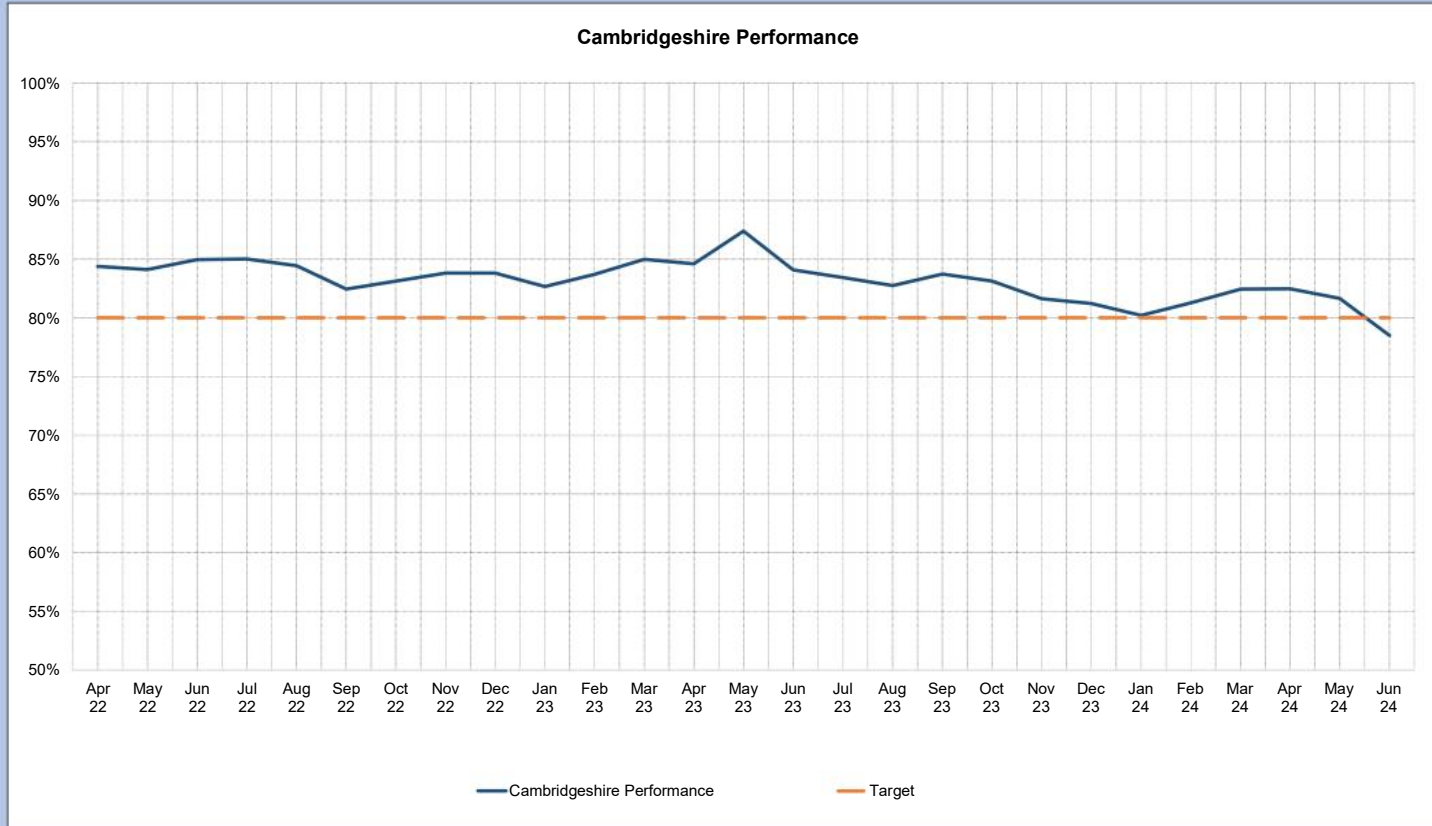
RAG Rating

Amber

Indicator Description

Percentage of cases Customer Services deal with that are marked as resolved or transferred, against total number of cases recorded. Resolved means we have dealt with a customer's enquiry to a full resolution. Customer Services also class transferred calls as resolved as the request would be to speak to another member of staff, therefore the enquiry is resolved. If Customer Services are unable to resolve an enquiry and need to pass it on to a service representative to deal with, this would be marked as unresolved. This measures how effectively Customer Services are able to meet the customer service standard of dealing with requests at first point of contact.

This is measured in different ways across the industry, but Customer Services feel this is the most accurate and meaningful way of measuring this to ensure we are delivering good customer service for our residents. Any unresolved contacts are reviewed to see if Customer Services can work with the service to increase knowledge in some areas to increase the resolution rate. The target is then adjusted in line with any amendments. It is envisioned that this target will reduce in the coming years as more contacts move to digital channels and Customer Services are left dealing with more complex enquiries. Customer Services have other internal service KPIs as well as a number of advisor KPIs which mitigates any risks of bias. Audits also take place regularly with all advisors to check accuracy of recording.



Commentary

Over the period of April to June 2024, Customer Services achieved a First Contact Resolution percentage of around 82% before a drop off to 78.5% in June.

The decrease in June can be attributed largely to an increase in the amount of contacts being passed to the service for Registrations. For comparison we saw 227 contacts passed to the Registrations service in April resulting in a First Contact Resolution percentage of 77.34%, in June we saw 316 contacts passed to the Registrations service resulting in a First Contact Resolution percentage of 63.07%. The main cause for this increase is that customers have been unable to book a death appointment within the required 5 days either online or through Customer Services as there are no appointments available, as a result Customer Services have to pass the contact on to the Registrations service for them to arrange an appointment with the customer instead.

Actions

In order to address the above issue for Registrations. The service have prioritised booking appointments for death registrations over those for birth registrations as deaths must be registered within 5 days whilst births must be registered within 42 days. In addition the service is also undertaking recruitment to fill posts that will in turn allow more appointments to be booked and help alleviate the pressure.

