Produced on: 18 March 2024

Performance Report

Quarter 3

2023/24 financial year

Strategy and Resources 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	• **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   **March 2024**

| Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
90.0%	↑	82.3%	83.0%	Declining

RAG Rating

Amber

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.

This measurement was adjusted in December 2021 to increase the relevance of the information provided. Prior to this date, the KPI measured the percentage of FOI responses issued within three months.

Cambridgeshire Performance
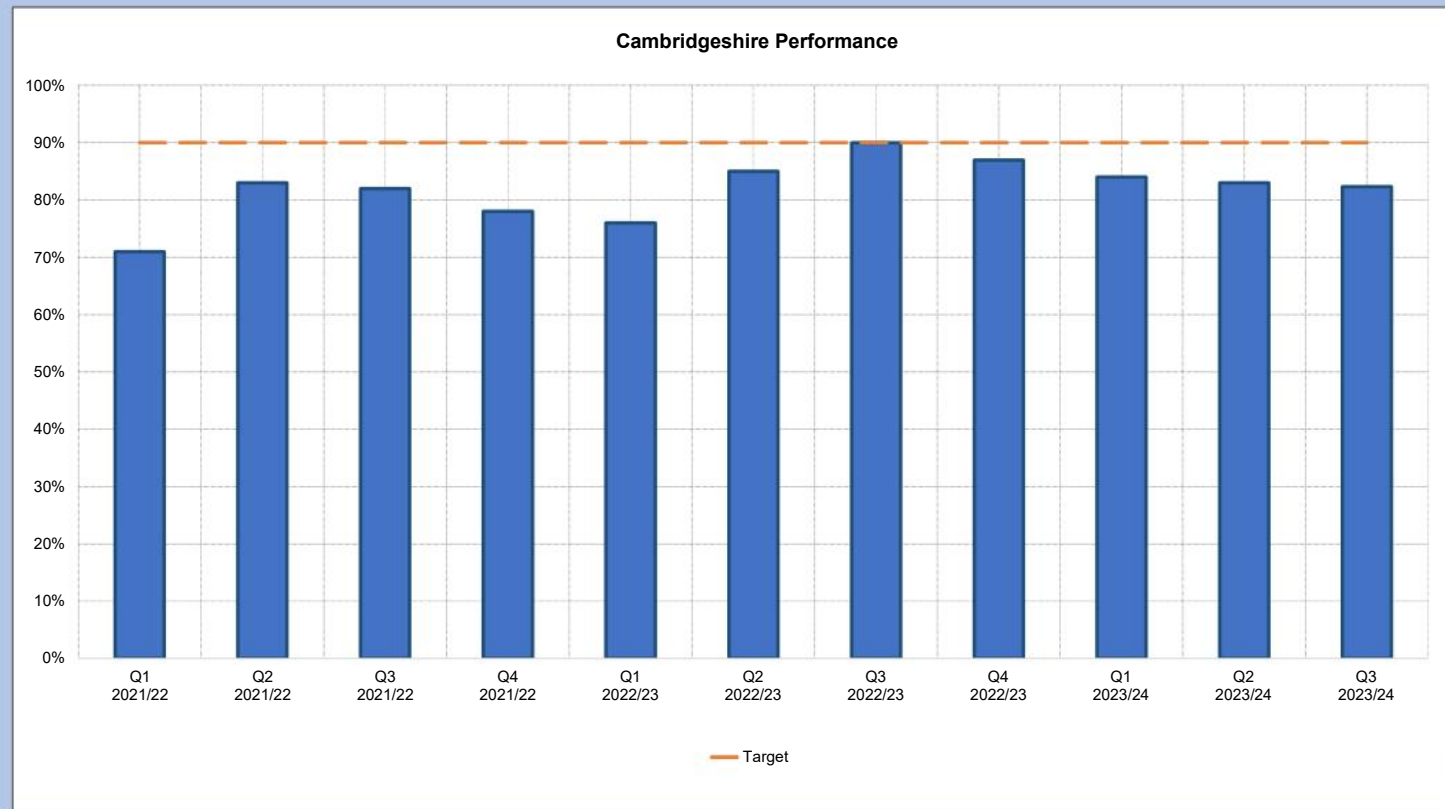
Commentary

This quarter performance has remained consistent with previous quarters. 83% of all FOIs responded on time despite the continued high level received since Q1 and we have maintained a similar performance to 2022-23 performance. There were 317 FOI requests in Q3, which remains an average of more than 3 for every calendar day in the period and the service issued 322 responses in the same period. These have ranged from requests in relation to potholes, road repairs, congestion charges, contracts, spend, social care and public health. Whilst some are relatively simple to answer, others require the careful review of documents to ensure that appropriate levels of information are disclosed. The service has commenced using the new FOI system in December 2023.

Useful Links

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

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

Actions

Indicator 183: Percentage of Subject Access Requests completed within statutory timescales (Year to Date)

March 2024

| Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
90.0%	↑	88.7%	77.0%	Improving

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.

