

# Balanced Scorecard Indicators

## Half Year Report 2021/22



This section of the Council report is presented using the Balanced Scorecard approach. The four Balanced Scorecard perspectives and key areas of focus are shown in the following table and the associated key indicators that follow are drawn from across the Council's services.

| Customer/Stakeholder   |  | Financial Health   |  |
|--|--|--|--|
| <ul style="list-style-type: none"> <li>Improving outcomes for children, young people and their families</li> <li>Ensuring Midlothian is a safe place to live, work and grow up in</li> <li>Creating opportunities for all and reducing inequalities</li> <li>Growing the local economy and supporting businesses</li> <li>Responding to growing demand for Housing and Adult Social Care services</li> </ul> |  | <ul style="list-style-type: none"> <li>Maintaining financial sustainability and maximising funding sources</li> <li>Making optimal use of available resources</li> <li>Reducing costs and eliminating waste</li> </ul> |  |
| Internal Processes   |  | Learning and Growth  |  |
| <ul style="list-style-type: none"> <li>Improving and aligning processes, services and infrastructure</li> </ul>  |  | <ul style="list-style-type: none"> <li>Developing employee knowledge, skills and abilities</li> <li>Improving engagement and collaboration</li> <li>Developing a high performing workforce</li> </ul>                  |  |

Each of the perspectives shown above are supported by a number of key measures and indicators which ensure that the Balanced Scorecard informs ongoing performance reporting and helps to identify areas for further improvement. The strategy map below provides an at a glance summary of the key performance indicators identified for the Single Midlothian Plan and under each of the perspective headings of the Balanced Scorecard. Detailed performance data is available in the quarterly service performance reports.

## Balanced Scorecard Strategy Map

### SMP Key Priority Indicators

Reducing the Gap in Economic circumstances

● 2 ✓ 3 📈 0 ? 0

Reducing the Gap in Health Outcomes

● 3 ✓ 7 📈 0 ? 0

Reducing the gap in Learning Outcomes

● 0 ✓ 5 📈 0 ? 0

### Customer Perspective Performance Indicators

● 8 ✓ 17 📈 24 ? 0

### Financial Health PIs

● 1 ✓ 0 📈 0 ? 0

### Learning and Growth PIs

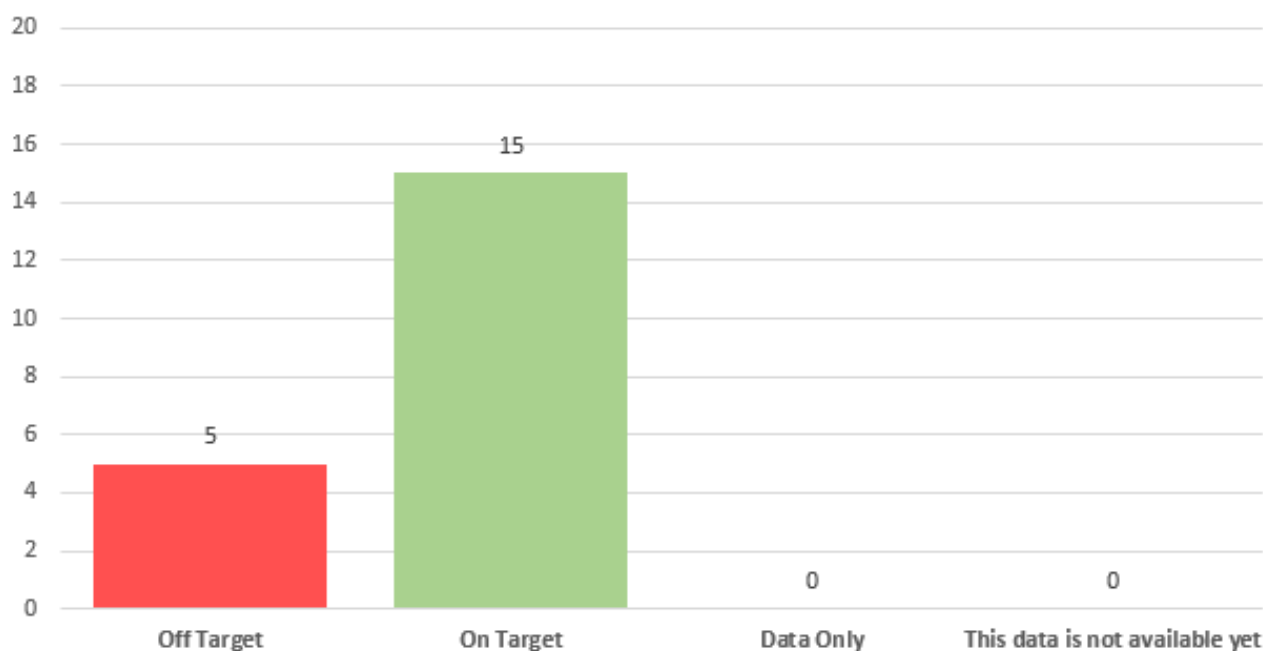
● 0 ✓ 2 📈 5 ? 0

### Internal Process PIs

● 2 ✓ 2 📈 1 ? 0

● Off Target   ✓ On Target   📈 Data Only Indicator   ? The Data is not available yet











