

Communities Committee

Item No.....

Report title:	Performance monitoring report
Date of meeting:	16 March 2016
Responsible Chief Officer:	Tom McCabe, Executive Director of Communities and Environmental Services
Strategic impact Robust performance and risk 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.	

Executive summary

This report provides an overview of the key performance issues facing those services that are covered by this committee in Q3 (October to December 2015). The risks presented in this report are the latest risks from March 2016.

This report also presents a draft list of vital signs performance indicators. These have been developed as part of a new performance management system (as described in previous performance reports), and the report outlines how members have fed into the development of this through a series of workshops.

Of the 43 indicators in the dashboard, 6 are not reporting this quarter. Most of these are new measures that are still under development. Of the 37 remaining indicators we are reporting this quarter:

- 19 are RAG rated green
- 8 are rated red
- 4 are rated amber
- 6 indicators are surveillance measures so do not have a RAG rating.

Areas of strong performance include:

- The delivery of 'dementia friendly sessions' by Public Health
- Work by the Trading Standards service
- Customer Services
- Visits to Norfolk's Museums.

There are some areas in which performance is more challenging. In summary, these are:

- Sickness absence
- Referrals to the Health Trainer Service from target populations
- Registration of deaths.

Of the 16 risks on the risk register for this committee, 3 risks are considered to be 'in scope' – this means a score of 12 or more and rated amber and red for prospect. There are no risks for this Committee that are of corporate significance.

Recommendations:

1. Review and comment on the performance and risk information
2. Consider any areas of performance or risk that require a more in-depth analysis
3. Confirm, subject to comment and any further work, this committee's updated set of performance indicators.

1. Proposal

- 1.1. This paper provides an overview of Q3 performance for the service areas covered by the Communities Committee, with the latest risk information available from March 2016.
- 1.2. Given extra detail within this paper around the performance framework, the Q3 performance and risk reporting element of this paper is deliberately brief and focuses on the key performance issues.
- 1.3. The Q3 Communities Committee performance dashboard contains 43 measures in total, and 31 measures with targets. Of these:
- 8 are significantly off target (more than 5%) – rated red
 - 4 are just off target (within 5%) – rated amber
 - 19 are at, or better than, target – rated green.

The performance dashboard contains 33 measures with a direction of travel – showing if performance this quarter has improved or got worse when compared to an earlier quarter or year. Of those measures:

- 15 have got worse – red arrow
 - 18 have improved – green arrow.
- 1.4. The full departmental risk register contains 18 risks, with 5 of these risks with both a current score of 12 or more and the prospect of meeting the target score by the target date at red or amber, which fall into the exception reporting category and appear on the risk register. There are no risks for this Committee that are of corporate significance.

2. Key performance issues

- 2.1. This report details performance and risk on the basis of exception reporting. As such, the focus is upon areas of performance and risk that are either red or amber rated. The performance dashboard appended in Appendix 1 and risk data, information and analysis in Appendices 2 and 3.

Red measures

- 2.2. **Sickness absence** – Percentage of time lost to sickness in the last 12 months (Excludes Fire personnel) – in the 12 months to December 2015, sickness absence for the Community and Environmental Services department was 2.62%. This has improved from 2.99% in the 12 months to September 2015. The CES target is 2.4% and the NCC target is 3.41%.

The figures by CES service area are as follows:

CES Services	% Lost Time - rolling 12 Months to December 2015
Active Norfolk	0.09%
Norfolk Community Learning Services	2.00%
Business Support & Development	2.54%
Community Safety & Fire	2.00%
Customer Services	4.71%

Economic Development & Strategy	0.77%
Environment & Planning	2.41%
Highways & Transport	2.72%
Norfolk Library and Information Service	2.67%
Norfolk Museums and Arts Service	2.29%
Norfolk Record Office	0.78%
CES total	2.62%
CES target	2.40%
NCC target	3.41%

Those service areas within CES that do not report to this committee, reporting instead to the EDT Committee or the Economic Development sub-committee, are shaded out.