Useful Links

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

Cambridgeshire Performance
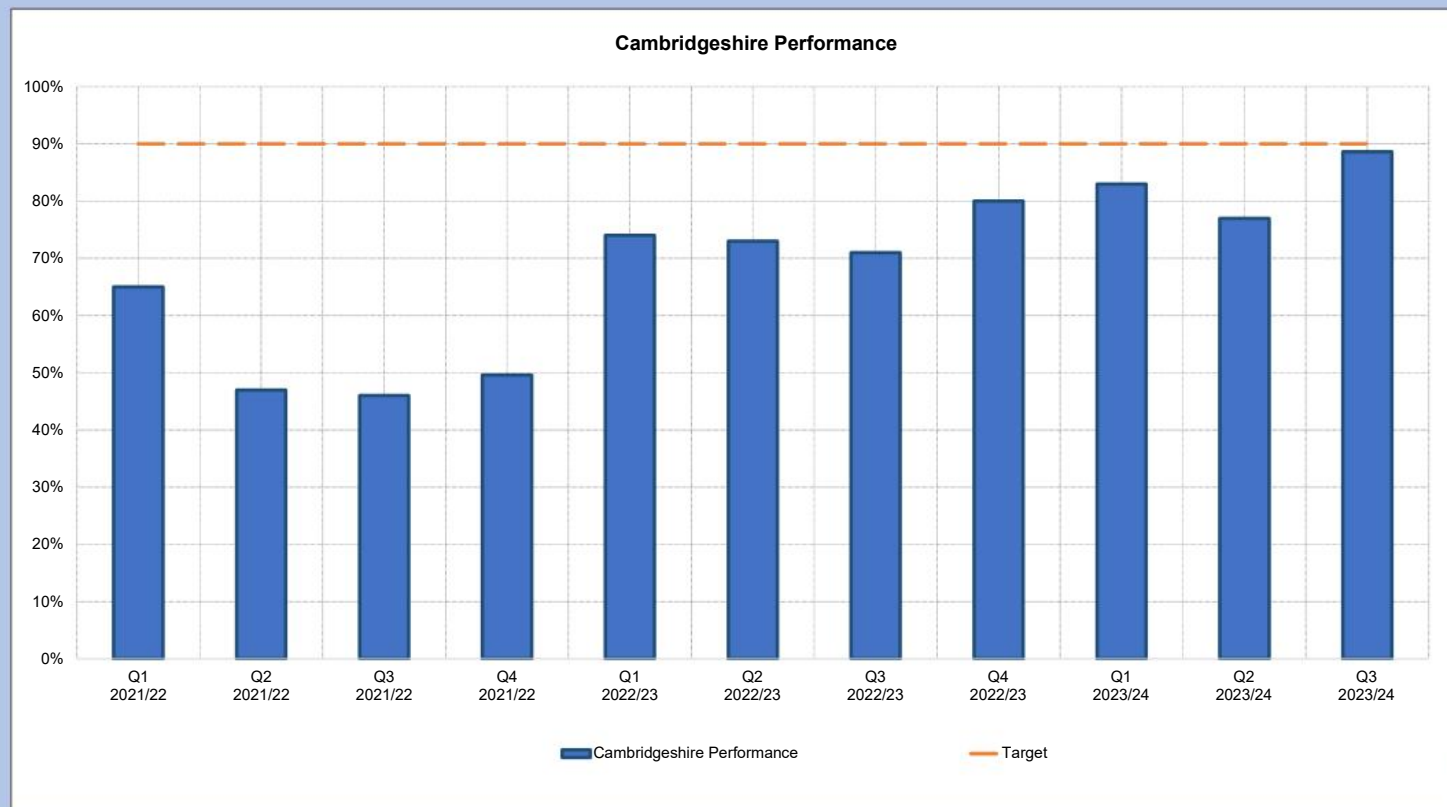
Commentary

The team continue to make progress, with 83% of responses issued on time for the year, showing maintained improvement overall. The team continue to make efforts to increase this response rate and maintain the good start to the year despite continued high volumes of requests received.

The team received 71 subject access requests in Q3 which were predominantly health and social care matters, which can run to several thousands of pages of sensitive information which needs careful review to ensure that appropriate information is provided without impacting on the rights of third parties or commit a data breach. These files often include paper records from the 1960s onwards which require very careful review and are time and resource intensive. Q3 is a similar amount to Q2 despite the Christmas breack.

The team closed 79 matters in Q3 with 61 responses issued. For the remaining 18, no response was received to the request for identification or clarification.

Actions

Indicator 184: Statutory returns completed on time   October   2022

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
100%	↑	95.65%	100%	Declining

RAG Rating

Amber

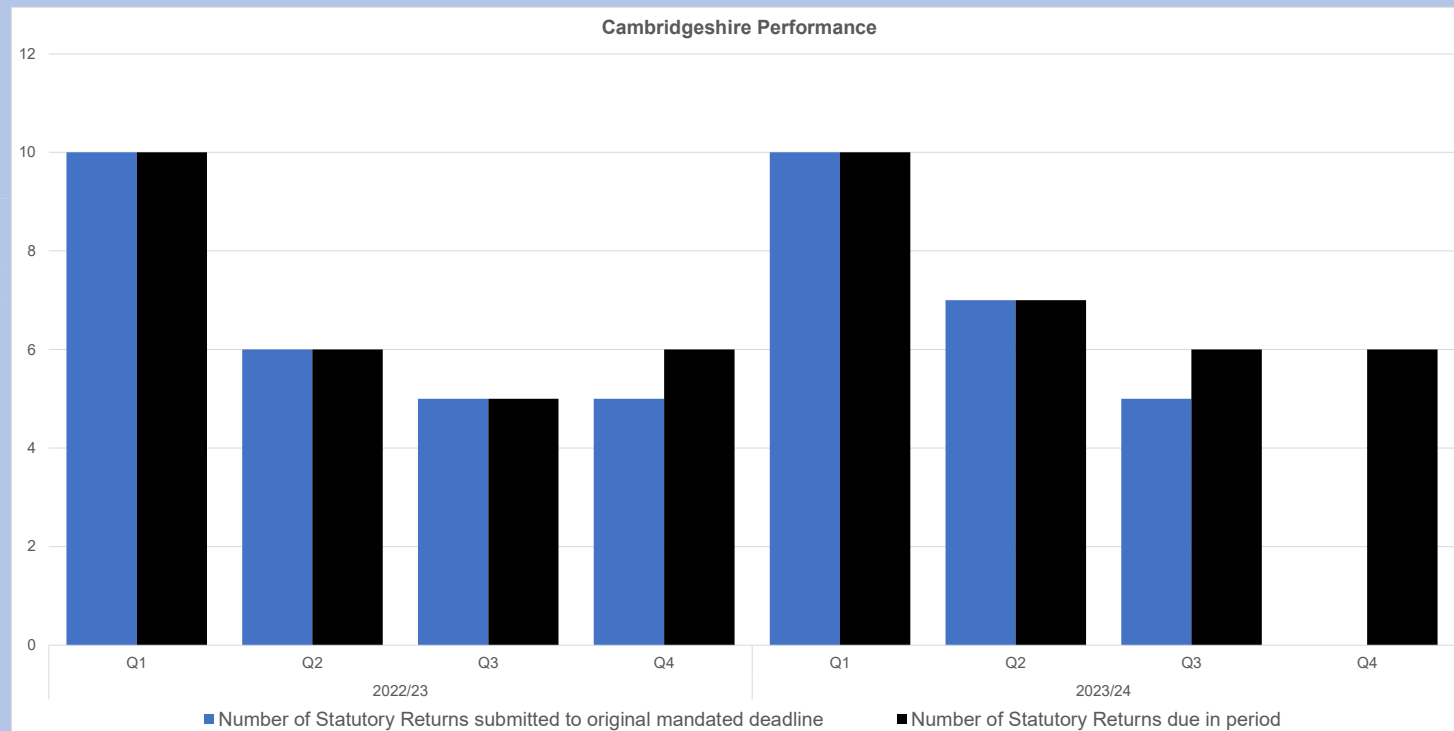### Indicator Description
The Council's Policy & Insight team leads on, and supports the submission of, a number of key statutory data returns to central government departments and regulatory bodies. A list is available on request.

Useful Links
A list of all the datasets that local government must submit to central government.

Cambridgeshire Performance

■ Number of Statutory Returns submitted to original mandated deadline
■ Number of Statutory Returns due in period

Commentary
As of the 31st December 2023 22 of 23 returns met the mandated deadline. A two week extension was agreed for the Adult Social Care Workforce return in October 2023 as more time was needed to manually collect data for approximately 1200 members of staff that is not available via the Council's HR system.
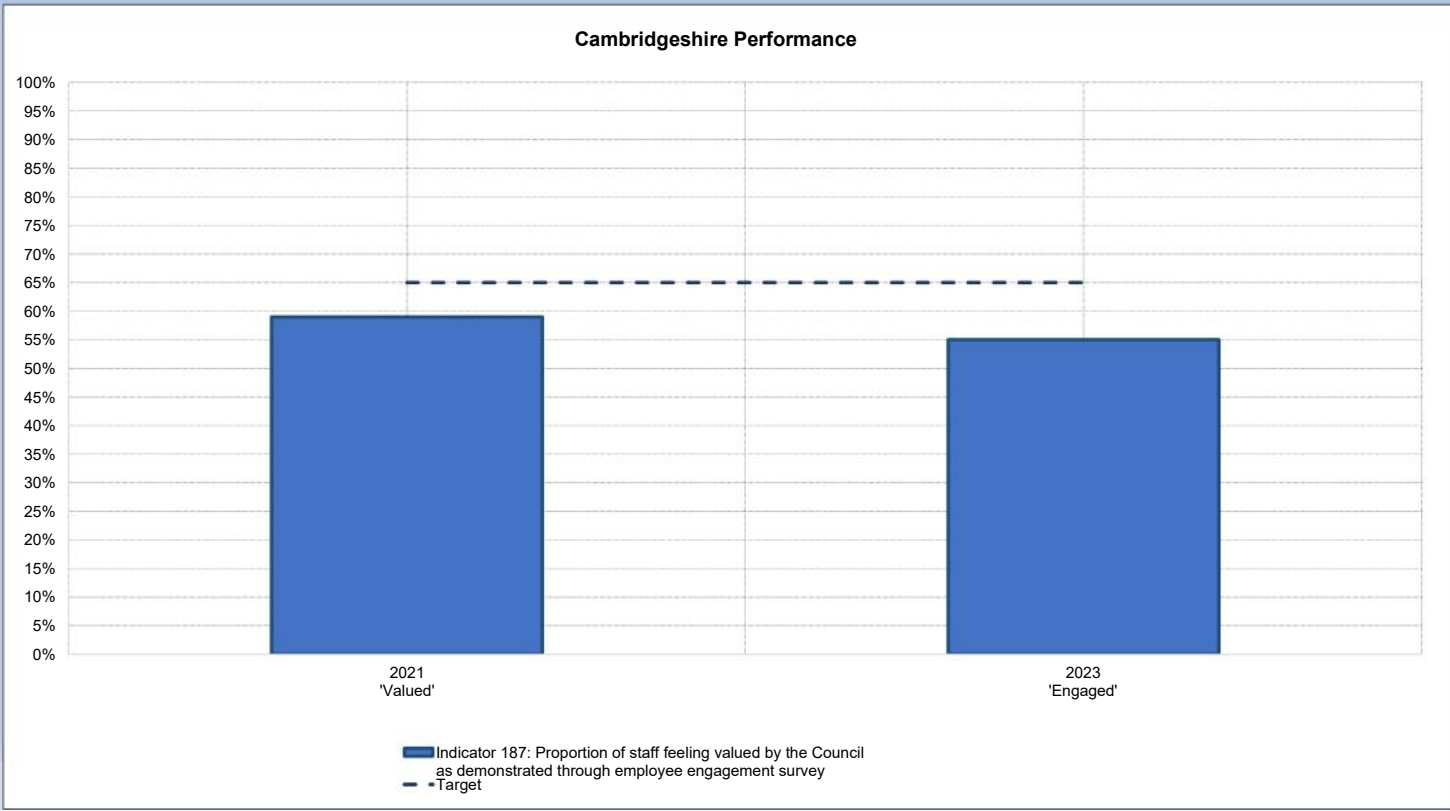
Actions

