

**ISLE OF ANGLESEY COUNTY COUNCIL**

<b>REPORT TO:</b>	<b>EXECUTIVE COMMITTEE</b>
<b>DATE:</b>	<b>NOVEMBER 25<sup>th</sup> 2019</b>
<b>SUBJECT:</b>	<b>SCORECARD MONITORING REPORT - QUARTER 2 (2019/20)</b>
<b>PORTFOLIO HOLDER(S):</b>	<b>COUNCILLOR DAFYDD RHYS THOMAS</b>
<b>HEAD OF SERVICE:</b>	<b>CARYS EDWARDS</b>
<b>REPORT AUTHOR:</b> TEL: E-MAIL:	<b>GETHIN MORGAN</b> 01248 752111 <a href="mailto:GethinMorgan@anglesey.gov.uk">GethinMorgan@anglesey.gov.uk</a>
<b>LOCAL MEMBERS:</b>	<b>n/a</b>

**A - Recommendation/s and reason/s**

- 1.1** This is the second scorecard of the financial year 2019/20.
- 1.2** It portrays the position of the Council against its operational objectives as outlined and agreed collaboratively between the Senior Leadership Team / Executive and in consultation with the Shadow Executive.
- 1.3** The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future.

These can be summarised as follows –

- 1.3.1** Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q3 and that continuous scrutiny of financial performance is undertaken with particular emphasis and support given to the services under pressure due to the increasing demand so that their management of performance does not decline or underperform into Q3.

- 1.4** The Committee is asked to accept the mitigation measures outlined above.

**B - What other options did you consider and why did you reject them and/or opt for this option?**

n/a

<b>C - Why is this a decision for the Executive?</b>		
This matter is delegated to the Executive		
<b>CH - Is this decision consistent with policy approved by the full Council?</b>		
Yes		
<b>D - Is this decision within the budget approved by the Council?</b>		
Yes		
<b>DD - Who did you consult?</b>		<b>What did they say?</b>
1	<b>Chief Executive / Strategic Leadership Team (SLT)</b> (mandatory)	This was considered by the SLT and their comments are reflected in the report
2	<b>Finance / Section 151</b> (mandatory)	No comment
3	<b>Legal / Monitoring Officer</b> (mandatory)	No comment
4	<b>Human Resources (HR)</b>	
5	<b>Property</b>	
6	<b>Information Communication Technology (ICT)</b>	
7	<b>Scrutiny</b>	
8	<b>Local Members</b>	
9	<b>Any external bodies / other/s</b>	
<b>E - Risks and any mitigation (if relevant)</b>		
1	<b>Economic</b>	
2	<b>Anti-poverty</b>	
3	<b>Crime and Disorder</b>	
4	<b>Environmental</b>	
5	<b>Equalities</b>	
6	<b>Outcome Agreements</b>	
7	<b>Other</b>	
<b>F - Appendices:</b>		
Appendix A - Scorecard Quarter 2		
<b>FF - Background papers (please contact the author of the Report for any further information):</b>		
<ul style="list-style-type: none"> <li>2019/20 Scorecard monitoring report - Quarter 1 (as presented to, and accepted by, the Executive Committee in September 2019).</li> </ul>		

## **SCORECARD MONITORING REPORT – QUARTER 2 (2019/20)**

### **1. INTRODUCTION**

- 1.1. One of the Council's duties under the Wales Programme for Improvement is to make arrangements to secure continuous improvement in the exercise of our services. We are required to put in place arrangements which allow us effectively to understand local needs and priorities, and to make the best use of our resources and capacity to meet them and evaluate the impact of our actions.
- 1.2. Our Council Plan for 2017 to 2022 identifies the local needs and priorities and sets out our aims for the period. The delivery of the Council Plan is delivered through the realization of the Annual Delivery Document (ADD).
- 1.3. This scorecard monitoring report is used as part of this process to monitor the success of our identified Key Performance Indicators (KPIs), a combination of local and nationally set indicators, in delivering the Councils day to day activities. The report also identifies any mitigating actions identified by the Senior Leadership Team (SLT) to drive and secure improvements.
- 1.4. The scorecard (appendix 1) portrays the current end of Q2 position and will (together with this report) be considered further by the Corporate Scrutiny Committee and the Executive during November.