# Single Midlothian Plan - Key Indicators








## Reducing the gap in economic circumstances

| PI Description  | 2016/ 17 2017/ 18 2018/ 19 2019/ 20 2020/ 21 H1 2021/22 |            |               |               |            |               |               |        |  |
|---|---|------------|---------------|---------------|------------|---------------|---------------|--------|--|
|   | Value   | Value      | Value         | Value         | Value      | Value         | Target        | Status | Note   |
|   |   |            |               |               |            |               |               |        |  |
| Midlothian Citizen Advice Bureaux (CABs) will generate an income maximization of £625k per quarter  | £3,820,265  | £3,704,161 | £3,352,380    | £4,401,850    | £4,226,848 | £2,378,557    | £1,250,000    | ✓      | H1 21/22: On Target  |
| Relative to Scotland, Midlothian can demonstrate a 1% reduction in child poverty. Currently the Scottish Average is 22% and Midlothian is 22.5% | -   | 22.5%      | 22.5%         | 25%           | -          | 23.9%         | 21.5%         | ✗      | H1 21/22: A reduction of 1.1% from 2019/20                   |
| Ensure the number of unemployed adults in Midlothian does not increase beyond existing levels   | -   | -          | 3.6%          | 2.7%          | -          | 3.7%          | 3.5%          | ✗      | H1 21/22: On Target  |
| Ensure the number of workless households in Midlothian does not increase beyond existing levels   | -   | -          | 12.4%         | 11.6%         | -          | 12.4%         | 12.4%         | ✓      | H1 21/22: 12.4% is similar to 18/19 levels.                  |
| Midlothian Council Welfare Rights Team (WRT) will generate an additional benefit income maximization of £625k per quarter                       | -   | -          | £4,407,373.09 | £4,411,105.24 | -          | £2,329,063.00 | £1,000,000.00 | ✓      | H1 21/22: Income maximisation targets significantly exceeded |

## Reducing the gap in health inequalities

| PI Description  | 2016/ 2017/ 2018/ 2019/ 2020/ H1 2021/22 |       |        |        |       |       |        |   |  |
|---|--|-------|--------|--------|-------|-------|--------|---|--|
|   | 17                                       | 18    | 19     | 20     | 21    |       |        |   |  |
|   | Value                                    | Value | Value  | Value  | Value | Value | Target | Status  | Note   |
| Number of people supported with Cancer (cumulative)   | -  | 240   | 316    | 265    | 239   | 175   | 125    |    | <b>H1 21/22:</b> On Target   |
| Total number of people attending activity groups hosted by Ageing Well each year  | -  | 739   | 21,446 | 21,427 | 3,895 | 8,269 | 0      |    | <b>H1 21/22:</b> Annual target in place.   |
| Number of people supported with Mental Health needs   | -  | 253   | 360    | 336    | 249   | 267   | 125    |    | <b>H1 21/22:</b> On Target   |
| Number of people referred to Weight Management Triage   | 172                                      | 159   | 215    | 509    | 190   | 270   | 100    |    | <b>H1 21/22:</b> On Target<br>Q1 = 138<br>Q2 = 132   |
| Number of people attending activity groups hosted by Midlothian Active Choices (MAC)  | -  | 7,845 | 10,280 | 9,786  | 766   | 1,820 | 5,000  |    | <b>H1 21/22:</b> Off Target<br>From 02/05 due to lockdown  |
| Number of people on Unpaid Work Programme attending at least one appointment with a nurse from the Health Inequalities Team (HIT) | -  | -     | -      | 8      | 4     | 1     | 5      |    | <b>H1 21/22:</b> Off Target<br>Due to Covid the Unpaid work team did not operate face to face during April to June and started group activity in September.  |
| Number of people in employment or education following intensive intervention  | -  | -     | -      | 6      | 14    | 5     | 3      |   | <b>H1 21/22:</b> On Target   |
| Number of assessments for home adaptations by Red Cross Link Workers, as part of mild frailty assessment.                         | -  | -     | -      | 161    | 108   | 63    | 20     |  | <b>H1 21/22:</b> On Target<br>63 referrals have received an adaptation assessment.   |
| Annual number of CAMHS referrals  | -  | 591   | 774    | 643    | 520   | 327   | 290    |  | <b>H1 21/22:</b> On Target   |
| Children & Young People's Wellbeing and Mental Health Strategy approved and in place  | -  | -     | No     | No     | -     | No    | Yes    |  | <b>H1 21/22:</b><br>The CYP Mental Health Strategic planning Group have experienced a number of unforeseen changes to membership, including the Chair. As a result, there has been a small delay in completing the strategic plan. An extension to time has been agreed by the GIRFEC Board, to 31 December 2021 |



## Reducing the gap in learning outcomes






| PI Description   | 2016/ 2017/ 2018/ 2019/ 2020/ H1 2021/22 |       |       |       |       |       |        |   |   |
|--|--|-------|-------|-------|-------|-------|--------|---|---|
|  | 17                                       | 18    | 19    | 20    | 21    |       |        |   |   |
|  | Value                                    | Value | Value | Value | Value | Value | Target | Status  | Note  |
| Increase the number of care experienced young people attending the Champions Group | -  | -     | -     | 101   | 42    | 47    | 40     |    | <b>H1 21/22:</b> On Target<br>Main group - 15<br>Mini champ - 20<br>Penicuik high champs - 5<br>Pathways champs - 2<br>1-2-1's - 5    |
| Monitor qualification levels at SVQ 1  | 88.1%                                    | 88.2% | 87.6% | 84.1% | 88.5% | 88.5% | 84.2%  |    | <b>H1 21/22:</b> On Target<br>The latest available information (Jan-Dec 2020) shows Midlothian is above the Scottish average of 86.4% |
| Monitor qualifications at SVQ level 4  | 38.5%                                    | 38.5% | 41.8% | 42.9% | 50%   | 50%   | 40.6%  |    | <b>H1 21/22:</b> On Target<br>The latest available information (Jan-Dec 2020) shows Midlothian is above the Scottish average of 49.3% |
| Monitor number of people with no qualifications                                    | 6.4%                                     | 6.4%  | 7.3%  | 9.4%  | 5.3%  | 5.3%  | 8.6%   |   | <b>H1 21/22:</b> On Target<br>The latest available information (Jan-Dec 2020) shows Midlothian is below the Scottish average of 8.0%  |
| Number of training events delivered  | -  | -     | 54    | 8     | 15    | 6     | 5      |  | <b>H1 21/22:</b> On Target  |