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
95.0%	↑	98.0%	97.0%	Improving

RAG Rating

Green

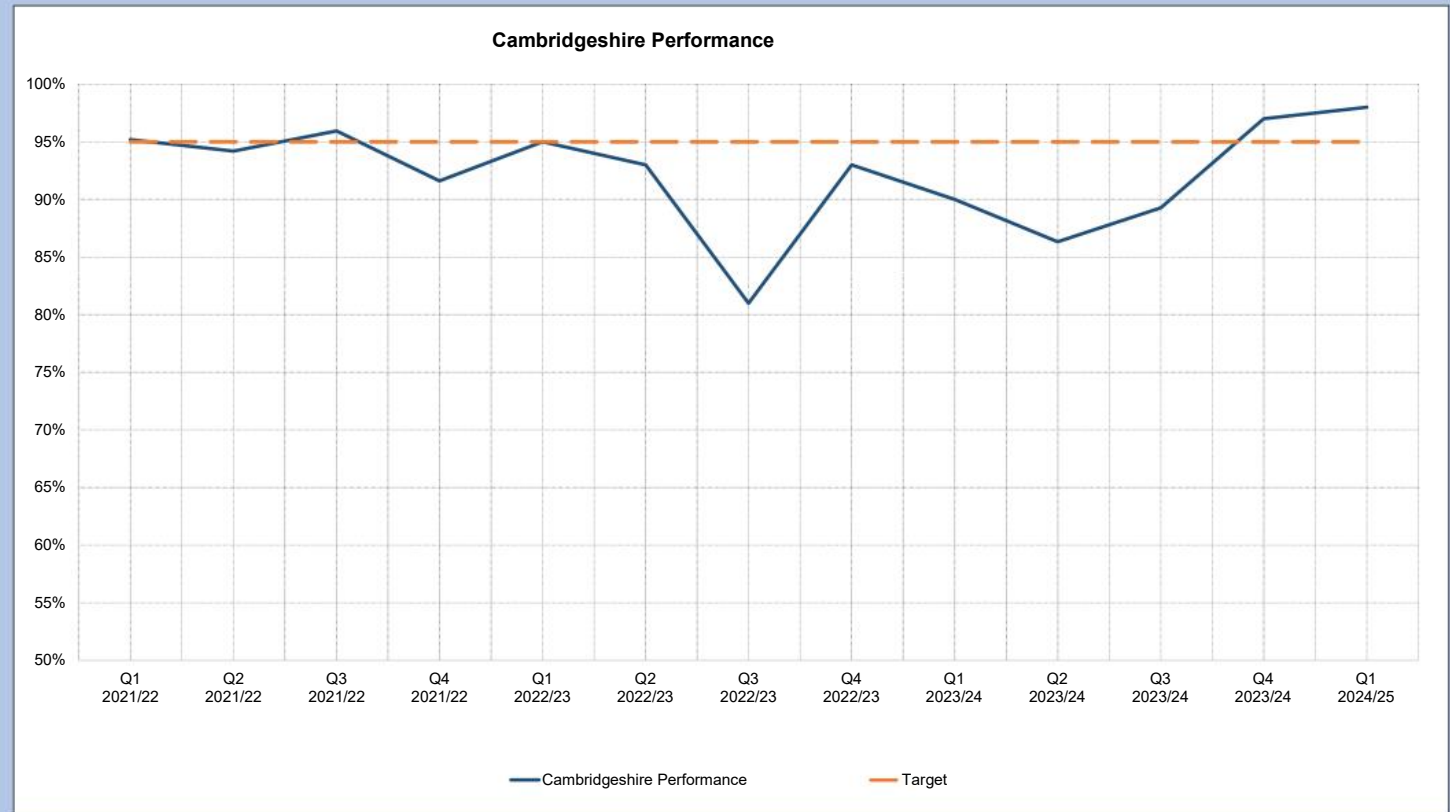
Indicator Description

For IT Support, a 'request' is defined as a call logged by a user asking for information, advice, a standard change or access to a service. They include system access requests, changes to IT profiles and laptop applications.

'First line' teams are those that take the calls directly from end users, in this case the IT Service Desk which includes the User Admin team.

'Requests resolved at first line', therefore means requests resolved by the Service Desk or User Admin, without being passed to any other IT team ('second line').

'Hornbill' is the IT system used internally by the council to raise, view and update IT requests and incidents.



Commentary

The increasing percentage of service requests being resolved within Service Level Agreement (SLA) is reflective of the improved processes used to resolve requests such as the management of call queues by ensuring that older calls are given equal priority. The standardisation of IT across the business is made possible by the migration away from network storage to Teams and SharePoint.

Actions

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Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
750	↑	541	N/A	N/A

