

Digital Innovation & Efficiency Committee

Item No.....

Report title:	IMT Performance Indicators
Date of meeting:	22 January 2018
Responsible Chief Officer:	Executive Director, Community and Environmental Services, Executive Director, Finance and Commercial Services
Strategic impact Robust performance management is key to ensuring that the organisation works both efficiently and effectively to develop and deliver services that represent good value for money and which meet identified need. This report provides an update to the new Committee for the IMT Department (and other related service areas) performance monitoring and management. It also provides the Committee with an update on current trends, some of which were previously reported to the Policy and Resources Committee.	

Executive summary

This is the third performance management report to this committee and incorporates elements of the revised Performance Management System, which was implemented as of 1 April 2016. There are currently 8 vital signs indicators under the remit of this committee ("CES – (CIL) The number of active 'My Norfolk' accounts" having been added since the last report). Work continues to see what other data may be available to report to committee on a more frequent basis (currently "CES - (CIL) Customer Satisfaction with Web Access" continues to be developed) and these will in turn be considered for inclusion as vital signs indicators.

Performance is reported on an exception basis using a report card format, meaning that only those vital signs that are performing poorly or where performance is deteriorating are presented to committee. To enable Members to have oversight of performance across all vital signs, all report cards (which is where more detailed information about performance is recorded) will be made available to view upon request.

Of the 8 vital signs indicators that fall within the remit of this committee, none have met the exception criteria.

Recommendations:

- 1. Note the information provided in this report.**
- 2. To consider whether there is any other performance data/information relating to the Committee's remit, in addition to the 8 vital signs set out in this report, which the Committee would wish to review on a regular basis.**

1. Introduction

- 1.1. This paper presents up to date performance management information for those 'vital signs' performance indicators that were agreed previously by the P and R Committee for the day to day operational service in IMT, as well as other vital signs identified as having relevance and/or significance to the remit of this committee.
- 1.2. The paper highlights any key issues or trends for members to note with more detail in the Appendices. This report contains:
 - A Red/Amber/Green rated dashboard overview of performance across all 7 vital signs indicators
 - Report cards for all vital signs
 - Subsequent reports will only contain report cards for measures that have met the exception reporting criteria.

2. Performance dashboard

- 2.1. The performance dashboard provides a quick overview of Red/Amber/Green rated performance across all 8 vital signs. This then complements the exception reporting process and enables committee members to check that key performance issues are not being missed.
- 2.2. The vital signs indicators are monitored during the year and are subject to review when processes are amended to improve performance, to ensure that the indicator correctly captures future performance.
- 2.3. The current exception reporting criteria are as below:
 - Performance is off-target (Red RAG rating or variance of 5% or more)
 - Performance has deteriorated for three consecutive periods (months/quarters/years)
 - Performance is adversely affecting the council's ability to achieve its budget
 - Performance is adversely affecting one of the council's corporate risks.
 - Performance is off-target (Amber RAG rating) and has remained at an Amber RAG rating for three periods (months/quarters/years)'.
- 2.4. Digital Innovation and Efficiency Committee performance dashboard:

NOTES:

In most cases the RAG colours are set as: Green being equal to or better than the target; Amber being within 5% (not percentage points) worse than the target; Red being more than 5% worse than target. 'White' spaces denote that data will become available; 'grey' spaces denote that no data is currently expected, typically because the Indicator is being finalised.

The target value is that which relates to the latest measure period result in order to allow comparison against the RAG colours. A target may also exist for the current and/or future periods.

