

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: **Housing and Communities Scrutiny Panel, 5<sup>th</sup> June 2025**

From: **Risk Management and Performance Officer**

Subject: **INTEGRATED PERFORMANCE REPORT - THIRD AND FOURTH QUARTER 2024/25**

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**1. Purpose of Report**

- 1.1 This integrated report seeks to provide appropriate performance information and risk data for service areas within the scope of this Panel.
- 1.2 The report has been adapted to reduce the volume of data (as previously reported under the former scrutiny panel arrangements) whilst still providing the Panel with sufficient information to monitor results to address issues arising.

**1.3 Important Note for Panel Members - Additional information**

Should panel members require additional information relating to performance **not fully explained by the comments supplied**, the following process is essential for the effectiveness of the meeting (to ensure that all issues can be addressed at the meeting):

- Having reviewed the report, the panel member should either ask for additional information to be provided ahead of the meeting or, if necessary, request that the relevant officer(s) attend the meeting. In either instance, the panel member should contact the Chair at their earliest opportunity
- The Chair will then advise the Committee clerks to make the necessary arrangements

**2. Financial Data**

- 2.1 The Overview and Scrutiny Panel (OSP) should note from Q1 of the 2024/2025 financial year, the Integrated Performance Report does not have any financial data that would otherwise be included in reports sent to Cabinet. This will help mitigate any possible confusion amongst officers and elected members, with regards to duplicated financial information. It will also reduce officer time spent producing multiple reports with the same/similar financial data. Previously, financial reports have been reported to both Cabinet and OSP's, and in the case of OSP's, only the financial data relevant to that OSP was presented. This resulted in financial data being compiled and manually separated between OSP's by officers.
- 2.2 The remit of the OSP panel includes scrutinising and reviewing decisions made by the executive and can "call in" a report (if stated within the report itself). Members of each OSP panel are reminded they receive links to Cabinet agendas, reports and meeting minutes which should be being reviewed. Members of the OSP may also discuss and agree whether an item should be added to the OSP work programme for scrutiny purposes, allowing a specific report or update to be provided by the Executive, Cabinet Member and/or Officer(s). Details of the "call-

in” process is included in the OSP Procedure Rules contained within the Constitution.

- 2.3 Each OSP should review the Forward Plan and where a decision has been made, members of the OSP should consider calling in an item if they have concerns which need discussing at a future OSP meeting. As per the May 2025 forward plan, the following financial reports are due to be considered by Cabinet in 2025

- General Fund Revenue Outturn (July Cabinet)
- HRA Revenue Outturn (July Cabinet)
- Capital Outturn (July Cabinet)
- Collection fund 2024/25 (July Cabinet)
- General Fund Budget Monitoring Q1 (September Cabinet)
- HRA Budget Monitoring Q1 (September Cabinet)
- Capital Monitoring Q1 (September Cabinet)

### 3. **Report Format**

Due to the timings of panel meetings, this report includes data for both the third and fourth quarters 2024/25.

The report consists of three parts:

- 3.1 **Appendix A** shows the results as at the end the third and fourth quarters (2 documents):
- The first page provides chart summaries for performance and Strategic Risk Register data within the remit of the panel, a summary of Freedom of Information and complaints and also a summary of Member Enquiry Forms.
  - Subsequent pages provide more detailed information on performance in areas within the remit of the panel. Charts are shown for each measure and “smiley / sad / neutral faces”, as appropriate, to indicate the performance trend. Comments are provided to ensure that Elected Members are made aware of issues relating to performance.
- 3.2 The Strategic Risk Register summary then follows (**Appendix B**). As this is a “live” document, it only shows the information as at the end of the fourth quarter - the latest status summary of the full register followed by the summary and current details of those risks **within the remit** of the panel.
- 3.3 Next is the latest Strategic Performance Report Executive Summary (**Appendix C**) showing the third and fourth quarter reports (2 documents). The Strategic Performance report has been developed to provide an overview of the Council’s position using the following categories:
- Collection Measures (Council Tax, Business Rates and Rent)
  - People and Service Delivery
  - Processes
  - Improvement

The report is reviewed monthly by Management Team.

It provides concise information on positive performance, areas of improvement and where performance is on or around target - comparing to best practice, and/or target and/or previous year, as appropriate.

#### **4. Regulation of Investigatory Powers Act (RIPA) 2000 (covert surveillance)**

- 4.1 An inspection report by the Office of Surveillance Commissioners highlighted the following recommendation:

“The importance of keeping the elected Councillors aware of any activity [or non-activity] under RIPA was appreciated and it was accepted that a minimal observation would be incorporated at regular intervals into officer’s reports”

Consequently, Elected Members should be aware that, as at the end of this quarter, there have been no surveillance operations.

- 4.2 Members should note that an Individual Cabinet Member Decision was made on 6th August 2024, approving an update to the Council's Regulation and Investigatory Powers Act Guidance and Procedure, due to changes in officers, as well as a new policy related to the monitoring and surveillance in the Workplace.

The latter, provides guidance for managers and employees in relation to various processes and tools in use that may capture data and information in the workplace. In an ever increasing digital world, the policy provides information about these processes and tools and how the information may be used to monitor the workplace, in the main to ensure efficient services and safety and welfare of employees.