Indicator 187: Proportion of staff feeling engaged as demonstrated through employee engagement survey   **March 2024**

Target	Direction for Improvement	Current Year	Previous Year	Change in Performance
65.0%	↑	55.0%	55.0%	Unchanged

RAG Rating

Amber

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 public sector benchmarks provided by the Survey organisation, which has been used to set the target for improvement when the next fully 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.

Cambridgeshire Performance

Legend: Indicator 187: Proportion of staff feeling valued by the Council as demonstrated through employee engagement survey; - - Target

Commentary

The County Council's first, full and wholly independent Employee Engagement Survey for well over a decade was carried out by Ipsos MORI 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 MORI is made up from a number of individual scores to provide an overall engagement rating, which in this case was 55%. Other questions covered in the survey focussed on factors such as how proud people feel to work 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 Surveyresults have been widely communicated and shared withint he Council and employee listening sessions involving members of the Corporate Leadership Team took place during January and February 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. The Council action plan in response to the Survey is planned to be developed and published by the end of April 2024 and this will be further scrutinised by the Staffing and Appeals Committee throughout the year, as part of the regular reports the Committee receives on the progress of the Council's People Strategy.

Indicator 190: Proportion of information enquiries resolved at first point of contact

March 2024

| Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
80.0%	↑	81.21%	81.63%	Declining

RAG Rating

Green

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 representaitve to deal with, this would be marked as unresolved. This measures how effecitvely 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 increae 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.

Cambridgeshire Performance
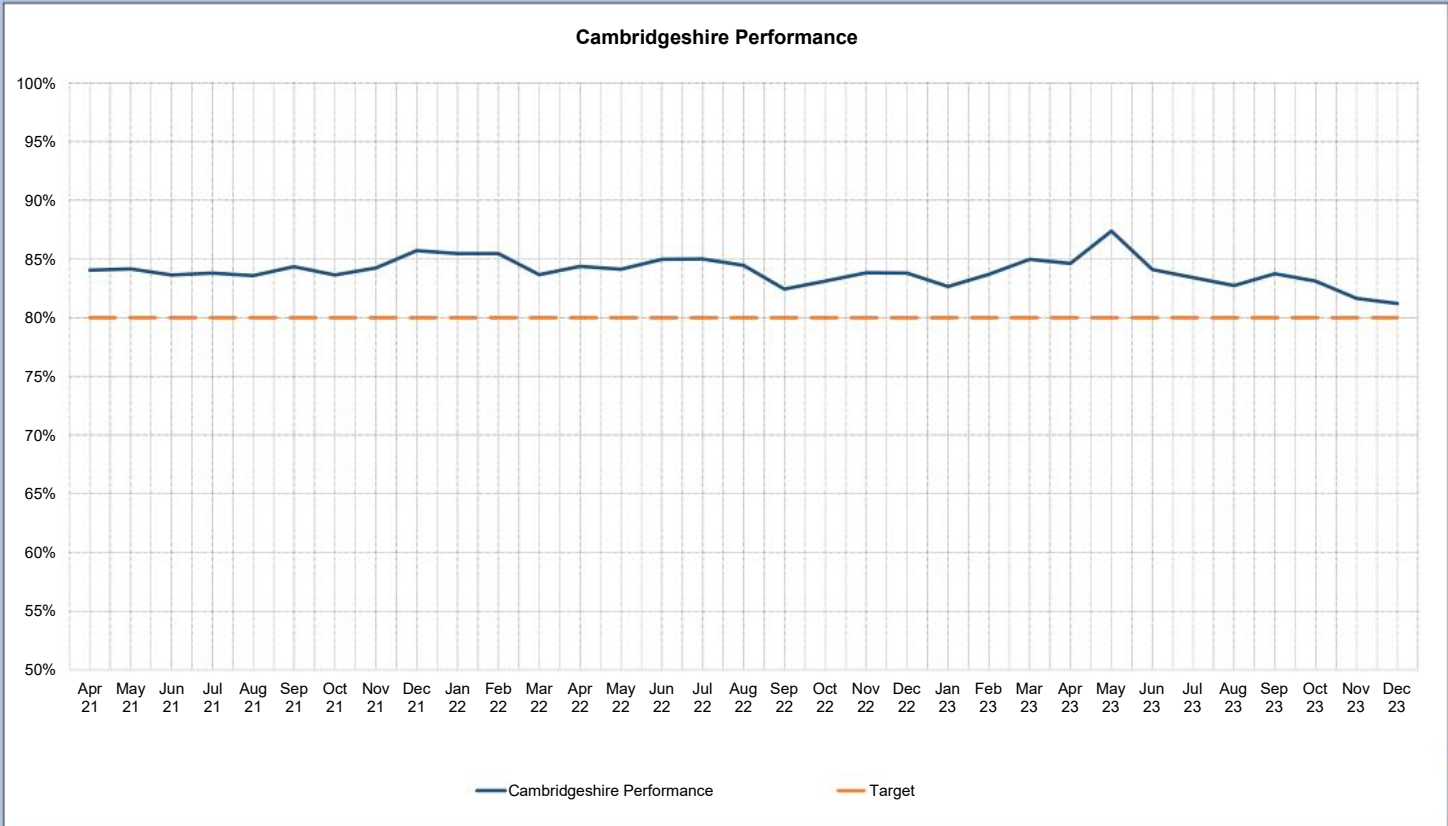
Commentary

Over the period of October to December 2023, Customer Services achieved a First Contact Resolution percentage of just over 81%. Whilst this is slight decline compared to the last quarter, it remains above the target of 80%.

The small decline from quarter 2 performance can be attributed to an increase in contacts for the Children's and Registrations' services. The complex nature of these calls means they may need to be transferred to the service team, these two services being two of the higher volume services for Customer Services. For Children's this was mostly made up of an increase in Request for Information background checks received in November and December. With regards to Registrations, the main areas of increase were around marriage ceremony enquiries and people informing us they would be late to appointments, both of which would always need to be passed on to the service.