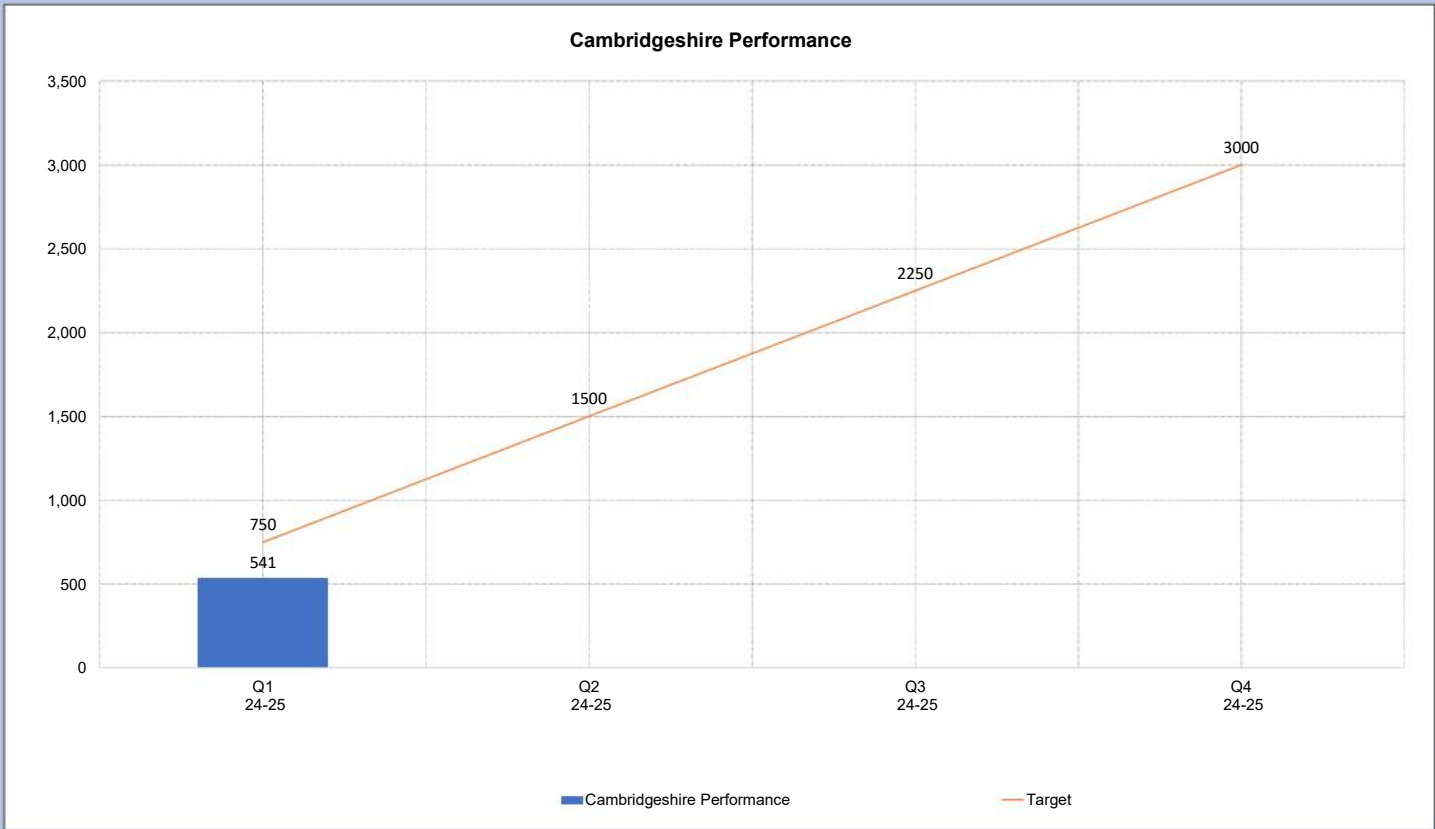
RAG Rating

Red

Indicator Description

This indicator measures how many staff have completed the 'Introduction to First Aid' & the 1 day Emergency First Aid course. These are mandatory courses which must be completed every year, that will enable staff to have a basic understanding of first aid requirements whilst working in an agile way.

Some staff do not need to complete the course as they may have already completed a more advanced course as part of their role within CCC (e.g. they may have a First Aid certificate acquired outside of work). This has informed the setting of a target of 3000 staff.



Commentary

This course has been reconfirmed by Corporate Leadership Team (CLT) as essential learning for all employees that needs to be repeated annually. A new process has been implemented in January whereby people are asked by their manager during their annual ratings conversation whether they have completed their essential learning and this is expected to drive a significant improvement in compliance.

For reporting on a quarterly basis, the target of 3000 is divided by four equally, however, whilst this indicator is reported red for Q1, 2,624 employees completed their training last year over the remainder of the financial year. It is expected that as officers complete their training annually this trend will continue, with the assurance of all employees being asked about their training during the annual ratings conversation at the end of Q3, beginning of Q4.

The Health & Safety Team continue to promote the course and monthly statistics are shared with CLT requesting them to promote within their Service areas.

Actions

The Health & Safety team will continue to promote the course via the Corporate Leadership Team and the Service Health & Safety Meetings to ensure that the target of 3000 by the end of the next financial year is met.

Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
8 - 10	Within Target Range	8.80	8.77	Declining

RAG Rating

Green

Indicator Description

Please note that the methodology for this indicator is provisional. We are investigating the underlying report that provides this data from our HR system (ERP gold) to confirm the methodology used to calculate this indicator. Subject to the outcome of this, there may be a slight amendment to the methodology for this indicator.

This indicator is the average days lost per FTE over a 12 month rolling period.

The calculation is as follows:

$$\frac{\text{Total FTE days lost to sickness absence in last 12m}}{\text{Average number of FTE (average taken from start and end of 12m period)}}$$

The cohort included in this calculation is all permanent employees. It excludes agency and relief staff and those who have been on zero hours contracts for under a year at time of reporting (casual employees). This definition is in line with how the benchmark indicators are calculated.

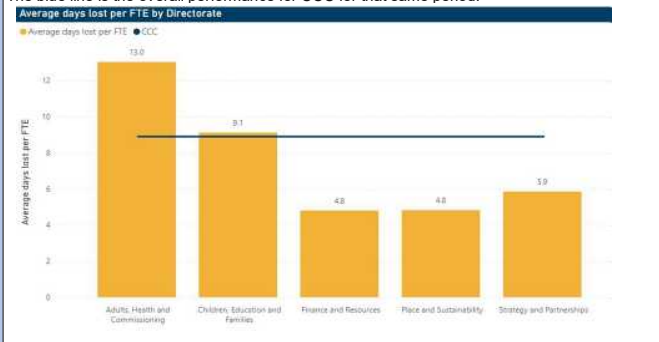
The National average refers to all English single tier and county authorities that submitted data to the LG inform workforce benchmarking club for the 2022/23 financial year (34 authorities). Statistical (CIPFA) neighbour average is the average of Cambridgeshire's CIPFA nearest neighbour authorities who submitted data to LG inform (4/15 neighbours). CIPFA nearest neighbours are calculated a broad range of social-economic indicators to define statistical similarities in authorities.

Directorate Comparison

The below graph shows the directorate comparison of average sickness days lost per FTE for the end of the latest quarter (Q1 2024/25).

The yellow bars are the average days lost per FTE for the 12m period up to the end of the quarter.

The blue line is the overall performance for CCC for that same period.