- 4.3 The Council was requested by the Investigatory Powers Commissioner's Office (IPCO) to provide information and documentation in readiness for an upcoming inspection that was due in 2025. Please note, the last inspection was 2023. As part of the review, the IPCO have confirmed the Council will not require further inspection this year. That said, a couple of considerations have been proposed by the IPCO which will be considered and if necessary, reported to the Audit and Standards Committee during the 2025/2026 Municipal Year.

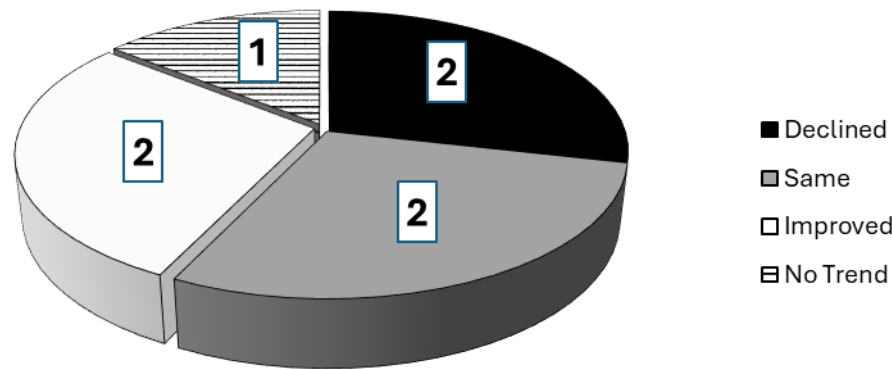
#### **5. Recommendation**

The panel is asked to scrutinise the performance information contained in this report and make any recommendations to the relevant Cabinet portfolio holder and/or Cabinet.

The panel may decide to establish an OSP Review Working Party, proposed, voted and agreed at an OSP itself, to review a specific item/activity. This would be made up of members from the OSP and the OSP would be required to set a clear scope and remit for the review.

STEVE GORE

Performance Measures Summary



Strategic Risk Register Summary

See fourth quarter 2024/25

Freedom of Information (FOI) / Environmental  
Information Regulations (EIR) Requests  
and Complaints Summaries – End of Third Quarter

	Number Received 2024/25 (2023/24)	Completed 2024/25 (2023/24)	Late 2024/25 (2023/24)	Outstanding 2024/25 (2023/24)
FOI / EIR Requests - 20-day target	575 (525)	575 (525)	105 (102)	0 (0)
Complaints -10-day target	1,074 (1,270)	1,074 (1,267)	115 (142)	0 (3)

Member Enquiry Forms (MEFs) Summary  
Third Quarter

Number Received	
2023/24	2024/25
111	286

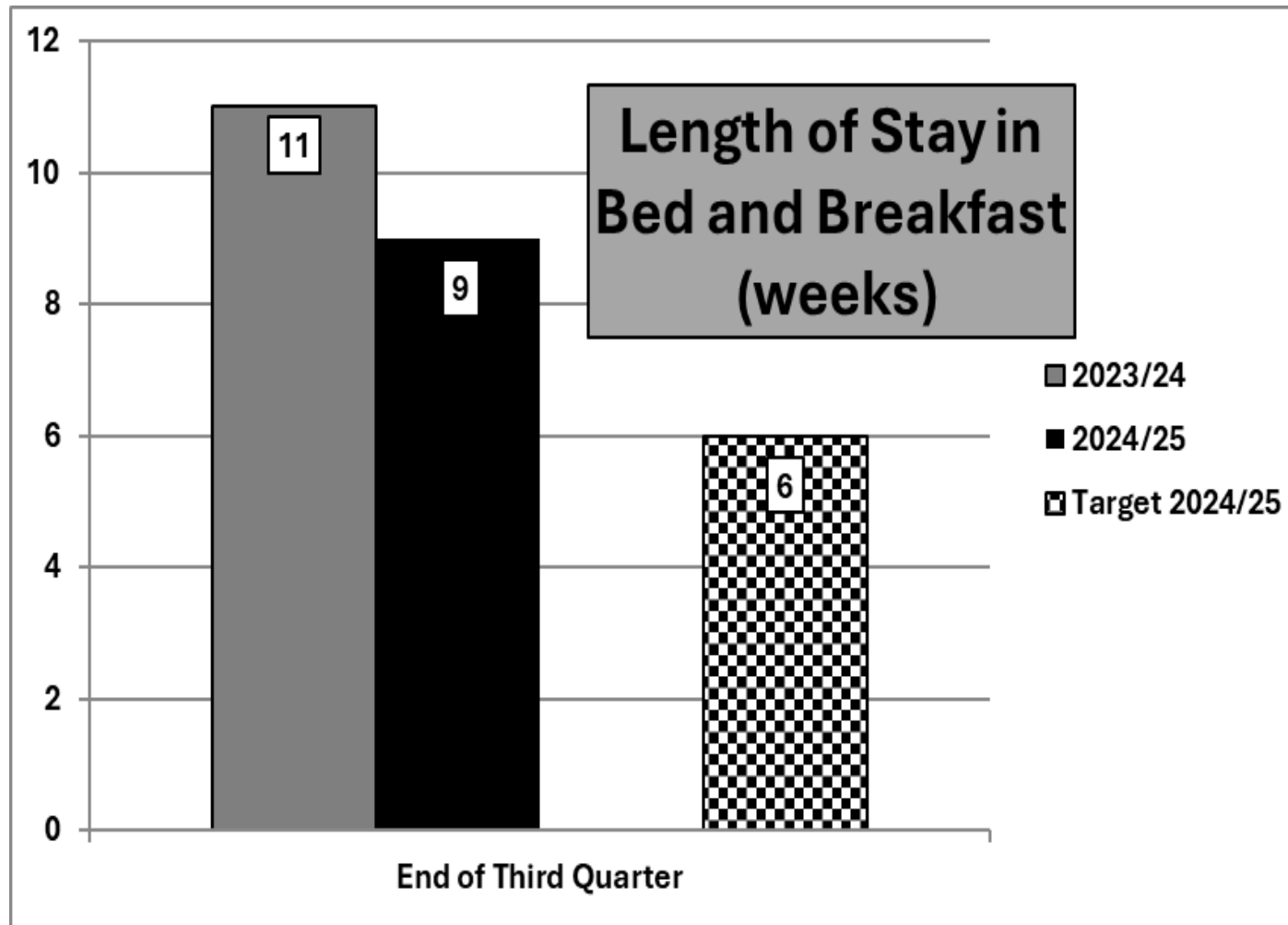
Subject trends identified in the current quarter:

