

## Appendix B: Service Performance (Quarter 3 2016/17)

This appendix aligns **performance**, **risk** and **finance** information for each service (Delivery Units and Service Providers) – focusing on key successes and challenges; any service indicators that are “below target” (RAG rated as Green Amber, Red Amber or Red); and revenue and capital budget variances. The full service reports are published on the website each quarter at [www.barnet.gov.uk/currentperformance](http://www.barnet.gov.uk/currentperformance)

### Performance

**315** indicators are reported in Q3 2016/17. Of these, 244 have been given a RAG rating: **78% (191)** are “on or above target” and **22% (53)** are “below target”. 223 indicators have been given a Direction of Travel (DOT) status: **66% (147)** have an “improved/same” DOT and **34% (76)** have a “worsened” DOT from the same period last year.

Service	No. reported Q3 2016/17	No. with a RAG rating Q3 2016/17	RAG Ratings				Monitor Q3 2016/17	No. with a DOT at Q3 2016/17	Long Term Direction of Travel	
			Green	Green Amber	Red Amber	Red			Improved/Same	Worsened
Adults and Communities	23	18	50% (9)	22% (4)	6% (1)	22% (4)	5	12	75% (9)	25% (3)
Barnet Homes	18	16	81% (13)	13% (2)	0% (0)	6% (1)	2	16	69% (11)	31% (5)
Commissioning Group	36	24	71% (17)	25% (6)	4% (1)	0% (0)	12	24	54% (13)	46% (11)
Customer and Support Group (CSG)	25	21	100% (21)	0% (0)	0% (0)	0% (0)	4	18	89% (16)	11% (2)
Education and Skills	26	12	75% (9)	17% (2)	0% (0)	8% (1)	14	13	77% (10)	23% (3)
Family Services	32	21	71% (15)	19% (4)	5% (1)	5% (1)	11	11	82% (9)	18% (2)
HB Public Law	13	12	92% (11)	0% (0)	0% (0)	8% (1)	1	12	50% (6)	50% (6)
Mortuaries	0	0	0% (0)	0% (0)	0% (0)	0% (0)	0	0	0% (0)	0% (0)
Parking and Infrastructure	7	7	71% (5)	14% (1)	0% (0)	14% (1)	0	7	29% (2)	71% (5)
Public Health	22	21	86% (18)	0% (0)	0% (0)	14% (3)	1	18	61% (11)	39% (7)
Regional Enterprise (Re)	64	52	87% (45)	0% (0)	4% (2)	10% (5)	12	48	65% (31)	35% (17)
Registrar Service	9	9	67% (6)	11% (1)	0% (0)	22% (2)	0	9	33% (3)	67% (6)
Street Scene	13	11	55% (6)	36% (4)	9% (1)	0% (0)	2	10	70% (7)	30% (3)
Your Choice Barnet (YCB)	27	20	80% (16)	10% (2)	0% (0)	10% (2)	7	25	76% (19)	24% (6)
<b>Total</b>	<b>315</b>	<b>244</b>	<b>78% (191)</b>	<b>11% (26)</b>	<b>2% (6)</b>	<b>9% (21)</b>	<b>71</b>	<b>223</b>	<b>66% (147)</b>	<b>34% (76)</b>

## Revenue

Service	Original Budget £000	Revised Budget £000	Q3 Projected Outturn £000	Variance from Revised Budget Adv/(fav) £000	Variance from Revised Budget Adv/(fav) %
Adults and Communities	85,566	88,968	95,022	6,054	6.8
Assurance	3,793	3,854	3,854	-	0.0
Births, Deaths & Marriages (Registrar Service)	(160)	(160)	18	178	111.3
Central Expenses	51,381	43,654	43,157	(497)	(1.1)
Commissioning Group	19,288	20,186	20,186	-	0.0
Customer and Support Group (CSG)	22,120	22,090	22,590	500	2.3
Education and Skills	6,940	7,082	7,157	75	1.1
Family Services	46,481	51,044	52,032	988	1.9
HB Public Law	2,011	2,011	2,068	57	2.8
Housing Needs and Resources (Barnet Homes)	4,976	5,560	5,738	178	3.2
Parking and Infrastructure	(1,933)	(1,947)	(2,003)	(56)	(2.9)
Public Health	18,544	18,055	18,055	-	0.0
Regional Enterprise (Re)	1,134	1,134	1,424	290	25.6
Street Scene	13,896	13,447	13,386	(61)	(0.5)
<b>Total</b>	<b>274,037</b>	<b>274,978</b>	<b>282,684</b>	<b>7,706</b>	<b>2.8</b>

## Capital

Service	2016/17 Budget £000	Additions/ (Deletions) £000	(Slippage)/ Accelerated Spend £000	Projected Outturn £000	Variance from Approved Budget Adv/(Fav) £000	Slippage %
Adults and Communities	1,039	341	-	1,380	341	0.0
Commissioning Group	33,237	(341)	(16,076)	16,820	(16,417)	(48.4)
Education and Skills	71,389	-	(31,376)	40,013	(31,376)	(44.0)
Family Services	9,662	-	(4,139)	5,523	(4,139)	(42.8)
Housing Needs & Resources (Barnet Homes)	13,983	(5,056)	(57)	8,870	(5,113)	(0.4)
Parking and Infrastructure	1,457	-	(261)	1,196	(261)	(17.9)
Regional Enterprise (Re)	87,467	(1,152)	(25,442)	60,873	(26,594)	(29.1)
Street Scene	2,536	-	(629)	1,907	(629)	(24.8)
<b>General Fund</b>	<b>220,770</b>	<b>(6,208)</b>	<b>(77,980)</b>	<b>136,582</b>	<b>(84,188)</b>	<b>(35.3)</b>
HRA (Barnet Homes)	39,790	313	(885)	39,218	(572)	(2.2)
<b>Total Capital Programme</b>	<b>260,560</b>	<b>(5,895)</b>	<b>(78,865)</b>	<b>175,800</b>	<b>(84,760)</b>	<b>(30.3)</b>

## Savings

Service	2016/17 MTFS Savings Target £000	Savings Achieved £000	Savings Expected to be Achieved £000	Savings Unachievable £000	Savings achieved %
Adults and Communities	3,383	3,383	-	-	100.0
Assurance	351	304	-	47	86.6
Central Expenses	6,995	6,665	130	200	95.3
Commissioning Group	2,411	2,211	200	-	91.7
Education and Skills	85	85	-	-	100.0
Family Services	1,986	1,036	826	124	52.2
Parking and Infrastructure	1,130	1,030	100	-	91.2
Re	2,253	2,253	-	-	100.0
Street Scene	960	910	-	50	94.8
<b>Total</b>	<b>19,554</b>	<b>17,877</b>	<b>1,256</b>	<b>421</b>	<b>91.4</b>

## Adults and Communities

Successes	Challenges
<ul style="list-style-type: none"> <li>The Delivery Unit continues to perform strongly against key demand management indicators – new admissions to residential care have remained low; take up of preventative services such as telecare have remained high.</li> <li>The Your Choice Enablement service has been successfully mobilised less than four months after issues emerged with the previous enablement provider. The service began receiving referrals in December and is now increasing its capacity. The Delivery Unit, in partnership with the Barnet Group, successfully mobilised the new service in less than four months.</li> <li>The Delivery Unit has run a successful series of ‘Silver Sunday’ events in October 2016 – part of a national event which celebrates the contribution older people make to our communities while combating loneliness and social isolation. 662 people attended events and 92 signed up for regular activities (such as sport and leisure activities or digital inclusion classes) as a result.</li> </ul>	<ul style="list-style-type: none"> <li>Managing the continuing financial pressure on adult social care – at the end of the quarter the Delivery Unit is forecasting an overspend of £6.205m. Spend continues to be closely monitored and a plan for in-year savings has been agreed by the Strategic Commissioning Board.</li> <li>Devoting sufficient resource to realise the opportunities arising from implementation of the new adult social care case management system, which has required significant staff time and investment in Quarter 3 and will continue to do so until the system ‘goes live’ in 2017/18. Fortnightly programme board meetings are being held to ensure the project remains on track.</li> <li>Managing the knock-on impact of pressure on the NHS. Management activity includes an intensive focus on discharge logistics e.g. managing discharge lists and setting up quick escalation routes; and ensuring capacity in the enablement and homecare provider markets.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>50% (9)</b>	<b>22% (4)</b>	<b>6% (1)</b>	<b>22% (4)</b>	<b>75% (9)</b>	<b>25% (3)</b>

23 indicators are reported in Q3 2016/17. 18 have been given a RAG rating: 50% (9) are “on or above target” and 50% (9) are “below target”. 12 have been given a Direction of Travel (DOT) status: 75% (9) have an “improved/same” DOT and 25% (3) have a “worsened” DOT from the same period last year. Of the 9 “below target”, 3 are Corporate Plan Indicators and can be found in Appendix A:

- AC/S3 (ASCOF 1G) Percentage of adults with learning disabilities who live in their own home or with their family.
- AC/S4 (ASCOF 1E) Percentage of adults with learning disabilities in paid employment.
- AC/S5 (ASCOF 1F) Percentage of adults with mental health needs in paid employment

6 are Service Indicators (in the Adults and Safeguarding Committee Commissioning Plan and/or Adults and Communities Management Agreement) and are set out below.

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
AC/S16 (ASCOF 1C/2A)	Proportion of service users with a direct payment (ASCOF 1C/2A)	Bigger is Better	42.0%	41.5%	38.97% (RA)	38.81%	Improving	39.50%	Worsening	CIPFA 29.5% London 27.6% (2015/16, ASCOF)	The proportion of service users with a direct payment has increased slightly since Q2.  Barnet remains a high performer nationally against this indicator even at 38.8% with benchmarking data for 2015/16 showing a comparator group average of 29.5% and a London average of 27.6%.
AC/S18	Percentage of service users receiving ongoing services with telecare	Bigger is Better	17.0%	15.9%	15.7% (GA)	14.9%	Improving	12.0%	Improving	No benchmark available	The Delivery Unit is seeing positive progress against this target this year and will continue to monitor referrals into the current service. The contract has been awarded for the new telecare service and as the review of the Front Door continues further opportunities will be found to improve referral rates into the service and use technology to deliver better care and support.
AC/S21	Number of carers' assessments	Bigger is Better	1045	732	593 (R)	Not reported in Q2	Not Reported in Q2	949	Not comparable due to reporting format	No benchmark available	The Delivery Unit is making sure carers are referred for assessment within assessment hubs where possible, which also gives carers access to a broader range of preventative services.

