

ISLE OF ANGLESEY COUNTY COUNCIL Scrutiny Report Template

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| Committee: | CORPORATE SCRUTINY |
| Date: | 20 JUNE 2023 |
| Subject: | SCORECARD MONITORING REPORT - QUARTER 4 (2022/23) |
| Purpose of Report: | TO CHALLENGE PERFORMANCE |
| Scrutiny Chair: | COUNCILLOR DOUGLAS FOWLIE |
| Portfolio Holder(s): | COUNCILLOR CARWYN E JONES |
| Head of Service: | CARYS EDWARDS |
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| Local Members: | n/a |

1 - Recommendation/s

- 1.1** This is the fourth and final scorecard report of 2022/23. It portrays the position of the Council against its wellbeing objectives.
- 1.2** The report highlights some of the positive stories with respect to the annual performance of 2022/23. Some of these highlights include:
- 1.2.1** The percentage of households (with children) prevented from becoming homeless
 - 1.2.2** The Adult Services indicators all being above target for the year
 - 1.2.3** The planning applications determined within timescale
 - 1.2.4** The number of empty homes brought back into use
 - 1.2.5** The percentage of roads in poor condition seeing an improvement across A, B and C roads
 - 1.2.6** The number of visits to leisure centers increasing to levels last seen pre pandemic
 - 1.2.7** The percentage of streets that are clean
- 1.3** The Committee is requested to scrutinize the scorecard and note the areas of improvement together with the areas which the Leadership Team are exploring and investigating to manage and secure further improvements into the future.
- 1.4** These areas can be noted as follows:
- 1.4.1** Percentage of Freedom of Information (FOI) requests responded to within timescale
 - 1.4.2** Average number of days to deliver Disabled Facilities Grant (DFG)
 - 1.4.3** Percentage of Planning Appeals Dismissed

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. The Council's performance during 2022/23 was positive. What arrangements are in hand to raise awareness of this?
2. A number of Service areas experienced increased demands and pressures during the year. How are these considered as part of the performance management process?
3. How are actions identified and pursued for the performance indicators that continue to underperform?
4. The report discusses a forecasted underspend for the year ending 31 March 2023. How will this position assist the Council's response to additional Service pressures anticipated during 2023/24?
5. What arrangements are in hand to introduce amendments to the current scorecard to ensure alignment the Council Plan: 2023/2028?

5 – Background / Context

5.1 The Isle of Anglesey County Council have arrangements in place which allow us to effectively 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 Transitional Plan for 2022/23 identified the local needs and wellbeing priorities and set out our aims for the period up until the end of March 2023 and this scorecard monitoring report is used to monitor the performance of our Key Performance Indicators (KPI's) up until such time.

5.3 It highlights how we are delivering the Councils' day to day activities. It provides the intelligence which enables a proactive approach to be adopted regarding performance management and as such, the report identifies any mitigating actions agreed by the Leadership Team to drive and secure improvements into the future.

5.4 The scorecard (appendix 1) portrays the end of year position and will (together with this report) be considered further by the Corporate Scrutiny Committee and the Executive during June 2023.

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

n/a

7 – Financial Implications

The end of Q4 financial position is noted in the report.

8 – Appendices:

Appendix A - Scorecard Quarter 4

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

- 2022/23 Scorecard Monitoring Report - Quarter 3 (as presented to, and accepted by the Executive Committee in March 2023).

SCORECARD MONITORING REPORT – QUARTER 4 (2022/23)

1. INTRODUCTION

- 1.1 The Isle of Anglesey County Council have arrangements in place which allow us to effectively 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 Transitional Plan for 2022/23 identified the local needs and wellbeing priorities and set out our aims for the period up until the end of March 2023 and this scorecard monitoring report is used to monitor the performance of our Key Performance Indicators (KPI's) up until such time.
- 1.3 It highlights how we are delivering the Councils' day to day activities. It provides the intelligence which enables a proactive approach to be adopted regarding performance management and as such, the report identifies any mitigating actions agreed by the Leadership Team to drive and secure improvements into the future.
- 1.4 The scorecard (appendix 1) portrays the end of year position and will (together with this report) be considered further by the Corporate Scrutiny Committee and the Executive during June 2023.