FOI / EIR – No trend(s) identified.

Complaints - No trend(s) identified.

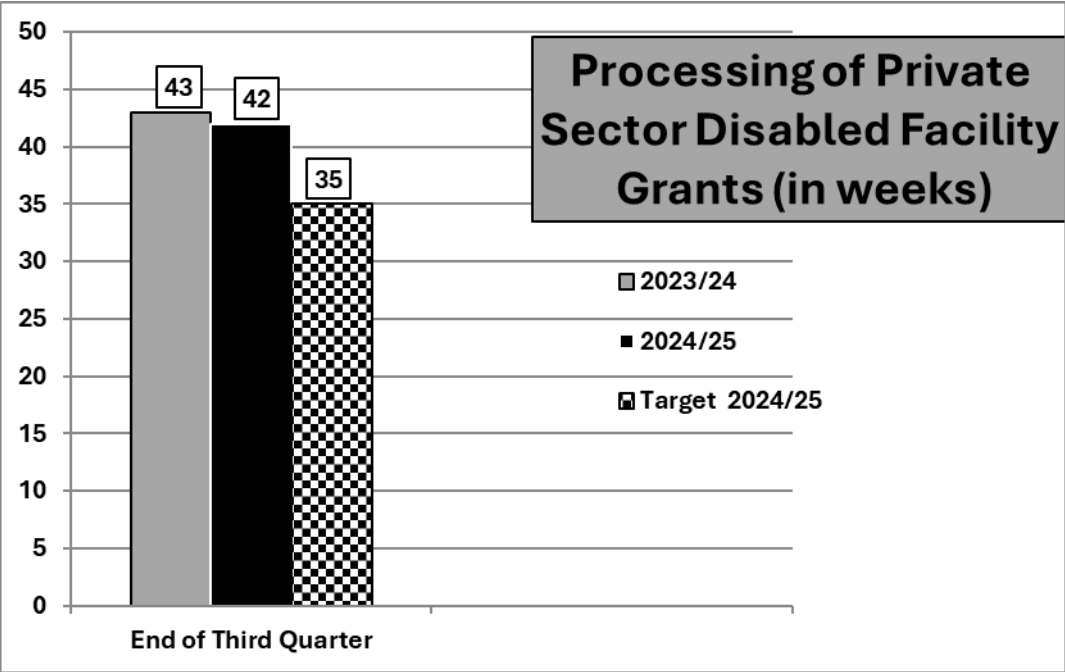
MEFs – 171 for Housing and 38 for Leisure and Culture (73%).