Actions

Indicator 195: Percentage of IT requests resolved at first line within expected timescales
March 2024

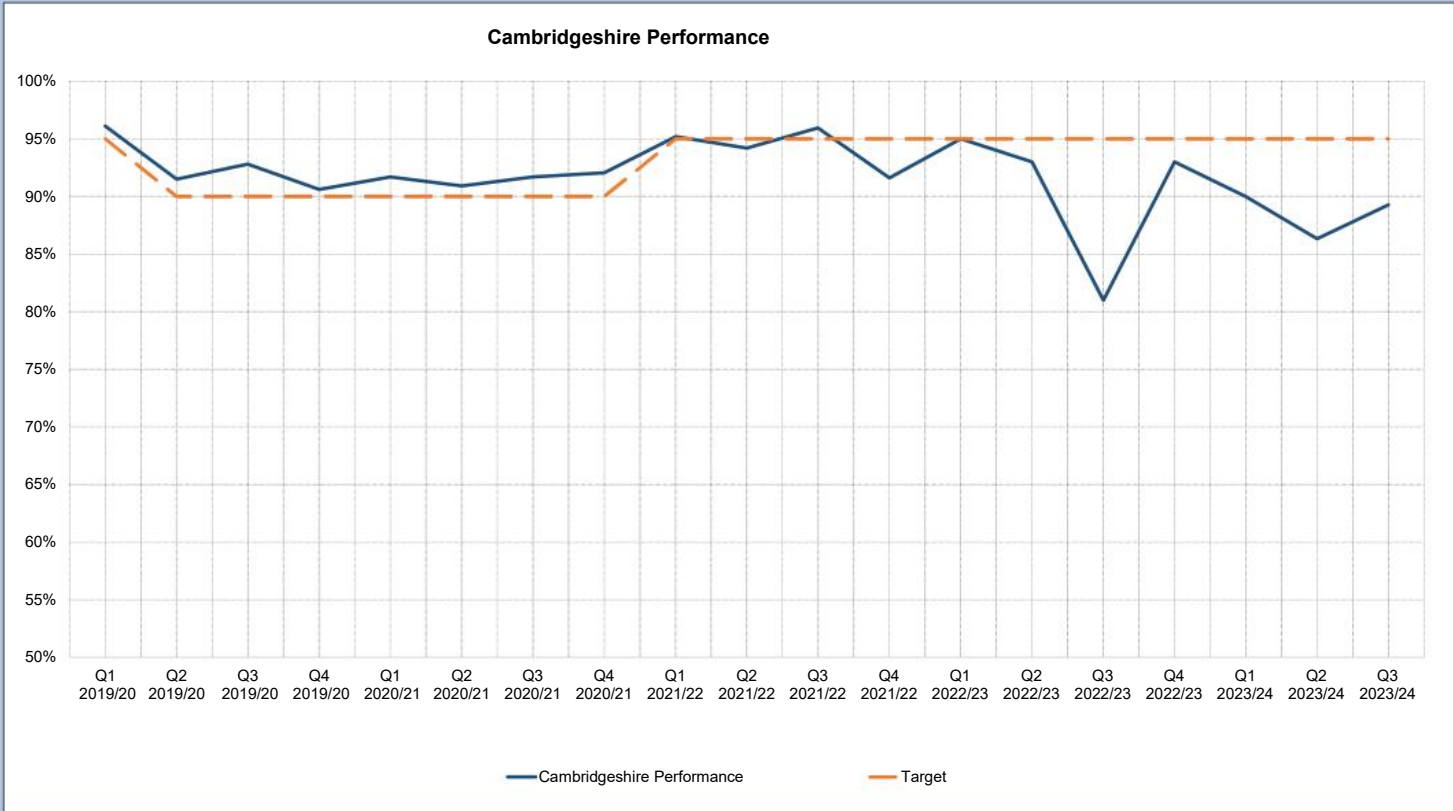| Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
95.0%	↑	89.3%	86.3%	Improving

RAG Rating

Amber

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 internally used by the council to raise, view and update IT requests and incidents.

Cambridgeshire Performance

Commentary

In the Q2 report, this KPI detailed the technical issues, which resulted in a number of calls being abandoned. These calls had to be manually resolved whilst the supplier fixed the issue. The Q3 Performance is reflective of a 'business as usual' workload.

Actions

Indicator 212: Number of staff who have completed Introduction to First Aid

March   2024

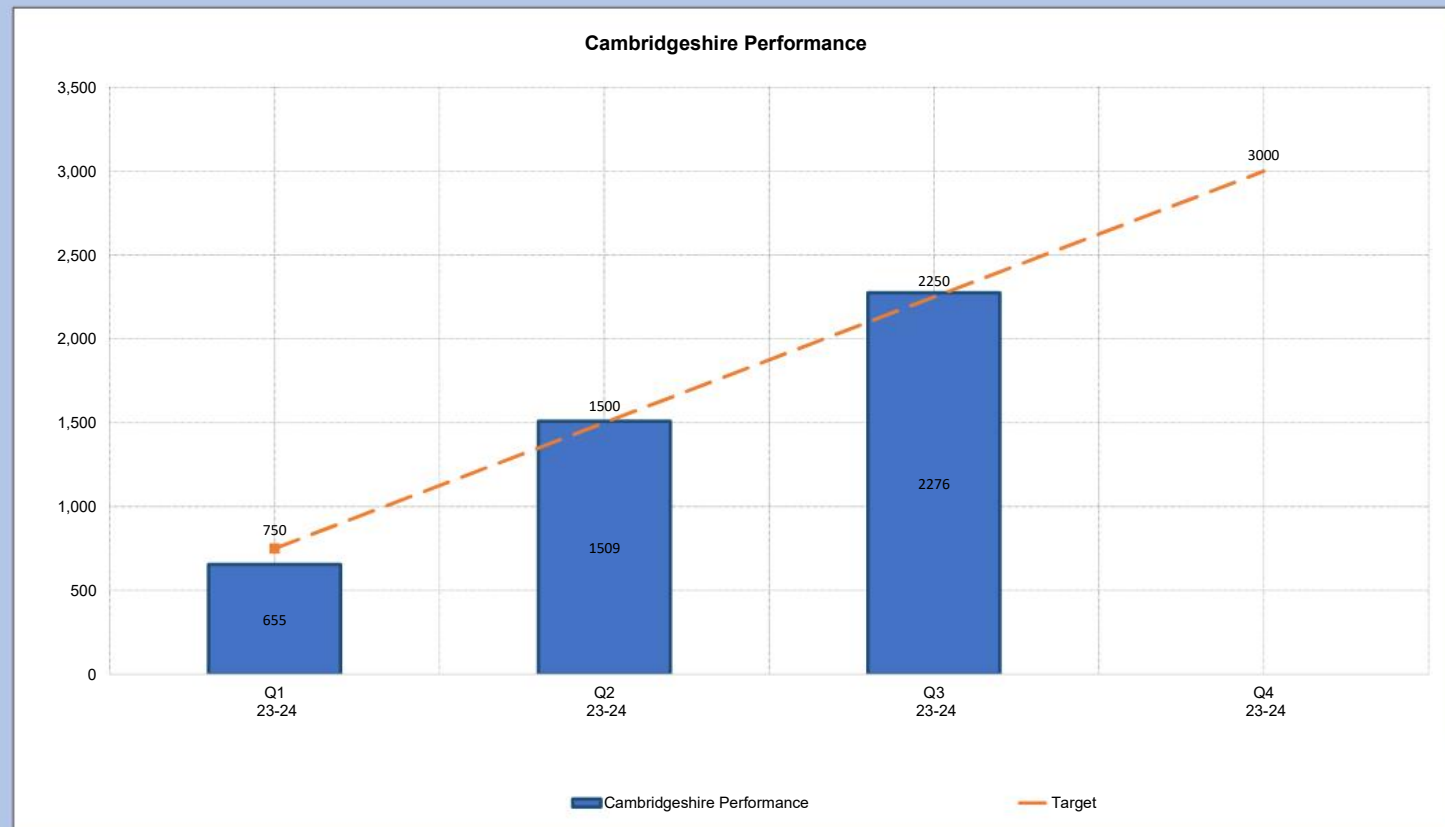| Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
2,250	↑	2,276	1,509	Improving

RAG Rating

Green

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 aquired outside of work). This has informed the setting of a target of 3000 staff.