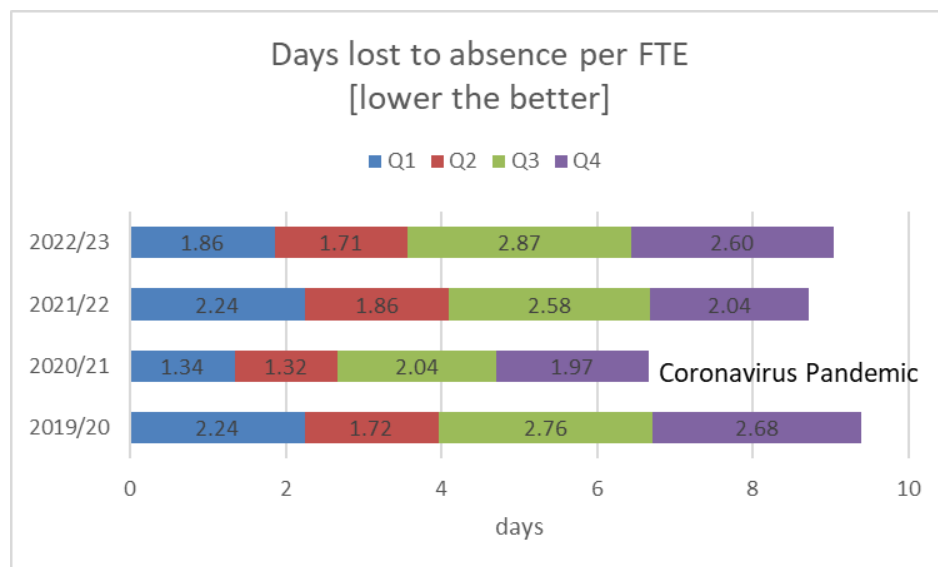
2. CONTEXT

- 2.1 The report itself, together with the scorecard depicts the end of year position against matters related to –
 - 2.1.1 customer service,
 - 2.1.2 people and financial management
 - 2.1.3 performance management.
- 2.2 Any targets within the report were reviewed and agreed upon with each service, including differing quarterly targets where required based on historical performance and trends.
- 2.3 The results within the scorecard are all cumulative and as such the trends column will inform the performance trends from quarter to quarter throughout the year.
- 2.4 The RAG status for each section of the scorecard, with the exception of financial management which is done from a professional opinion perspective, can be found below:
 - 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

3. CORPORATE HEALTH PERFORMANCE

- 3.1 It is encouraging to note that the majority (80%) of the indicators with targets monitored in this section performed well against targets (Green or Yellow RAG). Some of the highlights are noted below.
- 3.2 At the end of the year the Council is yellow against its staff attendance KPI with 9.15 days lost to absence per FTE against a target of 8.75 days lost to absence per FTE.

The performance for the year also includes 0.49 days absence per FTE which were coronavirus related absences since October 2022. Removing coronavirus related absences, as was done since March 2020, would result in a performance of 8.66 days lost to absence per FTE. This compares favourably against previous year-s monitored (with the exception of 2020/21). This is encouraging and demonstrates the commitment of staff..

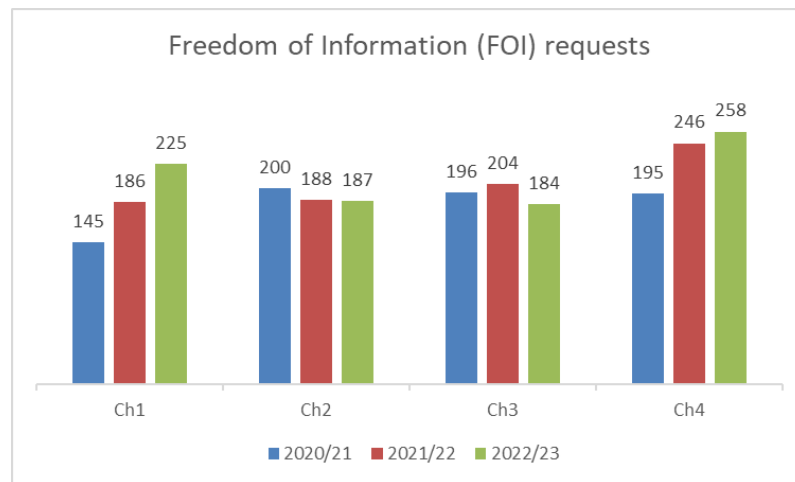


- 3.3 The indicators monitored within the Customer Service section did not highlight any great cause for concern with the indicators performing well against targets on the whole with the exceptions of indicators 04b and indicator 09. . A story is evolving which is encouraging to note when it can be evidenced that a greater number of people used web-based applications to pay for services whilst the number of people paying via touchtone payments decreased.
- 3.3.1 Indicator 04b which is known and recognised to be challenging due to the complicated nature of the complaints and the multi-agency response often required. The total % of written responses to complaints within 15 days (Social Services) was Red with a performance of 70% against a target of 80%. 19 of the 27 complaints received were discussed with the complainant within 5 working days, and 6 of the 8 late written responses were agreed with the complainant in advance of being identified late as

noted in the complaint protocol. The overall performance of 70% is however a slight improvement on the 66% as seen at the end of 2021/22.

- 3.3.2 It is acknowledged that further work is needed with regards to indicator 09 – the % of FOI requests responded to within timescale – which demonstrates that 72% of the responses were within timescale against a target of 80%. This performance is similar to the performance demonstrated in the Q3 scorecard report.

In total there were 854 FOI requests during the year and 843 of those required a response. The challenge from 2023/24 onwards is that the target is set to increase to at least 90% and it is recommended that further work is required to identify the types of requests that are late, why there is an increase in requests particularly during Q4 and where responses can be improved so that the Council are in a better position to achieve the target.