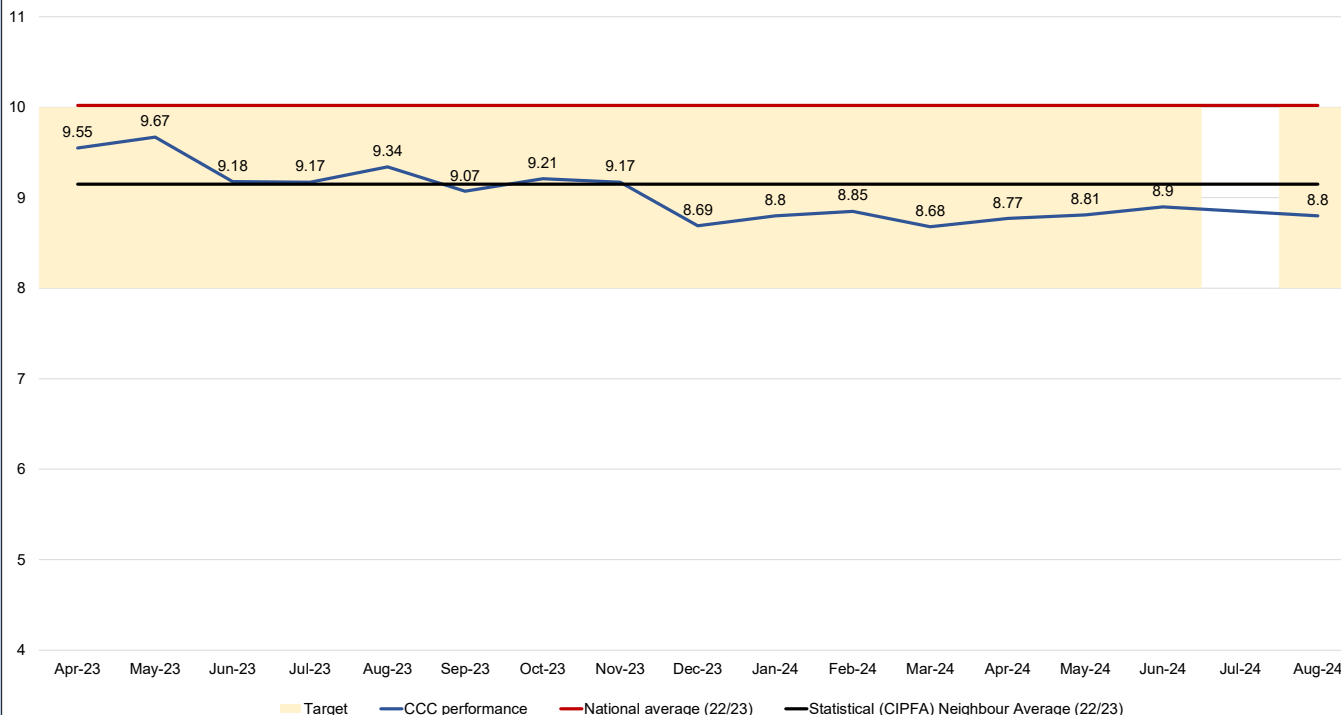


Wellbeing support

Support and interventions aimed at support for health and wellbeing include:

- Employee Assistance Programme (EAP)
- Occupational Health
- Access to Work and 1:1 Mental Health Support from Maximus
- Stress Policy including Stress MOT and Action Plan
- Return to work meetings
- Wellbeing Conversations and Wellbeing Passport
- Wellbeing Conversations for Managers training
- Schwartz Rounds (Monthly reflective sessions)
- Reasonable Adjustments Toolkit
- Mental Health First Aiders
- Agile/flexible working options
- Mental Health Awareness Training (e-learning and workshops)
- Wellbeing Hours, blogs and promotion of resources
- Menopause Awareness Workshops

Cambridgeshire Performance



Commentary

Our overall levels and top 5 reasons for absence continue to be monitored monthly at Corporate Leadership Team. Long-term absence is higher than in 2023, but lower than 2022. While the most common reason for long-term absence is anxiety, mental health and depression, levels are lower than in both 2022 and 2023, and we have a range of interventions supporting both managers and their teams to create a culture in which mental health is routinely discussed and resources accessed to promote good mental health, including our Employee Assistance Programme, our increasingly active Mental Health First Aiders network, and a comprehensive range of learning opportunities. Our 'Wellbeing Conversations for Managers' learning package has been accessed either in workshop or video format by 180 managers since its launch this year, providing the knowledge and skills to support both their team and their own mental health and wellbeing at work.

Long-term absences related to stress and to musculoskeletal issues are at higher levels than in the previous two years. We are highlighting interventions and resources that can act on work-related causes of these kinds of absence, including our Stress Policy, monitoring of DSE assessments, and an audit of risk assessments, which will capture both physical and psychosocial risk factors. Our new electronic self-certificate provides an indicator of work-related absence and a trigger for the manager to take early action. HR Teams are following up where work has been cited as a factor to ensure that appropriate actions and support is in place. Where non-work related factors are the cause, our range of supportive employment policies and wellbeing interventions are available to enable managers to support and promote healthy attendance, and for colleagues to seek support.

We continue to promote health and wellbeing interventions and resources with a focus on those that address our main reasons for absence, are supported by occupational health research, and are in line with our position as a public health authority. This includes: Our monthly Schwartz Rounds, which provide a safe, facilitated space in which colleagues reflect on the emotional impact of work and which 146 people have attended since we launched in February 2024; our participation in the Pain at Work research study, with 32 colleagues signing up to seek support and further research on managing pain at work; and our recognition for the significant numbers of colleagues who took part in the free trial of the Government's Midlife MOT scheme, which focused on supporting people to improve both their financial and physical and mental wellbeing to retain them in the workforce.

We continue to offer a monthly wellbeing hour, with recent topics including a session on how to use the digital tools in direct response to colleagues' experiences of adapting to new IT, such as MS Teams. Feedback provided confirmed that addressing potential stressors in this way is valued by colleagues, by understanding the impact of the right tools and the right support to use them, and reaching a large audience of 386 people live via the Wellbeing Hour platform. A recording is also available in the Wellbeing Hub along with a set of frequently asked questions from the session.

Actions

We launched an updated Health and Attendance Policy in July with the focus on supporting people to remain healthy in work and, and to achieve an effective and sustainable return to work when they have been absent from work. This puts a greater emphasis on the role of managers in supporting health at work, including the proactive use of wellbeing passports to structure and record supportive adjustments. It provides a degree of manager discretion in the use of phased returns to work, acknowledging the well-researched benefits of supporting people to attempt a return on adjusted duties or hours and the need for some more flexibility in this. This was in response to feedback from managers, employees, and trade unions, and the feedback to the revised approach has been very positive. We have invited tenders for both our Employee Assistance Programme and Occupational Health Contracts, emphasising the importance of services that understand and tailor for the wide range of needs and lives experiences within a workforce of our size, these procurements are now well underway.