Measure of performance: **Length of Stay in Bed and Breakfast**



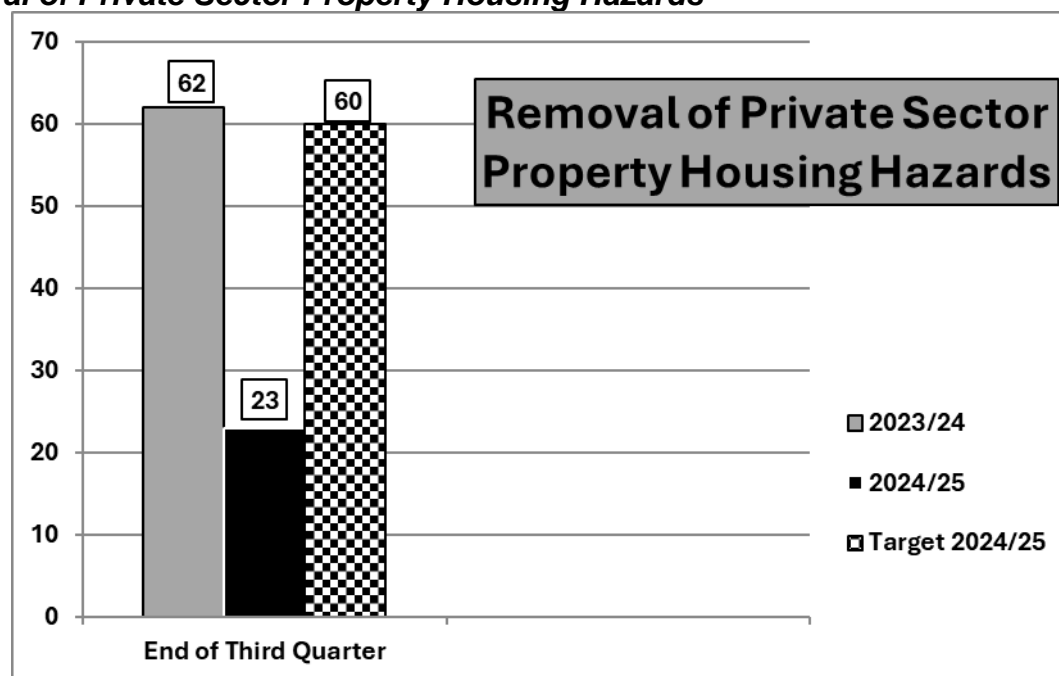
Measure details	End of Third Quarter Performance 2024/25 (2023/24)	Comments	Trend
<b>Length of Stay in Bed and Breakfast Accommodation</b>	9 weeks (11 weeks)	<p>The NBBC target for the placement of households with children remains at of 6 weeks, as this is based on the Government's requirement that families with children are not left in B&amp;Bs any longer than 6 weeks.</p> <p>It should be noted however, that not all our residents in B&amp;Bs are families with children. Where we do need to place a family with children into a Hotel/B&amp;B, we prioritise moving them into alternative available self-contained, which is defined as nightly rate a form of B&amp;B temporary accommodation at the earliest opportunity. The performance recorded here is for all households.</p> <p>The Council continues to experience high numbers of Homeless presentations requiring temporary accommodation. As at the end of December 2024 there were 140 in temporary accommodation.</p> <p>In addition to the lack of social housing available, we also have high demand in the private rented sector where our clients are unable to secure private rentals because every property currently being advertised has in the region of 50+ applicants applying, and due to private rent levels, they are largely unaffordable to households in receipt of benefits.</p> <p>This means that households in temporary accommodation are having to remain longer before they can be rehoused into social housing, whether that is council or housing association stock.</p> <p>To mitigate the situation we continue to direct match 50% of available VOID properties to homeless households occupying temporary accommodation.</p>	😊

Measure of performance: **Processing Private Sector Disabled Facility Grants**



Measure details	End of Third Quarter Performance 2024/25 (2023/24)	Comments	Trend
Processing Private Sector Disabled Facility Grants	42 weeks (43 weeks)	The target for 2024/25 is 35 weeks. Demand continues to be high across the County and there has been a significant increase in some complex children’s DFG cases which is impacting on the end to end times. The Capital Expenditure project has started to deliver against the backlog but it will be several months before the impact of this additional resource will be fully effective.	☹️

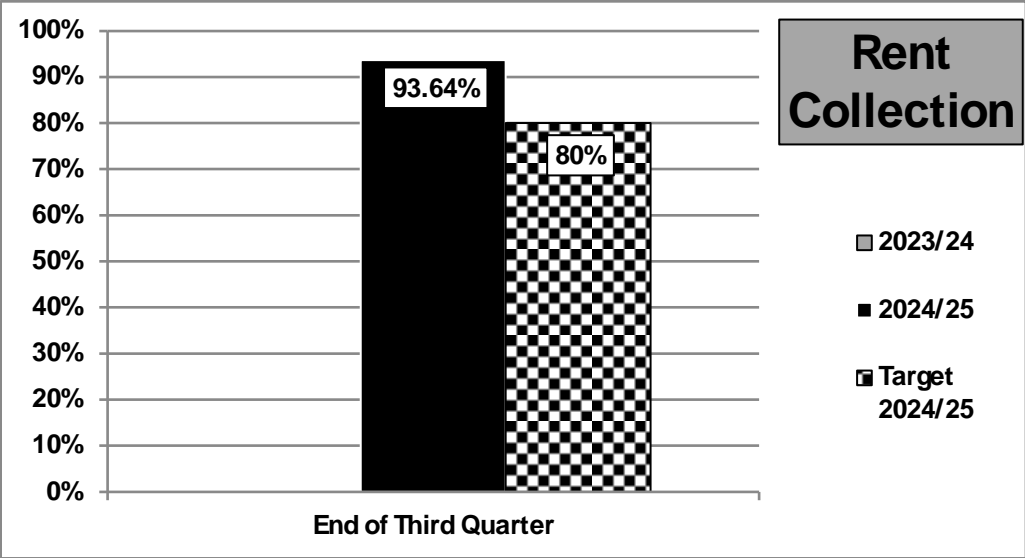
Measure of performance: **Removal of Private Sector Property Housing Hazards**