- 2.3. There are two services that have higher levels of sickness absence. The percentage of time lost to sickness in the last 12 months to December 2015 for Public Health was 4.09%. The figure for Customer Services was 4.71%. Both management teams are working closely with HR to strengthen efforts to reduce sickness absence in their services.
- 2.4. Since we last reported at Q2, the sickness absence data for Norfolk Community Learning Services (NCLS) has been recalculated to better reflect the sessional tutors that are employed in the Full Time Equivalent (FTE) figures. This has resulted in a reduction in the percentage of time lost per FTE over the past 12 months from 5.32% to 2.00%.
- 2.5. **Sickness absence per FTE for the Fire Service (excluding RDS)** – Although sickness absence in Q3 in Norfolk Fire and Rescue Service (NFRS) is lower than it was in the same period last year, it is above target at 5.8 days per FTE compared to a target of 5.35 days.
- 2.6. **% of NHS Health Checks delivered against eligible population from April 2013 to the quarter reported** – The NHS Health Check programme is a five year rolling programme, which runs from April 2013 to March 2018. The most recent performance data is from Q2. This shows that, to date, the programme of health checks has delivered to 21.5% of the eligible population, compared to the target of 22.9% (the England average). Projections show that the gap between England and Norfolk seems to be slowly increasing or worsening.
- 2.7. **% of those referred attending the Health Trainer Service from target populations** – The Health Trainer service works with people to provide the motivation, encouragement and support needed to enable them to make lasting healthy lifestyle changes. Performance for the period September to November 2015 was 71% compared to a target of 75%. Performance is also below the same period last year when 80% of those referred who attending the Health Trainer Service were from target populations.
- 2.8. **Mobile libraries** – visits to mobile libraries have fallen over Q3 and this indicator is now RAG rated Red, having been Green at Q2. With Q3 performance at 65,157 it is unlikely that the end of year target of 88,279 will be achieved.
- 2.9. **% of Your Voice members who agree that they can influence their local area** – this is an annual indicator, measured through a survey of our Your Voice members. The aim is to see 85% of members 'agreeing that they feel they can influence their local area'. In 2014, 82.8% agreed. In 2015 this dropped to 75.9%, making this indicator RAG rated red.

Performance has been affected by two, related factors:

- 1) Providing freepost envelopes when sending surveys to our members who don't have an email address. This has increased the number of responses that we have receive and may have encouraged people to complete our annual member survey who have not previously done so.
- 2) The balance between the number of people responding online and people returning a paper survey has changed. The number of online responses has remained largely unchanged, whilst the number of paper surveys returned has increased. This is significant because a higher percentage of our online members report that they feel they can influence decision making than those who submit a paper survey.

2.10. **% of young people voting in the annual Make Your Mark ballot** – this is an annual measure that we reported on in detail in the Q2 performance and risk monitoring report.

2.11. **Registration of deaths excluding Part B and Inquests** - this measure remains red and has been an area of poor performance throughout 2015/16. The nationally-set target is to register 90% of deaths (excluding Part B and inquests) within five days. In Q3, performance remained below this target at 72%. This is a drop in performance since Q2 when we registered 79% of deaths within the target time, and we are also doing worse than in Q3 last year when we registered 74% of deaths within the timescale.

Amber measures

2.12. **Performance against NFRS Emergency Response Standards (ERS)** – the standards state that the Service will endeavour to get to 80% of fires where life may be at risk within 10 minutes, and 80% of other emergencies where life may be at risk within 13 minutes. Performance against ERS is stable at around the 78% mark, as it has been since 2013/14, compared to a target of 80%. At the end of January 2016, the service met the standards on 77.4% of occasions in the previous twelve months.

2.13. **Registration of still births in Norfolk** – our nationally set target is to register 98% of still births within 42 days. At Q3, performance dipped below target to 95%, meaning this measure is rated amber.