- 3.4 The financial management section currently forecasts an underspend of £1.212m for the year ending 31 March 2023.
- 3.5 This result is welcomed and improves the Council's financial position.
- 3.6 The net underspend has contributed to an increase in the Council's General Balances with an underlying available sum of £10.2m, which is £1.4m above the minimum recommended value moving forward (5% of the 2023/24 net revenue budget).
- 3.7 The outturn financial position shows a continued demand for services however, particularly in Social Care and Homelessness. Given the current cost of living crisis it is anticipated that these pressures will remain in 2023/24.
- 3.8 The forecast underspend on the Capital Programme 2022/23 is £13.477m, with this being slippage into the 2023/24 Capital Programme. The funding for this slippage will also slip into 2023/24 and this has been factored into the

Treasury Management Strategy Statement, Capital Strategy and Capital Programme for 2023/24.

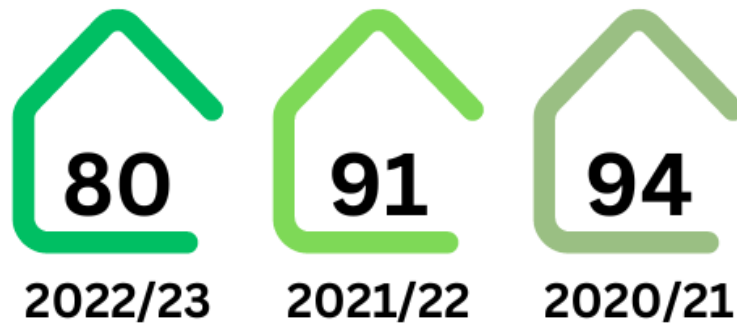
- 3.9 The revenue and capital accounts are considered by the Finance Scrutiny Panel where any underspends are scrutinised thoroughly before a progress report is presented to the Corporate Scrutiny Committee on a quarterly basis.
- 3.10 Further information on financial management can be seen in the 'Revenue Budget Monitoring Report for Q4', the 'Capital Budget Monitoring for Q4' and the 'Housing Revenue Account Budget Monitoring for Q4' reports which are to be discussed in The Executive meeting on the 27th June.
- 3.11 The overall performance within this section demonstrates that reasonable assurance can be provided that the Council's day to day activities in managing its
- people
 - finances and
 - serving its customers

are delivering against their expectation to a standard which is appropriate.

It also provides the basis and the evidence of a good performance management ethos which is reflected in the fact that the indicators from that perspective are also demonstrating satisfactory performance.

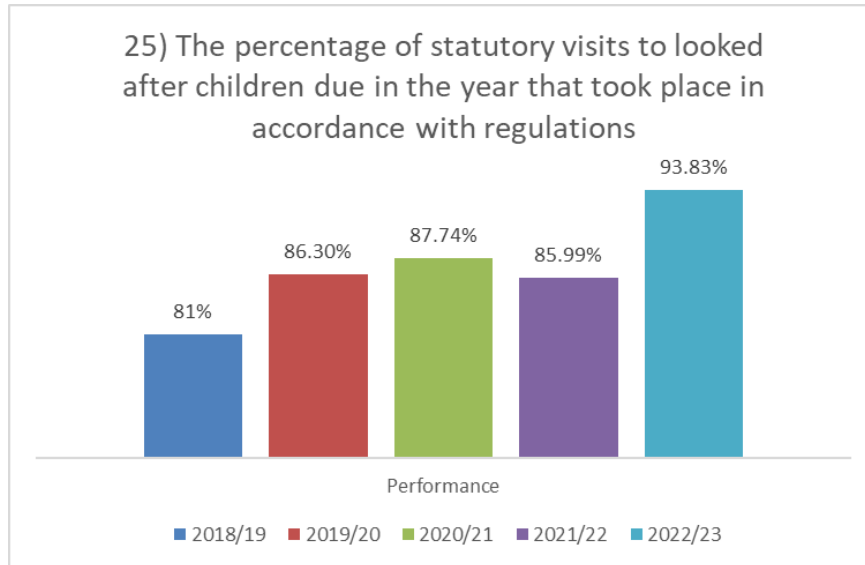
4. PERFORMANCE MANAGEMENT

- 4.1 At the end of the year it is encouraging to note that a high majority (91%) of the performance indicators in this section are performing above target or within 5% tolerance of their targets. This is identical to the performance seen at the end of 2021/22.
- 4.2 Indicators related to our wellbeing **Objective 1** where we are working to ensure that the people of Anglesey can thrive and realise their long-term potential, all performing well with all indicators being either green or yellow against their targets.
- 4.3 Some examples of the good performance within this objective seen during the year include:
- 4.3.1 100% of pupils have been assessed in Welsh at the end of the Foundation Phase (indicator 4). This is encouraging and meets the expectations from the council's Welsh in Education Strategic Plan.
 - 4.3.2 80 properties have been brought back into use against a target of 50 (indicator 11). Once again the use of the Council Tax Premium has proved fruitful here and it's positive that there are 80 less empty properties within our communities.