Cambridgeshire Performance

Quarter	Performance	Target
Q1 23-24	655	750
Q2 23-24	1509	1500
Q3 23-24	2276	2250
Q4 23-24		3000

Commentary

The Introduction to first aid course was launched in October 2021. So far 75.8% of the target of 3000 employees completing the Introduction to First Aid has been completed.
The target of 3000 completions was met during the last financial year (2022/2023).

This course has now been reconfirmed by CLT as essential learning for all colleagues 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.

Actions

Staff continue to complete the courses and within the first three quarters of 2023 - 2024 there have been 2276 completions. 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 financial year is met.

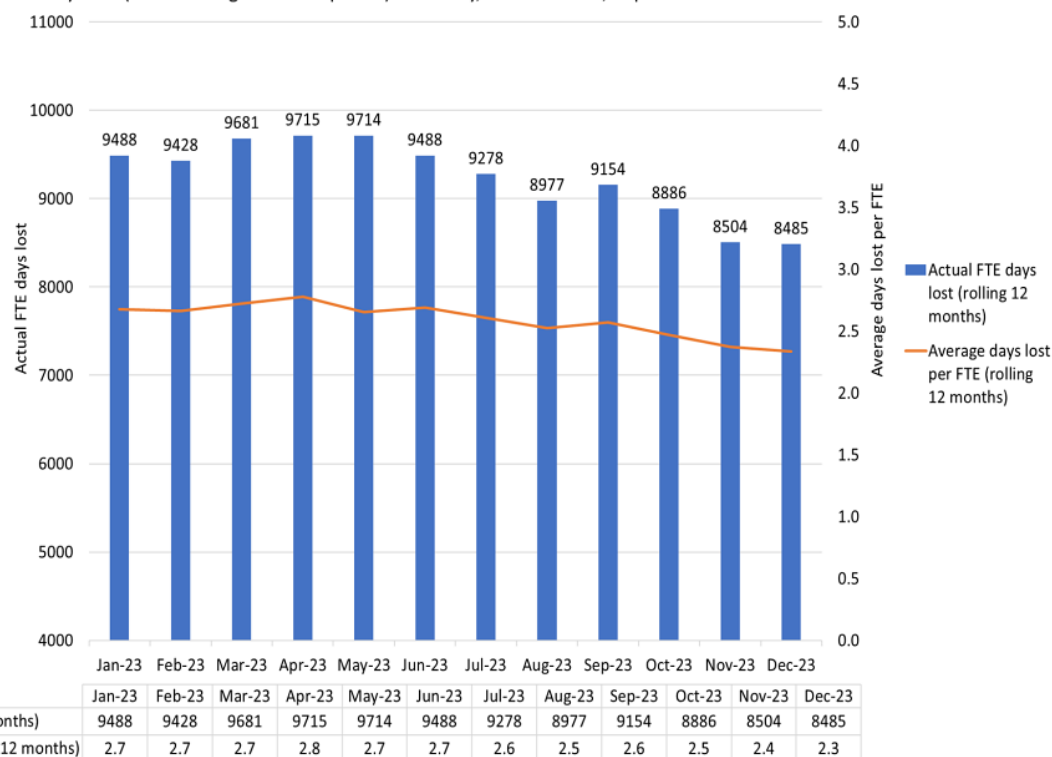| Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
TBC	↓	8,485	8,504	Improving

RAG Rating

Baseline

Indicator Description

The table shows a 12 month rolling absence for all CCC absence related to anxiety, mental health, depression and stress.

The actual full time equivalent (FTE) days lost is in blue. The orange line represents the average absence by FTE.

Wellbeing support

Support and interventions aimed at support for mental health and to reduce absence related to mental health conditions include:

Employee Assistance Programme (EAP)
Occupational Health
Access to Work 1:1 Mental Health Support from Maximus
Stress MOT
Return to work meetings
Wellbeing Conversations and Wellness Action Plans
Phased return/reasonable adjustments/SARA
Mental Health First Aiders
Agile/flexible working options
Mental Health Awareness Training (e-learning and workshops)
Wellbeing Hours, blogs and promotion of resources
Psychological support for social care teams via the ICS Hub
Menopause Awareness Workshops
Financial Wellbeing Workshops

FTE days lost (over a rolling 12 month period) to anxiety, mental health, depression and stress

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Actual FTE days lost (rolling 12 months)	9488	9428	9681	9715	9714	9488	9278	8977	9154	8886	8504	8485
Average days lost per FTE (rolling 12 months)	2.7	2.7	2.7	2.8	2.7	2.7	2.6	2.5	2.6	2.5	2.4	2.3

Commentary

The actual full time equivalent (FTE) days lost due to absence related to anxiety, mental health, depression and stress is steadily decreasing overall in Q3. The average absence by FTE for these reasons has also decreased. Anxiety, mental health and depression remains the top reason for long term absence (21days+) with stress the second.
As this metric is based on rolling 12 month data, it continues to be important to monitor this metric over the coming months but it is pleasing to see an overall sustained downward trend over the year and this reflects a sustained and consistent approach to talking about mental health in the organisation, and promotion of support resources, including those that have a preventative element.

Employee mental health is supported by multiple interventions including the employee assistance programme (EAP), which has a utilisation rate of c. 22.5% calculated as counselling and advice calls against our employee headcount in the year 1 December 2022 to 30th November 2023. 86% of calls were for counselling, with 14% seeking support and advice for other reasons including legal, employment matters, and relationship concerns. Counselling cases include a mixture of face to face, telephone, and online sessions, with online being by far the most used. After engaging in structured therapy, the Generalised Anxiety Disorder (GAD-7) average score reduced from 1.7 to 0.8 and the average Patient Health Questionnaire (PHQ-9) score reduced from 1.3 to 0.6. At the start of therapy, 11.5% of employees were absent from work. After engaging in structured therapy, this reduced to 7.7%, with 33% of employee returning to work. Presenteeism scores reduced from 3.3 at the start to 2.2 at the end. This suggests that people are seeking help at the right point and could be contributing to our continued reduced absence rates. Scores for workplace engagement were up, workplace distress down, and life satisfaction up between start and end of therapy. By all measures in this period, people are accessing support when they are experiencing moderate (not severe) symptoms, and following structured therapy, all bar one symptom measures have dropped to 'mild'.

Self-referrals to the fully-funded Access to Work Mental Health 1:1 support offer have increased year on year since 2019, with 44 referral total in 2023, compared to 38 in 2022. 16 of those referrals were in Q3 and this reflects a consistent approach to communication, including in direct briefings to line managers about wellbeing support options and monthly virtual support sessions explaining the Maximus offer.

In November we offered a Wellbeing Hour with MIND, on the topic 'Eco Anxiety and Active Hope'. This linked both our corporate outcome with an acknowledgement of the psychological distress people can experience in considering the climate crisis. December's session was 'Breathing techniques to boost wellbeing' delivered by the lead clinician at the ICS Staff Support Hub. Finding different ways to equip colleagues to manage their anxiety levels is intended to provide secondary interventions to target the fact that the majority of counselling referrals relate to anxiety.