Indicator 214: Staff turnover (rolling 12 month average)

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October 2024

Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
10-13%	Within Target Range	11.22%	11.85%	Improving

RAG Rating

Green

Indicator Description

Staff turnover is the sum of employees who leave the organisation over a 12 month period expressed as a percentage of the average headcount over a 12 month period.

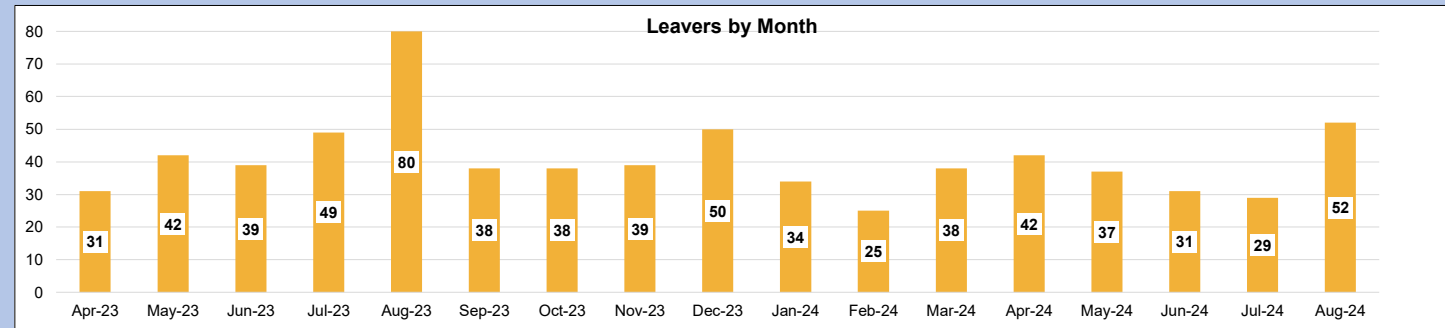
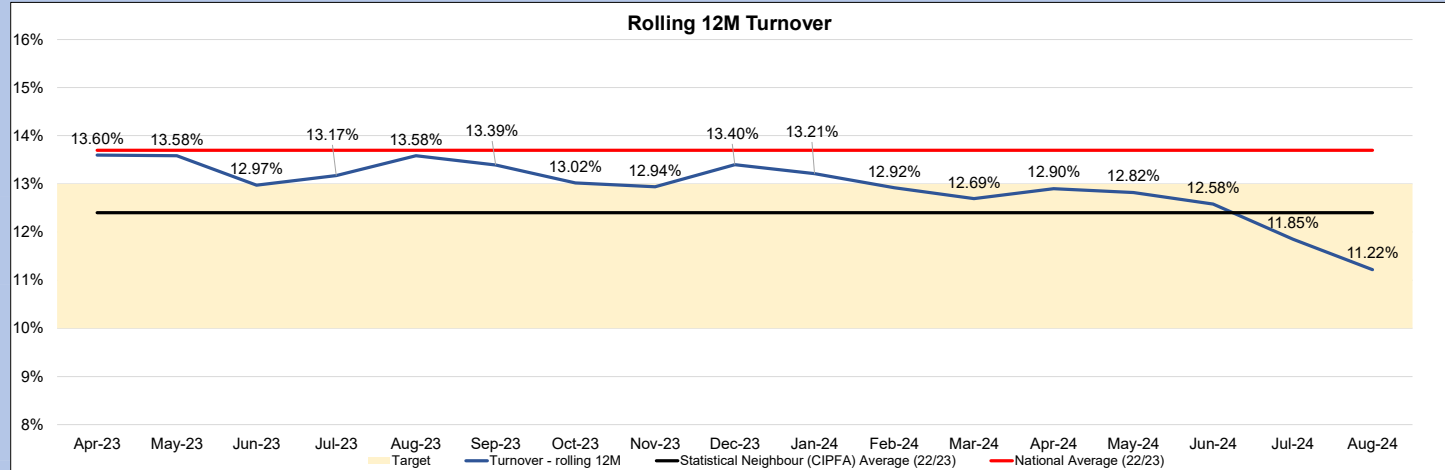
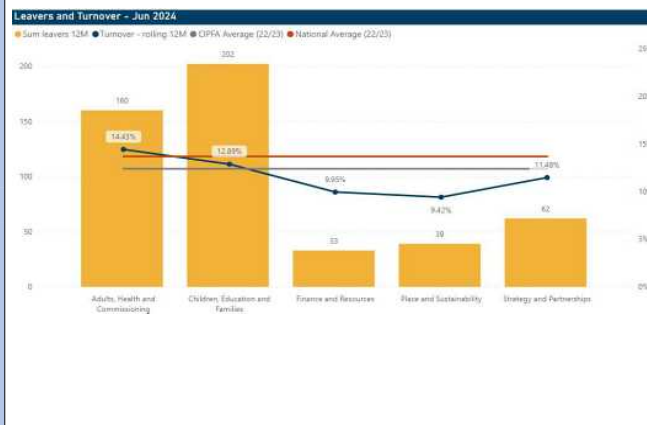
The blue line confirms the rolling 12 month average turnover which is calculated by number of voluntary and non-voluntary leavers / average headcount over a 12 month period. All permanent employees are included in the leavers and headcount figures used for the turnover calculation. This excludes agency and relief staff and those who have been on fixed term contracts for under a year at time of reporting (casual employees). This definition is in line with how the benchmark indicators are calculated.

The orange bars in the second graph show the number of leavers for each month. This is a count of voluntary and non-voluntary leavers (employees and FTCs over a year). If an employee leaves two positions, they are only counted once in this number. This is in-line with how the benchmark indicators are calculated. Please note: the data for number of leavers is correct at the time of reporting.

The National benchmark turnover figure for 2022 - 23 is 13.7%. National average refers to all English single tier and county authorities that submitted data to LG Inform for the 2022/23 financial year (34 authorities). The statistical (CIPFA) neighbour benchmark figure for 2022 - 23 is 12.4%. This is the average of Cambridgeshire's CIPFA nearest neighbour authorities who submitted data to LG Inform (5 out of the 15 authorities). CIPFA nearest neighbours are calculated by a broad range of social-economic indicators to define statistical similarities in authorities.