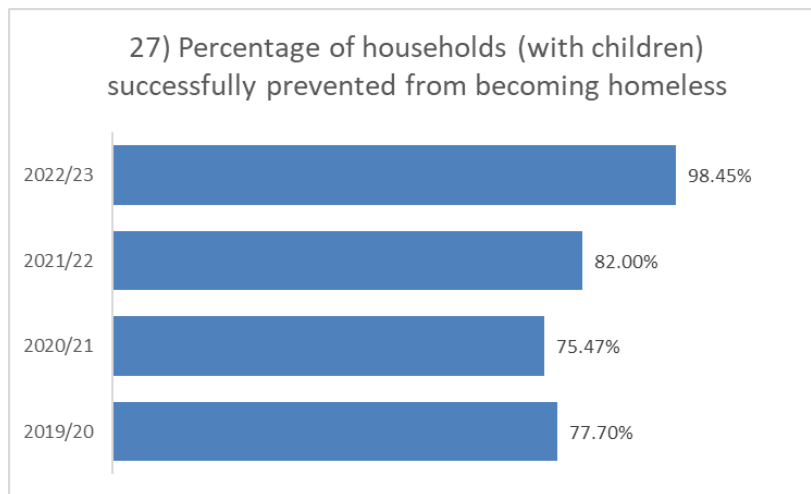


Number of empty homes brought back into use

- 4.3.3 72% of clients attending the NERS programme completed the course and 78% believed that the programme has made a positive impact on their health (indicators 9 and 10).
- 4.3.4 There were 514k visits to Leisure Centres during the year, an increase of 151k on 2021/22 and the highest total since 2018/19. This demonstrates that the improved facilities and activities available to residents are desirable in an ever-increasing competitive industry.
- 4.4 There was no information available for the following indicators –
- 4.4.1 Indicator 6 – The percentage of Quality Indicators (with targets) achieved by the library service – due to the assessment being adapted for the year to ensure services reported on what was delivered rather than assessed against targets. At the time of writing, the library standards report for 2022/23 has yet to be received from Welsh Government.
- 4.4.2 Indicator 14 – The percentage of tenants satisfied with responsive repairs (annual) – this was not reported due to issues around the implementation of the Accuserve system and the difficulty of collecting survey data. The service is developing a work around for obtaining customer satisfaction until the issues with the system are resolved
- 4.5 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 demonstrates a good performance once again. 11 indicators (73%) are Green whilst 2 indicators (13%) are Yellow against their targets for the year.
- 4.6 Examples of some of the good performance seen during the year include:
- 4.6.1 The Adult Services indicators (Indicators 16 to 19) are all Green against targets.
- 4.6.2 All but one of the Children and Families Service indicators (indicators 20 – 25) are above or within 5% of targets for the year. The number of statutory visits to looked after children was a particularly good performance at 93.83% compared to previous years –



4.6.3 The Homelessness indicators (Indicators 26 + 27) for the Housing Service have also demonstrated good performance with both green against targets. The targeted funding for homelessness has made a great difference where 98.45% of households with children were prevented this year compared to previous performance



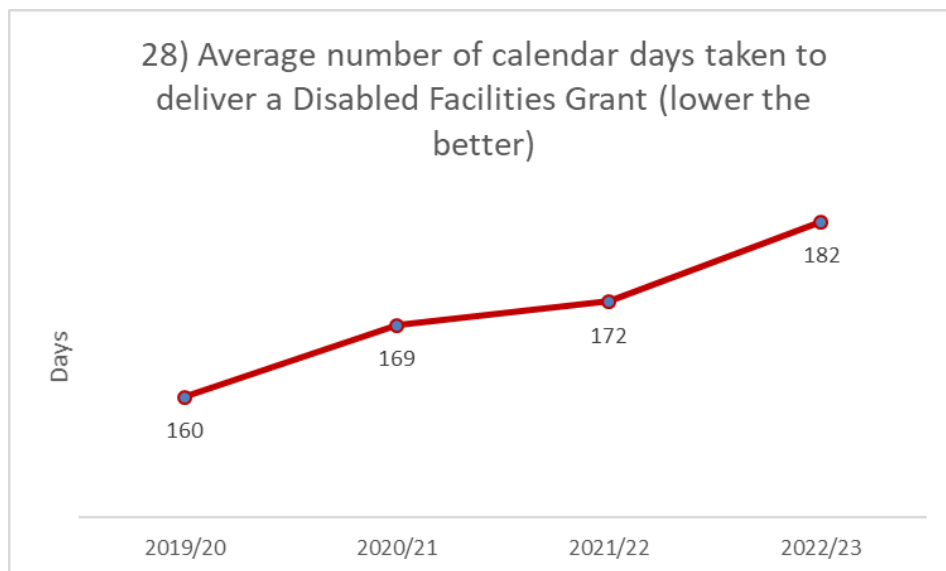
- 4.7 There was no information available for indicator 15 – the rate of people kept in hospital while waiting for social care per 1000 population aged 75+. Unfortunately, the local health board have not provided this information since March 2020.
- 4.8 We do however note that two indicators have underperformed during the year against wellbeing objective 2, with both being red against targets. The indicators in question have been discussed in previous quarterly reports throughout the year.
- 4.9 Indicator 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 – is Red with a performance of 303 days against a target of 270 days.