Actions

The council has successfully applied to licence an intervention called Schwartz Rounds, which was recommended as a means to support the emotional wellbeing of colleagues across the organisation, and particularly in social care and other services where psychological stress factors are present due to the nature of the work. Schwartz Rounds provide a structured forum where colleagues across the Council can come together regularly to discuss the emotional and social aspects of work. This is a preventative intervention aimed at reducing the psychological impact of work and having trained our Steering Group, the fist session will take place on 29th February 2024.

We have benefited during the year from clinical psychologist support via the Integrated Care Service Staff Support Hub. This has included team interventions, a wellbeing hour on breathing, and the Working Well Occupational Therapy pathway. Unfortunately, this support is coming to an end in March 2024 and there is no clear alternative available for our front line health and care workforce. It will be important to monitor any increases in related absence, particularly in the teams who currently access that supprt, in the absence of any funding for this support to continue.

Following work undertaken by Officers to look at benchmarking HR metrics, it has concluded that there is limited data available to accurately benchmark the current iteration of indicator 213. Changing the indicator to show total absence allows for national comparison as well as giving Members a better understanding of the overall absence position, the commentary attached to the indicator will still provide context with regards to the type of absence and the work being done to manage absence.

Indicator 214: Staff turnover (rolling 12 month average)

March   2024

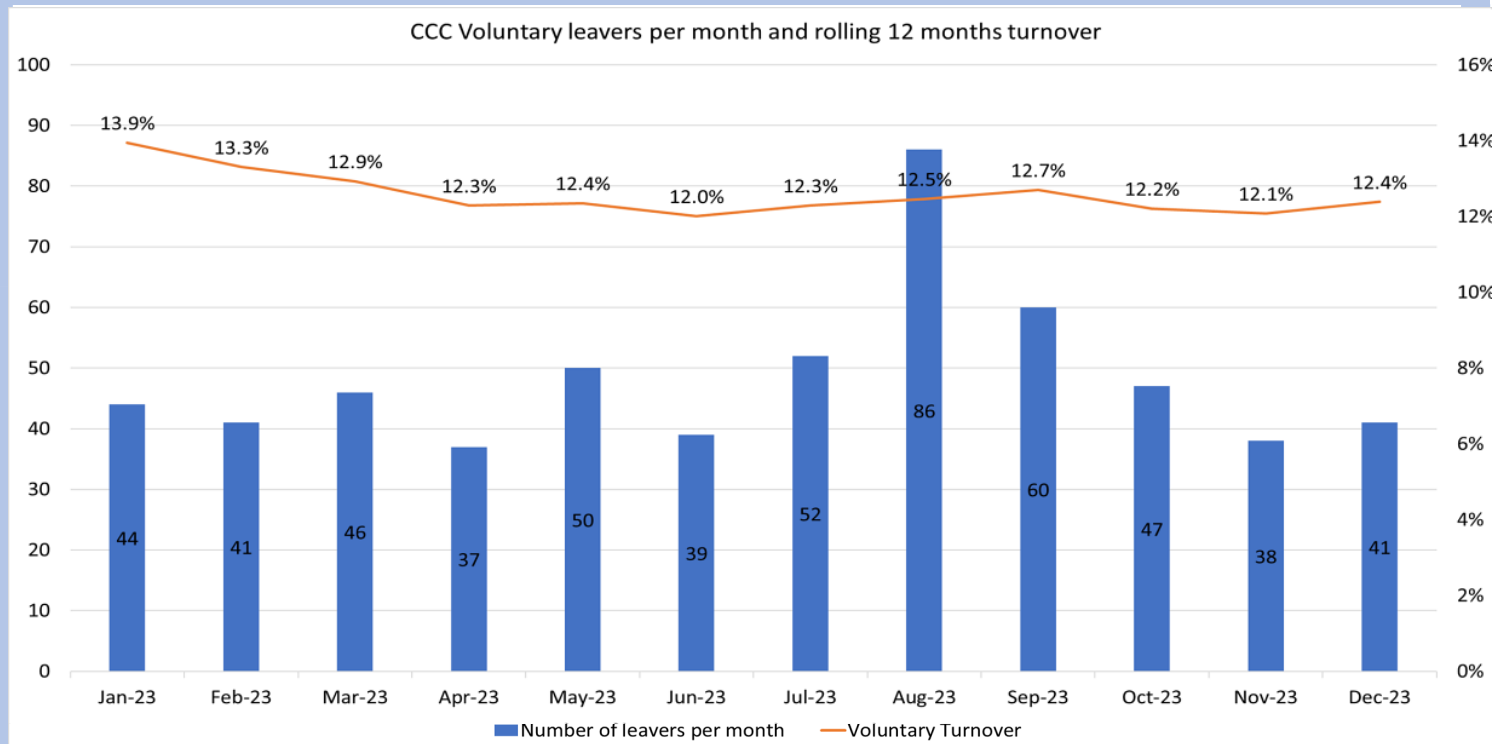| Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
TBC	↓	12.1%	12.4%	Improving

RAG Rating

Baseline

Indicator Description

The orange line confirms the rolling 12 month average turnover which is calculated by number of voluntary leavers / average headcount over a 12 month period.

In blue is the number of leavers for that month e.g. in Oct 22, 64 employees left employment with CCC. This is a count of voluntary leavers. If an employee is in two positions, both are counted in this number as they have left both roles.

The target for this indicator is to be confirmed. The intention is to reduce turnover, specifically early attrition of people with less than 12 months' service. This KPI will be further developed to include a focus on measuring the early attrition of new starters with the aim of ensuring that our recruitment, onboarding and induction is good, and that people's experience is positive.

CCC Voluntary leavers per month and rolling 12 months turnover

Chart data — Voluntary Turnover (%): Jan-23 13.9%, Feb-23 13.3%, Mar-23 12.9%, Apr-23 12.3%, May-23 12.4%, Jun-23 12.0%, Jul-23 12.3%, Aug-23 12.5%, Sep-23 12.7%, Oct-23 12.2%, Nov-23 12.1%, Dec-23 12.4%

Number of leavers per month: Jan-23 44, Feb-23 41, Mar-23 46, Apr-23 37, May-23 50, Jun-23 39, Jul-23 52, Aug-23 86, Sep-23 60, Oct-23 47, Nov-23 38, Dec-23 41

Turnover and Service

Of the total voluntary leavers for the rolling 12 months period ending 31 December 2023 12% had 6 months or less service which is lower than the previous reporting period which was 14%. The average length of service for voluntary leavers in the same period is 6.1 years, reducing to 4.7 years when excluding those retiring.

Voluntary leavers length of service (6 Months)

6 Months or Less, 12%
Over 6 Months, 88%

Commentary

Turnover had been reducing over the past 12 months which is positive. Exit interviews are now offered across the whole organisation and are being routinely carried out with all leavers who wish to take part in children's social care and adult social care 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

A new Insight Analyst has joined CCC in January 2024 and this will provide some much needed capacity to refining the suite of HR indicators and provide benchmarking data. This benchmarking data will help inform targets for these indicators.

Actions

Exit interviews and engagement sessions continue to provide valuable insights and information on the experiences of new recruits and those leaving the organisation. This information is regularly provided back to services to enable improvements and prevent people leaving unnecessarily.

Work has been undertaken to benchmark this indicator. For this to happen, the definition of the indicator needs to change to encompass all turnover rather than just voluntary turnover which is currently reported on. For context, December 2023 turnover figure would increase from 12.3% to 16.6%. Adjusting the definition for this indicator allows for this metric to be benchmarked against other Local Authorities with the national average of 14% and comparable statistical neighbours at 15%. Work will now be undertaken by the service to create a target for this indicator based on the benchmark figures and the baselining data gathered through previous performance ready for the next Corporate Performance report, due in July 2024.