# Customer Perspective - Adult, Health and Care



## 1. Adult Health and Care

| Performance Indicator  | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 | Target | Status  | Note  |
|--|---------|---------|---------|---------|---------|------------|--------|---|---|
|  | Value   | Value   | Value   | Value   | Value   | Value      |        |   |   |
| Number of individuals referred through the Safe and Together approach. | -       | -       | -       | 7       | 4       | 0          | 2      |  | <b>Q2 21/22: Off Target</b><br>Referrals to the service remain low but promotion of the service has continued to be a priority. Justice workers have attended team meetings for each service at No.11 and used this as an opportunity to share information about MFF; the leaflet and referral form have been shared across the council and with partners across the CJ working group, VAWG working group and the HSCP. Children and Families Social Work have invited a Justice Team Leader to attend their meetings to promote the service. |
| Reduce the number of emergency admissions for people aged 75+          | 2,257   | 2,785   | 2,797   | 2,923   | 2,573   | 541        |        |  | <b>Q2 21/22: Data only</b>  |

| Performance Indicator  | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |        |   |   |
|--|---------|---------|---------|---------|---------|------------|--------|---|---|
|  | Value   | Value   | Value   | Value   | Value   | Value      | Target | Status  | Note  |
| Total number of carers receiving an adult carer support plan of their care needs (cumulative)    | -       | -       | -       | 665     | 1,623   | 968        |        |  | <b>Q2 21/22:</b> Data only  |
| Number of individuals accessing the Midlothian Access Point                                      | 395     | 949     | 1,092   | 911     | 605     | 368        | 0      |  | <b>Q2 21/22:</b> On Target  |
| Number of Health & Social Care staff who have participated in face to face or on-line training   | N/A     | 1,741   | 1,595   | 979     | 1,171   | 185        |        |  | <b>Q2 21/22:</b> Data only<br>Training data for Adult and Social Care.<br>Data source: Learnpro                       |
| Decrease the percentage of falls which result in a hospital admission for clients aged 65+       | 5.03%   | 3.8%    | 7%      | 4.4%    | 3.77%   | 4%         | 6%     |  | <b>Q2 21/22:</b> On Target<br>12 out of 296 hospital admissions (65+) as a result of falls continues to be monitored. |
| Maintain at zero the number of patients delayed in hospital for more than 2 weeks at census date | 11      | 16      | 20      | 1       | 4       | 4          | 0      |  | <b>Q2 21/22:</b> Off Target   |

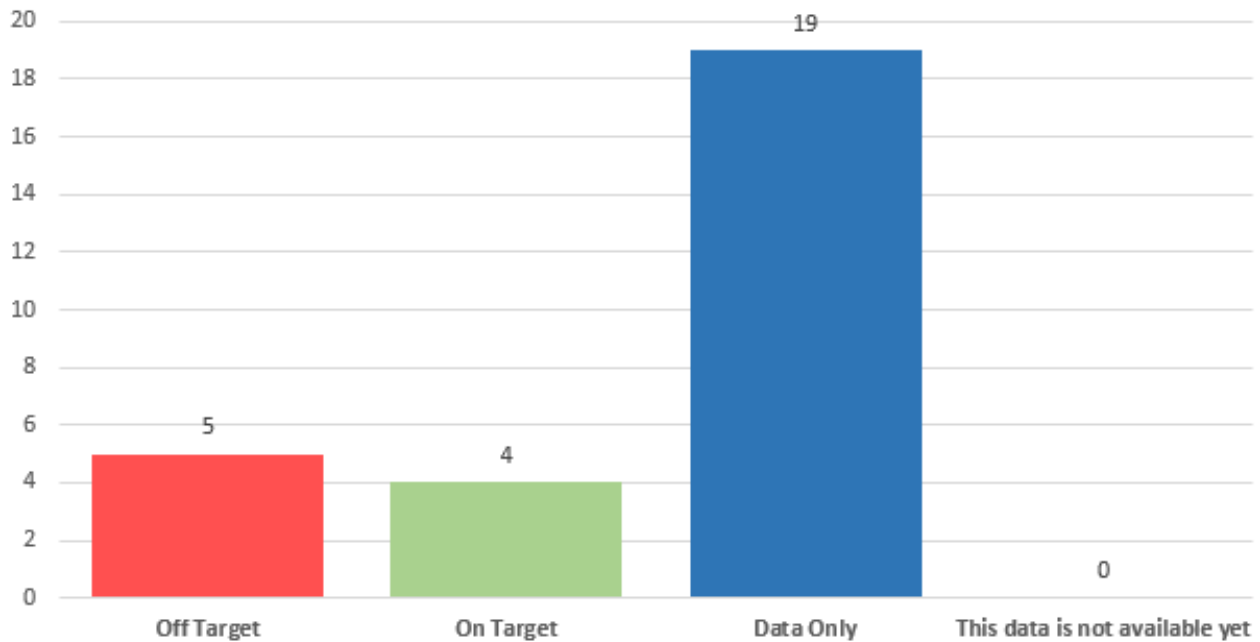
# Customer Perspective - Community Safety













## 2. Community Safety

















| Performance Indicator   | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |        |        |  |
|---|---------|---------|---------|---------|---------|------------|--------|--------|--|
|   | Value   | Value   | Value   | Value   | Value   | Value      | Target | Status | Note   |
| % of satisfactory complete Community Payback Orders                         | 78.7%   | 67%     | 68%     | 61.8%   | 78%     | 81.8%      | 80%    | ✓      | <b>Q2 21/22:</b> On Target<br>18 out of 22 community payback order successfully completed in period July to September. Satisfactory completion is affected by non attendance of offenders, and this is outwith the control of Council. |
| Percentage of all street light repairs completed within 7 days (cumulative) | 98.5%   | 90.6%   | 100%    | 80.5%   | 94%     | 100%       | 88.5%  | ✓      | <b>Q2 21/22:</b> On Target<br>During Q2 all faults recorded were repaired within 7 days.   |