2.14. **% of time retained fire stations are available to respond to an emergency** – NFRS aims to have stations crewed by retained on-call fire fighters available at least 90% of the time. Performance has improved slightly from 85.3% in Q1 to 86.1% in Q3 but availability remains below the 90% target and so is RAG rated as Amber.

2.15. It has previously been reported to this committee that retained fire fighter availability can be affected by a number of factors, including: periods of industrial action; low establishment (typically 1 or 2 vacancies) at some stations; reduction in operational activity; and conflicting demands relating to primary employment and family life.




Green measures

2.16. In line with the principle of exception reporting, measures with green alerts are not being covered in detail in this report. Particularly good performance, however, is reported in:

2.17. **Number of dementia friendly sessions delivered by Public Health** – at Q3 the end of year target was surpassed, with a total of 44 sessions delivered compared to a

target of 40 by the end of Q4.

- 2.18. **Visits to Norfolk's museums** – at Q3 the number of visits stood at 305,843, compared to the target for Q3 year to date of 261,407. All operating areas (Eastern, Western and Norwich) are also above target and so high performance in one area is not compensating for poor performance in another.
- 2.19. Norwich Castle Museum & Art Gallery saw record numbers over the February half-term with 13,055 visits, an increase of 8.5% on 2015 (itself a record-breaking year). The star attraction was the 'How to Train Your Dragon' exhibition and family-friendly events, delivered in partnership with Norfolk Libraries and Information Services.
- 2.20. **Percentage of businesses brought to broad compliance with trading standards** – this Trading Standards measure has recovered to exceed target in January after dipping to below target in November and December of Q3. All five of the Trading Standards performance indicators are either RAG rated as Green or showing a trend of performance improvement.
- 2.21. **Income generated through our calibration, verification and testing services** – the income generated by Trading Standards through their calibration, verification and testing services at Q3 was above the end of calendar year target, at £306,464 compared to £272,917. Full year income will exceed the target of £327,500.
- 2.22. **Customer services** – at Q3, all four performance indicators are green and showing a trend of improvement. Regarding customer satisfaction, people's experience of contacting the Council varies by access channel (the routes through which people contact us e.g. telephone, website, email). Satisfaction on the telephone and customer service emails have improved, while satisfaction with the website has decreased from 50% since last quarter respectively (see below).

Channel	% Customer leaving "Good" feedback
Telephone	96% 
Website	46% 
Customer Service Centre emails	90% 

The main reasons given for the poor customer experience of the Council website were: not being able to resolve queries; for example not being able to find information; and that the website was not available / accessible. A new County Council website is due to go live at the end of March 2016, which it is anticipated will lead to a significant improvement in customer satisfaction.

3. Risk

- 3.1. The latest full departmental risk register contains 16 risks, with 3 of these risks with both a current score of 12 or more and the prospect of meeting the target score by the target date at red or amber, which fall into the above exception reporting category and appear on the risk register (as below):

Service area	Risk Number/Name	Risk Score	Prospects
Public Health	RM14249 – Winter Capacity Mortuaries	12	Amber
Public Health	RM14234 – Failure to secure adequate grants to robustly commission or co-commission (including through s.75) Public Health Services	12	Amber
NFRS	RM13974 - Standards of operational competency for fires in the built environment need to be maintained to avoid staff being exposed to avoidable risk of harm	12	Amber

3.2. Appendix 2 provides a full explanation for those risks, including: a description of the risk; tasks to mitigate the risk; and an update on progress.

3.3. Appendix 3 provides the Committee members with an overall summary of the risks on the register.

3.4. A copy of the Full Corporate Risk Register was presented to the Audit Committee on 28 January 2016 and can be accessed at [Audit Committee page 72](#).

3.5. The evidence is that risks are being managed to an appropriate level with mitigation tasks being undertaken. In all cases risks have been reviewed by risk owners to ensure that risk scores and target dates reflect the current position against current service objectives.