The performance is a decline on the 287 days seen at the end of Q3, although it is a slight improvement on the 318 days reported at the end of 2021/22.

This indicator calculates those children who have been removed from the child protection register within the last twelve months on a rolling basis. An alternative indicator to measure the average length of time for all children spent on the child protection register (CPR) demonstrates a healthy performance of 166 days. The monitoring of this indicator will improve the performance against indicator 23 into the future and will ensure that the children on the CPR are only on it for the necessary time to make a decision.

- 4.10 Indicator 28 – The average number of calendar days taken to deliver a Disabled Facilities Grant – is Red with a performance of 193 days against a target of 170 days.

This performance is a decline on the 182 days seen at the end of Q3, and a decline on previous year's performances



The reasons for the decline in performance for this indicator include:

- Difficulties in gaining access to some properties due to client's concerns and anxieties following the coronavirus pandemic.
- Difficulties finding contractors to undertake the work. Currently there are only 6 contractors on the Island that install the adaptations.

It's likely that the target days will need to be increased in 2023/24 as a result of these difficulties.

The DFG Policy will be reviewed during Q1 2023/24 which will include drawing up a service level agreement and agreeing key performance indicators for the delivery of DFG adaptations.

- 4.11 The performance of indicators to monitor our wellbeing **Objective 3** where we work in partnership with our communities to ensure that they can cope

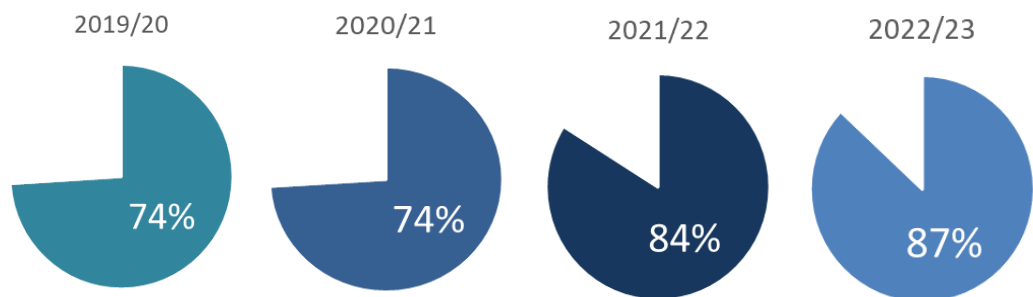
effectively with change and developments whilst protecting our natural environment has also been good at 90% above or within 5% of their targets for the year.

4.12 The indicators that have performed well in the year include:

4.12.1 A number of waste management indicators (Indicator 31, 33 and 34) are Green against targets during the year. 96% of our streets surveyed in the year were clean of any waste and this was the best performance of the last four years (95.5% in 2021/22, 92% in 2020/21 and 93.79% in 2019/20).

4.12.2 Planning applications determined within timescale is Green against target at 91%. This is also the best performance for this indicator in the last four years (79% in 2021/22, 79% in 2020/21 and 90% in 2019/20).

4.12.3 The percentage of planning enforcement cases investigated within 84 days has also demonstrated an improved performance (87%) compared to previous years (84% in 2021/22, 74% in 2020/21 and 74% in 2019/20). This is encouraging and demonstrates that improvements implemented by the Regulation and Economic Development service staff are making a difference to performance.

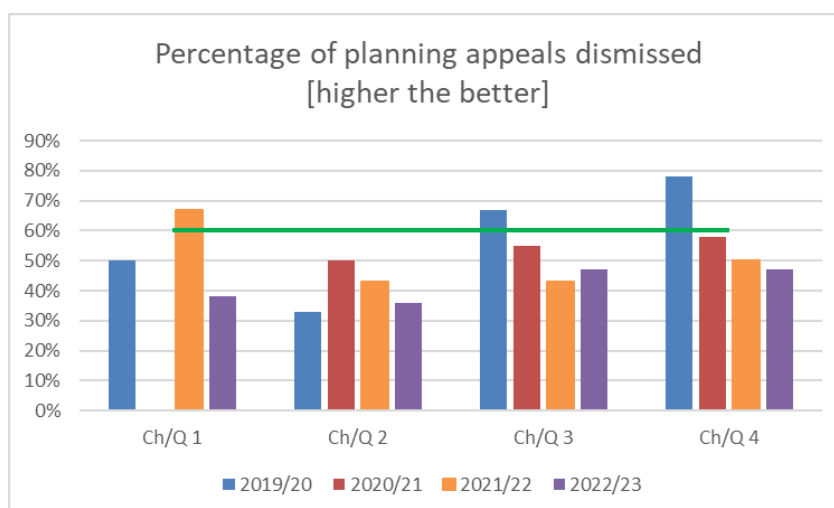


The percentage of planning enforcement cases investigated within 84 days

4.12.4 The three highways indicators related to the Islands' A, B and C road condition surveys (indicators 38 – 40) are Green against targets and have improved compared to 2021/22. The largest improvement can be seen in the condition of our A roads where only 2.6% were of a poor condition in 2022/23 compared to 3% in 2020/21 and 4.6% in 2019/20. The additional funding received, a combination of both capital funding and a Welsh Government grant, was a contributing factor to the improvements.