Indicator 215: IT & Digital Services Network Access Availability

March   2024

| 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.

Cambridgeshire Performance
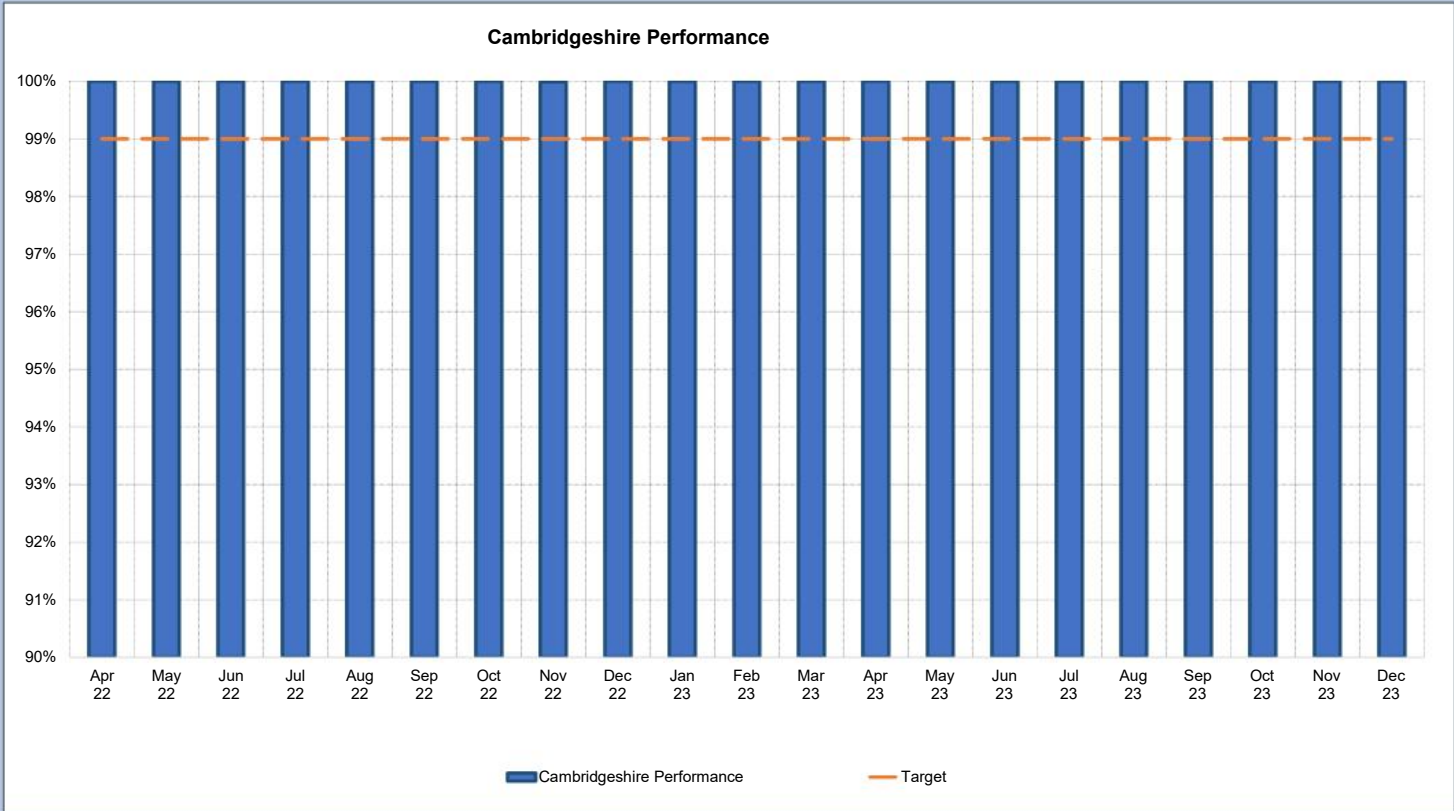
Commentary

The figure for Q3 relates to the PaloAlto Secure Web Gateway (SWG) implemented during summer 2023. 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 availability for the duration of Q3.

Actions

Indicator 216: IT & Digital Services Customer Perception Rating

| Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
85.0%	↑	87.6%	88.1%	Declining

RAG Rating

> **Green**

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.

Cambridgeshire Performance
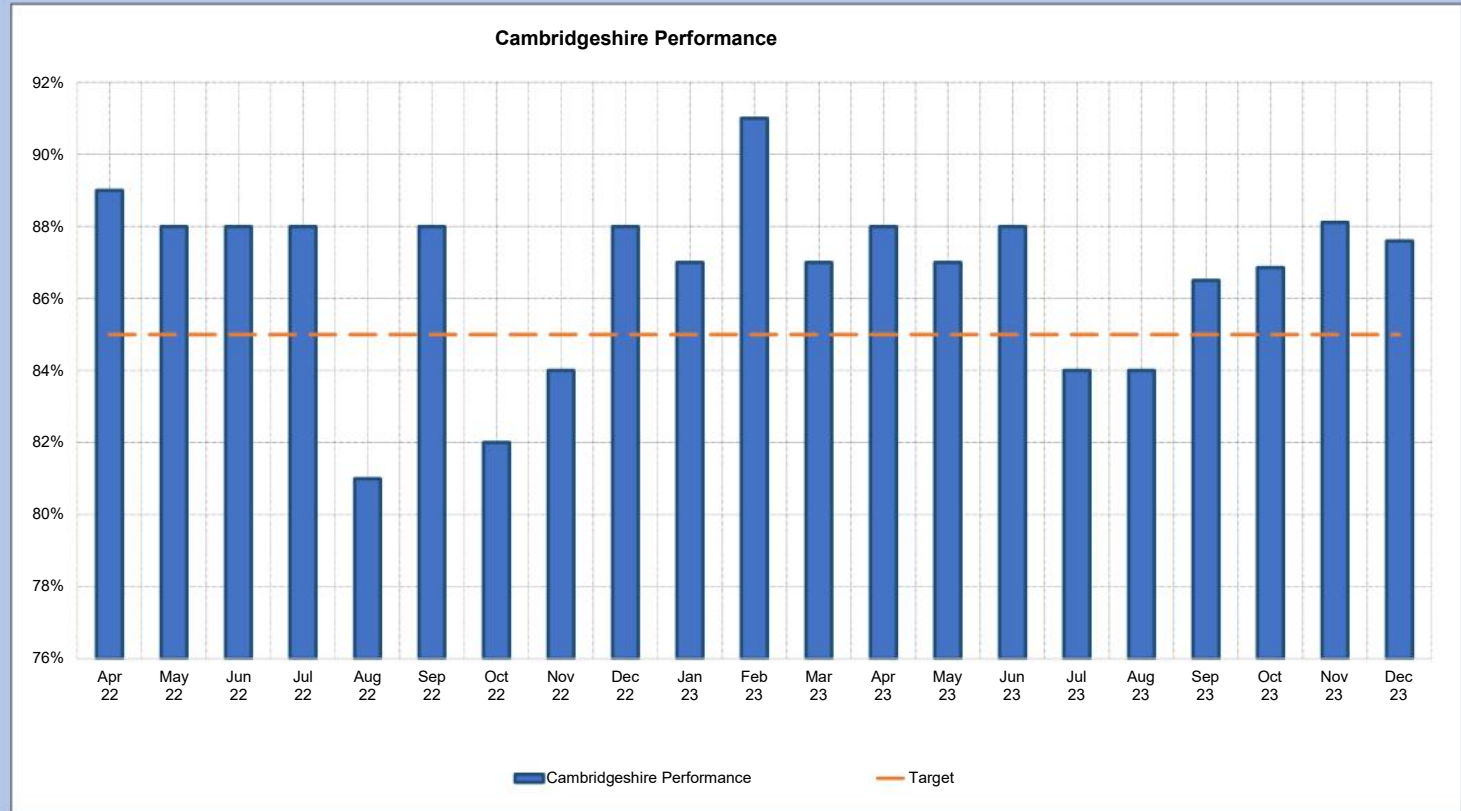
Commentary

Through Q3, perception ratings show an upward trend and are above target. This reflects the return to 'business as usual' workload levels since the AutoPilot roll-out completed in late summer 2023.