Measure details	End of Third Quarter Performance 2024/25 (2023/24)	Comments	Trend
Removal of Private Sector Property Housing Hazards	23 (62)	<p>There are hazards that may occur within housing that the Council has a duty to remove should they be rated as likely to cause injury or ill health using the national rating system. Examples of hazards include slips, trips, and falls, electrical, damp and mould, excess cold, food safety, personal hygiene, sanitation and drainage and entry by intruders. Hazards are identified via complaints or service requests to the team.</p> <p>The target for 2024/25 is 60.</p> <p>Unable to establish HEART section data relating to hazards until January 2025 – which means that actual performance will be confirmed in the fourth quarter report.</p>	☹️

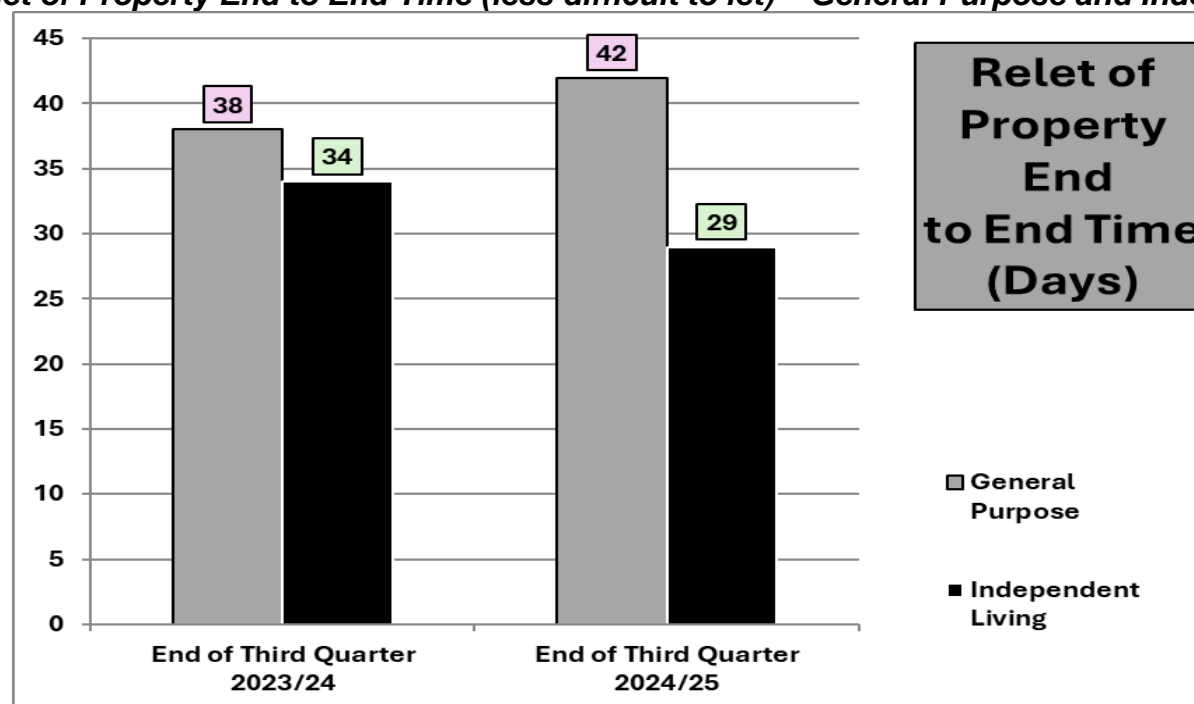


Measure of performance: **Rent Collection**



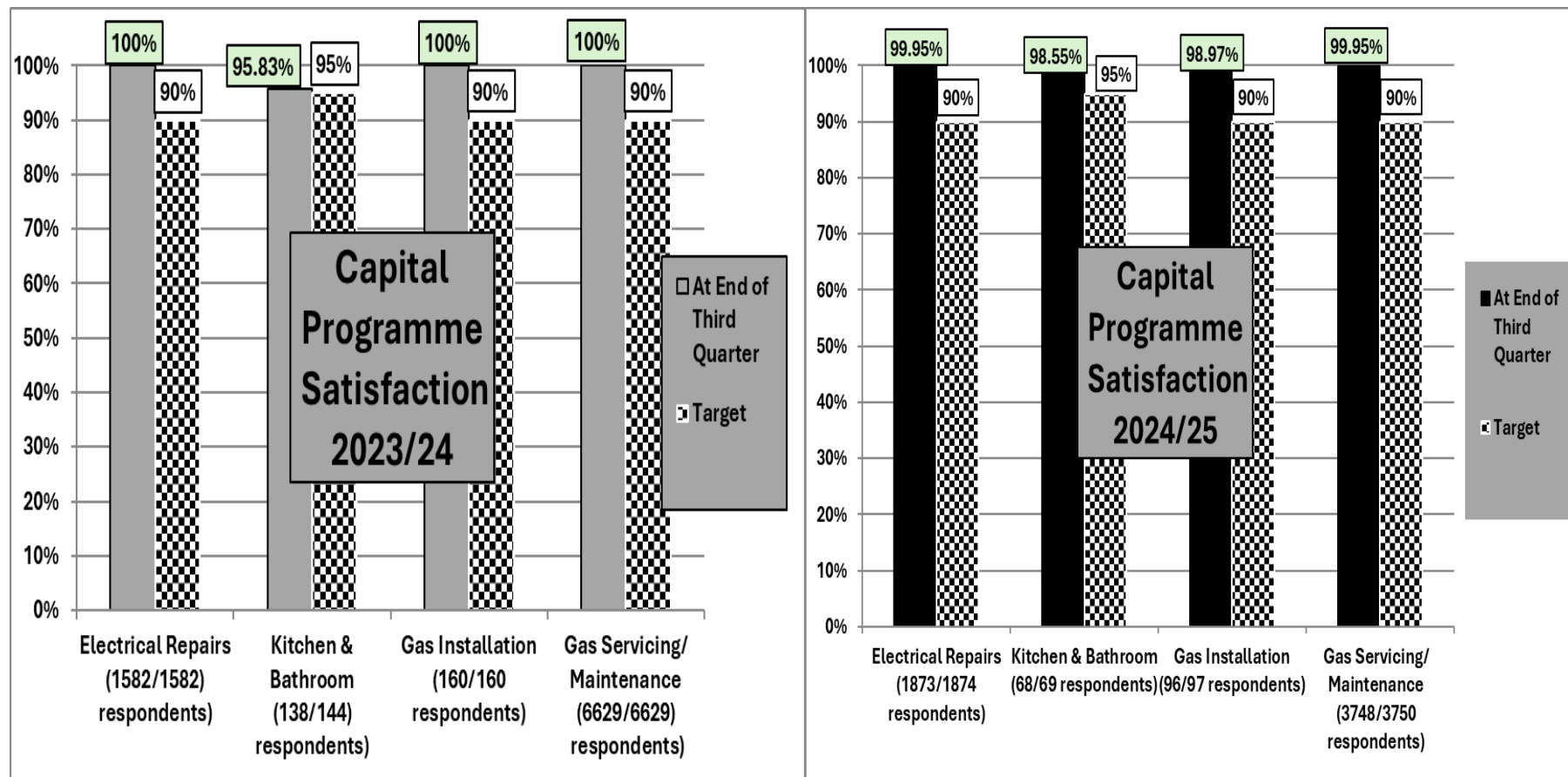
Measure details	End of Third Quarter Performance	Comments	Trend indicator
2023/24	No comparable data	The target for 2024/25 is 80% based on the confirmed arrears data. As the performance data now takes account of the verified arrears figures, no comparable trend data is available for 2023/24.  Performance at the end of the second quarter was 92.55%.	No trend data
2024/25	93.64%		

Measure of performance: **Relet of Property End to End Time (less difficult to let) – General Purpose and Independent Living Properties**



Measure details	End of Third Quarter Performance 2024/25 (2023/24)	Comments	Trend indicator
General Purpose	42 days (38 days)	<p>The overall measure for relet property end to end times comprises two measures – one for General Purpose and one for Independent Living properties. No targets are applicable. The figures exclude those properties that are classed as “difficult to let”.</p> <p>We have been experiencing an unprecedented number of properties that are being returned to us and this is placing huge demand across all teams. In addition, more properties are being returned in a poor condition requiring major works. We are working to relet properties in the quickest time possible in conjunction with external contractors.</p>	☹️