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
AC/C10	Percentage of clients receiving an ongoing package of care reviewed	Bigger is Better	75.0%	56.0%	46.3% (GA)	31.6%	Improving	New for 2016/17	New for 2016/17	No benchmark available	The Delivery Unit is exploring the feasibility of allocating further cases through the contract with its external reviews provider. Priority cohorts for review have been identified by Heads of Service and are being tracked through reporting to the Adults Transformation Programme to ensure high risk clients are prioritised for review before year end.
AC/C12 (ASCOF 2c(1))	Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care	Smaller is Better	7.3	7.4	9.1 (R)	8.3	Worsening	7.0	Worsening	CIPFA 8.8 London 7.8 (2015,16 ASCOF)	The Delivery Unit continues to work closely with the NHS to maintain the operational arrangements which enable assessments to take place in an efficient and timely manner. Barnet is an active participant in its local Accident and Emergency Delivery board and senior managers have taken part in a series of 'rapid improvement events' in hospitals early in 2017.
AC/C13 (ASCOF 2C/2)	Number of delayed transfers of care from hospital, and those which are attributable to adult social care, per 100,000 population	Smaller is Better	3.8	2.7	4.1 (R)	2.5	Worsening	2.7	Worsening	CIPFA 3.6 London 3.3 (2015,16 ASCOF)	As in AC/C12 above. The average rate of delays due to assessments for this comparator group is 0.7 per 100,000.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	12% (2)	53% (9)	35% (6)	76% (13)	0% (0)	24% (4)

Adults and Communities has 17 risks. 2 (12%) are Medium Low, 9 (53%) are Medium High, and 6 (35%) are High. 13 risks (76%) reduced or maintained the same score from the previous quarter. 4 (24%) are new risks for this quarter. 10 risks (59%) scored 12 or above and have been escalated to the Strategic Commissioning Board for review this quarter. These are shown below.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
ACO 01	Increased overspend to meet statutory duties	Adults & Communities Delivery Unit could have insufficient resources to meet its statutory duties due to operating in an environment in which there is inherent uncertainty in future demand for services, exacerbated by a potential inability to deliver savings, reduced ability to raise income from clients, the rising cost of care, other in year financial pressures due to unexpected demand, the increasing complexity and cost of care packages, and legislative changes. This could result in harm to individuals, legal challenge, worsening budget overspend, and reputational damage.	Adults and Communities Director	Statutory Duty	The council's budget management process (MTFS) forecasts demographic growth and pressures over a 3 year period. Budget and performance monitoring and management controls are used throughout the year. Work to reduce addressable spend (such as expenditure on agency staff) is being carried out in year. The Joint Strategic Needs Assessment will identify future demand pressures, and the council will undertake initiatives focused on reducing and managing future demand in response, including the Adults' New Operating Model/ Alternative Delivery Vehicle which focus on reducing demand for services and finding more creative ways to manage complex need.	5	5	5	4	20	Same	Treat



Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
AC002	Failure of care provider	<p>A care provider could suddenly be unable to deliver services, due to:</p> <ul style="list-style-type: none"> <li>- provider going into administration</li> <li>- failure of regulatory inspection relating to quality of service</li> <li>- care provider chooses not to deliver services</li> <li>- HS&amp;E breach</li> </ul> <p>leading to operational disruption to manage the situation, harm to individuals by not having their care and support needs met, unexpected financial consequences, breach of statutory duty.</p>	Head of Integrated Care Quality	Business continuity	<p>For contracted services, extensive due diligence is carried out before and during any contract. The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers.</p> <p>The council also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.</p> <p>A regular report setting out provider risks and concerns is circulated to the DASS and to the DU's Leadership team on a monthly basis and discussed through the regular DASS assurance meeting.</p>	5	5	5	4	20	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
ACO 03	Unacceptable level of quality services provided by care providers	Unacceptable levels of quality of services provided by care provider could lead to additional dedicated Barnet resource needing to be put in place to address the situation, resulting in reduced ability to manage BAU, financial consequences. If the additional resource is not able to address the underperformance of the care provider, this could also lead to harm to individuals, reputational consequences.	Head of Integrated Care Quality	Statutory Duty	For contracted services, extensive due diligence is carried out before and during any contract. The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers.  The council also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.	4	5	4	4	16	Same	Treat
ACO 04	Surge in demand from NHS	An unpredictable surge in demand from the NHS in situations where there is limited capacity could lead to the DU being unable to meet this demand within the NHS's required timescales. This could result in financial consequences, operational disruption leading to rushed decisions being made that have unintended negative consequences, potentially for individuals that have been discharged, and increased central government scrutiny.	Assistant Director Adult Social Care	Statutory Duty	System-wide resilience monies have been made available and these can be used to buy in extra capacity, subject to agreement by the NHS-led Improvement Board. There are monthly system resilience and operational resilience meetings between LBB, CCG and NHS Provider Trusts to discuss & manage pressures in the system, and to deliver action plans. Daily conference calls are in place to deal jointly with events as these happen.	4	5	3	5	15	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
ACO 05	Challenges to recruit and retain qualified staff	A challenging job market (rest of London competing for the limited supply of social workers, qualified occupational therapists and other social care staff across all levels) could lead to difficulties in recruiting and retaining sufficient staff, resulting in insufficient staff to meet demand, reliance on agency workers impacting on budget, inability to carry out quality work, knock on effect on morale, non-statutory duties being de-prioritised.	Assistant Director Adult Social Care	Staffing & Culture	The Unified Pay & Reward project puts in place options to offer incentives. The Delivery Unit can also make use of agency staff. There is a workforce development plan in place to mitigate this risk in the medium to long term.	4	4	4	3	12	Same	Treat
ACO 06	Wellbeing and safety of DU staff	The need for staff to work in high-risk situations (in locations with high levels of crime, entering homes on their own, working with volatile individuals) could impact on staff's general wellbeing and could also lead to a Health & Safety incident resulting in harm to Barnet employees, legal challenge, reputational damage as well as lowering workforce morale	Assistant Director Adult Social Care	Health & Safety	Corporate and local HS&E policies and guidance control and mitigate risk. The Delivery Unit records risk flags for certain cases on the client record system.  Corporate HS&E training and HS&E audits help discharge the duty of care to staff. Regular supervision is used to address specific issues. Wellbeing initiatives are deployed across the Delivery Unit.	5	4	4	3	12	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
ACO 08	Non-adherence to safeguarding policies and procedures	Staff non-adherence to policies and procedures (specifically safeguarding within the Care Act, and London-wide safeguarding policies and procedures), resulting in death or serious harm to individuals, legal challenge, financial loss, decreasing staff morale due to greater pressure and reputational damage.	Head of Safeguarding Adults	Statutory Duty	<p>Staff are required to undertake CPD of 5 days training &amp; development per year, supported by practice forums. Quality assurance framework, led by the Quality Board, monitors supervision. Regular case file audits take place (using a pool of auditors from across the Department). Monthly reporting to leadership team on safeguarding activity. Monthly quality and safeguarding meeting with DASS includes review of high risk cases. External case file audits are conducted.</p> <p>The Safeguarding Adults Board (multi-agency) meets regularly. Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as well as learning processes such as safeguarding adult reviews (SARs) and the domestic homicide review process.</p> <p>Social workers are required to maintain professional standards for statutory registration with HCPC.</p> <p>Staff are supported and supervised by a senior social worker/ team manager in accordance with policy; in addition supervision, advice and guidance is provided from the Head of Safeguarding and specialist Safeguarding Team.</p>	5	4	5	3	15	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
AC009	Data protection breach	The high quantity of sensitive information handled by the Adults & Communities Delivery Unit could lead to a data protection breach, resulting in risk to individuals, legal challenge, financial penalty and reputational damage	Head of Performance and Improvement	Statutory Duty	<p>Data protection training is mandatory for all staff. Data protection and information governance policies are in place. DBS checks are required for new members of staff accessing sensitive personal data. There is refresher training and there are regular communications to highlight issues in relation to common breaches.</p> <p>A monthly Information Management Governance Group is in place as the route for raising, identifying and resolving risks and breaches, with strategic ownership over information governance. An action log is being embedded to ensure mitigating actions are implemented.</p>	4	5	4	3	12	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
ACO 11	Breach of mental capacity act or code of practice	Insufficient experienced staff and non-adherence to policies and procedures (permanent and agency, at all levels) to meet rising demand and complexity could lead to breach of the Mental Capacity Act or Code of Practice, resulting in Barnet not acting in someone's best interest (Mental Capacity Act), and as a result serious harm to individuals and/or the ongoing impact of such a breach on an individual's life; legal challenge, financial loss (legal costs) and reputational damage.	Assistant Director Social Care	Statutory Duty	<p>As with safeguarding issues, staff training is in place, supported by practice forums. Quality assurance framework, led by the Quality Board, monitors supervision (and responds to, for example, supervision and other quality audits). Regular case file audits take place (using a pool of auditors from across the Department).</p> <p>Monthly reporting to leadership team on safeguarding activity  Monthly quality and safeguarding meeting with DASS includes review of high risk cases. External case file audits are conducted.  The Safeguarding Adults Board (multi-agency) meets regularly.</p> <p>Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as well as learning processes such as safeguarding adult reviews (SARs) and the domestic homicide review process.</p>	5	4	5	3	15	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
AC019	Capacity in the provider market	Market conditions could create shortages in both generalist and specialist service provision (such as specialist accommodation or Personal Assistants) which in turn could drive up placement prices and challenge the council's ability to meet service users' needs in accordance with its strategic objectives or within the desired budget.	Associate Director, Commissioning, Joint Commissioning Unit	Statutory Duty	The council has developed commissioning strategies and a five year commissioning plan which is updated each year to ensure the market is kept informed about current and future direction. The council also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.  The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers.	4	4	4	3	12	New	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	6,054 (6.8%)	341 (0%)	3,383 (100%)

The current projected **revenue** overspend of £6.054m within Adults and Communities represents 6.8 per cent of the total Delivery Budget (£88.968m).

The care budgets within Adults have seen significant overspends since 2014/15 as a result of rising demand for services and increasing complexity in relation to those supported. The main pressure for learning disabilities also continues to be in relation to clients' complex needs increasing and individuals transitioning from children's services into adult services. There are further pressures on the learning and disabilities budget resulting from Ordinary Resident clients transitioning into Barnet.

In 2016/17, demand continues to grow for older adults placements with a particular growth in clients with dementia requiring complex packages of care.

The Deprivation of Liberty Safeguards (DOLS) service continues to have significant pressures in 2016/17, as a result of Supreme Court judgements in 2014/15 and a loss of grant funding since 2015/16. Some of the current pressures are offset by underspends within the non-placement budget areas and these budgets continue to be closely monitored and managed.

The adults **capital** programme is forecast to increase by £0.341m, which is due to a transfer from the IT Strategy project in Commissioning.



## Assurance

Successes	Challenges
<ul style="list-style-type: none"><li>• Revised arrangements have been implemented for Residents Forums / Area Committees to enable Forums to be held in constituency areas and be separated from Area Committees. Area Committees will be taking place on separate evenings enabling senior officer representation from the council at every Area Committee meeting. Revised procedures for managing petitions have been implemented, which will improve the speed of the council's response and minimise referrals between committees.</li><li>• Barnet Youth Assembly (a joint Children's Service / Governance Service initiative) has met and considered a number of themes including post-16 education and training and health. Further sessions will take place in Quarter 4 on politics (including a number of external speakers) and community, before a report to the Children, Education, Libraries and Safeguarding Committee on the work of the Assembly is reported in May 2017. Linked to the work of the Assembly, one the Governance Team has been a judge at the Speak Out Challenge which took place on 24 January.</li><li>• All planned audits for 2016/17 are either complete or underway and are on track to meet our target of 95% of the plan delivered by the end of the year.</li><li>• Publication of the annual revised 'Register of Electors' took place on 1 December 2016 following a successful statutory annual 'HEF' (Household Enquiry Form) canvass of all residential properties in Barnet. This was the first canvass that utilised mobile tablet devices for the delivery of the 'personal visits' element of the canvass – that are necessary where households do not respond to posted forms. Over 51k properties received a personal visit and information was collected from 93.1% of all residential properties in the borough.</li><li>• With the CAFT service, there has been the successful introduction of 'Formal Cautions' as an alternative sanction outcome in accordance with our Fraud Policy. During the quarter, 19 cautions have been administered.</li></ul>	<ul style="list-style-type: none"><li>• There are budget pressures within the Governance Service relating to the ongoing print and courier costs for <a href="#">committee</a> meeting agendas. Members iPad Workshops will take place in Quarter 4 to help facilitate use of the iPad app and paperless meetings. The Modern.Gov iPad app is now being used for all committee papers. A trial of tablets for members of the public at meetings will also take place to determine if savings can be made on public agendas.</li><li>• Management responses to audit findings are not always achieved within the required timescales for Audit Committee. To increase buy-in, the service has moved to 'Agreed Actions' rather than 'Recommendations' within audit reports; and follow-ups are undertaken on a monthly basis to keep expected actions on officers' radars.</li><li>• Delivery of the 16 recommendations from the Independent 'Smith Review' – an action plan has been drafted to implement these, which is being reviewed by the Assurance Director and Head of Service.</li><li>• Resolving accommodation challenges related to elections. A suitable venue is being sought for future borough-wide elections as the venue at BEST hub (used for the 2016 elections) is not expected to be available in 2018. Long-term storage arrangements for elections equipment and statutory storage of elections documentation is also being sought.</li><li>• All relevant data sets have been successfully uploaded to the National Fraud Initiative (NFI) data matching exercise. For the first time this included wider Barnet Homes data sets.</li></ul>

No service indicators are reported by Assurance.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	29% (4)	71% (10)	0% (0)	100% (14)	0%	0%

The Assurance Group has 14 risks. 4 (29%) are Medium Low, and 10 (71%) are Medium High. All 14 risks (100%) reduced or maintained the same score from the previous quarter. 1 risk (7%) scored 12 or above and has been escalated to the Strategic Commissioning Board for review this quarter. This is shown below.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
AG012	Data protection breach in Electoral Services	Insufficient communications and awareness on data protection could lead to a human error data protection breach in Electoral Services, resulting in financial and reputational damage	Head of Electoral Services	Information Governance	All information is kept in one secure software system, with restricted access. Staffs have appropriate training. Policy and working process in place to ensure data is kept secure.	4	5	4	3	12	Same	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	0 (0.0%)	N/A	304 (86.6%)