4. Development of the performance management system

4.1 Work has continued to improve performance management arrangements following the Performance Monitoring report to Policy and Resources Committee on the 26 October 2015 setting out the requirements for a system that focuses on the right things, strengthens accountability and informs purposeful management. Member-led workshops took place throughout January and February to specify key elements of the new performance management system. The workshops gave Members an opportunity to test the developing set of vital signs against local priorities, and to shape the way the Council monitors progress.

4.2 At these sessions, Members worked on issues and performance related to: Communities and Environment Development and Transport Committees; Adult Social Care and Children's Services Committees; and Policy and Resources Committee.

4.3 A workshop was held on 13 January 2016 for the members of the Communities and EDT committees. At this workshop, members highlighted several local issues affecting their constituents and communities, including:

- Vulnerability to flooding and the role that the Council has to play in supporting and enabling communities to prepare, protect and respond to it
- Infrastructure and the need to work with a broad range of agencies, organisations and businesses to ensure that housing growth is planned and delivered in such a way that all necessary physical, social and economic infrastructure is in place
- Journey times and the importance of being able to get around the county by car, bus and rail as quickly as possible
- Strong and vibrant communities and the role of the Council in supporting and enabling the growth and development of strong, self-sufficient and self-determining communities
- Quality of life and the need to better understand what it is like to live and work in

different parts of Norfolk.

- 4.4 Members also highlighted that the common theme across all of these issues is the key role that the Council has to play as a system leader. None of the above will be achievable if the Council works in isolation.

5. Vital Signs

- 5.1 A vital sign is a key indicator from one of the Council's services which provides members, officers and the public with a clear measure to assure that the service is performing as it should and contributing to the Council's priorities. It is, therefore, focused on the results experienced by the community. It is important to choose enough vital signs to enable a good picture of performance to be deduced, but not so many that strategic discussions are distracted by detail.
- 5.2 There are 29 such indicators for the Communities Committee, seven of which relate to Public Health. Those in bold, 6 out of a total of 29, are indicators deemed to have a corporate significance and so will be reported at both the Communities Committee and the Policy and Resources Committee. All of the vital signs indicators will be reported to the CES Departmental Management Team and the Public Health Management Team.

Communities Committee performance indicators

	Vital Signs Indicators	What it measures	Why it is important
1	Norfolk's communities are resilient, confident and safe	Individuals, communities and public service working better together	Having an integrated approach to demand management and asset based community development, which targets agencies' investment at the most vulnerable localities, is critical to the Council and the delivery of the Re-Imagining Norfolk strategy
2	Library service use	Library visits – physical and virtual	To demonstrate ongoing relevance and delivery of NCC priorities and to meet income targets
3	Active use of library resources	% of active children and young people library users against population	Contributes to the sub outcome that 'all vulnerable people who live, work learn and are cared for will be safe and are more resilient and independent'
4	Active use of library resources	% of older people who are active library users against population	
5	Building the digital skills base	Library and Information - Number of people who have been supported to develop digital literacy skills	Vulnerable people are more resilient and independent. Communities are resilient, confident and safe

	Vital Signs Indicators	What it measures	Why it is important
6	Learning outcomes achievement	NCLS - Quality measures: learner success; tutor performance	To meet funder and Ofsted requirements (improvement curve: All schools and education establishments are judged good or better by Ofsted). To contribute to excellence in education sub outcomes
7	Transition to employment	NCLS - Number of apprenticeships	Demonstrates the number of people who move on to further training or gain/retain employment following their learning with NCLS
8	Transition to employment	NCLS - Number of people supported into employment	Contributes to specific target to increase the number of people with Learning disabilities in work. Real jobs sub outcome – everyone who is able to work has the opportunity to
9	Financial viability	NCLS - Full cost recovery and business plan on target and on budget	To be a financially viable service
10	NRO use	Norfolk Records Office Visits – physical and virtual including learning groups	Ensures that NRO collection is being utilised to deliver NCC priorities
11	Museum use	Museums visits – total visitors and school visits	Demonstrates contribution to Excellence sub outcomes and improvement curve
12	Economic cost of fire and emergencies	Cost of fire and other emergencies attended by NFRS using the nationally agreed formula	Demonstrates the added value of the NFRS and raises awareness of the impact of fire and other emergencies upon business and the economy - Annual estimate
13	Business compliance with trading standards	% of businesses that are broadly compliant with trading standards	Helps ensure that poor business practice is corrected and consumers and legitimate businesses are protected
14	Response to emergencies	Status of Norfolk Resilience Forum plans to which NCC contributes	Ensure that plans and procedures are in place to prepare, respond and recover from emergencies
15	Channel shift	The percentage of Norfolk Households with an online account (starting from a baseline of 0 at 2016/17)	Delivery of ‘channel shift’ enables cost reduction, internal digital transformation and digital inclusion

