

ISLE OF ANGLESEY COUNTY COUNCIL Scrutiny Report Template

Committee:	CORPORATE SCRUTINY
Date:	13 SEPTEMBER 2021
Subject:	SCORECARD MONITORING REPORT - QUARTER 1 (2021/22)
Purpose of Report:	TO CHALLENGE PERFORMANCE
Scrutiny Chair:	COUNCILLOR ALED M JONES
Portfolio Holder(s):	COUNCILLOR DAFYDD RHYS THOMAS
Head of Service:	CARYS EDWARDS
Report Author:	GETHIN MORGAN
Tel:	01248 752111
Email:	GethinMorgan@anglesey.gov.uk
Local Members:	n/a

1 - Recommendation/s

- 1.1** This is the first scorecard report of 2021/22. It is to be considered within the context of the additional pressures emanating from our response to the coronavirus pandemic during Q1.
- 1.2** It portrays the position of the Council against its operational objectives as outlined and agreed earlier in the year.
- 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 Q2 and that a close eye is kept on the indicators currently affected by the coronavirus pandemic.
- 1.3.2** The removal of indicator 8 – the percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation – from the Scorecard for this year due to the current Covid-19 pandemic and in line with the expectations within the Food Standards Agency Recovery Plan.
- 1.4** The committee is asked to accept the mitigation measures outlined above

2 – Link to Council Plan / Other Corporate Priorities

Used as part of the monitoring of the Council Plan

3 – Guiding Principles for Scrutiny Members

To assist Members when scrutinising the topic:-

3.1 Impact the matter has on individuals and communities [**focus on customer/citizen**]

3.2 A look at the efficiency & effectiveness of any proposed change – both financially and in terms of quality [**focus on value**]

3.3 A look at any risks [**focus on risk**]

3.4 Scrutiny taking a performance monitoring or quality assurance role [**focus on performance & quality**]

3.5 Looking at plans and proposals from a perspective of:

- Long term
- Prevention
- Integration
- Collaboration
- Involvement

[**focus on wellbeing**]

4 - Key Scrutiny Questions

1. How does Covid-19 continue to impact on the performance of Council services?
2. What arrangements are in place to mitigate the under-performance reported against some of the performance indicators? What arrangements are in place to monitor progress?
3. What effect will removing Indicator 8 (the percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation) have on the Scorecard this year?

5 – Background / Context

5.1 The Isle of Anglesey County Council 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.

5.2 Our Council Plan for 2017 to 2022 identifies the local needs and wellbeing priorities and sets out our aims for the period in conjunction with our Annual Delivery Document.

5.3 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.

5.4 This year's indicators included within the scorecard were agreed during a workshop with the Elected Members and Senior Management on the 13th July 2021. This will be the final annual scorecard agreed for this elected Council before the Local Government Elections in May 2022.

5.5 The scorecard (appendix 1) portrays the current end of Q1 position and will (together with this report) be considered further by the Corporate Scrutiny Committee and the Executive during September.

6 – Equality Impact Assessment [including impacts on the Welsh Language]

n/a

7 – Financial Implications

The end of Q1 financial position is noted in the report.

8 – Appendices:

Appendix A - Scorecard Quarter 1

9 - Background papers (please contact the author of the Report for any further information):

- 2020/21 Scorecard Monitoring Report - Quarter 4 (as presented to, and accepted by, the Executive Committee in June 2021).

SCORECARD MONITORING REPORT – QUARTER 1 (2021/22)

1. INTRODUCTION

- 1.1 The Isle of Anglesey County Council 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 wellbeing priorities and sets out our aims for the period in conjunction with our Annual Delivery Document.
- 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 This year's indicators included within the scorecard were agreed during a workshop with the Elected Members and Senior Management on the 13th July 2021. This will be the final annual scorecard agreed for this elected Council before the Local Government Elections in May 2022.
- 1.5 The scorecard (appendix 1) portrays the current end of Q1 position and will (together with this report) be considered further by the Corporate Scrutiny Committee and the Executive during September.