## Barnet Homes

Successes	Challenges
<ul style="list-style-type: none"> <li>Annual benchmarking analysis completed for the 2015/16 year by independent expert housing consultancy Housemark has shown Barnet Homes to be in the top quartile for a number of indicators when compared with other London Housing providers in the peer group (which includes other London local authorities and ALMO's):               <ul style="list-style-type: none"> <li>- Top quartile for the cost of delivering housing management services (ranked no.1)</li> <li>- Top quartile for the cost of delivering repairs and void property refurbishment services (ranked no.2)</li> <li>- Top quartile for the cost of delivering estate services (ranked no.2)</li> <li>- Top quartile for the cost of delivering leaseholder services (ranked no.3)- Top quartile for overall tenant satisfaction (ranked number 5). This is in comparison with all tenant surveys completed over the three year period from 2013/14 to 2015/16.</li> </ul> </li> <li>By the end of Quarter 3, the let2barnet service had achieved 454 private sector lettings. This is the best year on record, and means 91% of the annual target has been achieved. To further increase the affordable supply options, the direct acquisitions programme had exchanged or completed on seven new units in London and Bedfordshire. With a further 43 units expected to complete in Quarter 4, this will add valuable additional supply options and help reduce the pressure on the council's General Fund.</li> <li>The Full Business case for the new 53 home Extra Care Scheme at Moreton Close NW7 has been signed off, enabling demolition of the previous sheltered housing scheme to commence. A successful launch event to mark this significant landmark has taken place in November 2016, attended by the Leader and local members. This dementia friendly scheme is expected to be completed in the spring of 2018.</li> </ul>	<ul style="list-style-type: none"> <li>Increased homelessness demand has resulted in a continuing increase in temporary accommodation and associated cost pressures on the General Fund. A range of mitigations are in place to maximise prevention, manage demand and increase affordable supply.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>81% (13)</b>	<b>13% (2)</b>	<b>0% (0)</b>	<b>6% (1)</b>	<b>69% (11)</b>	<b>31% (5)</b>

**18** indicators are reported in Q3 2016/17. 16 have been given a RAG rating: 81% (13) are “on or above target” 19% (3) are “below target”. 16 have been given a Direction of Travel (DOT) status: 69% (11) have an “improved/same” DOT and 31% (5) have a “worsened” DOT from the same period last year. Of the 3 “below target”, 2 are Corporate Plan Indicators and can be found in Appendix A:

- BH/C5 Temporary Accommodation (TA) current arrears as percentage of debit
- BH/KPI1 Numbers of households in Temporary Accommodation

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
BH/C10 (LY: BH/C12)	Percentage of dwellings with a valid gas safety certificate	Bigger is Better	100%	100%	99.94% (GA)	100%	Worsening	100%	Worsening	Upper quartile (Q2 2016/17, Housemark)	There were four properties that fell overdue for an annual gas safety check in December due to complications obtaining legal warrants over the holiday period. The service aim to return to 100% compliance for the month of January.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	13% (1)	75% (6)	13% (1)	87% (7)	13% (1)	0% (0)

Barnet Homes has 8 risks. 1 (13%) is Medium Low, 6 (75%) are Medium High, and 1 (13%) is High. 7 risks (87%) reduced or maintained the same score from the previous quarter, while 1 (13%) increased. 4 risks (50%) scored 12 or above, and have been escalated to the Strategic Commissioning Board for review this quarter. These are shown below.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk <i>(without controls)</i>		Residual Risk <i>(with controls in place)</i>			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
TBG 001	Unviable cost of development scheme	<p>The Barnet Group are unable to deliver the portfolio of housing development schemes at a viable cost due to:</p> <ul style="list-style-type: none"> <li>- external factors (change of legislation, economic, confidence in the market, availability of finance)</li> <li>- recruitment and retention of skilled individuals within the development team</li> <li>- viability of house design</li> <li>- planning permission which results in the termination of the scheme, financial impact across council and Barnet Group (impact on staffing and sunk costs), reputational damage, knock on effect on ability to deliver the homelessness agenda</li> </ul>	Strategic Lead Housing	Financial	<p>Membership of professional bodies provides access to market intelligence. We undertake sensitivity analysis/stress testing of the financial business plan, with external support.</p> <p>There is a permanent team in place with relevant skills, and professional support from a team of advisors. TBG's governance structure, and reporting to the senior leadership of the council and project boards, also contributes.</p> <p>Upfront work is undertaken with RE to ensure schemes are viable (e.g. planning), and there are upfront surveys of sites.</p> <p>There is also a stakeholder engagement plan, the council's project management toolkit, and council resource in place to support TBG. The council has agreed to use RTB receipts to help fund the scheme. Finally, there is an agreed procurement strategy</p>	5	4	5	3	15	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
TBG 003	Increase in demand for homelessness services	An unexpected increase in the amount of homelessness leads to an increase in demand for services from people at risk of homelessness which results in financial impact in the area of costs to the council general fund, reduction in the supply of suitable properties, heightened risk of H&S and compliance incidents, an inability to meet statutory and legal responsibilities.	Strategic Lead Housing	Financial	<ul style="list-style-type: none"> <li>- Homelessness prevention strategy</li> <li>- Ongoing project to look at further ways of reducing homelessness (Prevention work / Modular Temporary Accommodation)</li> <li>- Performance indicators and financial monitoring</li> <li>- Horizon scanning of legislation changes</li> <li>- professional memberships</li> <li>- in house lettings agency for procurement of PRS properties</li> <li>- Supply and demand modelling</li> <li>- Links to growth and regeneration operations board</li> <li>- Development pipeline</li> <li>- Out of borough acquisitions</li> <li>-Processes which prevent families and children being in B&amp;B accommodation</li> </ul>	5	5	3	4	12	Increased	Treat
TBG 007	Employee H&S Incident	The need for staff to work in high-risk situations, entering homes on their own, working with volatile individuals) could lead to a Health & Safety incident resulting in harm to Barnet employees, legal challenge, reputational damage.	Barnet Group, Director of Corporate Services	Health & Safety	<p>Policies and procedures for health and safety are in place, including the H&amp;S management system, and the lone working system. Staff undertake training, and there is an induction for new staff.</p> <p>Structures are also in place for contact management, and risk assessments are undertaken. We have a register of those who are violent and abusive, as well as a Vulnerable Tenant password scheme.</p>	5	4	4	3	12	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
TBG 008	Data Protection breach	The high quantity of sensitive information handled by the Barnet Group could lead to a data protection breach, resulting in risk to individuals, reputational damage, legal challenge, and financial penalty.	Barnet Group, Director of Corporate Services	Information Governance	We have data protection policies and procedures, and control access to our systems, including Housing Management, HR, Finance, and Business Intelligence. We provide training through e-learning, including an annual refresher. Data protection issues are also covered in induction, and there is specialist training for specific groups. We undertake publicity and promotional campaigns, and have a dedicated DPO and Data Protection Specialist.	4	5	4	3	12	Same	Treat

Finance (Housing Needs and Resources)	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	178 (3.2%)	-5,113 (-0.4%)	N/A
Finance (HRA)	N/A	-572 (-2.2%)	N/A

The **revenue** forecast outturn is an overspend of £0.178m (3.2%) of the latest budget. The overspend has been driven by a sustained demand for temporary accommodation and high rental prices exceeding the government payments received by the council.

The Housing Needs and Resources **capital** programme has decreased by £5.113m. This is in relation to the development pipeline which, in the proposed current budget being submitted to the Policy and Resources Committee in February, will form part of a consolidated budget for support to Open Door.

## Commissioning Group

Successes	Challenges
<ul style="list-style-type: none"> <li>Crime (as measured by offences included in the Mayor's Office for Policing and Crime set, such as burglary, vandalism, criminal damage, theft of or from a motor vehicle, violence with injury, robbery and theft from the person) has reduced by 20.5% since 2011/12. This exceeds its target reduction, and is an improvement upon both Quarter 2 (by 2.5 percentage points) and Quarter 3 of last year (by 3.5 percentage points).</li> <li>A pop-up business school has been held with good outcomes for local entrepreneurs. This has been delivered through a partnership of Hammersons, Barnet and Southgate College, and Microsoft. Re has secured places for 45 apprentices in its regeneration activities, exceeding the annual target of 15. The apprentices started on site by December 2016.</li> <li>Overall satisfaction with customer services has risen by 12 percentage points since the same point last year, and is now exceeding its target. This is complemented by increased satisfaction with the council's website, which has also exceeded both its quarterly and annual target, and has improved by four percentage points on Quarter 2 and 10 percentage points on the same quarter last year. Furthermore, more customer service transactions are being completed via a self-service channel than last quarter, exceeding the target by four percentage points. 74% of contacts were resolved first time in Quarter 3, also improving on the previous quarter, due to addressing staffing gaps experienced in Quarter 2.</li> </ul>	<ul style="list-style-type: none"> <li>There is a need to improve the traffic flows and parking across the borough, which will also help to maintain road safety and air quality, and continue work at regional and national level to improve radial routes for public transport. In the autumn Residents Perception Survey (RPS)<sup>1</sup>, the percentage of residents who were concerned about traffic congestion had risen since the spring, and was above the target (after taking account of the 4% confidence interval).</li> <li>Resident satisfaction with Barnet as a place to live remains high at 85% and above the London average (83%). However, it has fallen short of the 90% target (after taking into account the 4% points confidence interval)<sup>1</sup>. This also represents a slight drop in satisfaction when compared with the spring survey (89%), and the autumn survey last year (88%).</li> <li>The detection rate for domestic abuse cases involving violence with injury has decreased by 0.9 percentage points since Quarter 2, and by 4.8 percentage points compared to the same period last year.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	71% (17)	25% (6)	4% (1)	0% (0)	54% (13)	46% (11)

**36** indicators are reported in Q3 2016/17. 24 have been given a RAG rating: 71% (17) are "on or above target" and 29% (7) are "below target". 24 have been given a Direction of Travel (DOT) status: 54% (13) have an "improved/same" DOT and 46% (11) have a "worsened" DOT from the same period last year. Of the 7 "below target", 4 are Corporate Plan Indicators and can be found in Appendix A:

- CG/S15 Performance of services;
- CG/S16 Percentage of residents who are satisfied with Barnet as a place to live
- CG/S18 Percentage of respondents very or fairly satisfied with the service provided by their social housing provider (Barnet Homes)
- CG/S26 Customer cases that are closed within the agreed timescales

3 are Service Indicators (in the Theme Committee Commissioning Plans and/or Commissioning Group Business Plan) and are set out below.



Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
CG/C17	Percentage of residents who are concerned about traffic congestion <sup>1</sup>	Smaller is Better	18.0%	18.0%	23.0% (Autumn 2016) (GA)	22.0% (Spring 2015)	Worsening	26.0% (Autumn 2015)	Improving	No benchmark available	
CG/C23	Sickness absence	Smaller is Better	6 days	6	7.88 (GA)	8.23	Improving	New for 2016/17	New for 2016/17	No benchmark available	The council is committed to achieving an overall sickness absence target of 6 days per annum. In order to support this, more robust sickness triggers have been introduced through Unified Reward (UR) that will enable the council to act earlier on sickness absence.
CG/C24	Running costs of estate (designated civic buildings only)	Smaller is Better	£4.47m	£3.40m	£3.60m (GA)	£1.56m	Improving	New for 2016/17	New for 2016/17	No benchmark available	The overspend in estate relates to the additional security required across civic buildings, reactive repairs and maintenance and the leasing in of some additional properties.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	15% (3)	85% (17)	0% (0)	100% (20)	0% (0)	0% (0)

The Commissioning Group has 20 risks. 3 (15%) are Medium Low, and 17 (85%) are Medium High. All 20 risks (100%) reduced or maintained the same score from the previous quarter. 6 risks (30%) scored 12 or above and have been escalated to the Strategic Commissioning Board for review this quarter. These are shown below.