	Vital Signs Indicators	What it measures	Why it is important
16	Customer satisfaction	Customer satisfaction with access channels	This measures the organisation's ability to respond efficiently and effectively to customer contact that are made
17	Road safety	Number of people killed and seriously injured on Norfolk's roads	Road casualties are a significant contributor to the levels of mortality and morbidity of Norfolk people, and the risks of involvement in KSI injuries are raised for both deprived and vulnerable groups in the Norfolk population
18	Active People participation data	Number of people involved in physical exercise and sport	Main measure for Sport England, the service's primary funder. Links with: health & well-being, academic attainment, jobs, good infrastructure
19	Physical inactivity	Inactive populations engaged across all programmes (<30 minutes per week at baseline) (%)	Key health & well-being measure as reducing inactivity is associated with significant savings to NHS and social care bill
20	Investment in Norfolk sport	Investment in sport & P.A. levered in by AN (£)	Demonstrates value Sport and physical activity brings to Norfolk economy, the role in employment, tourism and as a sector in its own right. Measure shows value added by service
21	External funding achievement	Income and external funding successfully achieved as a % of overall revenue budget	High quality organisations are successful in being able to attract and generate alternative sources of funding
22	Leverage of arts funding	Strategic investment by Arts Council England in cultural organisations and initiatives in Norfolk	Supports a diverse range of arts and cultural activity and events using minimal NCC direct investment

Public Health vital signs indicators

	Vital Signs Indicators	What it measures	Why it is important
23	2.5 years integrated developmental review	% of Health and Developmental Reviews at age 2 – 2½ years that are delivered as part of the single integrated review with Early Years' Foundation Stage two year old summary.	Early intervention works best when the support systems operate in a co-ordinated manner.

	Vital Signs Indicators	What it measures	Why it is important
24	Proportion of LAC aged 0-5yrs for whom health plan actions are complete at subsequent review	% of Looked After Children (LAC) aged 0-5yrs receiving a Review Healthcare Assessment in the last 12 months for whom all the actions due on their current Health Plan have been completed.	Looked after children have higher health needs due to their previous experiences with higher rates of mental health issues, emotional disorders such as anxiety and depression, hyperactivity and autistic spectrum disorder conditions.
25	Health and wellbeing measure	An overarching rank sum comprised of domains on: adult risk exposure /lifestyle; health care amenable factors / secondary prevention e.g. cholesterol, blood pressure; social & financial conditions; children and young people; and older people outcomes	This measure enables the overall health and wellbeing of people in different parts of Norfolk to be measured over time.
26	Smoking Status at Time of Delivery / Smoking in pregnancy	The percentage of mothers smoking during pregnancy	Smoking in pregnancy can cause serious pregnancy-related health problems. Smoking in pregnancy is five times more likely in deprived areas so disproportionately impacts on deprived communities.
27	Engagement and retention of adult substance misuse clients	% of adult substance misuse users that left drug treatment successfully who do not re-present to treatment within 6 months	Poor parental mental health, exposure to domestic abuse and alcohol/drug abuse by parents strongly affect children's outcomes.
28	HIV late diagnosis performance	% of adults newly diagnosed late with HIV	Late diagnosis is associated with poorer outcomes, infection transmission and higher NHS and social care costs.
29	Reducing inequity in smoking prevalence	% of 4 week quits coming from the 20% most deprived areas in Norfolk.	Smoking is the most important cause of preventable ill health and premature mortality in the UK.