### **2. CONTEXT**

- 2.1. It was agreed as part of the previously noted workshop that some changes were required of the Scorecard this year to ensure a greater strategic approach. To that end, the performance monitoring KPIs have been aligned to the Councils' three strategic objectives:
  - Objective 1 - Ensure that the people of Anglesey can thrive and realise their long-term potential
  - Objective 2 - Support vulnerable adults and families to keep them safe, healthy and as independent as possible
  - Objective 3 - Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment
- 2.2. It will not be possible to publish information for all KPIs on the Scorecard on a quarterly basis due to the nature of data collection methods. When this is the case, a note will indicate how often the KPI is monitored and when the data will be available for collection, e.g. (annual) (Q4), (termly) (Q3).
- 2.3. Since the Q1 Scorecard report was discussed in September 2019, further Public Accountability Measures (PAMs) have been published by Data Cymru specifically on Waste Management. We are pleased to confirm that we are once again the Authority that has the highest recycling rates in Wales, putting us once again amongst the world leaders in the amount of household waste which is recycled.

### 3. CORPORATE HEALTH PERFORMANCE

- 3.1. It is encouraging to note that the majority (71%) of the indicators monitored are continuing to perform well against targets (Green or Yellow RAG) as was the case at the end of Q1. Some of the highlights are noted below.
- 3.2. Attendance at work is an area which is reported on monthly and is analysed to ensure improvement. At the end of Q2 the Council is GREEN against its target with 3.96 days lost to absence per FTE in the period against a target of 4.48 days lost to absence per FTE. This is an improvement on the levels seen during Q2 2018/19 where 4.74 days were lost to absence per FTE. It is also better than the 4.25 days lost to absence per FTE seen in Q2 2017/18 which was the best performing year for absence since we began monitoring in this way.
- 3.3. The digital strategy continues to see fruition during Q2 where the majority of indicators under the digital service shift subheading sees an upward trend compared to Q2 of 2018/19 where 83% of the indicators demonstrate an increase. The shift can particularly be seen with the number of registered users (item 10) where it is more than double (11k) the 5k seen at the end of Q2 2018/19. This is positive as studies undertaken by Socitm (Society for innovation, technology and modernisation) demonstrate that digital transaction costs are lower than face to face contact costs.
- 3.4. Currently there is no cause for concern with the customer service charter sub heading where the majority (75%) of indicators are performing well against targets. The only indicator which is RED against target is item 04b - the % of written complaints responded to by Social Services within 15 days. 20 of the 21 (95%) complaints were discussed with the complainant within timescale. Whilst 12 of the 21 (57%) complaints were written to within timescale, 5 of the late written responses received extensions to respond to the complaint after agreement with the complainant, leaving 4 that were late without agreement.
- 3.5. The Customer Strategy was approved during Q2 by the Corporate Governance Programme Board and an action plan is now in development. The action plan will include the monitoring of the Customer Service KPIs identified in the Scorecard as well as other KPIs that will be used to ensure that the Customer Strategy is realised.
- 3.6. The financial management section currently forecasts, on the basis of the financial position at the end of the second quarter, that the Council will overspend its revenue budget, for the year-ending 31 March 2020, by £1.935m (1.43%). The service budgets are expected to overspend by £1.410m and corporate finance is forecast to overspend by £0.341m. Council Tax income is expected to be £184k lower than the budget, mainly as a result in a fall in empty properties subject to the 100% additional premium and an increase in taxpayers qualifying for the severe mental impairment exemption. The historic trend over the last few years has been that Corporate Finance and Council Tax Council had significant underspends/surplus of income. This has helped to reduce overspends in service costs. Unfortunately, for 2019/20 these budgets are also under pressure and will not available to fund service overspends.