<sup>1</sup> A representative sample of 500 residents (adults, 18+) from across the London Borough of Barnet. Confidence intervals for a sample of 500 = +/-4.4% (i.e. if we surveyed the whole population we can be confident that the results would be the same +/- 4.4%). London data taken from Survey of Londoners 2014/15 (November 2014) - a representative random sample of approximately 1,000 adults in London. National data taken from LGA public poll on resident satisfaction (October 2016) – a representative random sample of approximately 1,000 British adults polled by telephone once a quarter.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
SPPC 004	Breach of confidentiality	Ineffective delivery unit, partnership management and oversight leads to a significant breach of confidentiality and/or loss of personal data resulting in data protection breach, financial cost, reduced service levels to residents and damage to reputation	Head of Information Management	Information Governance	Information Management's framework of policies, and specifically data protection toolkit controls this risk. There is effective incident management, and Information Management Governance Groups, as well as ICO audits.	4	5	4	3	12	Same	Treat
SPPC 007	Delivery of the Way we Work programme (Smarter Working & office moves)	If the programme is unable to deliver changes to how and where staff work, there may be insufficient adequate office space, resulting in financial consequences, staff recruitment and retention issues and reputational damage.	Director of Resources	Financial	Specialist resource has been brought in to deliver the programme, including a change manager. Officer governance bodies are in place to oversee delivery, and project management methodology is followed. Staff engagement and communications have started with focus on travel planning. Agreed scope for what must be delivered to ensure staff are able to change how they work.	4	4	4	3	12	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
SPPC 011	Depot Relocation - Service Disruption	Potential unsuccessful delivery of depot project could lead to inefficient fragmentation of services delivered from depots resulting in service disruption, poor customer satisfaction, financial impact, loss of operating licence, and/ or reputational damage.	Chief Operating Officer	Statutory Duty	There is service representation on governance boards, with regular engagement with senior managers across services, and the detailed requirements are understood. Project management methodology is being utilised, with detailed project plans and risk registers, and we have a contracted delivery partner. Additional resources for coordination of service transition have been agreed.  The initial moves are progressing well, such as the Passenger Transport Service, which has moved to North London Business Park and of Street Scene services which have moved to the Harrow depot. Construction of the new site at Oakleigh Road is progressing to plan.	5	4	4	3	12	Same	Tolerate
SPPC 012	Depot Relocation - Late withdrawal	Potential unsuccessful delivery of the depot project could lead to a late withdrawal from Mill Hill depot resulting in a potential delay of a major income source, financial penalties from site purchasers, reputational damage.	Chief Operating Officer	Financial	A phased exit plan has been agreed with the site purchasers, and we have a contracted delivery partner. Project management methodology is being utilised.  On track to meet requirements of first phase of transfer of land to purchasers before 31/12/2016.	4	5	4	3	12	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
SPPC 014	Inconsistent key messaging and communications approach	Organisational structure means that there is an increased need for stewardship of stakeholders & organisations who can impact on the council's reputation. Without this the council could suffer from inconsistent key messaging and communications approach from organisations commissioned under Barnet name, resulting in significant media scrutiny, reduced trust in the council from residents and Members, confusion in message to key audiences, and reputational damage.	Head of Communications	Staffing & Culture	A new structure and operating model is being embedded to improve relationship management with all parties. Working protocols are being developed with all parties through the development of communication networks and relationship building. Management of all media is directed through the central team. All posts in the Strategic Communications Team have now been recruited to and are building relationships with stakeholders.	5	4	4	3	12	Same	Treat
COM 05	Inadequate commercial and clienting arrangements	A shortage of the required skillset within local government market and the length of the recruitment process for permanent hires prevents the recruitment of the required number of specialist contract management staff to deliver a full service. This leads to an over reliance on interims, reduced capacity, increased financial cost and reduced benefit realisation.	Commercial Director (Interim)	Staff & Culture	Gaps have been filled with interim postholders, and internal resource has been identified and trained as well.	4	5	3	4	12	Same	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
		0 (0.0%)	-16,417 (-48.4%)

The Commissioning Group **capital** forecast includes the IT Strategy budget transfer to Adults (£0.341m), slippage in relation to the Depot relocation (£8.000m), community centre build (£2.000m) where the procurement phase has taken longer than expected and the Sports and Physical Activity project where a longer design phase than planned has delayed the start of the build from the original January date (£5.717m).

## Customer and Support Group (CSG)

Successes	Challenges
<ul style="list-style-type: none"> <li>The 3 year review of the CSG contract has been approved by the Council in December 2016. The review demonstrated CSG delivered significant benefits to the borough, saved over £31m and improved resident satisfaction, along with offering the council new savings opportunities.</li> <li>The Unified Reward went live as planned for corporate staff during the period, the next phase of the programme of work focuses on schools and the go-live of the performance reviews for corporate staff. Business Partners and HR advisors have been heavily involved in this transition (contract review/appeals/TU liaison) and will continue to be as the schools transition over the coming months. The first phase of the Employee Benefits solution also went live in the period as planned.</li> <li>Quarter 3 has been the best quarter since the Customer Services was transferred to CSG, with all KPI's achieved in the period and only 1 minor PI failure in October 2016. Web customer satisfaction achieved 52% in Quarter 3, which is a 7% increase on the previous quarter. This has resulted in Barnet Council achieving 3<sup>rd</sup> place in the channel satisfaction index league table for October and 8<sup>th</sup> place in November This was the first time since service transfer that web satisfaction has entered the top ten.</li> </ul>	<ul style="list-style-type: none"> <li>A number of escalations were received in respect of Integra issues and performance. Steps have been taken to improve the performance of the Integra finance system, including a significant increase in the network connection capacity along with system configuration improvements, although there are still performance issues.</li> <li>Property Services management of issues and proactive feedback to enquiries from the client and/or members of the public still needs improvement.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	100% (21)	0% (0)	0% (0)	0% (0)	89% (16)	11% (2)

25 indicators are reported in Q3 2016/17. 21 have been given a RAG rating: a100% (21) of the indicators were “on or above target”. 18 have been given a Direction of Travel (DOT) status: 89% (16) have an “improved/same” DOT and 11% (2) have a “worsened” DOT from the same period last year.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	17% (4)	75% (18)	8% (2)	92% (22)	0% (0)	8% (2)

The Customer and Support Group has 24 risks. 4 (17%) are Medium Low, 18 (75%) are Medium High, and 2 (8%) are High. 22 risks (92%) reduced or maintained the same score from the previous quarter, while 2 (8%) are new risks. 4 risks (17%) scored 12 or above and have been escalated to the Strategic Commissioning Board for review this quarter. These are shown below.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
CSG 12	IT service failure	Poor or non-maintenance by supplier of IT infrastructure, network services and applications at desired levels of speed resilience and security due to mismanagement and/or inadequate technical specification, leads to an IT service failure resulting in loss of critical service provision and associated ability to provide service continuity with accompanying reputational damage and cost to remedy (and potential litigation in event of breach of statutory obligations)	Head of Information Management	Business continuity	To address this risk, we have a validated network design and dedicated infrastructure staff. Network design is validated through Public Services Network certification and Capita third party assurance. Dedicated infrastructure staff within Capita are focused on the control of the Barnet infrastructure. Capacity checks on wireless network are currently taking place to increase speed and resilience.	5	4	5	3	15	Reduced	Treat
CSG 13	IT service obsolescence	Inability of current infrastructure to handle multiple service applications due to portfolio of systems not being managed properly, with many approaching end-of-life, resulting in outdated and unusable systems, poor-performing systems and potential security breaches	Head of Information Management	Business continuity	Network design is validated through Public Services Network certification and Capita third party assurance. Dedicated infrastructure staff within Capita are focused on the control of the Barnet infrastructure. Capacity checks on wireless network are currently taking place to increase speed and resilience.	4	5	4	4	16	Reduced	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
CSG 15	Unsuccessful delivery of IT projects	Poor implementation of IT projects due to lack of appropriate skills / capability in supplier, resulting in adverse impact on existing service provision, non-realisation of intended benefit(s) from projects and increased project costs/extended timetable.	Head of Information Management	Business continuity	IT projects are managed as a portfolio and pipeline, overseen by a monthly programme board, this is now delivered with a new Head of Projects who joined the team at the end of last year and reviewed all of the processes and resource on the team, also we are now using the services of an external consultant for Technical Assurance	3	5	3	4	12	Same	Treat
CSG 16	H&S advice	Timely and/or competent H&S advice not provided to organisation due to absence of appropriately skilled / experienced staff, resulting in health and safety risks not being properly managed, possible injury/ies and potential reputational damage.	Head of Safety, Health and Wellbeing	Health & Safety	There is a "split" service, with access to additional H&S advice available as required. We have Barnet-based staff with H&S knowledge of local issues, plus a statutory officer in place.	4	4	4	3	12	Same	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	500 (2.3%)	N/A	N/A

The projected **revenue** overspend of £0.500m within the Customer and Support Group represents 2.3 per cent of the total Delivery Unit budget (£22.090m). The projected overspend is due to additional security costs and reduced income.



## Education and Skills

Successes	Challenges
<ul style="list-style-type: none"> <li>Following the smooth transfer of services to Cambridge Education in April 2016, service reviews have been completed for all service areas in the first 100 working days of the contract with the council and structural changes, efficiency measures and plans for growth are now being put in place.</li> <li>During Quarter 3 the percentage of good or outstanding schools in Barnet rose to over 94%.</li> <li>The rate of completions of new Education, Health and Care Plan assessments within 20 weeks has risen each month since June after excluding allowed exceptions: October (88%); November (94%); and December (100%)</li> </ul>	<ul style="list-style-type: none"> <li>It is estimated that Barnet schools on average will lose 1% of current funding by 2019/20 as a result of the introduction of the National Funding Formula. This comes on top of growing pressures on school budgets arising from increases in employers' National Insurance and pension contributions. As a result a growing number of schools are facing financial challenges.</li> <li>Continuing growth in pupil numbers requires careful planning of school places and liaison with the Department of Education (DfE) and Education Funding Agency over the opening of new Free Schools.</li> <li>The implementation of the SEN Reforms in relation to the completion of statutory processes remains a challenge.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>75% (9)</b>	<b>17% (2)</b>	<b>0% (0)</b>	<b>8% (1)</b>	<b>77% (10)</b>	<b>23% (3)</b>

26 indicators are reported in Q3 2016/17. 12 have been given a RAG rating: 75% (9) are “on or above target” and 25% (3) are “below target”. 13 have been given a Direction of Travel (DOT) status: 77% (10) have an “improved/same” DOT and 23% (3) have a “worsened” DOT from the same period last year. Of the 3 “below target”, 1 is a Corporate Plan Indicator and can be found in Appendix A:

- CES/S1 Percentage of primary schools rated as ‘good’ or better

2 are Service Indicators (in the Children, Education, Libraries and Safeguarding Committee Commissioning Plan and/or Cambridge Education contract) and are set out below.

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
CES/S18-2	Combined percentage of 16-18 year olds who are not in education, employment or training and those whose current activity is not known to the local authority	Smaller is Better	London Top Quartile	7.6%	18.8% (R)	3.8%	Worsening	8.6%	Worsening	West London and Barnet 20.9% (November 2016, West London Partnership Support Unit)	Local authorities are no longer responsible for collecting the destinations of 18 year olds. This came into force in September 2016 but management reports will not reflect this change until April 2017. As of November 2016, NEET and Not Known combined % for 16/17 year olds was 5.5% (8 <sup>th</sup> in London, excluding City of London).
CES/S2	The percentage of pupils in primary schools judged as good or better by Ofsted	Bigger is Better	95.0%	95.0%	94.0% (GA)	95.3%	Worsening	91.8%	Improving	England 90.2%, London 93.5% (January 2017, Watchsted)	The monitoring, support and challenge school improvement policy sets out the level of support offered to schools

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	25% (5)	75% (15)	0% (0)	100% (20)	0% (0)	0% (0)

Education and Skills has 20 risks. 5 (25%) are Medium Low, and 15 (75%) are Medium High. All 20 risks (100%) reduced or maintained the same score from the previous quarter. No risks scored 12 or above, to be escalated to the Strategic Commissioning Board for review this quarter.

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	75 (1.1%)	-31,376 (-44.0%)	85 (100%)

The **revenue** forecast shows an overspend of £0.075m (1.1%) on the current budget, as a result of increased support service charges.

The Education and Skills **capital** forecast includes slippage of £31.376m, mainly as a result of school build and expansion funding being re-profiled into future years.