2. CONTEXT

- 2.1 The performance monitoring KPIs continue to be aligned to the Councils' three wellbeing 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 The publication of the PAM national indicators was restarted this year following cancellation due to the Covid-19 pandemic last year. However, the PAM results are not yet available to help with the target setting process this year. Targets for the year have therefore been agreed based on previous

year's performance and also based on how they have been affected by the Covid-19 pandemic.

3. CORPORATE HEALTH PERFORMANCE

- 3.1 It is encouraging to note that the majority (88%) of the indicators monitored are performing well against targets (Green or Yellow RAG). 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. A challenging target of 8.75 days lost to absence per FTE has been agreed this year following on from the 6.68 days lost to absence per FTE in 2020/21.
- 3.3 At the end of Q1 the Council is YELLOW against its target with 2.23 days lost to absence per FTE in the period against a target of 2.1 days lost to absence per FTE. This performance is almost identical to the levels seen pre-pandemic in Q1 2019/20 where 2.24 days were lost to absence per FTE.
- 3.4 Our digital strategy has proved successful throughout this pandemic. There have been many developments to our digital channels including the use of social media accounts within our Services. The importance of social media cannot be underestimated as a communication tool for sharing information with both residents and visitors whilst attempting to positively influence behaviours during this time.
- 3.5 The accounts managed within Services have helped reach people who would not perhaps have followed the main Anglesey County Council accounts. This year, we will be including the Service led social media accounts to indicator 14 within the Customer Service section, the number of 'followers' of IOACC Social Media.
- 3.6 The additional followers will be taken from accounts including:
 - Gwasanaeth Ieuencid Môn / Anglesey Youth Service,
 - Teulu Môn,
 - Archifau Ynys Môn / Anglesey Archives,
 - Môn Actif,
 - Gwasanaeth Ailgylchu a Gwastraff / Recycling and Waste Service,
 - Visit Anglesey / Croeso Môn,
 - Oriel Môn,
 - Swyddi Môn Jobs,
 - and others
- 3.7 Following feedback in the workshop from the Elected Members, we will be developing a system to measure the customer service satisfaction of the Council's telephone service. Work has begun on the system which will offer customers the option to take part in a customer satisfaction survey after their initial call is dealt with by officers. It is planned that the new system will be in place ready for reporting in the Q3 Scorecard report.

- 3.8 The indicators currently monitored within the Customer Service section do not highlight any cause for concern as the indicators are performing well against targets on the whole. Whilst this is positive, we also acknowledge that further work is needed as is noted above in 3.7 to implement additional customer satisfaction indicators for inclusion in the Q3 report. The only indicator that is underperforming against its target currently is indicator 04b – the total % of written responses to complaints within 15 days (Social Services) with a performance of 50% against a target of 80%. Despite the performance it is reassuring that 13 of the 14 complaints received in the quarter were discussed with the complaint within 5 working days and for 5 of the 7 late responses (71%) an extension was previously agreed.
- 3.9 The financial management section currently forecasts at the end of the first quarter is that the budget will be underspent by £2.540m for the year ending 31 March 2022. The service budgets are expected to underspend by £1.286m and corporate finance is forecast to also underspend by £0.675m. An underachievement of £0.039m is expected on the standard Council Tax. Surplus income of £0.668m is forecast on the Council Tax Premium. The Adults Service budgets are under 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 quarter estimate, however, if the projected overspend transpires it would be funded from the Council’s general balances, which would increase to £9.961m.
- 3.10 Further work is required to model the impact and a revised Medium Term Financial Plan will be submitted to the Executive in September 2021, prior to the commencement of the 2022/23 budget process.
- 3.11 The forecast underspend on the Capital Programme for 2021/22 is £12.619m, with this being potential slippage into the 2022/23 Capital Programme. The funding for this slippage will also slip into 2022/23 and will be factored in when producing the Treasury Management Strategy Statement, Capital Strategy and Capital Programme for 2022/23.
- 3.12 These results and the associated projected expenditure shows that the majority of projects are on target to be completed within budget. Covid-19 continues to have an impact on capital schemes and the speed in which they can progress due to various reasons and on a number of schemes, slippage is already expected. The Council has secured many different external grants and work is progressing well or expected to, on most of these schemes. The Council is also expecting to receive £0.852m of Capital Receipts in 2020/21 to contribute towards the funding of the Capital Programme.
- 3.13 Further information on financial management can be seen in the ‘Revenue Budget Monitoring Report for Q1’ and the ‘Capital Budget Monitoring for Q1’ reports which will be discussed in The Executive meeting on the 27th September.
- 3.14 This demonstrates reasonable assurance 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 satisfactory performance.