- 3.7. The Adults Service budgets are under significant pressure due to increasing demand and the transition of a costly placement from Children's Services. It is the normal pattern for the final outturn position to be better than the first few quarters estimate, however, if the projected overspend transpires, it would be funded from the Council's general balances which would reduce to £4.346m. This reduction weakens the Council's financial position but vindicates the decision not to use general balances to fund part of the 2019/20 budget.
- 3.8. Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q2' which will be discussed in The Executive meeting on the 25th November.
- 3.9. What this demonstrates therefore is the reasonable assurance which can be provided through the use of the scorecards analysis that the Council's day to day activities in managing its people, its finances and serving its customers are delivering against their expectation to a standard which is appropriate and agreed by Members. This is also reflected in the fact that the indicators from a performance management perspective are also demonstrating good performance.

#### 4. PERFORMANCE MANAGEMENT

- 4.1. At the end of Q2 it is encouraging to note that the majority (85%) of performance indicators continue to perform above target or within 5% tolerance of their targets. This compares favourably to the position we were in during Q2 in 2018/19. We do note however that five indicators are underperforming against their targets and are highlighted as being Red or Amber in the Scorecard.
- 4.2. Performance for **Objective 1** at the end of Q2 has been good where only one indicator against the objective is currently underperforming.
- 4.2.1. Indicator 17 – Landlord Services: Average number of days to complete repairs – which is RED with a performance of 15.14 days against a target of 12 days. This is higher than the 13.39 days seen in Q2 2018/19 and the 12.33 days seen at the end of Q1.

Following a change in the Repairs and Maintenance Policy in October 2018, work orders are now prioritised for completion within 12 hours, 48 hours, 5 days, 20 days and 3 months dependant on the urgency of the work. Previous work orders could also be set for 10 days and 15 days which is no longer an option. When setting the target of 12 days for 2019/20 we did not have a 12 month period available to compare previous performance against the new classifications and as such the target set could well be too low with regards to the average number of days. For instance, if 80% of reactive maintenance works fall within the 20 days priority, then the overall target days for all jobs could be circa 16 days.

The Housing Services Board will continue to monitor this indicator with a view to improving the performance.

We are pleased that 93% of the works orders have been completed on time.

4.3. Performance against the indicators for **Objective 2** demonstrate that only two indicators of the 17 monitored in Q2 (12%) are currently underperforming for the objective.

4.3.1. Indicator 27 – The percentage of referrals of children that are re-referrals within 12 months – which is AMBER with a performance of 14.29% against a target of 10% and down on the 10.53% seen at the end of Q1.

This KPI deals with a relatively small number of cases which can fluctuate greatly at the start of the year. A review of the re-referral case files found that they were all appropriately re-referred into the service.

4.3.2. Indicator 36 - Landlord Services: Percentage of rent lost due to properties being empty is RED on the scorecard with 1.57% lost against a target of 1.15%

This indicator is directly linked with indicator 35 on the Scorecard, the average number of calendar days to let lettable units of accommodation which improved during Q2. The poor performance of that indicator in Q1 had an impact on this KPI and it has not been possible to claw back as much as hoped despite the improvement in letting units seen in Q2.

Some properties have deliberately been kept vacant for a longer period of time than normal as they have been considered for use as part of the Small Group Homes project with Children Services.

Some properties that required adaptations prior to re-letting were for kept back for period of time. This was because there were instances of a short delay whilst waiting for Occupational Therapist instructions. We expect this to improve upon appointment of a part time Occupational Therapist working within Housing Services.

During the year to date we have also undertaken major improvement works on some properties that were classed as acceptable fails with regards to WHQS as the former tenants had decided that they did not want improvements carried out on their properties, these are known as a 'Resident Choice' acceptable fail by the WHQS.

All of the above noted factors have had a negative effect on this performance indicator.

We will continue to implement the new streamlined process identified in Q1 to improve the performance of this indicator.

4.4. The indicators to monitor **Objective 3** have also performed well in Q2, however two indicators of the seven (28%) monitored for the objective has underperformed against target.

- 4.4.1. Indicator 43 – Percentage of planning appeals dismissed – which is AMBER with a performance of 33% against a target of 65%, a decrease on the 50% seen at the end of Q1.