## Family Services

Successes	Challenges
<ul style="list-style-type: none"> <li>• New Park House children’s home maintained their Outstanding Ofsted rating in their latest inspection.</li> <li>• The number and percentage of 2 year olds in a Free Entitlement to Early Education place reached its highest level in Quarter 3.</li> <li>• A new CYP-IAPT (Children &amp; Young People - Improved Access to Psychological Therapies) service will co-locate 4 trainee Psychological Wellbeing Practitioner posts within Barnet Family Services next month for one year.</li> </ul>	<ul style="list-style-type: none"> <li>• Ensuring that Barnet has high quality resilience based practice across Family Services. Practice Development Workers have been appointed to support the pace of progress in practice improvements. The Quality Assurance framework has been strengthened to improve the quality of audit, and increased audit activity has taken place across the service. Training sessions on Signs of Safety have commenced, with an advanced session being held with Practice Leaders in the next quarter.</li> <li>• Recruitment to social work posts to reduce the number of vacant posts and locum cover. The recruitment campaign is ongoing with an increased reduction of vacant and locum posts within Children’s Social Care.</li> <li>• Ensuring that social workers have the tools they need to do their job effectively. 1.5 million documents are being migrated to a single IT system, which will make it easier for social workers to locate the information they need.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>71% (15)</b>	<b>19% (4)</b>	<b>5% (1)</b>	<b>5% (1)</b>	<b>82% (9)</b>	<b>18% (2)</b>

32 indicators are reported in Q3 2016/17. 21 have been given a RAG rating: 71% (15) are “on or above target” and 29% (6) are “below target”. 11 have been given a Direction of Travel (DOT) status: 82% (9) have an “improved/same” DOT and 18% (2) have a “worsened” DOT from the same period last year. Of the 6 “below target”, 1 is a Corporate Plan Indicator and can be found in Appendix A:

- FS/S2 Children made subject to Child Protection Plan for a second or subsequent time.

5 are Service Indicators (in the Children, Education, Libraries and Safeguarding Committee Commissioning Plan and/or Family Services Management Agreement) and are set out below.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
FS/C18	Percentage of children in care with three or more placements during the last 12 months	Smaller is Better	10.0%	11.5%	12.5% (GA)	11.3%	Worsening	New for 2016/17	New for 2016/17	Statistical Neighbours 11.33% London 11% England 10% (2014/15, LAIT)	The small increase in this indicator is due to appropriate moves as a result of permanence plans, complex adolescents with challenging behaviours and one baby who moved a number of times due to hospital admissions and court directions.
FS/C26	Percentage of CLA visits taken place within timeframes	Bigger is Better	95.0%	95.0%	83.5% (GA)	90.2%	Worsening	New for 2016/17	New for 2016/17	No benchmark available	This indicator continues to improve. It is not yet reaching the target as a result of recording issues due largely to some staffing changes in the service during Q3 resulting in reduced team manager capacity for a period.
FS/C37	Percentage of CLA who have had a timely initial health assessment in the last 6 months	Bigger is Better	95.0%	95.0%	4.9% (R)	10.2%	Worsening	New for 2016/17	New for 2016/17	No benchmark available	Meetings with our Health partners are taking place regularly to improve this indicator. All initial assessments up until the end of December have been completed and moving forward it is expected that collaborative work and new ways of working will start to show signs of improvement in this indicator.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
FS/C38	Percentage of CLA who have had a health timely assessment (under 5 6 months, over 5 annual)	Bigger is Better	95.0%	95.0%	92.4% (GA)	82.7%	Improving	New for 2016/17	New for 2016/17	Statistical Neighbours 90.9% (2014/15, DfE)	Measures have been put into place to ensure that health assessments and dental visits take place within timeframes which we are confident will show improvement in the next quarter.
FS/C39	Percentage with dental checks in the previous 12 months	Bigger is Better	85.0%	85.0%	60.5% (RA)	57.9%	Improving	New for 2016/17	New for 2016/17	Statistical Neighbours 88.4% (2014/15, DfE)	Measures have been put into place to ensure that health assessments and dental visits take place within timeframes which we are confident will show improvement in the next quarter. There are currently health assessments and dental visits which need to be put on the system and this is impacting on this number currently.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	6% (1)	82% (14)	12% (2)	94% (16)	0% (0)	6% (1)

Family Services has 17 risks. 1 (6%) is Medium Low, 14 (82%) are Medium High, and 2 (12%) are High. 16 risks (94%) reduced or maintained the same score from the previous quarter, and 1 (6%) is a new risk. 6 risks (35%) scored 12 or above and have been escalated to the Strategic Commissioning Board for review this quarter. These are shown below.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
FS001	Significant child safeguarding incident	Inappropriate response or poor decision-making around a case leads to a significant children's safeguarding incident, resulting in increased risk of significant harm or death of a child, and reputational damage.	Asst. Director, Social Care	Statutory Duty	<p>Elements of the Practice Improvement Plan have been implemented (including training). Delivery of the plan is monitored regularly and overseen by a Board chaired by the Chief Executive.</p> <p>Supervision and practice standards help to control this risk, as well as quality assurance activity.</p> <p>We provide assurance reports to the lead member, SCB Assurance, Barnet Safeguarding Board, and the Social Work Improvement Board, to ensure scrutiny and oversight. The lead member meets monthly with service leads to provide oversight.</p>	5	5	4	4	16	Same	Treat
FS004	Serious gang-related incident	As a result of inappropriate decision making, which could be exacerbated by a lack of timely access to information, a gang and serious youth violence related incident could occur involving one or more young people within the borough resulting in a child death and reputational damage.	Asst. Director, Social Care	Health & Safety	<p>Our Gangs and Serious Youth Violence Strategy is overseen by the Community Safety Partnership Board and Youth Offending Partnership Board. We also have a gangs operational group, and a gangs, missing and child sexual exploitation strategic group.</p> <p>Our gangs operational protocol and screening tool helps control this risk, as well as the Keeping Young People Safe preventative project.</p> <p>A new multi-disciplinary team is being established to deliver intensive, wraparound interventions for high risk adolescents.</p>	5	5	4	4	16	Same	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
FS007	Data Protection Breach	The high quantity of sensitive information handled by the Family Services DU could lead to a significant data protection breach, resulting in risk to individuals, reputational damage, legal challenge, financial penalty	Head of Service Commissioning & Business Improvement	Information Governance	The Information Management and Governance Group meets monthly, and reviews policies and procedures. There is mandatory data protection training for new starters. Data protection refresher training is also on offer.  We also circulate lessons learned through newsletters.	5	5	4	3	12	Same	Treat
FS010	Inability to achieve savings targets	An increase in demand for social care services could lead to the Delivery Unit being unable to achieve the social care demand savings target resulting in financial consequences across the rest of the delivery unit services, reduction in performance of the delivery unit	Asst. Director, Social Care	Financial	Our Family Friendly 2020 programme, and Practice Improvement Plan, help control this risk.	4	5	4	3	12	Same	Treat
FS011	Inability to recruit and retain qualified staff	A challenging job market could lead to an inability to recruit and retain sufficiently qualified permanent staff resulting in reliance on agency workers, impacting on budget, inability to carry out quality work, lower morale, significant safeguarding incident	Asst. Director, Social Care	Staffing & Culture	Our Practice Improvement Plan includes a workforce recruitment strand. There is also an organisational development workforce board, and a market factors supplement is available. An innovative model is in place with is successfully converting agency social workers to permanent contracts. Building the Barnet brand and offering an attractive training offer, including through the Practice Academy.	5	5	4	3	12	Reduced	Treat

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
FS018	Non receipt of information or intervention from key partner agencies	Capacity pressures of delivery on key partners (Police, Health, Education), exacerbated by partners not buying into the vision of the new Barnet model of resilience, could lead to non-receipt of information and/or interventions from key partner agencies, resulting in harm to an individual, reputational damage and/or a financial impact	Family Services Director	Statutory Duty	The Children and Young People Plan has been developed and key partnership boards are in place (BSCB, Children's Partnership Board, Health and Wellbeing Board). Joint commissioning relationships are in place with Health. An early intervention strategic group has multi-agency representation. Resilience workshops are being rolled out to the service and partnership. Partners are engaging with Signs of Safety training.	4	5	4	3	12	Same	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	988 (1.9%)	-4,139 (-42.8%)	1,036 (52.2%)

The projected **revenue** overspend of £0.988m within Family Services represents 1.9 per cent of the total Delivery Unit budget (£51.044m). This is primarily due to an increase on 0-25 in relation to the increase in the cost of current placements, costs transferred from Children Looked After or Special Educational Needs and young people moving out of home into supported living as they become more independent. There is also an increase in the number of agency staff covering vacant posts and pressure on the unaccompanied asylum seeking children budget. The delivery unit has been working to reduce the level of agency staff. The overspends are partially offset by managing contractual increases.

The **capital** forecast is slippage of £4.139m and is largely due to the libraries project which, whilst started, will not complete until 2017/18.



## HB Public Law

Successes	Challenges
<ul style="list-style-type: none"> <li>The team has worked closely with Barnet Homes this quarter, including assisting them with the delivery of their out of borough acquisitions programme. This is a new high profile programme for Barnet.</li> <li>Since April 2016 HBPL has successfully recruited permanent staff to the following teams: Contracts and Procurement; Litigation; Planning; Property; and Social Care.</li> </ul>	<ul style="list-style-type: none"> <li>The service continues to experience difficulties in recruiting legal staff in some key areas, particularly contracts, where a market supplement has been agreed.</li> <li>The practice suffered a significant number of IT issues during the period, some of which affected all Harrow employees, some specific to HBPL staff. Given the practice's total reliance on its IT, such outages are costly (clients are not charged for down time), frustrating for staff, and unhelpful to its reputation.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	92% (11)	0% (0)	0% (0)	8% (1)	50% (6)	50% (6)

13 indicators are reported in Q3 2016/17. 12 have been given a RAG rating: 92% (11) are “on or above target” and 8% (1) are “below target”. 12 have been given a Direction of Travel (DOT) status: 50% (6) have an “improved/same” DOT and 50% (6) have a “worsened” DOT from the same period last year. The 1 “below target” is a Service Indicator (in the HB Public Law contract) and is set out below.

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q2 2015/16 Result	DOT Long Term (From Q2 2015/16)	Benchmarking	Comment where “below target”
HBPL/C1	Acknowledge emails within 1 working day	Bigger is Better	95.0%	95.0%	91.8% (R)	94.9%	Worsening	92.9%	Worsening	No benchmark available	Not all emails received require a response.

HBPL measures risk in accordance with the Lexcel (Law Society). Risk cases are reported to the Barnet Monitoring Officer.

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	57 (2.8%)	N/A	N/A

## Mortuaries

Successes	Challenges
<ul style="list-style-type: none"> <li>The parish funeral function for Brent is now under the direction on the shared mortuary rather than adult social care. This provides an efficient service to support those that are unable to make funeral arrangements or cannot afford to do so. This change will result in a significant improvement in the time taken to deal with cases where there is no next of kin to weeks rather than months. The Mortuaries team benefit from a working knowledge of the majority of parish funeral of cases and already work closely with coroner's officers, which should significantly improve service delivery.</li> <li>Through the North London Coroner's group it has been agreed to manage, via the coroner's office, the number of post mortems and storage across Brent and Haringey's sites. This would mean setting a typical daily number to ensure maximum efficiency on days that a pathologist is available. This reduces the chances of post mortems being cancelled by pathologists due to low numbers or excessively high numbers that impact on quality and additional stress on mortuary staff.</li> <li>Mortuaries managed a high volume of bodies through the Christmas and New Year period, when funeral directors and cremations were limited. This resulted in a continued service across the boroughs, ensuring that the deceased and their relatives are treated with dignity as quickly as possible after death.</li> </ul>	<ul style="list-style-type: none"> <li>Long term recruitment of permanent staff to replace a member who resigned in July. Despite three attempts to recruit no suitable applicants have been found. Agency staff are being used for an interim period to ensure service quality is maintained.</li> <li>Ensuring sufficient capacity to cope with a high volume of deaths either over a short or sustained period, which significantly exceeds the normal operating levels of the mortuary.</li> <li>Ensuring funerals of people that have no next of kin, or are unable to pay, are dealt with by each local authority promptly, to avoid impacting on storage capacity and reputation.</li> </ul>

No service indicators are reported by Mortuaries.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	22% (2)	22% (2)	56% (5)	0% (0)	89% (8)	11% (1)	0% (0)

Mortuaries has 9 risks. 2 (22%) are Low, 2 (22%) are Medium Low, and 5 (56%) are Medium High. 8 risks (89%) reduced or maintained the same score from the previous quarter, while 1 risk (11%) increased. No risks scored 12 or above, for escalation to the Strategic Commissioning Board for review this quarter.