Directorate Comparison

The below graph shows the directorate comparison of turnover for the end of the latest quarter (Q1 2024/25). The orange bars show the sum of leavers over the past 12 months (Jul 23-Jun 24). The blue line shows the rolling 12M turnover at the end of the latest quarter for each directorate. The grey and red lines are the statistical neighbour (CIPFA) and national average benchmark figures (2022-23).



Commentary

Rolling 12-month turnover has been steadily reducing since April 2023 and is now sitting more comfortably within the target range and significantly lower than our statistical neighbours. The number of leavers in August spiked which was in part due to 13 relief/fixed term contracts coming to an end and 13 retirements taking effect from end August. Whilst it was higher compared to recent months, it is a large drop off year on year, hence the downward trajectory of the rolling 12-month data.

Exit interviews are now offered across the whole organisation and are being routinely carried out with all leavers who wish to take part. This ensures reasons for leaving are captured and improvements made where possible with the intelligence gathered being fed back into the services through the HR teams. Engagement sessions are held within social care supporting new starters in their first few weeks of employment. Exit interviews can now be requested by individuals directly and the offer is now extended to those employees who are considering leaving. The focus of this work will continue.

Increased collaboration between HR and Insight Analysts has provided some much-needed improvement to the suite of HR indicators and provided benchmarking data. This benchmarking data will help inform how the County Council is performing in relation to targets, statistical neighbours and national information.

Actions

- Undertaking deeper listening activity with colleagues, via Directorate sessions, to explore the employee survey outcomes and how these insights can be used to drive employee engagement.
- Strengthening management skills in having effective Our Conversations, including a new learning intervention 'Wellbeing Conversations for Managers, which also covers support for managers own wellbeing.
- Responding to feedback from colleagues, managers and trade unions in relation to our approach to absence and attendance management, by developing and launching our refreshed Health and Attendance Policy.
- Developing targeted workforce plans with Adults' and Children's services to address specific needs that impact on recruitment and retention.
- Continue to gather the feedback from exit interviews, engagement sessions and potential leaver conversations to inform the directorates and address issues that can be resolved.

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
99.0%	↑	100.00%	100.00%	Unchanged

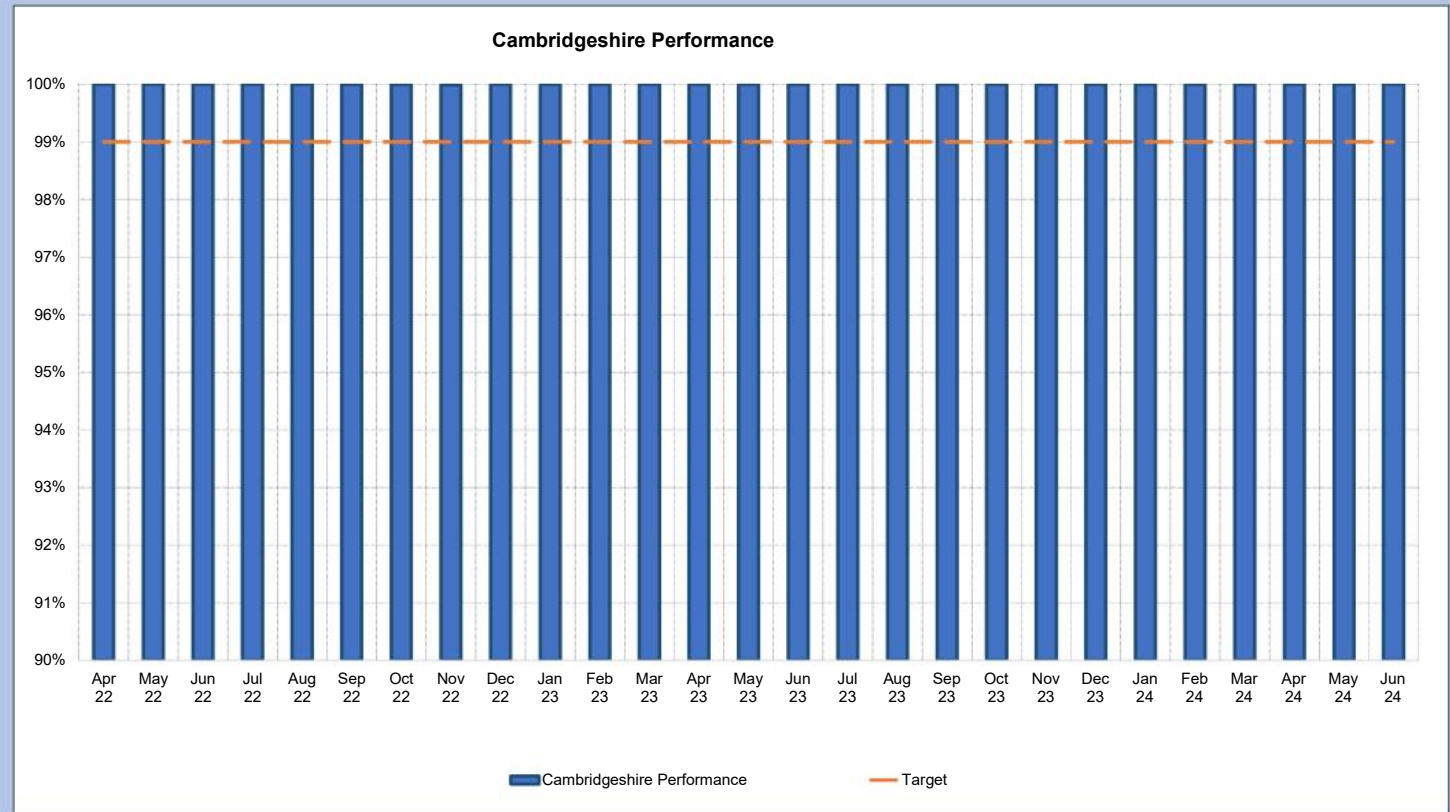
RAG Rating

Green

Indicator Description

This indicator measures the availability of access to the CCC IT network from a managed (CCC) computer, for staff and Members.