Monthly	Bigger or Smaller is better	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct 17	Nov 17	Dec 17	Target
(CIL) Number of active My Norfolk accounts	Bigger	5,705	6,376	6,924	7,457	7,911	8,572	9,432	10,321	11,156	12,162	13,054	13,933	14,755	
(CIL) Customer satisfaction with web access	Bigger					76.3%	69.6%	70.5%	66.1%	64.2%	72.1%	71.5%	70.0%	73.7%	70.0%
(IMT) Abandonment Rate - % of calls abandoned on the ICT Service Desk	Smaller	7.0%	11.0%	7.0%	12.0%	16.8%	8.0%	9.0%	8.0%	6.8%	7.0%	8.5%	14.2%	33.9%	10.0%
		229 / 2996	431 / 5661	283 / 3760	547 / 4676	740 / 4392	476 / 6027	531 / 5969	321 / 4110	282 / 4175	252 / 3615	436 / 5107	511 / 4266	961 / 2927	
(IMT) ICT incidents per customer per month	Smaller	1.0	1.5	1.3	1.6	1.3	1.8	1.8	1.4	1.5	1.2	1.2	1.2	0.9	1.5
(IMT) First line fix	Bigger	43.0%	40.0%	36.0%	32.9%	34.6%	34.0%	28.7%	26.0%	27.4%	30.4%	26.9%	24.8%	29.3%	28.0%
		1262 / 2947	1965 / 4957	1363 / 3795	1510 / 4598	1097 / 3175	1017 / 3018	1304 / 4542	1132 / 4259	1000/92 / 3769	1157 / 3610	1003 / 3734	1063 / 4394	977 / 3331	
(IMT) Incidents resolved within SLA	Bigger	73.0%	80.0%	75.0%	82.2%	80.7%	75.4%	78.0%	77.0%	76.4%	81.0%	82.3%	83.2%	79.1%	80.0%
			3090 / 4060	3059 / 4064	3567 / 4363	2466 / 3059	2523 / 3477	2636 / 3703	2555 / 3262	2427 / 3175	2519 / 3232	2477 / 3010	2575 / 3096	2167 / 2741	
(IMT) Customer satisfaction with ICT services	Bigger			6.4	6.4	6.5	6.2	6.2	6.4	6.5	6.5	6.6	6.5	6.5	6
(IMT) Systems availability	Bigger	98.0%	99.0%	99.0%	98.0%	95.1%	94.0%	97.6%	98.9%	99.0%	99.0%	99.0%	99.2%	99.0%	99.0%
		83.5% / 84.5%			121.2% / 124.2%	102.7% / 106.0%	101.0% / 106.0%	116.0% / 116.5%	112.2% / 113.4%	116.5% / 116.5%	112.5% / 113.4%	116.5% / 116.5%	117.5% / 116.5%	102.5% / 102.5%	
Quarterly / Termly	Bigger or Smaller is better	Dec 14	Mar 15	Jun 15	Sep 15	Dec 15	Mar 16	Jun 16	Sep 16	Dec 16	Mar 17	Jun 17	Sep 17	Dec 17	Target
(BBFN) % of Norfolk homes with superfast Broadband coverage	Bigger				83.0%		84.0%			86.0%	88.0%	89.0%	89.0%		88.0%
					n/a / n/a		n/a / n/a			n/a / n/a		n/a / n/a			

3. Report Cards

- 3.1. A report card has been produced for each vital sign. These provide a succinct overview of performance and outlines what actions are being taken to maintain or improve performance. The report card follows a standard format that is common to all committees.
- 3.2. Each vital sign has a lead officer, who is directly accountable for performance, and a data owner, who is responsible for collating and analysing the data on a monthly basis. The names and positions of these people are clearly specified on the report cards.
- 3.3. Vital signs are reported to committee on an exceptions basis. There are no exceptions this month and therefore there are no report cards included with this report. The report cards for those vital signs that do not meet the exception criteria on this occasion, and so are not formally reported, are also collected and are available to view if requested.

4. IMT programme of work

- 4.1. We are currently prioritising the projects around Norfolk Futures. As a result the IMT programme of work will be updated to the committee in a future report when the outcome of the prioritisation work is known.

5. Recommendations

- 5.1. Committee Members are asked to:

- Review and comment on the performance data, information and analysis presented in the vital sign dashboard and associated report cards and determine whether the recommended actions identified are appropriate or whether another course of action is required (refer to list of possible actions in Appendix 1).

In support of this, Appendix 1 provides:

- A set of prompts for performance discussions
- Suggested options for further actions where the committee requires additional information or work to be undertaken

6. Financial implications

- 6.1. There are no significant financial implications arising from the development of the revised performance management system or the performance management report.

7. Issues, risks and innovation

- 7.1. There are no significant issues, risks and innovations arising from the development of the revised performance management system or the performance management report.

Officer Contact

If you have any questions about matters contained in this paper or want to see copies of any assessments, eg equality impact assessment, please get in touch with:

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Performance discussions and actions

Reflecting good performance management practice, there are some helpful prompts that can help scrutinise performance, and guide future actions. These are set out below.

Suggested prompts for performance improvement discussion

In reviewing the vital signs that have met the exception reporting criteria and so included in this report, there are a number of performance improvement questions that can be worked through to aid the performance discussion, as below:

1. Why are we not meeting our target?
2. What is the impact of not meeting our target?
3. What performance is predicted?
4. How can performance be improved?
5. When will performance be back on track?
6. What can we learn for the future?

In doing so, committee members are asked to consider the actions that have been identified by the vital sign lead officer.

Performance improvement – suggested actions

A standard list of suggested actions have been developed. This provides members with options for next steps where reported performance levels require follow-up and additional work.

All actions, whether from this list or not, will be followed up and reported back to the committee.

Suggested follow-up actions

The suggested 'follow up actions' have been amended, following on from discussions at the Communities Committee meeting on 11 May 2016, to better reflect the roles and responsibilities in the Committee System of governance.

	Action	Description
1	Approve actions	Approve actions identified in the report card and set a date for reporting back to the committee
2	Identify alternative/additional actions	Identify alternative/additional actions to those in the report card and set a date for reporting back to the committee
3	Refer to Departmental Management Team	DMT to work through the performance issues identified at the committee meeting and develop an action plan for improvement and report back to committee
4	Refer to committee task and finish group	Member-led task and finish group to work through the performance issues identified at the committee meeting and develop an action plan for improvement and report back to committee
5	Refer to County Leadership Team	Identify key actions for performance improvement and refer to CLT for action
6	Refer to Policy and Resources Committee	Identify key actions for performance improvement that have 'whole Council' performance implications and refer them to the Policy and Resources committee for action.