4. PERFORMANCE MANAGEMENT

- 4.1 At the end of Q1 it is encouraging to note that the majority (85%) of the performance indicators are performing above target or within 5% tolerance of their targets. We do note however that four indicators are underperforming against their targets and are highlighted as being Red or Amber in the Scorecard.
- 4.2 Performance for our wellbeing **Objective 1** where we are working to ensure that the people of Anglesey can thrive and realise their long-term potential, at the end of Q1 has been good with only one indicator against this objective currently underperforming.
 - 4.2.1 Indicator 8 – The percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation – is RED with a performance of 19% against a target of 45% which is an improvement on the 0% undertaken in Q1 2020/21.

This work has been affected as a result of the Covid-19 pandemic, where only 31 of the 163 planned inspections were able to take place during Q1. This was mainly due to the redeployment of staff in response to the pandemic and the guidance issued by the Food Standards Agency (FSA) which states that for action in terms of food safety, namely where ever possible - new businesses should be prioritised. This guidance has been followed fully. In this respect, it is encouraging to note that all new businesses due for inspection in Q1 were inspected. However, the new requirements to prioritise new business inspection is not compatible with the requirements of this indicator resulting in an inaccurate presentation of the actual performance.

The FSA Recovery Plan indicates that there is no expectation to complete these planned inspections until 2022/23. To date, no confirmation has been received on how inspections will be prioritised post-pandemic from a national perspective and therefore, as a result of this, **it is recommended that this indicator is removed from the Scorecard for the 2021/22 year and monitored in house.**

- 4.3 Performance against the indicators for wellbeing **Objective 2** where we are supporting vulnerable adults and families to keep them safe, healthy and as independent as possible demonstrate good performance once again. Only one indicator of the 15 monitored in Q1 (7%) is currently underperforming for the objective.
 - 4.3.1 Indicator 17 – The percentage of adults who completed a period of reablement and have no package of care and support 6 months later – is

AMBER with a performance of 56.58% against a target of 62%. This is a decline on the 60.76% seen in Q1 2020/21 and the 61.8% seen in Q1 2019/20.

We are currently seeing an increase in the level of clients with complex and higher support needs deciding to remain at home in response to the Covid-19 pandemic. This increases the level and demand for ongoing care & support from us. This will have an impact on the reablement rate of ongoing care moving forward as more complex cases remain in their communities.

The service has had to amend its practice in terms of hospital discharges and Social Workers and Occupational Therapists are working 7 days a week in Penrhos Stanley in order to assist the flow of discharges from Ysbyty Gwynedd. This change in practice has been done in partnership with our Health Colleagues.

A further analysis will be undertaken in Q2 to establish the reasons behind this demand to ensure that the service provision is adequately resourced into the future and the necessary levels of support are being offered in line with expectations.

- 4.4 The performance of indicators to monitor our wellbeing **Objective 3** where we work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment have on the whole been good with 71% above target. The 2 indicators which are underperforming during this quarter are:
- 4.4.1 Indicator 32 – Percentage of waste reused, recycled or composted – is RED with a performance of 64.55% against a target of 70% for the quarter. This performance is down on the 67.07% seen in Q1 2020/21 and the 72.79% seen in Q1 2019/20.

There are many reasons for this decline in performance in comparison with previous years. The Covid-19 pandemic remains one of these reasons due to a reduction in the use of our Household Waste Recycling Centres and an increase in black bin household waste as more people work from home. Other reasons include the difficulty in obtaining outlets to recycle some materials including carpets, wood and mattresses which is also a concern for other North Wales Councils.