Independent Living	29 days (34 days)		😊

Measure of performance: **Satisfaction with the Capital Work Programme**



Comments					Trend indicator	
Performance is based on those respondents rating the service as good or better. All data shows performance above targets. Excellent results in both 2023/24 and 2024/25. The following table provides clarity on satisfaction performance / respondents:					☹️	
Area	2023/24		2024/25			
	Satisfaction Percentage	Satisfaction Respondents	Overall Response Rates	Satisfaction Percentage		Satisfaction Respondents
Electrical Repairs (target 90%)	100%	1582 / 1582	1874 / 1946 (96.30%)	99.95%		1873 / 1874
Kitchen and Bathroom (target 95%)	95.83%	138 / 144	69 / 81 (85.19%)*	98.55%*		68 / 69*
Gas Installation (target 90%)	100%	160 / 160	97 / 106 (91.51%)*	98.97%*		96 / 97*
Gas Servicing (target 90%)	100%	6629 / 6629	3750 / 3834 (97.81%)*	99.95%*		3748 / 3750*
*= end of <u>second</u> quarter data shown for 2024/25						
<b>IMPORTANT NOTE - Customer satisfaction surveys for gas installation, gas servicing and kitchen and bathroom:</b> Due to the suspension of the contracts for gas installation and gas servicing from October 2024, there is no data for Q3 and Q4. In addition, the Kitchen and Bathroom programme ended in September 2024 and, consequently there is also no data for Q3 and Q4. The Capital Projects section is currently working on arranging for customer satisfaction surveys across all work streams.						

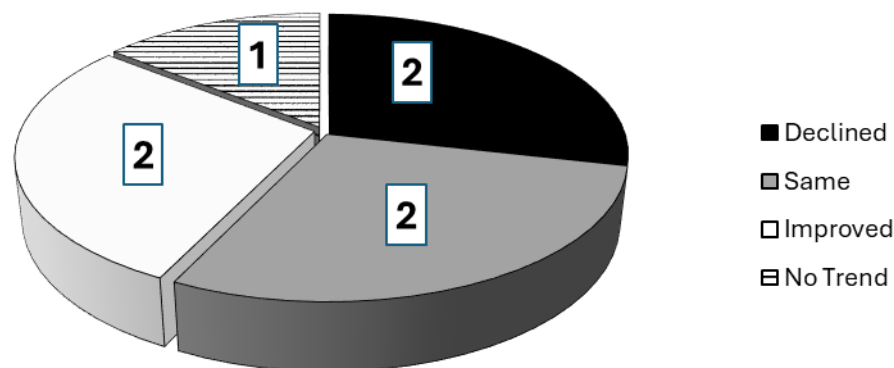
### **Summary:**

**The performance indicator trend data** shows that 2 of the 7 key indicators has improved, 2 have declined, 2 have stayed the same and 1 has no trend at end of the third quarter 2024/25.