# Customer Perspective - GIRFEC



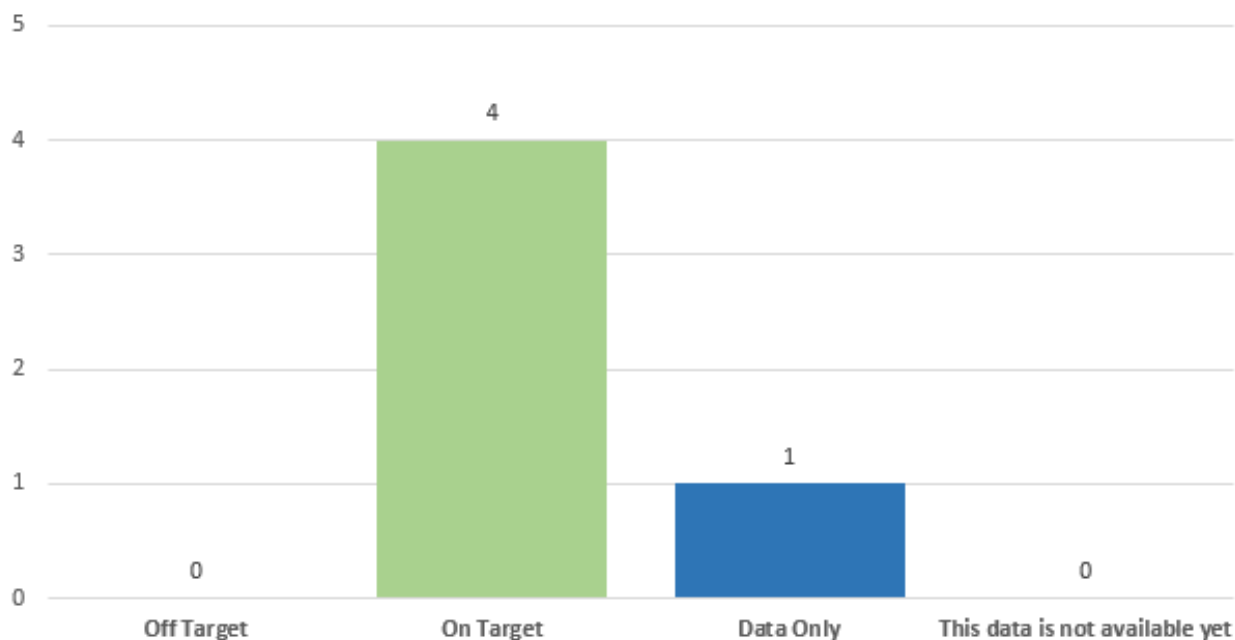
## 3. Getting it Right for Every Midlothian Child

| Performance Indicator  | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |        |   |  |
|--|---------|---------|---------|---------|---------|------------|--------|---|--|
|  | Value   | Value   | Value   | Value   | Value   | Value      | Target | Status  | Note   |
| Number of outcome focused assessments undertaken (cumulative)  | 180     | 1,006   | 1,241   | 1,478   | 1,045   | 567        | -      |  | Q2 21/22: Data Only Q1 - 299, Q2 - 268               |
| Number of referrals to the duty service (cumulative)   | 4,764   | 4,893   | 5,519   | 5,930   | 6,043   | 3,794      | -      |  | Q2 21/22: Data Only Q1 - 1893, Q2 - 1901             |
| Number of foster carers going through prep groups on a quarterly basis (cumulative)                    | 43      | 53      | 23      | 28      | 27      | 8          | -      |  | Q2 21/22: Data Only                                  |
| Number of new foster carers approved (cumulative)  | 9       | 5       | 5       | 1       | 2       | 0          | -      |  | Q2 21/22: Data Only                                  |
| Number of foster carers de-registered quarterly (cumulative)   | 5       | 3       | 4       | 2       | 5       | 2          | -      |  | Q2 21/22: Data Only                                  |
| Number of permanence LAAC Reviews happening quarterly (cumulative)                                     | 34      | 16      | 37      | 29      | 23      | 8          | -      |  | Q2 21/22: Data Only                                  |
| Number of children matched in quarter – (average months from perm LAAC to matching panel) (cumulative) | 19      | 12      | 6       | 7       | 2       | 2          | -      |  | Q2 21/22: Data Only                                  |
| Number of places taken at residential houses - capacity 12   | 10      | 10      | 7       | 12      | 12      | 12         | -      |  | Q2 21/22: Data Only                                  |
| The number of children living in kinship care  | 171     | 66      | 53      | 70      | 61      | 57         | -      |  | Q2 21/22: Data Only Not cumulative - snapshot figure |
| The number of children living in foster care   | 171     | 86      | 63      | 68      | 65      | 57         | -      |  | Q2 21/22: Data Only                                  |