## Parking and Infrastructure

Successes	Challenges
<ul style="list-style-type: none"> <li>The relocation of the Highways Direct Labour Organisation (DLO) and Reactive Highway Maintenance from Mill Hill Depot to Harrow Depot has been a real challenge; however, this was successfully delivered and mobilised with minimal disruption to service. The service is fully operational including winter gritting service.</li> <li>During Quarter 3, a full consultation was carried out with residents on Disabled Persons Freedom Passes. There has been positive feedback from service users and councillors in respect to the proposed changes, which are intended to meet the council's vision for its Disabled Persons Freedom Pass application and renewals process to be an exemplar high quality process that provides the best user experience possible for our residents.</li> <li>During Quarter 3 the DVLA conducted a GIAA Tier 3 Audit and achieved the following outcome of 'Green', which demonstrated a high level of compliance.</li> </ul>	<ul style="list-style-type: none"> <li>The volume of work coming from the Moving Traffic Contravention roll-out has placed pressures on the parking client team. A new parking performance officer has been recruited, which will partially help towards resourcing this area; and a full review of the structure is being carried out to ensure adequate resources going forward.</li> <li>Making improvements to appeal outcomes. Additional time and resources are being allocated to improve current processes.</li> <li>Recruitment of good quality and experienced officers continues to be a challenge. A range of opportunities are being explored for recruiting staff, including possible redeployments from other services.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>71% (5)</b>	<b>14% (1)</b>	<b>0% (0)</b>	<b>14% (1)</b>	<b>29% (2)</b>	<b>71% (5)</b>

7 indicators are reported in Q3 2016/17. All 7 have been given a RAG rating: 71% (5) are "on or above target" and 29% (2) are "below target". All 7 have been given a Direction of Travel (DOT) status: 29% (2) have an "improved/same" DOT and 71% (5) have a "worsened" DOT from the same period last year. Of the 2 "below target", 1 is a Corporate Plan Indicator and can be found in Appendix A:

- PI/S3 (RPS) Percentage of residents who are satisfied with parking services

1 is a Service Indicator (in the Environment Committee Commissioning Plan and/or Parking and Infrastructure Business Plan) and is set out below.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
PI/C3	Parking - Response processing in time: Response provided within legislative timescales in relation to correspondence	Bigger is Better	100%	99.0%	98.7% (GA)	98.1%	Worsening	100.0%	Worsening	No benchmark available	This is due to the festive season. There was a reduction of working days, thus missing the 99% target by 0.29%. The matter will be raised with NSL at the monthly KPI and Performance meeting scheduled for 20 January 2017.

Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	58% (7)	42% (5)	0% (0)	50% (6)	8% (1)	42% (5)

Parking and Infrastructure has 12 risks. 7 (58%) are Medium Low, and 5 (42%) are Medium High. 6 risks (50%) reduced or maintained the same score from the previous quarter and 1 (8%) increased. 5 (42%) are new risks. No risks scored 12 or above, for escalation to the Strategic Commissioning Board for review this quarter.

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	-56 (-2.90%)	-261 (-17.90%)	1,030 (91.2%)

The **revenue** forecast is an underspend of £0.056m and is primarily as a result of savings on carbon emissions and abandoned vehicles contract payments.

The **capital** budget has slipped by £0.261m as a result of delays to the lines and signs and town centre bays projects which have slipped into 2017/18.

## Public Health<sup>2</sup>

Successes	Challenges
<ul style="list-style-type: none"> <li>Over 300 enquiries have been received by the Community-Centred Practices Mental Health Programme Provider in response to invitations from the two surgeries.</li> <li>Two more schools have achieved the Gold award for Healthy Schools London. Barnet now has nine Gold awards in total placing it in a joint first place across the 33 London boroughs.</li> <li>The new Barnet Young People's Drug and Alcohol Service (Barnet YPDAS) was launched in December 2016 with support from Barnet's young people and a broad range of stakeholders. The new service has reached agreements with a number of stakeholders to provide satellite sites to ensure young persons are seen at a place which is easy for them to get to and where they feel most comfortable. An Educational Portal has been developed for Barnet Schools to access advice and support online or directly with the Barnet YPDAS Lead practitioner.</li> <li>Barnet Adult Substance Misuse Service have successfully recruited two Hidden Harm Workers who will identify and support parents/carers involved in problematic drug and/or alcohol misuse and minimise the impact of this substance misuse on their children.</li> <li>Barnet Adult Substance Misuse Service has commenced a 12 month Identification and Brief Advice (IBA) Enhanced Service by delivering training to frontline staff.</li> </ul>	<ul style="list-style-type: none"> <li>Difficulties filling sessions for Making Every Contact Count (MECC) training resulted in a session being cancelled in September. Further sessions have taken place in October, with 66 people being trained to date (November 2016).</li> <li>Challenges in identifying options for the smoking cessation service in the context of changes in the Sustainability and Transformation Plan (STP) landscape and reducing budgets, as well as the forthcoming Pan-London Smoking Channel Shift project that Barnet will be participating in. In the interim, a specialist smoking cessation trainer has been appointed to deliver up-to-date training and CO monitor calibration in 2017.</li> </ul>

Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>86% (18)</b>	<b>0% (0)</b>	<b>0% (0)</b>	<b>14% (3)</b>	<b>61% (11)</b>	<b>39% (7)</b>

22 indicators are reported in Q2 2016/17. 21 have been given a RAG rating: 86% (18) are "on or above target" and 14% (3) are "below target". 18 have been given a Direction of Travel (DOT) status: 61% (11) have an "improved/same" DOT and 39% (7) have a "worsened" DOT from the same period last year. Of the 3 "below target", 1 is a Corporate Plan Indicator and can be found in Appendix A:

- PH/S5 Smoking prevalence

2 are Service Indicators (in the Public Health & Wellbeing Commissioning Plan and/or Public Health Management Agreement) and are set out below.

<sup>2</sup> Reported a quarter in arrears, so refers to Quarter 2 2016/17

Ref	Indicator	Polarity	2016/17 Annual Target	Q2 2016/17 Target	Q2 2016/17 Result	Q1 2016/17 Result	DOT Short Term (From Q1 2016/17)	Q1 2015/16 Result	DOT Long-Term (From Q2 2015/16)	Benchmarking	Comment where "below target"
PH/C14	Re-presentations - opiate users	Smaller is Better	12.0%	12.0%	23.1% (R)	15.8%	Worsening	12.5%	Worsening	National 18.7% (December 2016, National Adult Quarterly Activity Partnership Report)	The National Drug Treatment Monitoring Service (NDTMS) previously showed decreases in successful treatment completion rates. There has been ongoing, close monitoring by the SMS Commissioner. Recent NDTMS data for July – September 2016 shows an improvement in successful completions across all categories of care.
PH/C15	Re-presentations - non-opiate users	Smaller is Better	8.0%	8.0%	22.2% (R)	22.2%	Worsening	9.1%	Worsening	National 6.1% (December 2016, National Adult Quarterly Activity Partnership Report)	

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	0% (0)	50% (2)	50% (2)	0% (0)	100% (4)	0% (0)	0% (0)

Public Health has 4 risks. 2 (50%) are Medium Low, and 2 (50%) are Medium High. All 4 risks (100%) reduced or maintained the same score from the previous quarter. 1 risk (25%) scored 12 or above, and has been escalated to the Strategic Commissioning Board for review this quarter. This is shown below.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
PH04	Failure to deliver public health outcomes within the reduced annual funding envelope	Planned ongoing reduction in government funding under the 2016 Comprehensive Spending Review could lead to failure to deliver public health outcomes within the reduced annual funding envelope, leading to an inability to fully deliver public health outcomes.	Director of Public Health	Financial	<p>Robust budget monitoring system in place, and monthly finance reports presented at SMT.</p> <p>The service continues to undertake regular monitoring of financial position, however the respective financial challenges across both councils does mean that the grant will be redirected towards wider determinants of health, requiring the cessation of certain projects to ensure that funding can be contained within the financial envelope.</p> <p>The specific public health reserve enables a one-off mitigation, if required, should the in-year position not be able to fully mitigate any grant reduction. For Barnet the use of the specific reserve will be utilised to fund wider determinants of health and therefore any pressures which arise which exceed the grant will need to be met by the council's general fund reserves.</p> <p>Review of longer term financial plans ongoing, including service redesign of sexual health and ongoing re-procurement activity.</p> <p>Awaiting outcome of consultation on business rate retention model, which should confirm future grant position.</p>	4	5	3	4	12	Same	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	0 (0.0%)	N/A	N/A

## Regional Enterprise (Re)

Successes	Challenges
<ul style="list-style-type: none"> <li>The One Stonegrove co-located community centre church has been named runner-up for the National Churches Trust Presidents' Award by The Duke of Gloucester at the 2016 Church Architecture Awards. In addition, the Deed of Variation for the facility has been successfully completed, which means a management agent can now be appointed to manage, run and generate income to keep the building financially sustainable for the wider community.</li> <li>The Private Sector Housing Team, working with HB Public Law, has had more success in court this quarter. In November, two companies (Uptown Properties Ltd and YLR Ltd) and a Company Director of Uptown Properties Ltd were found guilty of failing to apply for a mandatory House in Multiple Occupation (HMO) Licence. A total of £6,193 fines, £2,854 costs and £220 victim surcharge were granted.</li> <li>Hendon Cemetery and Crematorium has achieved accredited status for ISO 9001 and ISO 14001 following a two day visit by the Assessor. ISO 9001 is a certified quality management system (QMS) for organisations who want to prove their ability to consistently provide products and services that meet the needs of their customers and other relevant stakeholders. ISO 14001 is an internationally agreed standard that sets out the requirements for an environmental management system. It helps organisations improve their environmental performance through more efficient use of resources and reduction of waste.</li> </ul>	<ul style="list-style-type: none"> <li>Members and residents have raised concerns that the planning enforcement service is not seen as responding effectively to reported breaches of planning consents. An Enforcement Improvement Plan has been developed (and effective from October 2016) with regular updates to Members. The next Members' Planning Enforcement quarterly report update is scheduled for January 2017 and will provide latest information on planning enforcement activity across the borough and progress on related prosecutions.</li> <li>An exceptionally high volume of authority works permit applications have been responded to by Re's NRW/Permit Team with over 3,447 processed in Quarter 3, which has placed pressure on resources in the team to assess all applications within the strict timeframes prescribed.</li> <li>Brent Cross Cricklewood. The working relationship with Network Rail (NR) on Thameslink has been challenging due to the complex nature of the different business units within NR. Issues have been escalated to the Brent Cross Governance Board and DfT. A Station Delivery Board has been set up with NR, Re and the council; and meetings are taking place at a senior level to reinforce the importance of the programme. A one day workshop has been scheduled with NR in January 2017 and NR have formally committed to delivery of the scheme to budget.</li> <li>A number of KPIs in Highways reactive maintenance continue to go unreported for a second consecutive quarter due to challenges obtaining the relevant performance data from the contractor. Whilst reactive repairs for all category type defects continue to be instructed and repaired on the borough's roads, there has been limited data to track performance on turnaround times. Direct discussions to resolve this issue are taking place. Pending resolution, the KPIs will continue to be reported as failed.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>87% (45)</b>	<b>0% (0)</b>	<b>4% (2)</b>	<b>10% (5)</b>	<b>63% (29)</b>	<b>37% (17)</b>

64 indicators are reported in Q3 2016/17. 52 have given a RAG rating: 87% (45) are "on or above target" and 14% (7) are "below target". 48 have been given a Direction of Travel (DOT) status: 65% (31) have an "improved/same" DOT and 35% (17) have a "worsened" DOT from the same period last year. Of the 7 "below target", 1 is Corporate Plan Indicator and can be found in Appendix A:



- KPI 2.1-2.3 Highways defects made safe within agreed timescale.

6 are Service Indicators (in the Assets, Regeneration and Growth Committee Commissioning Plan and/or Re contract) and are set out below.