Following on from the new chargeable Green Waste service implemented from April 2021, we have seen a decrease in the tonnages collected, and therefore composted – some of this green waste will have been placed in black bins by householders. Such a reduction can be evidenced from 2,456T in Q1 2020/21 to 1,863T at the end of Q1 2021/22.

This decrease was identified as a risk when agreeing to the new chargeable green waste collection service in January 2020 where it was stated that –

“Although there are potential major financial benefits for charging for Green Garden Waste collection, there are risks involved, most notably the likely

reduction in annual recycling levels which could increase the risk of not achieving the 70% 2024/25 statutory recycling target, resulting in Welsh Government fines.”

To mitigate the current underperformance, a new steering group has been established which includes senior officers, senior politicians and partners from the WLGA and WRAP Cymru. The aim will be to evaluate current working practices and identify how best to improve performance in respect to this indicator and work towards the targets set by the Welsh Government by 2025.

- 4.4.2 Indicator 35 – Percentage of all planning applications determined in time – which is RED with 73% against a target of 82%.

Capacity issues within the Planning team, arising as a result of long term illness, the secondment of an experienced team leader, protracted recruitment and backfilling processes, as well as other work pressures such as the impact of the ongoing pandemic, including a backlog of applications has resulted in the performance seen in Q1.

We are currently working to strengthen the Planning capacity through the Planning Improvement Plan and an improvement in the performance of this indicator will be realised once the increased capacity is in place.

The Planning Function has secured the placement of a Trainee Planning Officer and despite being unsuccessful in recruiting thus far it is anticipated that this additional capacity will be in place by March 2022. There are also plans underway to utilise Function reserves to create two additional (initially temporary) posts within the Development Management team, that are currently progressing through the recruitment process and if successful it is anticipated that this additional capacity will be in place by the end of the year.

- 4.5 We are currently developing further indicators for Objective 3 to demonstrate the carbon footprint of our Council Fleet and business miles. These new indicators will be in place for the Q2 report but are envisaged to include –

- A - Net change in Greenhouse Gas Emissions (tCO₂e) - Council fleet (Annual) (%)
- B - Council fleet approx. consumption of fossil fuels (tCO₂e)
- C - Grey fleet (employee vehicles) approx. consumption of fossil fuels (tCO₂e)

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.
- 5.2 These can be summarised as follows –

- 5.2.1 Underperformance is recognised and managed with mitigation measures completed to aide improvement during Q2 and that a close eye is kept on the indicators currently affected by the coronavirus pandemic.
 - 5.2.2 The removal of indicator 8 – the percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation – from the Scorecard for this year due to the current Covid-19 pandemic and in line with the expectations within the Food Standards Agency Recovery Plan.
- 5.3 The committee is asked to accept the mitigation measures outlined above.