| Performance Indicator   | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |        |   |   |
|---|---------|---------|---------|---------|---------|------------|--------|---|---|
|   | Value   | Value   | Value   | Value   | Value   | Value      | Target | Status  | Note  |
|   |         |         |         |         |         |            |        |   | Not cumulative - snapshot figure  |
| Number of Midlothian children on the Child Protection Register  | 54      | 36      | 51      | 53      | 36      | 28         | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| Rate per 1,000 population of Midlothian children on the Child Protection Register in relation to the Scottish average | 3.2     | 2.2     | 3       | 3       | 2       | 1.5        | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| % of Child Protection plans which have integrated chronology  | 79%     | 94%     | 96%     | 99%     | 93%     | 92%        | -      |    | <b>Q2 21/22:</b> Data Only  |
| Rate per 1,000 of Midlothian Looked After Children AT HOME in comparison with the Scottish average                    | 3.7     | 3.7     | 4.2     | 3.1     | 1.6     | 1.6        | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| Rate per 1,000 of Midlothian Looked After and Accommodated Children in comparison with the Scottish average           | 10.7    | 9.4     | 7       | 7.9     | 7.3     | 6.5        | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| The number of looked after children and young people not in residential placed outwith Midlothian                     | 51      | 24      | 16      | 13      | 9       | 11         | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| The number of looked after children and young people placed in Residential School outwith Midlothian                  | 10      | 8       | 6       | 4       | 3       | 2          | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| The number of young people who are allocated/engage with Through Care and After Care service                          | 88      | 90      | 65      | 56      | 51      | 56         | -      |    | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure  |
| Child Protection: % of Core Group meetings held within a 8 week period.   | 80%     | 100%    | 99%     | 98%     | 100%    | 100%       | 100%   |   | <b>Q2 21/22:</b> On Target  |
| Child Protection: % of Core Group meetings held within 15 days for Initial  | 87%     | 93%     | 87%     | 79%     | 89%     | 92%        | 100%   |  | <b>Q2 21/22:</b> Off Target<br>2 core groups held out with time scale   |
| Improve Primary School attendance   | 95%     | 94.5%   | 94.86 % | 94.04 % | 95.06 % | 93.09 %    | 95%    |  | <b>Q2 21/22:</b> Data Only<br>Information for Primaries to 30/09/2021, due to pupils isolating as a result of contact tracing   |
| Improve Secondary School Attendance   | 90.24 % | 89.4%   | 89.34 % | 89.34 % | 90.97 % | 90.01 %    | 91.5%  |  | <b>Q2 21/22:</b> Data Only<br>Information for Secondaries to 30/09/2021, due to pupils isolating as a result of contact tracing |
| Reduce exclusions in Primary schools (Rate per 1,000)   | 101     | 74      | 94      | 8.44    | 6.16    | 0.49       | 15     |  | <b>Q2 21/22:</b> Data Only<br>Information for Primaries to 30/09/2021   |
| Reduce exclusions in Secondary schools (Rate per 1,000)   | 318     | 299     | 210     | 14.8    | 13.7    | 2.3        | 40     |  | <b>Q2 21/22:</b> Data Only<br>Information for Secondaries to 30/09/2021   |
| Average primary school attendance   | 95%     | 94.47 % | 94.86 % | -       | 95.06 % | 93.09 %    | 95%    |  | <b>Q2 21/22:</b> Data Only<br>Information for Primaries to 30/09/2021, due to pupils isolating as a result of contact tracing   |
| Average secondary school attendance   | 90.24 % | 89.39 % | 89.34 % | -       | 90.97 % | 90.01 %    | 91.5%  |  | <b>Q2 21/22:</b> Data Only<br>Information for Secondaries to  |

| Performance Indicator   | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |         |   |  |
|---|---------|---------|---------|---------|---------|------------|---------|---|--|
|   | Value   | Value   | Value   | Value   | Value   | Value      | Target  | Status  | Note   |
|   |         |         |         |         |         |            |         |   | 30/09/2021, due to pupils isolating as a result of contact tracing |
| Number of Children looked after away from home  | 200     | 181     | -       | -       | 150     | 133        | -       |  | <b>Q2 21/22:</b> Data Only<br>Not cumulative - snapshot figure     |
| Percentage of Midlothian Care Experienced school leavers progressing to positive destinations | 76.92 % | 76.92 % | 69.23 % | 62.5%   | 92.31 % | 92.31 %    | 82.43 % |  | <b>Q2 21/22:</b> On Target   |

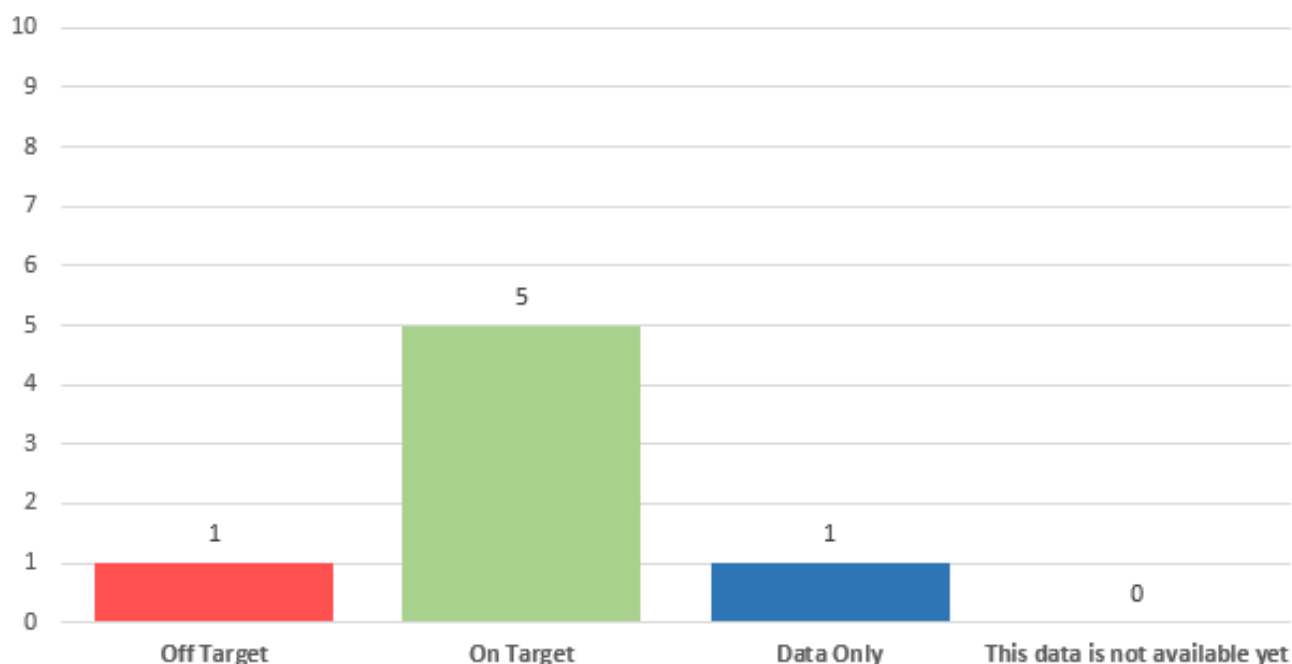
# Customer Perspective - Improving Opportunities for Midlothian