5.3 Two of the vital signs indicators listed above also appear on the EDT Committee list: 'Income and external funding successfully achieved as a % of overall revenue budget'; and 'Number of people killed and seriously injured on Norfolk's roads'.

5.4 There is one Organisational Health indicator that is relevant to this committee and which will be reported to the Policy and Resources Committee: 'Efficiency and effectiveness of complaints'.

6. Transition to the new performance management system

- 6.1 Performance will be reported at committees using the new performance management reporting from April 2016 onwards.
- 6.2 For some of the indicators more work is needed to gather the data needed to monitor performance, meaning that work will continue beyond April in some areas, and the committee will be briefed on progress.
- 6.3 Further development work will continue to refine the performance management system including:
- Defining the measures technically and confirming the target, baseline, benchmarks and trajectory for each vital sign
 - Improvements to data collection systems and procedures to provide for timelier reporting
 - Refining the content and presentation of performance information to committees - including presenting risk management reporting and vital signs in an integrated report
 - Developing options to make regular performance information available to Members and officers in addition to committee reports – e.g. online 'portal', newsletter.

7 Recommendation

- 7.1 Committee Members are asked to:
1. Review and comment on the performance and risk information
 2. Consider any areas of performance or risk that require a more in-depth analysis
 3. Confirm, subject to comment and any further work, this committee's set of vital signs performance indicators.

8 Financial Implications

- 8.1 There are no significant financial implications arising from the development of the new performance management system or the performance and risk monitoring reports.

9 Issues, risks and innovation

- 9.1 There are no significant issues, risks and innovations arising from the development of the new performance management system or the performance and risk monitoring reports.

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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Appendix 1 - Q3 Communities Committee Performance Dashboard

Indicator	Value (Q3 15/16)	Date	Target 15/16	Rating (RAG) against target	Direction of Travel against same period previous year
HR sickness absence data					
Sickness absence (% employee time lost to sickness - rolling 12 months)	2.62%	Dec-15	2.40%	▲	↓
Public Health					
Number of dementia friendly sessions delivered by Public Health.	44	April - Dec 2015	40 (full year target)	★	↓
Smoking cessation: percentage of 4 week quits coming from the 20% most deprived areas in Norfolk.	31%	Q2 15/16	29%	★	↓
Sexual health: rate of repeat infections within one year. [A]	Data available Mar-16		Threshold m 8.5% f 7.2%	N/A	N/A
% of adult substance misuse clients in effective treatment (retained for 12 weeks or more, or who have had a successful completion prior to 12 weeks).	96%	Q2 15/16	90%	★	↑
Uptake NHS Health Checks rate as measured by number delivered / number offered.	21.5%	Q2 15/16	22.9%	▲	↑
% of those referred attending the Health Trainer Service from target populations.	71%	Sept - Nov 2015	75%	▲	↓
% of eligible children in Reception and Year 6 participating in the national child measurement programme.	41%	Sept - Dec 2015	95%	★	↓
Norfolk Fire and Rescue Service					
% of time retained fire stations are available to respond to an emergency [temporary measure]	86.1%	Jan-16	90%	●	↑
Performance against NFRS Emergency Response Standards: whole county [temporary measure]	77.4%	Jan-16	80%	●	↓
Number of Home Fire Risk Checks completed for vulnerable older and/or disabled people	3,165	Jan-16	2,917	★	↓
Number of false alarm calls that NFRS goes to (monitoring measure - 1 year)	1,054	Jan-16	1373	★	↓
Sickness absence days per FTE (excluding RDS)	5.83	Dec-15	5.35	▲	↓