4.13 The only indicator underperformed against target for the year:

4.13.1 Indicator 36 – the percentage of planning appeals dismissed – with a performance of 47% against a target of 65%. This is a slight decline on the performance demonstrated in 2021/22 (50%).



This indicator relates to a small number of planning appeals, the number of which can fluctuate greatly from one quarter to the next. Three of the five appeals during Q4 were dismissed resulting in a total of nine out of the nineteen appeals being dismissed for the year.

The Council continues to ensure that planning decisions are 'robust' and well-founded, however the Council has no influence over an appeal decision. We will continue to monitor appeal decisions on similar applications to identify if a pattern is developing that would require a different interpretation of our policies.

4.13.2 Our year on year performance for all comparable indicators (37 in total) demonstrates that 17 (46%) have improved during the year, 17 (46%) have declined and 3 (8%) have maintained on their performance levels.

4.13.3 Overall it is encouraging to report that 71% of the indicators that are used to monitor the Wellbeing Objectives were Green against target for the year.

5. RECOMMENDATIONS

5.1 The report highlights some of the positive stories with respect to the performance over the year. Some of these highlights include:

- The percentage of households (with children) prevented from becoming homeless
- The Adult Services indicators all being above target for the year
- The planning applications determined within timescale
- The number of empty homes brought back into use
- The percentage of roads in poor condition seeing an improvement across A, B and C roads
- The number of visits to leisure centres increasing to levels last seen pre pandemic
- The percentage of streets that are clean

- 5.2 The Committee is requested to scrutinise the scorecard and note the areas of improvement together with the areas which the Leadership Team are exploring and investigating to manage and secure further improvements into the future.

These areas can be noted as follows:

- 5.2.1 Percentage of Freedom of Information (FOI) requests responded to within timescale
- 5.2.2 Average number of days to deliver Disabled Facilities Grant (DFG)
- 5.2.3 Percentage of Planning Appeals Dismissed

6. GLOSSARY

- 6.1 Below is a list of acronyms used within the report and Scorecard

- 6.1.1 KPI – Key Performance Indicator
- 6.1.2 Q1 – Quarter 1
- 6.1.3 Q2 – Quarter 2
- 6.1.4 Q3 – Quarter 3
- 6.1.5 Q4 – Quarter 4
- 6.1.6 RAG Status - 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
- 6.1.7 Trend - Trend arrows represent quarter on quarter performance
- 6.1.8 FTE – Full Time Equivalent
- 6.1.9 FOI – Freedom of information
- 6.1.10 HRA – Housing Revenue Account
- 6.1.11 NEET – Not in Education, Employment or Training
- 6.1.12 DTL – Difficult to Let
- 6.1.13 NERS – National Exercise Referral Scheme
- 6.1.14 CPR – Child Protection Register
- 6.1.15 IOACC – Isle of Anglesey County Council