## 4. Improving Opportunities for Midlothian




| Performance Indicator  | 2016/17    | 2017/18    | 2018/19    | 2019/20    | 2020/21    | Q2 2021/22 |            |        |                     |
|--|------------|------------|------------|------------|------------|------------|------------|--------|---------------------|
|  | Value      | Value      | Value      | Value      | Value      | Value      | Target     | Status | Note                |
| Midlothian Citizen Advice Bureaux (CABs) will generate an income maximization of £625k per quarter | £3,820,265 | £3,704,161 | £3,352,380 | £4,401,850 | £4,226,848 | £2,378,557 | £1,250,000 | ✓      | Q2 21/22: On Target |
| % of those leaving school secure a positive destination  | 95.1%      | 94.35%     | 94.35%     | 93.81%     | 94.47%     | 94.47%     | 94.47%     | ✓      | Q2 21/22: On Target |
| Number of Midlothian Active Choices (MAC) attendees during quarter (quarterly)                     | 5,253      | 9,263      | 11,433     | 1,997      | -          | 1,086      | -          | 📊      | Q2 21/22: Data only |
| Number of activities offered by Ageing Well to 50+ age groups (quarterly)                          | 23         | 23         | 15         | 15         | 19         | 39         | 15         | ✓      | Q2 21/22: On Target |
| Tone zone retention rate (quarterly)   | 55.25%     | 49.25%     | 53.5%      | 55%        | 52%        | 74%        | 55%        | ✓      | Q2 21/22: On Target |

# Customer Perspective - Sustainable Growth and Housing

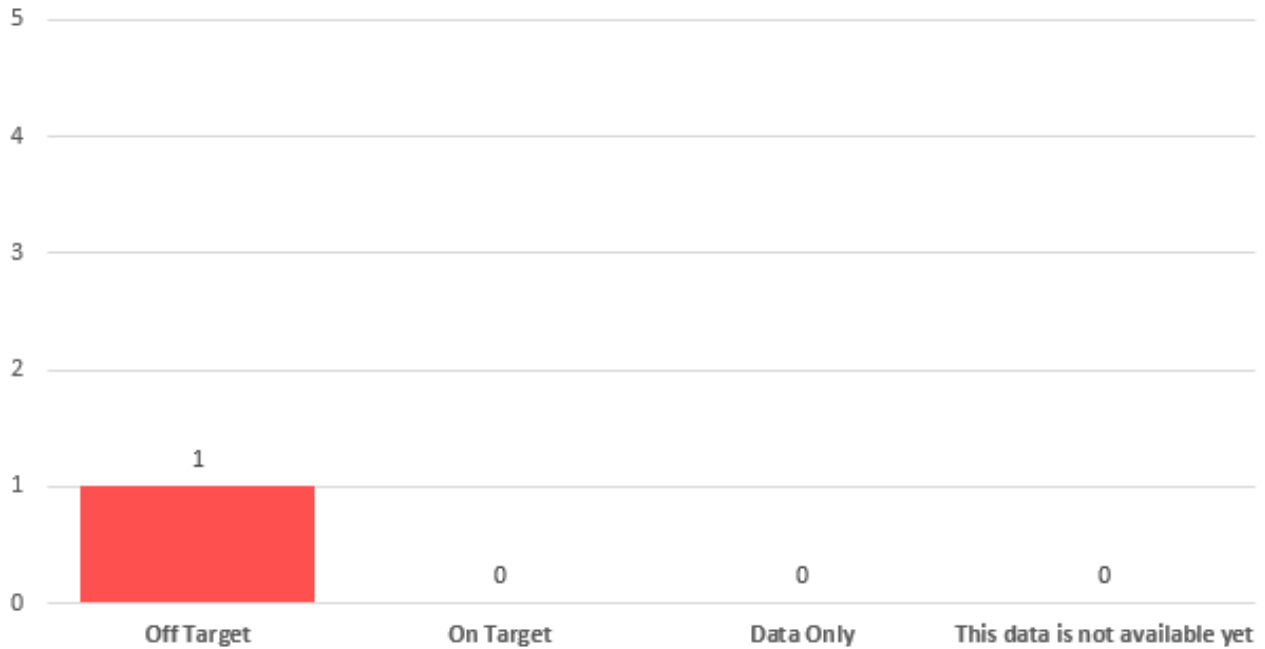


## 5. Sustainable Growth

| Performance Indicator  | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |         | Status | Note  |
|--|---------|---------|---------|---------|---------|------------|---------|--------|---|
|  | Value   | Value   | Value   | Value   | Value   | Value      | Target  |        |   |
| Number of environmental awards e.g. Green flags  | 5       | 5       | 2       | 2       | 1       | 1          | 1       | ✓      | Q2 21/22: Complete Green flag received this quarter for the Dalkeith to Penicuik walkway.   |
| Percentage of Council fleet which is 'Green' (cumulative)  | 4.68%   | 5.41%   | 5.34%   | 8.2%    | 8.4%    | 8.2%       | 8%      | ✓      | Q2 21/22: On Target<br>Going forward Fleet replacement will include a proportion of electric vehicles.  |
| Re-let time permanent properties (calendar days)   | 48 days | 50 days | 49 days | 54 days | 46 days | 50 days    | 45 days | ✗      | Q2 21/22: Off Target<br>11 properties requiring extensive works due to property condition and delays with utility connections.  |
| Percentage of the Councils housing stock meeting the 'Modern facilities & services' Scottish Housing Quality Standard criteria | 100%    | 100%    | 100%    | 98.4%   | 98.4%   | 98.4%      | 98.4%   | ✓      | Q2 21/22: On Target<br>Work to bring the percentage of Councils housing stock that meets Scottish Quality Standards criteria will commence at the start of Q3 after Covid related delays to meet annual target. |