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q1 2021/22

Rheoli Perfformiad / Performance Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Tuedd Bl i Fl / Yr on Yr Trend	Canlyniad 20/21 Result	Canlyniad 19/20 Result
Objective 1 - Ensure that the people of Anglesey can thrive and realise their long-term potential							
1) Percentage of pupil attendance in primary schools (tymhorol) (Q3)	-	-	-	-	94.60%	-	94.90%
2) Percentage of pupil attendance in secondary schools (termly) (Q3)	-	-	-	-	93.90%	-	93.90%
3) Percentage of Year 11 leavers not in Education, Training or Employment [NEET] (annual) (Q4)	-	-	-	-	3%	4.2%	2%
4) Percentage of pupils assessed in Welsh at the end of the Foundation Phase (annual) (Q4)	-	-	-	-	85%	-	87.50%
5) Percentage of year 11 pupils studying Welsh [first language] (annual) (Ch4)	-	-	-	-	65%	-	65.01%
6) Percentage of Quality Indicators (with targets) achieved by the library service (annual) (Q3)	-	-	-	-	75%	-	75%
7) Percentage of food establishments that meet food hygiene standards	Gwyrdd / Green	-	98%	95%	95%	98%	98%
8) Percentage of high risk businesses that were subject to planned inspections that were inspected to ensure compliance with Food Hygiene Legislation [Local Indicator]	Coch / Red	-	19%	90%	90%	43%	92%
9) Percentage of NERS clients who completed the exercise programme (Ch3)	-	-	-	50%	50%	-	75%
10) Percentage of NERS clients whose health had improved on completion of the exercise programme (Ch3)	-	-	-	80%	80%	-	84%
11) Number of empty private properties brought back into use	Gwyrdd / Green	-	29	12	50	94	104
12) Number of new homes created as a result of bringing empty properties back into use	-	-	0	0	3	9	7
13) Landlord Services: Average number of days to complete repairs	Gwyrdd / Green	-	7.56	18	18	8.1	16.44
14) Percentage of tenants satisfied with responsive repairs (annual) (Q4) [Local Indicator] (Ch4/Q4)	-	-	-	-	-	-	-
Objective 2 - Support vulnerable adults and families to keep them safe, healthy and as independent as possible							
15) Rate of people kept in hospital while waiting for social care per 1,000 population aged 75+ (Q3)	-	-	-	-	3	-	6.88
16) The percentage of adult protection enquiries completed within statutory timescales	Gwyrdd / Green	-	90.00%	90%	90%	92.31%	91.30%
17) The percentage of adults who completed a period of reablement and have no package of care and support 6 months later	Ambr / Amber	-	56.58%	62%	62%	60.36%	63.08%
18) 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 [Local Indicator]	Gwyrdd / Green	-	14.82	19	19	15.36	17.57
19) 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	-	98.00%	93%	93%	98.20%	98.00%
20) Percentage of child assessments completed in time	Gwyrdd / Green	-	90.45%	90%	90%	86.87%	89.62%
21) Percentage of children in care who had to move 3 or more times	Gwyrdd / Green	-	1.97%	2.50%	10%	12.34%	8.39%
22) The percentage of referrals of children that are re-referrals within 12 months [Local Indicator]	Gwyrdd / Green	-	12.50%	15%	15%	32.00%	12.75%
23) 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)	Melyn / Yellow	-	277	270	270	258	224
24) The percentage of referrals during the year on which a decision was made within 1 working day	Gwyrdd / Green	-	99.29%	95%	95%	99.56%	98.88%
25) The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations	Melyn / Yellow	-	85%	90%	90%	87.74%	86.30%
26) Percentage of households successfully prevented from becoming homeless	Gwyrdd / Green	-	78.20%	70%	70%	74.74%	74.91%
27) Percentage of households (with children) successfully prevented from becoming homeless	Gwyrdd / Green	-	85.71%	70%	70%	75.47%	77.70%
28) Average number of calendar days taken to deliver a Disabled Facilities Grant	Melyn / Yellow	-	178.54	170	170	169	159.58
29) The average number of calendar days to let lettable units of accommodation (excluding DTLs)	Melyn / Yellow	-	41.8	40	40	45.6	21.9
30) Landlord Services: Percentage of rent lost due to properties being empty	Gwyrdd / Green	-	1.72%	2.00%	-	1.98%	1.42%
Objective 3 - Work in partnership with our communities to ensure that they can cope effectively with change and developments whilst protecting our natural environment							
31) Percentage of streets that are clean	Gwyrdd / Green	-	98%	95%	95%	92.00%	93.79%
32) Percentage of waste reused, recycled or composted	Coch / Red	-	64.55%	70%	67%	62.96%	67.26%
33) Average number of working days taken to clear fly-tipping incidents	Gwyrdd / Green	-	0.88	1	1	0.95	0.96
34) Kilograms of residual waste generated per person	Gwyrdd / Green	-	55.98kg	60kg	240kg	214kg	206.17kg
35) Percentage of all planning applications determined in time	Coch / Red	-	73%	82%	82%	79%	90%
36) Percentage of planning appeals dismissed	Gwyrdd / Green	-	67%	65%	65%	58%	78%
37) Percentage of planning enforcement cases investigated within 84 days	Gwyrdd / Green	-	91%	80%	80%	74%	74%
38) Percentage of A roads in poor condition (annual) (Q4)	-	-	-	3%	2.90%	4.60%	4%
39) Percentage of B roads in poor condition (annual) (Q4)	-	-	-	4%	3.80%	3.80%	3.80%
40) Percentage of C roads in poor condition (annual) (Q4)	-	-	-	9%	8.70%	8.50%	8.20%