**Housing and Communities OSP Performance Measures  
Fourth Quarter 2024/25**

**Appendix A**

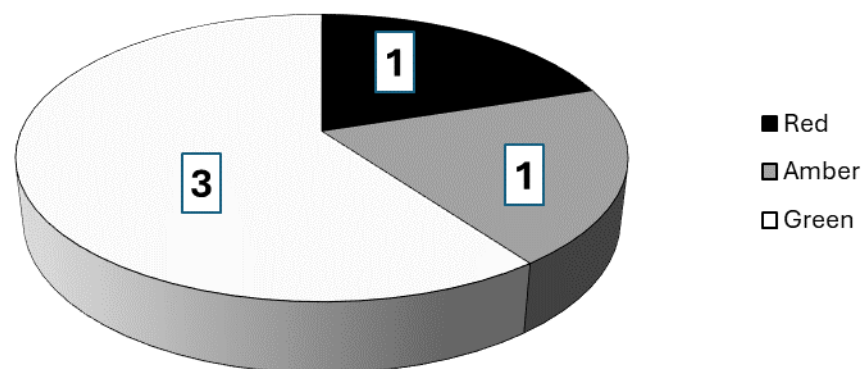
**Performance Measures Summary**



**Freedom of Information (FOI) / Environmental Information Regulations (EIR) Requests and Complaints Summaries – End of Fourth Quarter**

	Number Received 2024/25 (2023/24)	Completed 2024/25 (2023/24)	Late 2024/25 (2023/24)	Outstanding 2024/25 (2023/24)
<b>FOI / EIR Requests - 20-day target</b>	775 (744)	775 (739)	150 (150)	0 (5)
<b>Complaints -10-day target</b>	1,516 (1,584)	1,516 (1,581)	155 (173)	0 (3)

**Strategic Risk Register Summary**



**Member Enquiry Forms (MEFs) Summary  
Fourth Quarter**

Number Received	
2023/24	2024/25
109	187

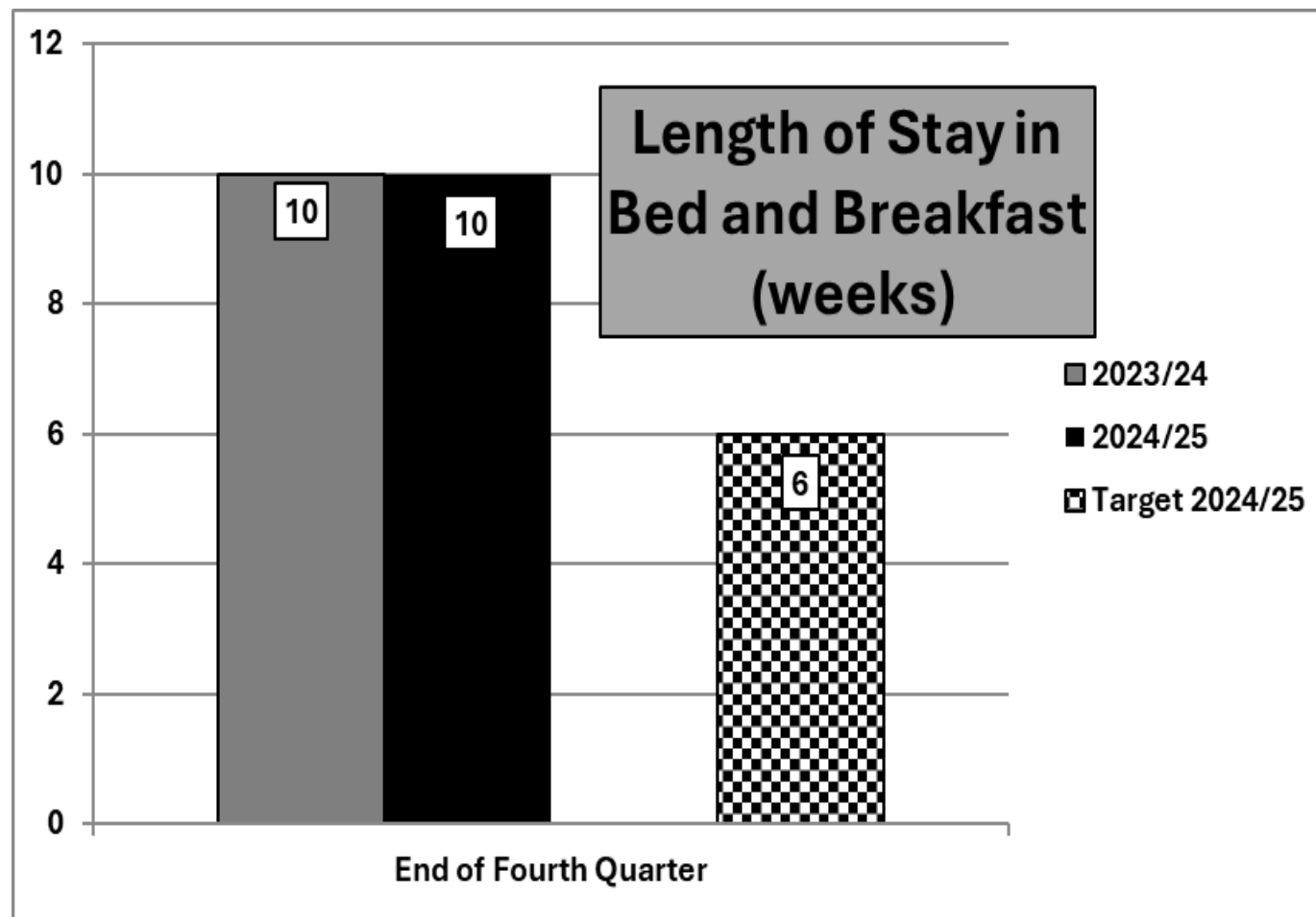
**Subject trends identified in the current quarter:**