Useful Links

Actions

| Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
87.0%	↑	95.0%	98.0%	Declining

RAG Rating

Blue

Indicator Description

The score is a measure of how well our website performs against the Siteimprove quality assurance checks. Siteimprove 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.

Cambridgeshire Performance

Legend: Cambridgeshire Performance — Target — Industry Benchmark
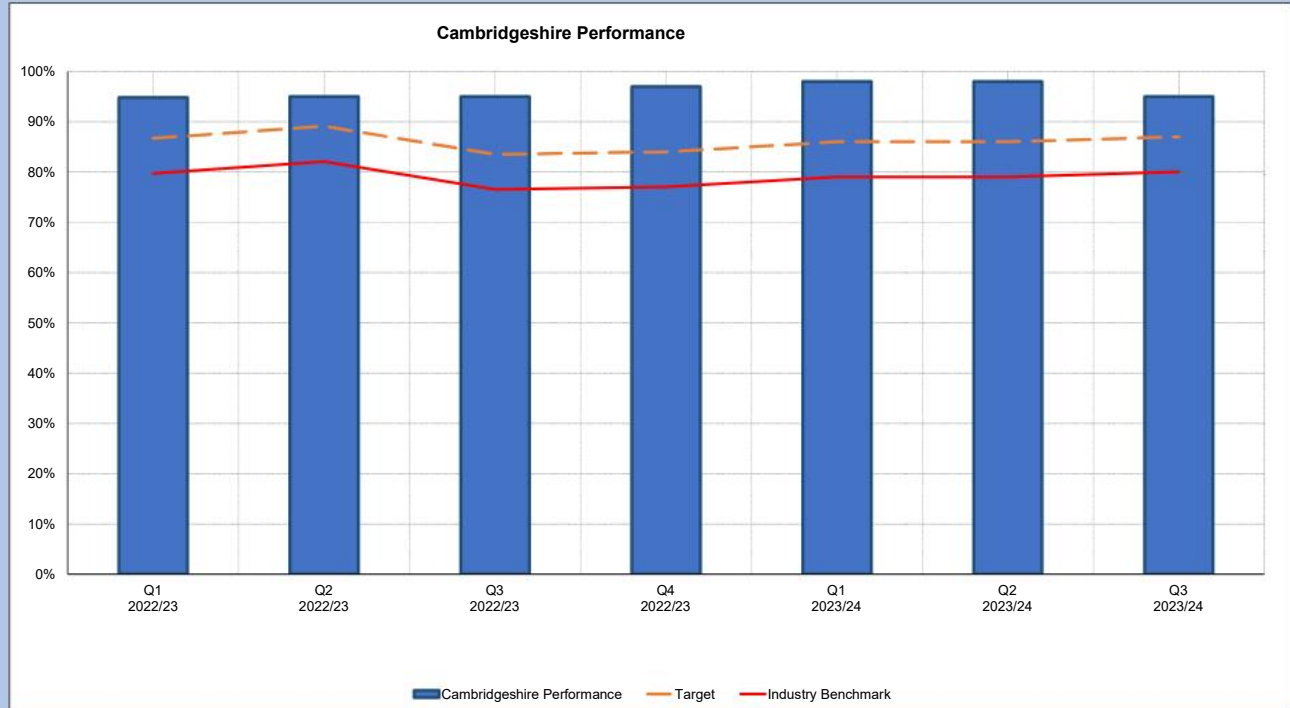
Commentary

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 fallen by 3% this quarter. We have experienced a number of broken links to The British Library (BL) Website. The BL site has been offline and rebuilt following a security breach. These broken links have resulted in the fall in our QA score. We are looking to reinstate the links to the BL site now that it has been rebuilt.

There are no security implications or concerns for the CCC website as a result of the security issues at The BL.

Actions

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
92.0%	↑	94.0%	95.0%	Declining

RAG Rating

Green

Indicator Description

The score is a measure of how well our website performs against the Siteimprove 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 accessiblity 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 Accessiblity E-Leanring course to enable all staff to understand hte accessibility reguations 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.

Cambridgeshire Performance
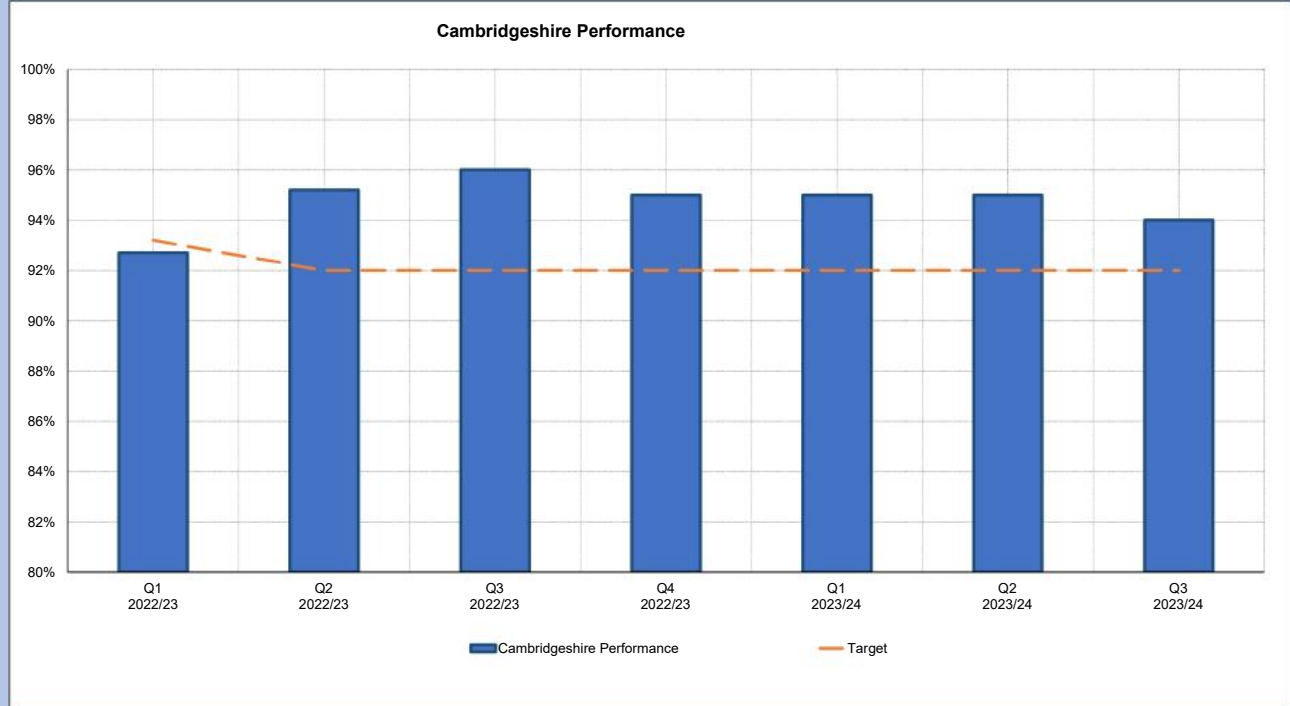
Commentary

The accessibility score has remained stable this quarter. It is 1% lower, mainly due to the period over the festive period when staff were on holiday and some issues weren't addressed until the new year. The score remains above target.

Actions