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 arrows represent quarter on quarter performance All above indicators are reported Nationally unless stated otherwise

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q1 2021/22

Gofal Cwsmer / Customer Service	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 20/21 Result	Canlyniad 19/20 Result
Siarter Gofal Cwsmer / Customer Service Charter						
01) No of Complaints received (excluding Social Services)	Gwyrdd / Green	-	10	19	43	67
02) No of Stage 2 Complaints received for Social Services	-	-	4	-	6	-
03) Total number of complaints upheld / partially upheld	-	-	2	-	8	-
04a) Total % of written responses to complaints within 20 days (Corporate)	Gwyrdd / Green	-	88%	80%	88%	94%
04b) Total % of written responses to complaints within 15 days (Social Services)	Coch / Red	-	50%	80%	75%	-
05) Number of Stage 1 Complaints for Social Services	-	-	14	-	24	-
06) Number of concerns (excluding Social Services)	-	-	37	-	104	136
07) Number of Compliments	-	-	107	-	662	618
08) % of FOI requests responded to within timescale	Gwyrdd / Green	-	83%	80%	79.4%	82%
09) Customer Satisfaction Telephone Service - TBC (Q3)	-	-	-	-	-	-
Newid Cyfrwng Digidol / Digital Service Shift						
10) No of Registered Users on AppMôn / Website	-	-	41.5k	-	33.5k	15k
11) No of reports received by AppMôn / Website	-	-	30k	-	58k	10.8k
12) No of web payments	-	-	8.5k	-	18.5k	13k
13) No of telephone payments	-	-	2k	-	7k	6.5k
14) No of 'followers' of IOACC Social Media	-	-	84k	-	-	-
15) No of visitors to the Council Website	-	-	248k	-	1.03M	783k

Rheoli Pobl / People Management	CAG / RAG	Tuedd / Trend	Canlyniad / Actual	Targed / Target	Canlyniad 20/21 Result	Canlyniad 19/20 Result
01) Number of staff authority wide, including teachers and school based staff (FTE)	-	-	2169	-	2180	2181
02) Sickness absence - average working days/shifts lost	Melyn / Yellow	-	2.23	2.1	6.68	9.4
03) Short Term sickness - average working days/shifts lost per FTE	-	-	0.87	-	1.94	4.2
04) Long Term sickness - average working days/shifts lost per FTE	-	-	1.36	-	4.74	5.2
05) Local Authority employees leaving (%) (Turnover) (Annual) (Q4)	-	-	-	-	6%	9%

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	-	£31,874,000	£31,500,000	-1.17%	-	-
02) Forecasted end of year outturn (Revenue)	Coch / Red	-	£147,120,000	-	-	£145,509,437	-1.09%
03) Forecasted end of year outturn (Capital)	-	-	£31,692,000	-	-	£25,366,000	-19.96%
04) Income v Targets (excluding grants)	Gwyrdd / Green	-	-£3,403,325	-£3,419,737	0.48%	-	-
05) Amount borrowed	-	-	£7,188,000	-	-	£0	-100.00%
06) Cost of borrowing	Gwyrdd / Green	-	£4,550,756	-	-	£4,000,380	12.09%
07) % of Council Tax collected (for last 3 years)	Melyn / Yellow	-	-	98.1%	-	-	-
08) % of Business Rates collected (for last 3 years)	Gwyrdd / Green	-	-	98.6%	-	-	-
09) % Housing Rent collected (for the last 3 years)	Melyn / Yellow	-	-	100.5%	-	-	-
10) % Housing Rent collected excl benefit payments (for the last 3 years)	-	-	-	99.63%	-	-	-