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
KPI001	Meet building regulation application within statutory timescales	Bigger is Better	96%	96%	95.4% (RA)	97.3%	Worsening	95.8%	Worsening	No benchmark available	
KPI 1.1 NM	Implementation of the Annual programme relating to Highway Safety Inspections	Bigger is Better	100%	100%	Fail (R)	98%	Not comparable due to reporting format	98%	Not comparable due to reporting format	No benchmark available	Performance data for this KPI is not yet available for Q3 and therefore it has been flagged as a fail. The roll-out of mobile working during the quarter has resulted in a combination of paper based and electronic records which has resulted in a delay in reporting as we collate the data.
NM KPI 2.2	Category 1 Defects Rectification Timescales completed on time (48 hours)	Bigger is Better	100%	100%	Fail (R)	100%	Not comparable due to reporting format	98.7%	Not comparable due to reporting format	No benchmark available	These KPIs have been unable to report this quarter due to an on-going issue with the contractor. Direct discussions aimed to resolve this and other contractual issues are taking place between the Authority and the contractor.
KPI 2.3 NM	Number of Highways Category 2 Defects Rectification completed on time	Bigger is Better	100%	100%	Fail (R)	Fail	Not comparable due to reporting format	97%	Not comparable due to reporting format	No benchmark available	
KPI 2.4 NM	Highways Insurance Investigations completed on time	Bigger is Better	100%	100%	99% (RA)	100%	Worsening	98.6%	Worsening	No benchmark available	Meanwhile, Re continues to raise highways repair orders to the

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
KPI 2.8 NM	Construction of Vehicle Crossovers within timescales following receipt of payment	Bigger is Better	100%	100%	Fail (R)	84.9%	Not comparable due to reporting format	88.0%	Not comparable due to reporting format	No benchmark available	contractor and also provides the Authority with a weekly update on instructed works.  The Commissioner has written to the contractor requesting an improved service offer, part of which would be improved reporting and a strengthened KPI regime.

Re has not finalised a joint risk register in time for Quarter 3 reporting. This will be developed early in Quarter 4.

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	290 (25.60%)	-26,594 (-29.1%)	N/A

The **revenue** forecast is an increase of £0.290m. This is due to an increased costs from additional work commissioned by the council, offset by the investment in the capital programme for roads reducing the budget for reactive repairs.

The Re delivery unit **capital** programme has decreased by £26.594m. This is due to deletions of £1.152m where various small projects are no longer going ahead and slippage of £25.442m. The slippage is largely due to Brent Cross land acquisitions now not taking place in 2016/17 (£14.351m) and delays to the schedule for the investment in roads and pavements and carriageways resulting in the re-profiling of the budget (£8.932m).

## Registrar Service

Successes	Challenges
<ul style="list-style-type: none"> <li>The proposed diary changes from Quarter 2 and managing staff resources have been implemented over the last quarter creating more efficiency in service delivery. This has resulted in a 19% increase of deaths registered within 5 days achieving 90% in December from 71% in November and has been a major achievement for the team. Additionally, families registering deaths and requesting the green form (required for urgent funerals) will be issued with the document and offered a death registration appointment within the legal required time frame within five days of death.</li> <li>Five additional diaries (six appointments per diary) for nationality checking service appointments have been offered, which provided 30 more Barnet residents and their families the opportunity to apply for nationality service and start the process of becoming a British citizen. This working practice will be continued in Quarter 4; especially as European nationals who have obtained permanent residency for a year are now eligible to apply, so there will be a greater need of availability for nationality checking service appointments.</li> <li>Income generation has increased by £18,458 on the previous quarter. The Citizenship income from the Home Office has been closely monitored and £10k of income received in December 2016 has been reconciled. The extra income has been achieved from the extra nationality diaries and private citizenship ceremonies.</li> </ul>	<ul style="list-style-type: none"> <li>Relocation of the Registration and Nationality Service from Burnt Oak Registry Office to Hendon Town Hall. This is scheduled to take place in February 2017.</li> <li>Staff development due to time constraints and the legal framework for registration and nationality that need to be learned and maintained by Registrars in a specialist field.</li> <li>Income generation and innovation. New services are being offered, including European Passport Checking Service for European Permanent Residency in collaboration with the Home Office, as well as increasing the availability of Nationality appointments to maximise income. New fees for marriage ceremonies at Hendon Town Hall will be implemented in February 2017, in conjunction with the relocation of the service to Hendon Town Hall.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	67% (6)	11% (1)	0% (0)	22% (2)	33% (3)	67% (6)

9 indicators are reported in Q3 2016/17. All 9 have been given a RAG rating: 67% (6) are "on or above target" and 33% (3) are "below" target". All 9 have been given a Direction of Travel (DOT) status: 33% (3) have an "improved/same" DOT and 67% (6) have a "worsened" DOT from the same period last year. Of the 3 "below target", all are in the Registrar Service contract and are set out below.

Ref	Indicator	Polarity	2016/17 Annual Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (Q3 2015/16)	Benchmarking	Comment where "below target"
R/1	Percentage of births registered within 42 working days of request	Bigger is Better	95%	95%	94% (GA)	91%	Improving	98%	Worsening	No benchmark available	The service is the ninth largest borough for numbers of birth registrations in London. The increased number of births is due to the birthing unit in Enfield Chase farm hospital closing down. The service aim to continue to create additional birth diary days in order to attain the required standard.
R/3	Percentage of deaths registered within 5 working days of request	Bigger is Better	95%	95%	81% (R)	61%	Improving	93%	Worsening	No benchmark available	Extra diaries are being offered on a weekly basis for death registrations. The service will continue to do this in the new quarter and also offer death only appointment diaries staff permitting.
R/4	Percentage of Marriage/Civil Partnership notices appointments offered within 10 working days of request	Bigger is Better	90%	90%	73% (R)	37%	Improving	83%	Worsening	No benchmark available	The service aim to shorten some notice appointments from 1hour to 45 minutes per appointment in order to create more appointment slots for notices per week.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	(0%) 0	75% (3)	25% (1)	0% (0)	100% (4)	0% (0)	0% (0)

The Registrar Service has 4 risks. 3 (75%) are Medium Low and 1 (25%) is Medium High. All 4 risks (100%) reduced or maintained the same score from the previous quarter. No risks scored 12 or above, for escalation to the Strategic Commissioning Board for review this quarter.

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	178 (111.3%)	N/A	N/A

The projected **revenue** overspend of £0.178m within the Registrar Service (Births, Deaths and Marriages) represents 111.3% of the total service budget (£0.160m). Legislative changes since the budget was set have resulted in the demand for ceremonies decreasing significantly. Work is being continued within the service to maximise existing resources and overcome financial constraints.

## Street Scene

Successes	Challenges
<ul style="list-style-type: none"> <li>The ADM proposal has been submitted on time and a timely response provided to questions raised. A comprehensive presentation has been given to the Commissioning Group on the offer.</li> <li>Passenger Transport Services have been successfully relocated from the Mill Hill Depot to North London Business Park, and half the Recycling, Waste and Street Cleansing staff and vehicles have been successfully moved to Harrow.</li> <li>Parking provision and site management, including traffic flow, have been reconfigured, at the Mill Hill Depot to facilitate the release of the main parking forecourt to the Inglis Consortium.</li> </ul>	<ul style="list-style-type: none"> <li>Management activities have been put in place to ensure a smooth transfer of services from the Mill Hill Depot.</li> <li>Budget monitoring briefing sessions and various action plans are in place to deliver the MTFS full year savings targets for 2017/18.</li> <li>Regular communications are taking place with staff to maintain morale during this period of uncertainty, including waiting for the outcome of the ADM submission.</li> </ul>

Service Performance	Green	Green Amber	Red Amber	Red	Improved/Same	Worsened
	<b>55% (6)</b>	<b>36% (4)</b>	<b>9% (1)</b>	<b>0% (0)</b>	<b>70% (7)</b>	<b>30% (3)</b>

13 indicators are reported in Q3 2016/17. 11 have been given a RAG rating: 55% (6) are “on or above target” and 45% (5) are “below target”. 10 have been given a Direction of Travel (DOT) status: 70% (7) have an “improved/same” DOT and 30% (3) have a “worsened” DOT from the same period last year. Of the 5 “below target”, 3 are Corporate Plan Indicator and can be found in Appendix A:

- SS/S3 Percentage of household waste sent for reuse, recycling and composting.
- SS/S4 Percentage of residents who are satisfied with refuse and recycling services.
- SS/S6 Percentage of residents who are satisfied with street cleaning.

2 are Service Indicators (in the Environment Committee Commissioning Plan and/or Street Scene Management Agreement) and are set out below.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
SS/C1	Waste tonnage – residual per household	Smaller is Better	590.85kg per HH	154.41 (Q2 2016/17)	159.90 (Q2 2016/17) (GA)	165.57 (Q1 2016/17)	Improving	164.60 (Q2 2015/16)	Improving	Rank 24 (out of 31 London Boroughs) (December 2016, LAPS)	Barnet's performance will be ranked 24 <sup>th</sup> out of the 33 London Boroughs. Current residual waste bin capacity at houses remains high, with standard capacity being 240 litres per week, and a number of properties having in excess of this capacity. An assessment will be carried out of unregulated waste, which should not be counted as household waste.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
SS/C2	Waste tonnage – recycling per household	Bigger is Better	427.97kg per HH	111.44 (Q2 2016/17)	106.16 (Q2 2016/17) (GA)	107.77 (Q1 2016/17)	Worsening	101.10 (Q2 2015/16)	Improving	No benchmark available	The dry recycling contamination rate has increased from 5.81% in Q2 2015/16 to 7.49% in Q2 2016/17 reflecting increased sampling and monitoring at the Materials Recovery Facility. However a contamination plan is in place and there has been an improvement in contamination figures between Q2 2016/17 and Q1 2016/17. There are a number of factors affecting the amount of material available for recycling including the light weighting of packaging such as glass, plastics and cans, and a decline in paper as consumers use more digital media. To encourage greater food recycling a new food waste campaign will commence in 2017.

Service Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
	20% (2)	10% (1)	70% (7)	0% (0)	70% (7)	0% (0)	30% (3)

Street Scene has 10 risks. 2 (20%) are Low, 1 (10%) is Medium Low, and 7 (70%) are Medium High. 7 risks (70%) reduced or maintained the same score from the previous quarter, and 3 (30%) are new risks. 2 risks (20%) scored 12 or above, and have been escalated to the Strategic Commissioning Board for review this quarter. These are shown below.



Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls in place	Inherent Risk (without controls)		Residual Risk (with controls in place)			Direction of Travel	Response Option
						Impact	Likelihood	Impact	Likelihood	Risk Score		
SS001	Depot relocation: accommodation for all Street Scene services	Risk to Street Scene Delivery Unit that have to move out of MHD and no suitable accommodation has been secured (including planning permission, construction of buildings and licenses granted) for immediate operational use for all services that are provided by Street Scene. Consequently not all services could be provided immediately.	Street Scene Transformation Director	Business continuity	Street Scene has representation on the Board to positively contribute, highlight issues and assist in mitigating delays wherever possible Plan application has been submitted for Copthall Works started at Oakleigh Road South for Tractors	4	3	4	3	12	Same	Treat
SS010	Operation from multiple satellite bases	Following the relocation from MHD to multiple sites there are operational implications such as the need to be sufficiently resourced to ensure compliance with the Operator's license. This means additional costs associated with fleet maintenance, however these costs are currently unknown, and the budget for these has not been identified.	Street Scene Director	Business continuity	Have arranged workshop cover in short term with Fraikins, whilst assess impact	3	4	3	4	12	New	Treat

Finance	Revenue Budget Variance (000s)	Capital Budget Variance (000s) and Slippage (%)	Savings achieved (000s)
	-61 (-0.5%)	-629 (-24.8%)	910 (94.8%)

The **revenue** forecast is £0.061m below the current budget. This relates to an anticipated underspend of £0.276m within Trade Waste due to increased income and tight controls on expenditure on supplies. The underspend overall has been reduced by overspends on transport as a result of the depot relocation to Harrow and other sites, and the resulting new mobile maintenance plan required for the vehicles, and staffing costs .

The **capital** forecast shows slippage of £0.629m as a result of delays in the purchase of vehicles.