The measure excludes outages for scheduled maintenance.



Commentary

The figure relates to the PaloAlto Secure Web Gateway (SWG). It provides access to the network when using a CCC managed computer from any location, whether remote or a networked office.

There has been full SWG availability for the duration of Q1. Issues in May were network wide and not limited to the SWG.

Actions

Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
85.0%	↑	93.0%	90.0%	Improving

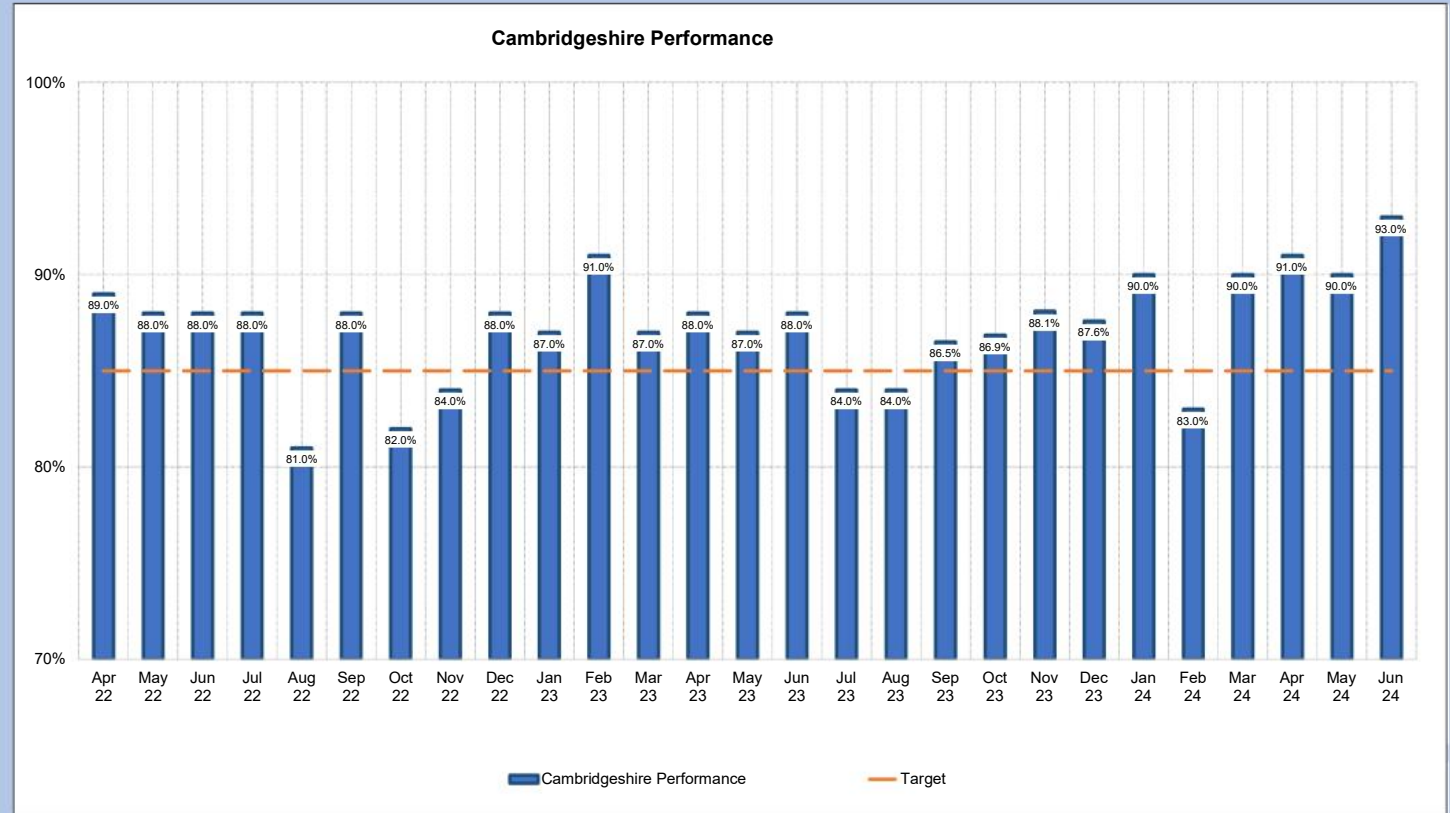
RAG Rating

Blue

Indicator Description

Once a call to the IT Service Desk is resolved, the requestor receives an email asking them to submit online feedback about the service they received. They can give a rating of one to five stars; the higher the star rating, the better the customer perception of service.

This measure takes the percentage of those submitting a five-star rating.



Commentary

Q1 starts well with 91% 5 star ratings for April, continues at 90% in May and finishes with a record 93% in June.

Useful Links

Actions

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
87.0%	↑	98.0%	98.0%	Unchanged