This indicator deals with very small numbers and at the end of this quarter the performance is because of the result of 2 of the 3 appeals being upheld after the interpretation of new policies were challenged. The interpretation of the new policies will improve

- 4.4.2. Indicator 43 - Percentage of planning enforcement cases investigated within 84 days – which is AMBER with a performance of 69% against a target of 80%. This is a new indicator for the Scorecard this year, however performance of this indicator was 17% during Q4 2018/19 and 55% at the end of Q1.

There is good progress being made given the historic backlog and current performance demonstrates a significant increase as new processes are embedded, capacity and expertise is improved, and the backlog is cleared. It is anticipated that this improvement will continue into the year ahead.

## **5. RECOMMENDATIONS**

- 5.1. The Committee is requested to scrutinise the scorecard and note the areas which the Senior Leadership Team are managing to secure improvements into the future. These can be summarised as follows –

- 5.1.1. Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q3 and that continuous scrutiny of financial performance is undertaken with particular emphasis and support given to the services under pressure due to the increasing demand so that their management of performance does not decline or underperform into Q3.

- 5.2. The committee is asked to accept the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q2 2019/20

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed Ch/ Q Target	Targed BI / Yr Target	Canlyniad 18/19 Result	Canlyniad 17/18 Result
<b>Objective 1 - Ensure that the people of Anglesey can thrive and realise their long-term potential</b>							
1) Percentage of pupil attendance in primary schools (tymhorol) (Q3)	-	-	-	93.90%	93.90%	-	94.60%
2) Percentage of pupil attendance in secondary schools (termly) (Q3)	-	-	-	93.30%	93.30%	93.90%	93.30%
3) Percentage of Year 11 leavers not in Education, Training or Employment [NEET] (annual) (Q4)	-	-	-	-	-	1.10%	4.20%
4) Average Capped 9 score for pupils in year 11 (annual) (Q3)	-	-	-	-	-	349.1	335.9
5) Percentage of pupils assessed in Welsh at the end of the Foundation Phase (annual) (Q4)	-	-	-	-	-	88.30%	72.60%
6) Percentage of year 11 pupils studying Welsh [first language] (annual) (Ch4)	-	-	-	-	-	65%	63.70%
7) Percentage of Quality Indicators (with targets) achieved by the library service (annual) (Q3)	-	-	-	-	-	82%	-
8) Number of visits to leisure centres	Melyn / Yellow	↓	244k	253k	553k	553k	508k
9) Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	→	98%	95%	95%	98%	98%
10) Percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation	Melyn / Yellow	↓	89%	90%	90%	-	-
11) Percentage of NERS clients who completed the exercise programme	Gwyrdd / Green	↓	76%	50%	50%	70%	-
12) Percentage of NERS clients whose health had improved on completion of the exercise programme	Gwyrdd / Green	↑	86%	80%	80%	83%	-
13) Number of empty private properties brought back into use	Gwyrdd / Green	↑	74	37	75	78	75
14) Number of new homes created as a result of bringing empty properties back into use	Gwyrdd / Green	↑	2	2	4	9	4
15) Number of additional affordable housing units delivered per 10,000 households (annual) (Q4)	-	-	-	-	-	-	-
16) Landlord Services: Percentage of homes that meet the Welsh Housing Quality Standard (WHQS)	Gwyrdd / Green	→	100%	100%	100%	100%	-
17) Landlord Services: Average number of days to complete repairs	Coch / Red	↓	15.14	12	12	13.63	-
18) Percentage of tenants satisfied with responsive repairs (annual) (Q4)	-	-	-	-	-	-	-
<b>Objective 2 - Support vulnerable adults and families to keep them safe, healthy and as independent as possible</b>							
19) Rate of people kept in hospital while waiting for social care per 1,000 population aged 75+	Melyn / Yellow	↓	3.7	3	3	7.78	6.58
20) The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	↑	89.76%	90%	90%	90.91%	93.25%
21) The percentage of adults who completed a period of reablement and have a reduced package of care and support 6 months later	Gwyrdd / Green	↓	41.7%	35%	35%	30.87%	59.26%
22) The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Gwyrdd / Green	↑	62.16%	62%	62%	62.84%	62.65%
23) The rate of older people (aged 65 or over) whom the authority supports in care homes per 1,000 population aged 65 or over at 31 March	Gwyrdd / Green	↓	18.64	19	19	17.35	17.44
24) The percentage of carers of adults who requested an assessment or review that had an assessment or review in their own right during the year	Gwyrdd / Green	↓	96.80%	93%	93%	93.30%	96%
25) Percentage of child assessments completed in time	Gwyrdd / Green	↑	91.43%	90%	90%	86.17%	67.57%
26) Percentage of children in care who had to move 3 or more times	Gwyrdd / Green	↑	3.80%	5%	10%	9.52%	9%
27) The percentage of referrals of children that are re-referrals within 12 months	Ambr / Amber	↓	14.29%	10%	10%	16.87%	-
28) The average length of time for all children who were on the CPR during the year, and who were de-registered during the year (days)	Gwyrdd / Green	↓	230	270	270	241	326.5
29) The percentage of referrals during the year on which a decision was made within 1 working day	Gwyrdd / Green	→	98.19%	95%	95%	98%	-
30) The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations	Melyn / Yellow	↑	85.84%	90%	90%	86.17%	63.32%
31) Percentage of households successfully prevented from becoming homeless	Gwyrdd / Green	↑	74.62%	60%	60%	-	-
32) Percentage of households (with children) successfully prevented from becoming homeless	Gwyrdd / Green	↓	79.17%	60%	60%	55.10%	65.20%
33) Average number of calendar days taken to deliver a Disabled Facilities Grant	Gwyrdd / Green	↑	160.5	170	170	161.9	177
34) Decision Made on Homeless Cases within 56 days (annual) (Q4)	-	-	-	-	-	-	-
35) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Melyn / Yellow	↑	22	21	21	-	-
36) Landlord Services: Percentage of rent lost due to properties being empty	Coch / Red	↑	1.57%	1.15%	-	1.30%	-
<b>Objective 3 - Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment</b>							
37) Percentage of streets that are clean	Gwyrdd / Green	↓	97.16%	95%	95%	95.60%	93.60%
38) Percentage of waste reused, recycled or composted	Gwyrdd / Green	↓	70%	70%	70%	69.86%	72.20%
39) Average number of working days taken to clear fly-tipping incidents	Gwyrdd / Green	↑	1	1	1	0.2	-
40) Kilograms of residual waste generated per person	Gwyrdd / Green	↓	106kg	120kg	240kg	240kg	236kg
41) Percentage of all planning applications determined in time	Gwyrdd / Green	↑	92%	90%	90%	80%	86%
42) Percentage of planning appeals dismissed	Ambr / Amber	↓	33%	65%	65%	74%	47%
43) Percentage of planning enforcement cases investigated within 84 days	Ambr / Amber	↑	69%	80%	80%	-	-
44) Percentage of A roads in poor condition (annual) (Q4)	-	-	-	-	2.90%	2.90%	2.90%
45) Percentage of B roads in poor condition (annual) (Q4)	-	-	-	-	3.80%	3.80%	4.20%
46) Percentage of C roads in poor condition (annual) (Q4)	-	-	-	-	8.70%	8.70%	8.90%