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q4 2022/23

| Rheoli Perfformiad / Performance Management | CAG / RAG | Tuedd / Trend | Canlyniad / Actual | Targed / Target | Bl ar FI / Yr on Yr Trend | Canlyniad 21/22 Result | Canlyniad 20/21 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) | | ↑ | 91.69% | | | - | - |
| 2) Percentage of pupil attendance in secondary schools (termly) (Q3) | | ↓ | 85.22% | | | - | - |
| 3) Percentage of Year 11 leavers not in Education, Training or Employment [NEET] (annual) (Q4) | Melyn / Yellow | | 3.20% | 3% | ↓ | 2.60% | 4.2% |
| 4) Percentage of pupils assessed in Welsh at the end of the Foundation Phase (annual) (Q3) | Gwyrdd / Green | | 100% | 100% | - | - | - |
| 5) Percentage of year 11 pupils studying Welsh [first language] (annual) (Q3) | Gwyrdd / Green | | 68% | 67.5% | ↑ | 67.8% | 65% |
| 6) Percentage of Quality Indicators (with targets) achieved by the library service (annual) (Q4) | | | - | - | - | - | - |
| 7) Number of visits to leisure centres | Melyn / Yellow | ↑ | 539k | 546k | ↑ | 388k | 189k |
| 8) Percentage of food establishments that meet food hygiene standards | Gwyrdd / Green | ↑ | 98% | 98% | ⇒ | 98% | 98% |
| 9) Percentage of NERS clients who completed the exercise programme | Gwyrdd / Green | ↓ | 72% | 50% | ↑ | 47.5% | - |
| 10) Percentage of NERS clients whose health had improved on completion of the exercise programme | Melyn / Yellow | ↓ | 78% | 80% | ↓ | 84% | - |
| 11) Number of empty private properties brought back into use | Gwyrdd / Green | ↑ | 80 | 50 | ↓ | 91 | 94 |
| 12) Number of new homes created as a result of bringing empty properties back into use | Melyn / Yellow | ⇒ | 1 | 3 | ⇒ | 1 | 9 |
| 13) Landlord Services: Average number of days to complete repairs | Gwyrdd / Green | ↓ | 16.61 | 18 | ↓ | 13.89 | 8.1 |
| 14) Percentage of tenants satisfied with responsive repairs (annual) (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+ (Q4) | | | | | | - | - |
| 16) The percentage of adult protection enquiries completed within statutory timescales | Gwyrdd / Green | ↑ | 91.69% | 90% | ↓ | 94.78% | 92.31% |
| 17) The percentage of adults who completed a period of reablement and have no package of care and support 6 months later | Gwyrdd / Green | ↑ | 64.71% | 62% | ⇒ | 64.85% | 60.36% |
| 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 | ↑ | 16.74 | 19 | ↓ | 14.33 | 15.36 |
| 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 | ↓ | 98.10% | 93% | ↑ | 96.10% | 98.20% |
| 20) Percentage of child assessments completed in time | Melyn / Yellow | ↓ | 86.75% | 90% | ↓ | 87.15% | 86.87% |
| 21) Percentage of children in care who had to move 3 or more times | Gwyrdd / Green | ↑ | 6.15% | 10% | ↑ | 9.79% | 12.34% |
| 22) The percentage of referrals of children that are re-referrals within 12 months [Local Indicator] | Gwyrdd / Green | ↑ | 14.35% | 15% | ↓ | 5.74% | 32.00% |
| 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) | Coch / Red | ↓ | 306 | 270 | ↑ | 318 | 258 |
| 24) The percentage of referrals during the year on which a decision was made within 1 working day | Gwyrdd / Green | ↓ | 98.31% | 95% | ↓ | 99.10% | 99.56% |
| 25) The percentage of statutory visits to looked after children due in the year that took place in accordance with regulations | Gwyrdd / Green | ↑ | 93.83% | 90% | ↑ | 85.99% | 87.74% |
| 26) Percentage of households successfully prevented from becoming homeless | Gwyrdd / Green | ↑ | 89.53% | 80% | ↑ | 80.95% | 74.74% |
| 27) Percentage of households (with children) successfully prevented from becoming homeless | Gwyrdd / Green | ↑ | 98.45% | 85% | ↑ | 92.00% | 75.47% |
| 28) Average number of calendar days taken to deliver a Disabled Facilities Grant | Coch / Red | ↓ | 193 | 170 | ↓ | 172.3 | 169 |
| 29) The average number of calendar days to let lettable units of accommodation (excluding DTLs) | Gwyrdd / Green | ↓ | 35.8 | 40 | ↓ | 28.7 | 45.6 |
| 30) Landlord Services: Percentage of rent lost due to properties being empty | Melyn / Yellow | ↑ | 1.83% | 1.70% | ↓ | 1.66% | 1.98% |
| 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 | ↓ | 96% | 95% | ↑ | 95.50% | 92.00% |
| 32) Percentage of waste reused, recycled or composted | Melyn / Yellow | ↓ | 63.47% | 64% | ↑ | 62.39% | 62.96% |
| 33) Average number of working days taken to clear fly-tipping incidents | Gwyrdd / Green | ⇒ | 1 | 1 | ↓ | 0.25 | 0.95 |
| 34) Kilograms of residual waste generated per person | Gwyrdd / Green | ↓ | 207kg | 220kg | ↑ | 223kg | 214kg |
| 35) Percentage of all planning applications determined in time | Gwyrdd / Green | ↑ | 91% | 90% | ↑ | 79% | 79% |
| 36) Percentage of planning appeals dismissed | Coch / Red | ⇒ | 47% | 65% | ↓ | 50% | 58% |
| 37) Percentage of planning enforcement cases investigated within 84 days | Gwyrdd / Green | ↑ | 87% | 80% | ↓ | 92% | 74% |
| 38) Percentage of A roads in poor condition (annual) | Gwyrdd / Green | | 2.6% | 3% | ↑ | 3% | 4.60% |
| 39) Percentage of B roads in poor condition (annual) | Gwyrdd / Green | | 2.6% | 4% | ↑ | 2.80% | 3.80% |
| 40) Percentage of C roads in poor condition (annual) | Gwyrdd / Green | | 7.6% | 9% | ↑ | 8.20% | 8.50% |
| 41) Council fleet approx. consumption of fossil fuels (tCO2e) | | ↓ | 515.07 | | ↓ | 486.85 | 385 |
| 42) The number of miles travelled by the Council fleet (miles) | | ↓ | 1,728,920 | | ↓ | 1,524,961 | 1,254,419 |
| 43) The number of miles travelled by the Council Gray/Employee fleet (miles) | | | 790,899 | | ↓ | 786,247 | - |
| 44) Net change in Greenhouse Gas Emissions (tCO2e) - Council fleet (Annual) (%) | | | +6% | | ↑ | +26% | - |