RAG Rating

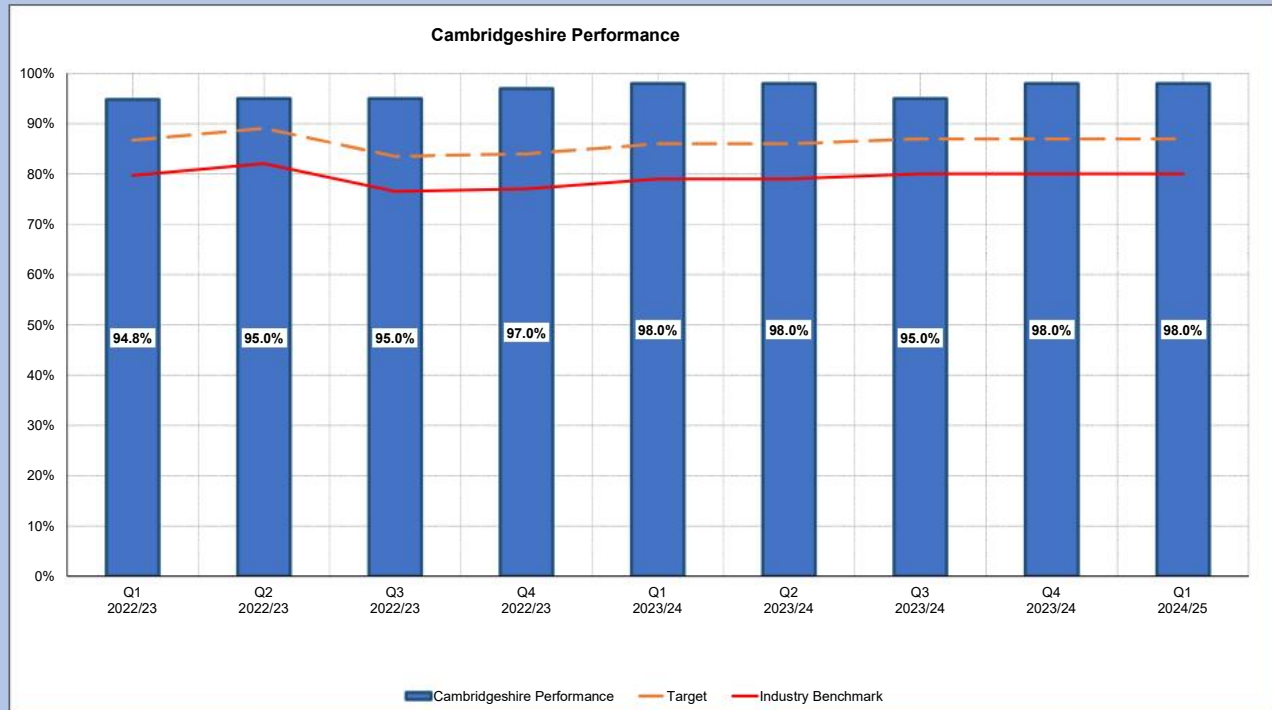
Blue

Indicator Description

The score is a measure of how well our website performs against the Site improve quality assurance checks. Site improve measures content quality, content freshness, security and user experience of CCC's main public website.

Reported data is an average of weekly scores for the last week in the reported month.

The target is set to track at 7% above the industry benchmark score for Government and this updates every quarter.



Commentary

The graph shows the quality assurance of the County Council website compared to the target score (7% above the industry standard).

The quality assurance score has remained the same for this period

Actions

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
92.0%	↑	94.0%	94.0%	Unchanged

RAG Rating

Green

Indicator Description

The score is a measure of how well our website performs against the Site improve website accessibility checks, which are based on the Web Content Accessibility Guidelines (WCAG) success criteria. These checks cover common issues that affect a website's accessibility compliance.

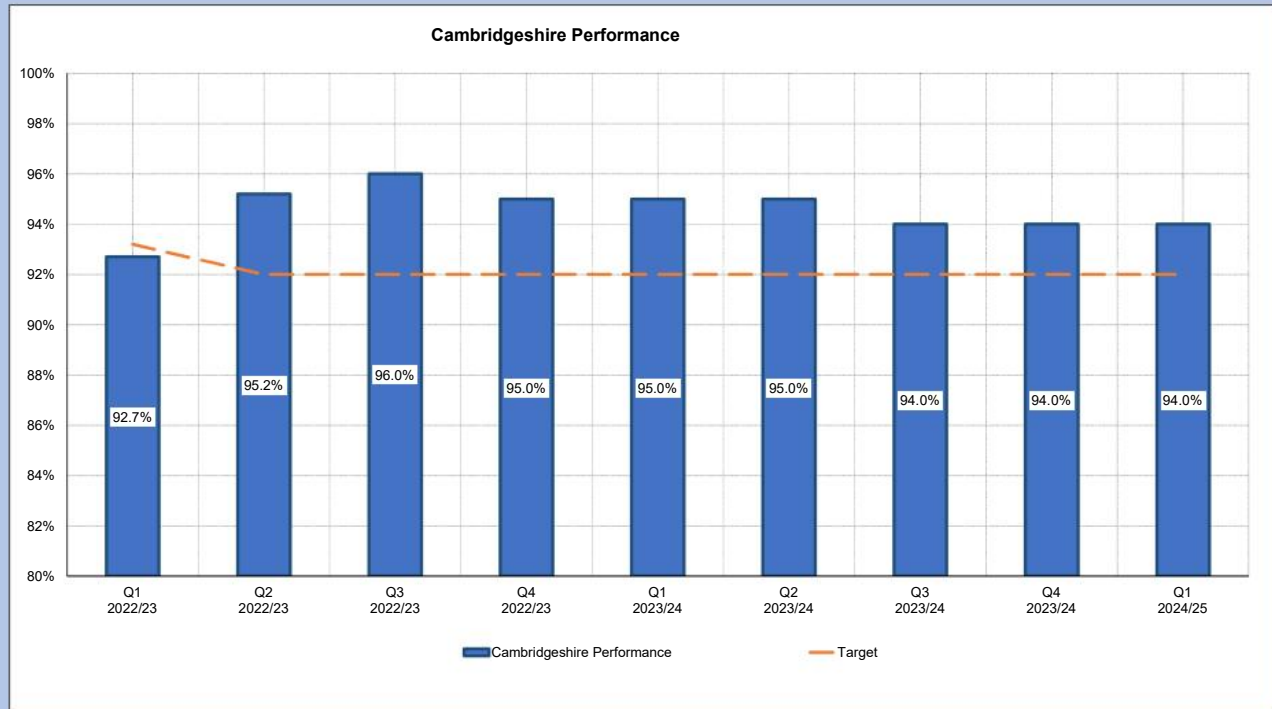
New regulations on accessibility came into force for public sector bodies in 2018 - <https://www.gov.uk/guidance/accessibility-requirements-for-public-sector-websites-and-apps>. We must make our website accessible by making it 'perceivable, operable, understandable and robust'.

The web team carryout weekly audits of the website to ensure the site is meeting the required accessibility standards. All new content is thoroughly checked to make sure it is accessible and we are currently updated all legacy documents (PDFs) to make sure they meet the new standards. The team uses a number of resources to do this including our Website Content Playbook - <https://www.cambridgeshire.gov.uk/website-content-playbook>

We have also developed an Accessibility E-Learning course to enable all staff to understand the accessibility regulations and make their own content accessible.

Reported data is an average of weekly scores in the reported time period.

The target changed to a fixed score of 92%, from a score that tracked at 7% above the industry standard in Q1 22/23.



Commentary

The accessibility score has remained the same this quarter

Actions