Red - more than 10% below target and/or needing significant intervention    Amber - between 5% & 10% below target and/or requiring some intervention  
 Yellow - within 5% of target    Green - on or above target    Trend - quarterly against target



Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q2 2019/20

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 18/19 Result	Canlyniad 17/18 Result
<b>Siarter Gofal Cwsmer / Customer Service Charter</b>						
01) No of Complaints received (excluding Social Services)	Gwyrdd / Green	↑	33	19	76	71
02) No of Stage 2 Complaints received for Social Services	-	↓	7	-	8	9
03) Total number of complaints upheld / partially upheld	-	↓	8	-	27	28
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green	⇒	100%	80%	93%	92%
04b) Total % of written responses to complaints within 15 days (Social Services)	Coch / Red	↓	57%	80%	57%	-
05) Number of Stage 1 Complaints for Social Services	-	↑	21	-	44	51
06) Number of concerns (excluding Social Services)	-	↓	47	-	62	112
07) Number of Compliments	-	↑	270	-	513	753
08) % of FOI requests responded to within timescale	Gwyrdd / Green	↑	86%	80%	81%	78%
09) Number of FOI requests received	-	↓	463	-	1052	919
<b>Newid Cyfrwng Digidol / Digital Service Shift</b>						
10) No of Registered Users on AppMôn / Website	-	↑	11k	-	8.2k	-
11) No of reports received by AppMôn / Website	-	↑	3.8k	-	4.7k	2k
12) No of web payments	-	↓	7.3k	-	-	-
13) No of telephone payments	-	↓	3.8k	-	-	-
14) No of 'followers' of IOACC Social Media	-	↑	32k	29.5k	29.5k	25k
15) No of visitors to the Council Website	-	↓	383k	-	-	-