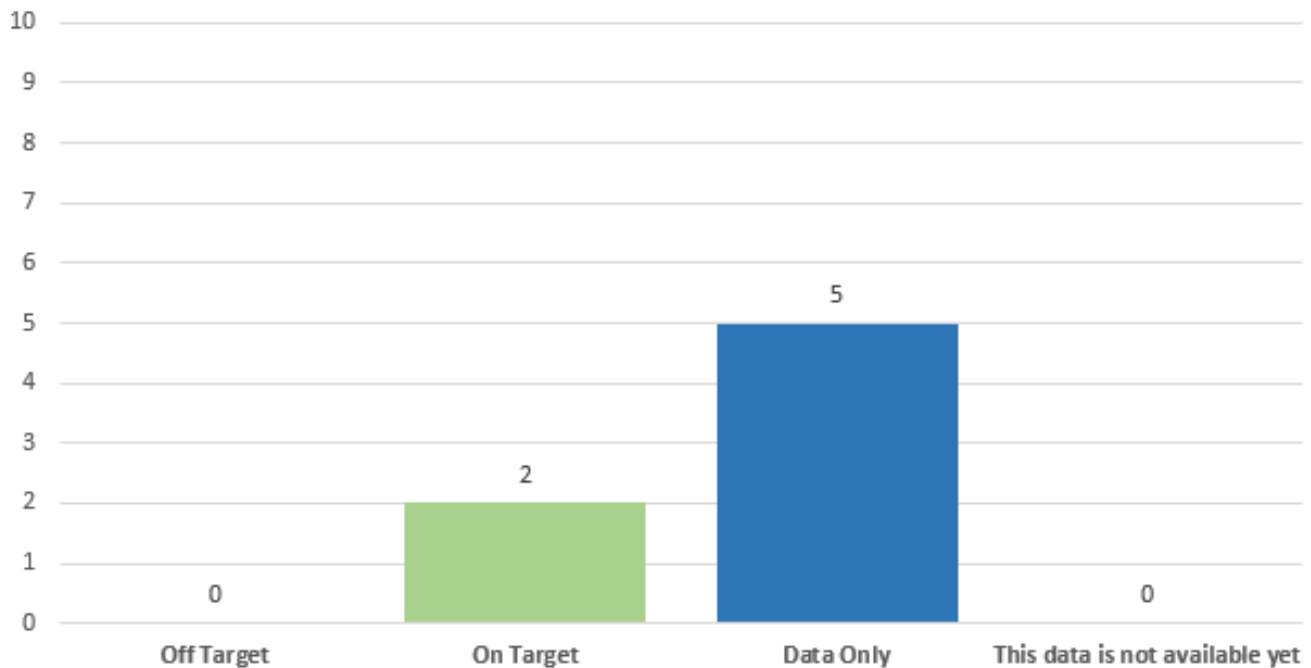
| Performance Indicator  | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 | Q2 2021/22 |        |   |  |
|--|---------|---------|---------|---------|---------|------------|--------|---|--|
|  | Value   | Value   | Value   | Value   | Value   | Value      | Target | Status  | Note   |
| Number of New Business Start Ups (LGBF)  | 165     | 202     | 153     | 149     | N/A     | 28         |        |  | <b>Q2 21/22:</b> Data Only   |
| Corporate Indicator - Percentage of the Councils housing stock meeting the Scottish Housing Quality Standard criteria (LGBF) | 96.04 % | 96.05 % | 96.1%   | 94.3%   | 96.4%   | 96.4%      | 96.4%  |  | <b>Q2 21/22:</b> On Target<br>96.4% of Midlothian Council houses have modern facilities and services. Work to bring the percentage of Councils housing stock that meets Scottish Quality Standards criteria will commence at the start of Q3 after Covid related delays to meet annual target. |
| % of total road network resurfaced (cumulative)  | 1.1%    | 1.3%    | 1.67%   | 0.85%   | 0.54%   | 0.47%      | 0.32%  |  | <b>Q2 21/22:</b> On Target<br>3.2km of carriageway resurfaced to end of Q2.  |



# Financial Health Perspective








| Short Name  | 2016/<br>17 | 2017/<br>18 | 2018/<br>19 | 2019/<br>20 | 2020/<br>21 | Q2 2021/22 |        |        |  |
|---|-------------|-------------|-------------|-------------|-------------|------------|--------|--------|--|
|   | Value       | Value       | Value       | Value       | Value       | Value      | Target | Status | Note   |
| Corporate Indicator - Percentage of invoices sampled and paid within 30 days (LGBF) | 87.4%       | 93.1%       | 91.1%       | 89.6%       | 92.3%       | 93.1%      | 95.0%  |        | <b>Q2 21/22:</b> Off Target 93.1% of invoices were paid on time for Q2 2021/22. Work continues to resolve barriers in services to help ensure all invoices are paid within the 30 days |