## Your Choice Barnet (YCB)

Successes	Challenges
<ul style="list-style-type: none"> <li>Your Choice (Barnet) has successfully set-up Your Choice Enablement Service, providing short-term support packages for people to regain the skills and confidence they need to live independently. The service provides between 1 and 4 visits per day to people in their own home for a period of up to six weeks</li> <li>Your Choice (Barnet) sickness levels have further reduced and are down to 10 days in Quarter 3 which is now Green; this has been steadily reducing throughout the year from 13.2 days in Quarter 1 and 11.5 days in Quarter 2.</li> <li>The number of referrals from Barnet Council and self-referrals from people using direct payments continues to rise and is currently at 58 meaning that the collective target for the full year (40) has already been exceeded.</li> </ul>	<ul style="list-style-type: none"> <li>The use of agency staff has risen from 11.1% in Quarter 2 to 12.7% in Quarter 3. Agency usage continues to be monitored closely and services are actively recruiting in order to cover unplanned absences with contracted staff.</li> <li>The Accident and Incident rate has remained as Red in Quarter 3. This figure historically fluctuates due to the vulnerability of service users; and a robust reporting of all incidents.</li> <li>The number of new referrals from other local authorities is Red in Quarter 3. YCB will continue to work closely with neighbouring authorities and actively market its services.</li> </ul>

Service Performance	Green	Amber		Red	Improved/Same	Worsened
	<b>80% (16)</b>	<b>10% (2)</b>	<b>0% (0)</b>	<b>10% (2)</b>	<b>76% (19)</b>	<b>24% (6)</b>

27 indicators are reported in Q3 2016/17. 20 have been given a RAG rating: 80% (16) are “on or above target” and 20% (4) are “below target”. 25 have been given a Direction of Travel (DOT) status: 76% (19) have an “improved/same” DOT and 24% (6) have a “worsened” DOT as per the percentage of the target variance. Of the 4 “below target”, all are in the YCB contract and are set out below.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short-Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
YCB11	Agency staff	Smaller is Better	n/a	Green: 10% or below Green: 10.1% to 14.9% Amber: 15% to 19.9% Red: 20% or above	12.7% (GA)	11.1%	Worsening	13.7%	Improving	No benchmark available	Agency staff up from 11.1% from Q2 to 12.7% in Q3, and the services are actively recruiting in order to cover unplanned absences with contracted staff
YCB12	Accident Incident Rate	Smaller is Better	n/a	Green: below 5,000 Red: ≥ 5,000	6,400 (AIR only) (R)	6,000 (AIR only)	Worsening	3,200	Worsening	No benchmark available	The Accident and Incident rate has remained as Red in Q3. This figure historically fluctuates, due to the vulnerability of the YCB service users. The services ensure robust reporting of all incidents.
YCB19	New referrals from other local authorities.	Bigger is Better	20	Green: 5 or more Green Amber: 3 or 4 Red Amber: 2 Red: less than 2	6 (R)	5	Improving	7	Worsening	No benchmark available	The number of referrals from other local authorities is now Red as the cumulative total to date is 6 against a target of 20.

Ref	Indicator	Polarity	Annual 2016/17 Target	Q3 2016/17 Target	Q3 2016/17 Result	Q2 2016/17 Result	DOT Short-Term (From Q2 2016/17)	Q3 2015/16 Result	DOT Long Term (From Q3 2015/16)	Benchmarking	Comment where "below target"
YCB23	Service utilisation Valley Way	Bigger is Better	90%	Green: 90% or higher Green Amber: 85%-89% Red Amber: 81%-84% Red: 80% or lower	Overall 89% Monday-Thursday 86% Friday-Sunday 92% (GA)	Overall: 89% Mon-Thu 87% Fri-Sun 92%	Worsening	93% Mon-Thu 93% Fri-Sun 94%	Worsening	No benchmark available	Valley Way Utilisation (PI 23) has remained at 89% overall against a target of 90% and is rated as Green Amber. A number of people who use the service have now moved into supported living settings service. The service is marketing to other local authorities and to people who have personal budgets

YCB risks are contained within the risk register for Barnet Homes above.

## Programmes

The below table illustrates how the council is performing against all projects within the following six portfolios; Central, Adults and Health, Children's and Young People, Growth & Development, Environment and the Schools Capital programme.

Portfolio	Green Status	Amber Status	Red Status	Not yet started	Comments
Central Portfolio	6	3	0	0	<p>The Central Portfolio is delivering well overall and there have been a number of activities taking place on key projects. For The Way We Work Programme, a ground breaking ceremony took place at the new council office location on 5 December 2016, and the ground and first floor internal office layouts have been drafted and approved. A review has taken place into what can be done to assist staff in travelling to and from the Colindale offices and travelling for business purposes, informed by focus groups, a staff survey and best practice research.</p> <p>Unified Reward has been implemented for council staff to ensure a better overall package across the organisation and the first Unified Reward pay run to c.1,460 council staff was made with a zero error rate. The Community Participation Strategy project has moved from amber to green and the Barnet Community Directory has now 'gone live' to bring together information about voluntary and community groups in Barnet to offer guidance and advice to residents.</p> <p>The business case for the Customer Transformation Programme has been approved and phase 1 has started to deliver new and improved online digital transactions to residents, as well as replicating some existing functions, in order to improve residents' experience and encourage greater use of the website for customer transactions.</p>
Adults and Health Portfolio	13	4	0	0	<p>There are more projects being reported as part of the Adults and Health Portfolio than last quarter because more detailed reporting arrangements have been introduced for this portfolio.</p> <p>Some of the key elements of delivery over the last quarter have included a new contract with Your Choice Barnet which is now in place and will increase support to people with learning disabilities, including autism, to move towards more independent living and to participate in the workplace as well as saving £1.2m over the MTFS period.</p> <p>The Investing in IT project has moved from red to amber and considerable progress was made during December 2016. A clear plan to deliver training is being developed and system testing is nearing its start. The General Functions Committee approved recommendations to implement changes to the workforce and structure in the Adults and Communities Mental Health service, in order to reflect an enablement and social care model of mental health support.</p> <p>Demolition commenced for the Moreton Close Extra Care scheme and an event marking the start on site took place on 23 November 2016.</p>

Portfolio	Green Status	Amber Status	Red Status	Not yet started	Comments
Children and Young People Portfolio	8	4	0	0	<p>Progress has been made across the Children and Young People Portfolio and a number of projects are progressing. The Libraries Strategy is in the implementation phase with a number of key activities delivered; preferred Partnership Organisations have been selected and announced: Kisharon in partnership with Mencap is set to operate Childs Hill Library; Inclusion Barnet is to operate East Barnet and South Friern Libraries; and Mill Hill Library will be operated by NW7 Hub.</p> <p>The concept phase of the Resilient Futures project has now been completed and the project is now moving into the implementation phase with a clear delivery plan in place.</p> <p>The Youth Zone project is progressing well and an engagement day with councillors and the public took place on 15 December 2016. Next steps for this project include sign off of the lease arrangements by Assets, Regeneration and Growth Committee.</p> <p>The Outline Business Case for the replacement and relocation of Meadow Close Children's Home was approved at Assets, Regeneration and Growth Committee on 12 December 2016. This project will now progress towards Planning Committee.</p>
Environment Portfolio	4	6	0	0	<p>A number of key milestones have been met in the Environment Portfolio this quarter particularly in relation to Depot Moves; Passenger Transport Services and Barnet Community Transport Service have been successfully relocated to North London Business Park, and part of the Highways (winter gritting and DLO) Service has been successfully relocated to Harrow.</p> <p>For the Street Scene ADM project, the initial Outline Business Case was approved by Full Council on 1 November. Following approval, employee and public consultation took place from 9 November 2016 to 15 January 2017 and the outcome of the consultation will be used to inform the revised Outline Business Case which will be submitted to Environment Committee in March 2017. The Enforcement Trial has also progressed, with an update on progress submitted to Environment Committee on 8 November 2016, where a new fixed penalty notice (FPN) rate for fly tipping was agreed at £400 (£300 if paid within 10 days). It was also noted at Committee that body-worn cameras (BWCs) were shortly to be introduced to the trial – the BWCs were introduced at the end of November 2016. For the Moving Traffic Contraventions (MTCs) project, fifty sites are now live and twenty further sites are due to go live in the next few months. The project seeks to improve safety and is proving a success, particularly outside of schools where compliance has been steadily improving.</p>

Portfolio	Green Status	Amber Status	Red Status	Not yet started	Comments
Growth and Development Portfolio	13	1	2	0	<p>A number of completions have been delivered as part of the Growth and Development Portfolio; in Regeneration, 210 homes have been completed at Millbrook Park and the handover of St Peter's Church and vicarage has taken place on Stonegrove, concluding the very final parcel of land transfer on this scheme.</p> <p>Work has commenced on site for an extra care scheme for older people and early feasibility work is underway on other sites as part of the Tranche 2 of the development pipeline.</p> <p>The RAG status remains red for Tranche 1 of development pipeline. A 6 week review of sites was undertaken in quarter 3 to inform the preferred way forward for the scheme. The Phase 2 Moxon Street planning application was approved at Committee on 19 October 2016.</p> <p>For Tranche 3 (HRA Infill) the full business case was approved by Assets, Regeneration and Growth Committee on 12 December 2016 and agreement was given to substitute the Church End site from the project.</p> <p>Grahame Park, Plot 5 has completed ahead of time delivering 60 new homes that include 25 social rent, 12 shared ownership and 23 private homes. Grahame Park is RAG rated red overall and should improve through 2017 as certainty over the vision and viability of stage B becomes clearer.</p> <p>In relation to Entrepreneurial Barnet, the Burnt Oak Town Centre consultation closed on 23 December 2016.</p> <p>Re have exceeded their annual target for apprentices employed on regeneration activities, with 45 apprentices that started on site in December 2016.</p>
Education Capital Programme	16	8	0	0	<p>Progress continues to be made across a number of projects and overall the Education Capital Programme is on target to achieve pupil places when required.</p> <p>Works are underway to expand Monkfrith primary and St Mary's and St Johns all-through school.</p> <p>In relation to works to support the delivery of Free Early Education (FEE2) works have started onsite at Dollis Infant School and the construction phase has completed at Moss Hall Nursery.</p>

## Key to Indicator RAG ratings:

RAG rating	% of targeted improvement achieved		Description
<b>Green</b>	100% or more	Target is met or exceeded	Meeting target
<b>Green Amber</b>	>80% <100%	Target not met, but 80% or more of targeted improvement achieved	Near target with some concerns
<b>Red Amber</b>	>65% <80%	Target not met, but 65-80% of targeted improvement achieved	Problematic
<b>Red</b>	<65%	Target not met, and less than 65% of targeted improvement achieved	Serious concerns
In addition, any indicator that is less than 10% off target and has a positive Direction of Travel will be amber-rated. Both of the following criteria need to be met if a service is to have a Red-rated performance indicator amended to either Green Amber or Red Amber:			
<b>Amendment to Green Amber:</b>		<b>Amendment to Red Amber:</b>	
1. No more than 5% off target; and 2. A positive Direction of Travel		1. Between >5% and no more than 10% off target; and 2. Positive Direction of Travel or negative Direction of Travel not in excess of 2.5% (if improvement plan in place)	
NB. For indicators with known margin of error e.g. Residents' Perception Survey, any Red rated indicator within the margin of error will be uprated to Red amber.			

## Key to Risk RAG ratings:

Score:		LIKELIHOOD					
		1	2	3	4	5	
		Rare	Unlikely	Possible	Likely	Almost Certain	
<b>IMPACT</b>	5	Catastrophic	Moderate	Medium / High	High	High	High
	4	Major	Moderate	Medium / High	Medium / High	High	High
	3	Moderate	Low	Moderate	Medium / High	Medium / High	High
	2	Minor	Low	Moderate	Moderate	Medium / High	Medium / High
	1	Negligible	Low	Low	Low	Moderate	Moderate



**Key to Finance RAG ratings:**

	<b>Green</b>	<b>Green Amber</b>	<b>Red Amber</b>	<b>Red</b>
	<b>Good performance</b>	<b>Good, with some concerns</b>	<b>Some concerns</b>	<b>Serious concerns</b>
Revenue and capital budget management - variance % (above and below)	0%	< 0.5%	0.5 - 1%	More than 1%
Corporate Plan and HR performance scores	More than 2	0.5 to 2	-1 to 0.	Less than -1

Note: This methodology is different from what was applied in previous quarters.