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

Appendix A - Cerdyn Sgorio Corfforaethol - Corporate Scorecard Ch-Q4 2022/23

| Gofal Cwsmer / Customer Service | CAG / RAG | Tuedd / Trend | Canlyniad / Actual | Targed / Target | Canlyniad 21/22 Result | Canlyniad 20/21 Result |
|---|----------------|---------------|--------------------|-----------------|------------------------|------------------------|
| Siarter Gofal Cwsmer / Customer Service Charter | | | | | | |
| 01) No of Complaints received (excluding Social Services) | Gwyrdd / Green | ↑ | 40 | 67 | 55 | 43 |
| 02) No of Stage 2 Complaints received for Social Services | | | 4 | - | 9 | 6 |
| 03) Total number of complaints upheld / partially upheld | | | 13 | - | 20 | 8 |
| 04) Total % of written responses to complaints within 20 days (Corporate) | Gwyrdd / Green | ↓ | 82% | 80% | 80% | 88% |
| 05) Total % of written responses to complaints within 15 days (Social Services) | Coch / Red | ↑ | 70% | 80% | 66% | 75% |
| 06) Number of Stage 1 Complaints for Social Services | | ↑ | 27 | - | 41 | 24 |
| 07) Number of concerns (excluding Social Services) | | ↓ | 321 | - | 189 | 104 |
| 08) Number of Compliments | | ↑ | 495 | - | 658 | 662 |
| 09) % of FOI requests responded to within timescale | Ambr / Amber | ↑ | 72% | 80% | 79% | 79.4% |
| Newid Cyfrwng Digidol / Digital Service Shift | | | | | | |
| 10) No of Registered Users on AppMôn / Website | | ↓ | 59.5k | - | 51k | 33.5k |
| 11) No of reports received by AppMôn / Website | | ↓ | 36k | - | 66k | 58k |
| 12) No of web payments | | ↑ | 26k | - | 21k | 18.5k |
| 13) No of telephone payments | | ↑ | 9.5k | - | 11k | 7k |
| 14) No of 'followers' of IOACC Social Media | | ↑ | 100k | - | 92k | 42k |
| 15) No of visitors to the Council Website | | ↑ | 327k | - | 634k | 1.03M |

| Rheoli Pobl / People Management | CAG / RAG | Tuedd / Trend | Canlyniad / Actual | Targed / Target | Canlyniad 21/22 Result | Canlyniad 20/21 Result |
|---|----------------|---------------|--------------------|-----------------|------------------------|------------------------|
| 01) Number of staff authority wide, including teachers and school based staff (FTE) | | | 2288 | - | 2202 | 2180 |
| 02) Sickness absence - average working days/shifts lost | Melyn / Yellow | ↑ | 9.15 | 8.75 | 8.73 | 6.68 |
| 03) Short Term sickness - average working days/shifts lost per FTE | | | 4.54 | - | 3.70 | 1.94 |
| 04) Long Term sickness - average working days/shifts lost per FTE | | | 4.61 | - | 5.03 | 4.74 |
| 05) Local Authority employees leaving (%) (Turnover) (Annual) (Q4) | | | 8% | - | 10% | 6% |

| Rheolaeth Ariannol / Financial Management | CAG / RAG | Tuedd / Trend | Cyllideb / Budget | Canlyniad / Actual | Amrywiant / Variance (%) | Rhagolygon o'r Gwariant / Forcasted Actual | Amrywiant a Ragwelir / Forcasted Variance (%) |
|---|----------------|---------------|-------------------|--------------------|--------------------------|--|---|
| 01) Budget v Actuals (Controllable Budget Lines) | Gwyrdd / Green | ↑ | £158,120,000 | £156,017,000 | -1.33% | | |
| 02) End of year outturn (Revenue) | Gwyrdd / Green | ↑ | £158,367,000 | £156,813,000 | -0.98% | | |
| 03) End of year outturn (Capital) | | ↑ | £39,530,000 | £29,510,000 | -25.35% | | |
| 04) Income v Targets (excluding grants) | Gwyrdd / Green | ↑ | -£13,318,044 | -£15,978,167 | 19.97% | | |
| 05) Amount borrowed | | ↑ | £12,052,000 | £1,549,000 | -112.85% | | |
| 06) Cost of borrowing | | ↑ | £4,151,734 | £4,048,339 | -2.49% | | |
| 07) % of Council Tax collected (for last 3 years) | | ↑ | | 98.50% | | | |
| 08) % of Business Rates collected (for last 3 years) | | → | | 99.20% | | | |
| 09) % Housing Rent collected (for the last 3 years) | Melyn / Yellow | ↑ | | 100.2% | | | |
| 10) % Housing Rent collected excl benefit payments (for the last 3 years) | Melyn / Yellow | ↑ | | 100.5% | | | |