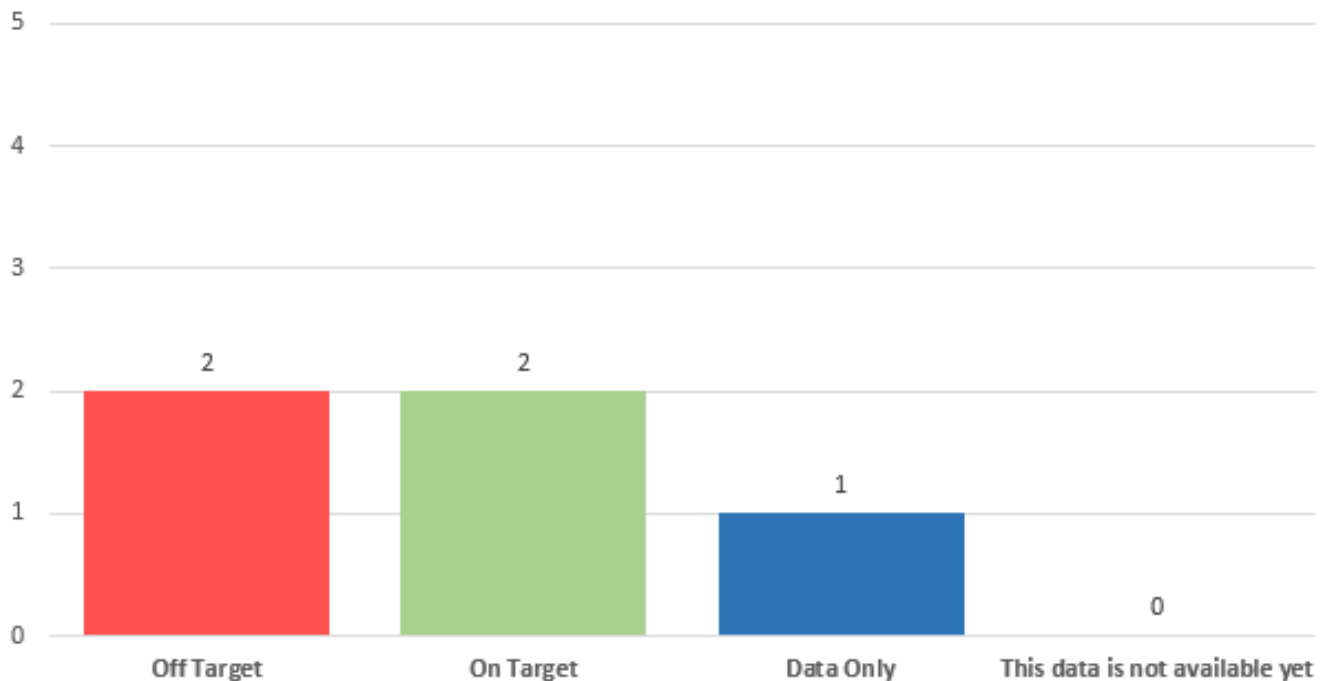
# Learning and Growth Perspective








| Short Name   | 2016/<br>17 | 2017/<br>18 | 2018/<br>19 | 2019/<br>20 | 2020/<br>21 | Q2 2021/22 |        |   |  |
|--|-------------|-------------|-------------|-------------|-------------|------------|--------|---|--|
|  | Value       | Value       | Value       | Value       | Value       | Value      | Target | Status  | Note   |
| Corporate Indicator - Sickness Absence Days per Employee (All employees) | 8.34        | 7.5         | 8.55        | 9.7         | 7.26        | 4.81       | -      |  | <b>Q2 21/22:</b> Data only Sickness absence days have increased compared to Q2 of last year. Up to end of January 2021, Covid related sickness absence or otherwise has been recorded as special leave and not included in the calculation of average days lost. From 1st of February 2021 Covid sickness absence is now being recorded via the usual sickness procedures with the exception of special leave granted for up to 14 days for isolation which could be attributable to the increase in days lost. This change contributed in an increase in day lost across the service. |
| Percentage of staff turnover (including teachers)                        | 10.48 %     | 10.3%       | 10.38 %     | 9.22%       | 5.9%        | 3.2%       | -      |  | <b>Q2 21/22:</b> Data only We track our employee turnover  |

| Short Name   | 2016/<br>17 | 2017/<br>18 | 2018/<br>19 | 2019/<br>20 | 2020/<br>21 | Q2 2021/22 |        |   |   |
|--|-------------|-------------|-------------|-------------|-------------|------------|--------|---|---|
|  | Value       | Value       | Value       | Value       | Value       | Value      | Target | Status  | Note  |
|  |             |             |             |             |             |            |        |   | rates on a half yearly basis by expressing it as a percentage of employees overall when taking account of all leavers. Turnover varies through the year with an expected increase over the summer months. This reflects teachers and other school based staff retiring or moving to new roles at the start of the new academic year. Consideration of the levels of turnover across services, locations and particular groups of employees helps to inform workforce planning and resourcing. |
| Progress against Council's mainstream report (Equality and Diversity)  | 100%        | 100%        | 100%        | 100%        | 100%        | 50%        | 50%    |    | <b>Q2 21/22:</b> Progress reflects year 1 of a 2 year timeframe.  |
| Corporate Indicator - The Percentage of council employees in top 5% of earners that are women (LGBF)                           | 47.0%       | 49.0%       | 49.2%       | 51.0%       | 55.1%       | 53.2%      | 50.0%  |  | <b>Q2 21/22:</b> On Target  |
| Corporate Indicator - The gender pay gap between average hourly rate of pay for male and female - all council employees (LGBF) | 2.97%       | 2.32%       | 3.94%       | 3.06%       | 2.7%        | 2.64%      | -      |  | <b>Q2 21/22:</b> Data only<br>The gender pay gap indicator is a measurement of average female pay versus average male pay within the organisation and the figures show that the Council has more male staff at higher rates of pay by 2.64%.  |
| Corporate Indicator - Teachers Sickness Absence Days (LGBF)  | 4.90 days   | 4.59 days   | 5.15 days   | 5.77 days   | 3.47 days   | 1.86 days  | -      |  | <b>Q2 21/22:</b> Data only<br>Sickness absence levels continue to be a challenge as we navigate through the COVID pandemic and as the effects of longer term Covid infections are realised.   |
| Corporate Indicator - Local Government Employees (except teachers) sickness absence days (LGBF)                                | 9.64 days   | 8.59 days   | 9.86 days   | 11.19 days  | 8.76 days   | 5.99 days  | -      |  | <b>Q2 21/22:</b> Data only<br>Sickness absence levels continue to be a challenge as we navigate through the COVID pandemic and as the effects of longer term Covid infections are realised.   |

# Internal Processes Perspective



| Short Name  | 2019/<br>20 | 2020/<br>21 | Q2 2021/22 |        |   |   |
|---|-------------|-------------|------------|--------|---|---|
|   | Value       | Value       | Value      | Target | Status  | Note  |
| % of internal/external audit actions progressing on target.         |             | 95.4 %      | 90%        | 85%    |  | <b>Q2 21/22:</b> On Target  |
| % of high risks that have been reviewed in the last quarter         |             | 100%        | 100%       | 100%   |  | <b>Q2 21/22:</b> On Target  |
| Total number of complaints received (quarterly)                     |             | 7,337       | 1,996      |        |  | <b>Q2 21/22:</b> Data Only  |
| Percentage of complaints at stage 1 complete within 5 working days  | 87.61 %     | 91.32 %     | 87.1%      | 95%    |  | <b>Q2 21/22:</b> Off Target<br>1724 out of 1979 complaints were complete within 5 working days. |
| Percentage of complaints at stage 2 complete within 20 working days | 60.87 %     | 78.57 %     | 71.4%      | 95%    |  | <b>Q2 21/22:</b> Off Target<br>10 out of 14 complaints were complete within 20 working days.    |