Rheoli Pobl / People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 18/19 Result	Canlyniad 17/18 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2206	-	2243	2252
02) Number of staff authority wide, excluding teachers and school based staff(FTE)	-	-	1231	-	1252	1244
03a) Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	3.96	4.48	10.34	9.96
03b) Short Term sickness - average working days/shifts lost per FTE	-	↑	1.54	-	4.68	4.63
03c) Long Term sickness - average working days/shifts lost per FTE	-	↑	2.43	-	5.66	5.32
04a) Primary Schools - Sickness absence - average working days/shifts lost	Gwyrdd / Green	↑	3.39	4.36	12.21	10.39
04b) Primary Schools - Short Term sickness - average working days/shifts lost per FTE	-	↑	1.4	-	4.97	4.85
04c) Primary Schools - Long Term sickness - average working days/shifts lost per FTE	-	↑	2.03	-	7.24	5.55
05a) Secondary Schools - Sickness absence - average working days/shifts lost	Ambr / Amber	↓	3.6	3.31	9.57	9.67
05b) Secondary Schools - Short Term sickness - average working days/shifts lost per FTE	-	↓	1.33	-	5.26	5.32
05c) Secondary Schools - Long Term sickness - average working days/shifts lost per FTE	-	↑	2.27	-	4.31	4.35
06) Local Authority employees leaving (%) (Turnover) (Annual) (Q4)	-	-	-	11%	11%	11%
07) % of PDR's completed within timeframe (Annual) (Q4)	-	-	-	80%	84%	90.50%

Rheolaeth Ariannol / Financial Management	CAG / RAG	Tuedd / Trend	Cyllideb / Budget	Canlyniad / Actual	Amrywiad / Variance (%)	Rhagolygon o'r Gwariant / Forecasted Actual	Amrywiad a Ragwelir / Forecasted Variance (%)
01) Budget v Actuals	Coch / Red	↓	£66,155,987	£66,509,788	0.53%	-	-
02) Forecasted end of year outturn (Revenue)	Coch / Red	↓	£135,210,190	-	-	£137,145,191	1.43%
03) Forecasted end of year outturn (Capital)	-	-	£25,910,000	-	-	£16,822,000	-35.08%
04) Achievement against efficiencies	Ambr / Amber	↓	£2,561,000	-	-	£2,165,800	-15.43%
05) Income v Targets (excluding grants)	Gwyrdd / Green	↓	-£5,210,818	-£5,887,285	12.98%	-	-
06) Amount borrowed	-	⇒	£2,184,000	-	-	£0	0.00%
07) Cost of borrowing	Gwyrdd / Green	⇒	£4,262,730	-	-	£4,260,516	-0.05%
08) % invoices paid within 30 days	Melyn / Yellow	↓	-	84.44%	-	-	-
09) % of Council Tax collected (for last 3 years)	Gwyrdd / Green	↑	-	98.90%	-	-	-
10) % of Business Rates collected (for last 3 years)	Gwyrdd / Green	↑	-	98.80%	-	-	-
11) % of Sundry Debtors collected (for last 3 years)	Melyn / Yellow	↑	-	96.90%	-	-	-
12) % Housing Rent collected (for the last 3 years)	Melyn / Yellow	⇒	-	99.39%	-	-	-
13) % Housing Rent collected excl benefit payments (for the last 3 years)	-	↑	-	98.73%	-	-	-