Indicator	Value (Q3 15/16)	Date	Target 15/16	Rating (RAG) against target	Direction of Travel
Trading Standards					
Percentage of businesses brought to broad compliance with trading standards	96.8%	Jan-16	94%	★	↑
[new indicator] Percentage of doorstep and other rogue traders and most detrimental businesses brought to compliance	74.6%	Jan-16	under development	N/A	↑
[new indicator] Percentage of scam victims supported to prevent further financial abuse	85.0%	Jan-16	under development	N/A	↑
[new indicator] Percentage of consumer goods, including foods, sampled or test purchased which are found to be non-compliant and are subsequently brought to compliance	85.0%	Jan-16	under development	N/A	↑
Income generated through our calibration, verification and testing services	£306,464	Jan-16	£272,917	★	↑
Community Safety					
Repeat incidents of domestic violence kept below national rate (24%)	13.0%	Q3	24%	★	↓
Proportion of non-police referrals to Multi Agency Risk Assessment Conference	29.0%	Q3	25%	★	↑
Registration Service					
Registration of deaths excluding Part B and Inquests	72%	Q3	90%	▲	↓
Registration of all births in Norfolk	99%	Q3	98%	★	↑
Registration of still births in Norfolk	95%	Q3	98%	●	↓
NEW INDICATOR: Customer satisfaction with the Registration Service - Availability of appointments - did you get your preferred day and time for your appointment?	96.7%	Q3	N/A	★	N/A
NEW INDICATOR: Customer satisfaction with the Registration Service - Availability of appointments - was your appointment within five days of your preferred date?	99.1%	Q3	N/A	★	N/A
NEW INDICATOR: Customer satisfaction with the Registration Service - Customer Satisfaction - were you satisfied with the way your appointment was conducted?	93%	Q3	N/A	●	N/A
Number of sham marriages in Norfolk (s.24 reports)	1	Q2	SURV	N/A	N/A

Indicator	Value (Q3 15/16)	Date	Target 15/16	Rating (RAG) against target	Direction of Travel
Cultural Services					
UNDER DEVELOPMENT Libraries - Active Users as % of Registered Users	New indicator, still under development				
Libraries - Active Users as % of Population	22.7%	Q3	SURV	N/A	N/A
Mobile libraries – physical visits	65,157	Q3	88,279	▲	↓
Norfolk Record Office - physical visits	3,958	Q3	SURV	N/A	↓
Norfolk Record Office – total virtual visits	44,707	Q3	SURV	N/A	↓
Museums - physical visits	305,843	Q3	261,407	★	↓
Museums – pre-booked school and educational visits	32,393	Q3	26,960	★	↓
Norfolk Community Learning Services – New Learners	4,143	Q3	9,224	N/A	N/A
Norfolk Community Learning Services – Learner retention	95.60%	Q3	96.00%	N/A	N/A
Norfolk Community Learning Services – Learner achievement	73.30%	Q3	95.80%	N/A	N/A
Consultation and Community Relations					
% of Your Voice members who agree they can influence their local area [A]	75.9%	Jan-16	85%	▲	↓
% of young people voting in the annual Make Your Mark ballot	21.0%	Oct-15	30%	▲	↓
% residents who feel they can influence decisions affecting their local area – Tracker survey [A]	Not currently reporting				
Customer Services					
Customer satisfaction measure (Govmetric) – Customer Access	90%	Q3	50%	★	↑
% of priority Social Care Calls answered within service level agreement time	99.1%	Q3	As many as possible	★	↑
% of all other calls answered within service level agreement time	95.2%	Q3	90.00%	★	↑
Average time taken to answer calls (seconds)	43 seconds	Q3	60 seconds	★	↓

★	Performance is on target, no action required.
●	Performance is slightly off-track.
▲	Performance is worse than the target, action required.

DoT – Direction of travel i.e. better or worse than the previous year (or period if data unavailable).	
↓x or ↑x	Value has worsened.
↑✓ or ↓✓	Value has improved.
→	Value has stayed the same.