**FOI / EIR** – No trend(s) identified.

**Complaints** - No trend(s) identified.

**MEFs** – 59 for Housing and 39 for Leisure and Culture (52%).

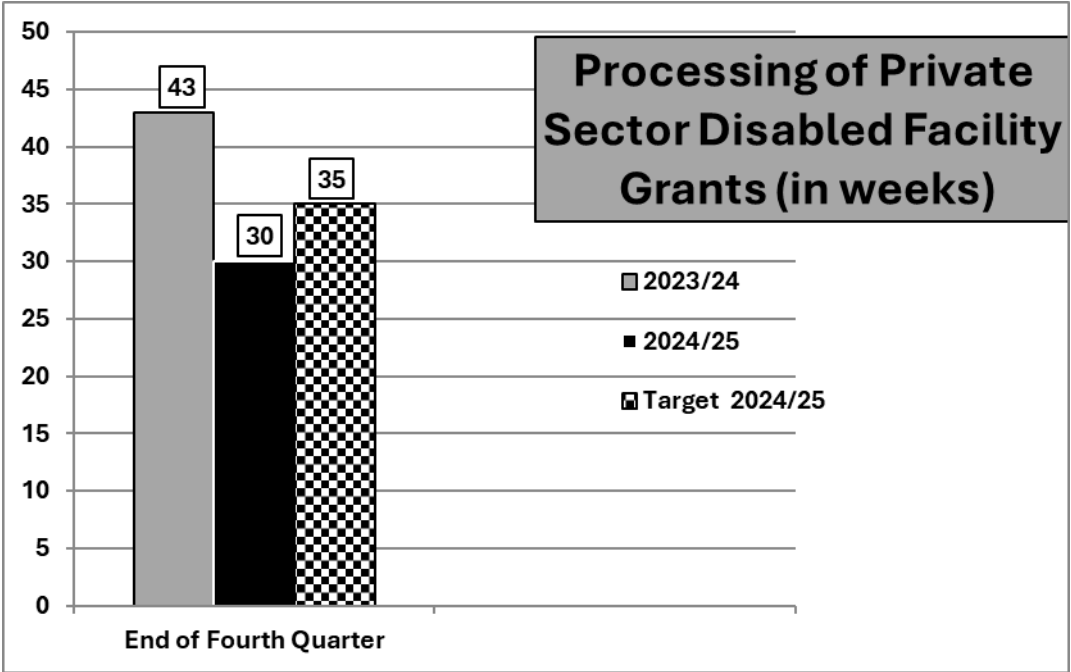
*Measure of performance: Length of Stay in Bed and Breakfast*



Measure details	End of Fourth Quarter Performance 2024/25 (2023/24)	Comments	Trend
<b>Length of Stay in Bed and Breakfast Accommodation</b>	10 weeks (10 weeks)	<p>The NBBC target for the placement of households with children remains at of 6 weeks, as this is based on the Government's requirement that families with children are not left in B&amp;Bs any longer than 6 weeks.</p> <p>It should be noted however, that not all our residents in B&amp;Bs are families with children. Where we do need to place a family with children into a Hotel/B&amp;B, we prioritise moving them into alternative available self-contained, which is defined as nightly rate a form of B&amp;B temporary accommodation at the earliest opportunity. The performance recorded here is for all households.</p> <p>The Council continues to experience high numbers of Homeless presentations requiring temporary accommodation. As at the end of December 2024 there were 140 and, at the end of March 2025, 137 households in temporary accommodation.</p> <p>In addition to the lack of social housing available, we also have high demand in the private rented sector where our clients are unable to secure private rentals because every property currently being advertised has in the region of 50+ applicants applying, and due to private rent levels, they are largely unaffordable to households in receipt of benefits.</p> <p>This means that households in temporary accommodation are having to remain longer before they can be rehoused into social housing, whether that is council or housing association stock.</p> <p>To mitigate the situation we continue to direct match 50% of available VOID properties to homeless households occupying temporary accommodation.</p>	☹️

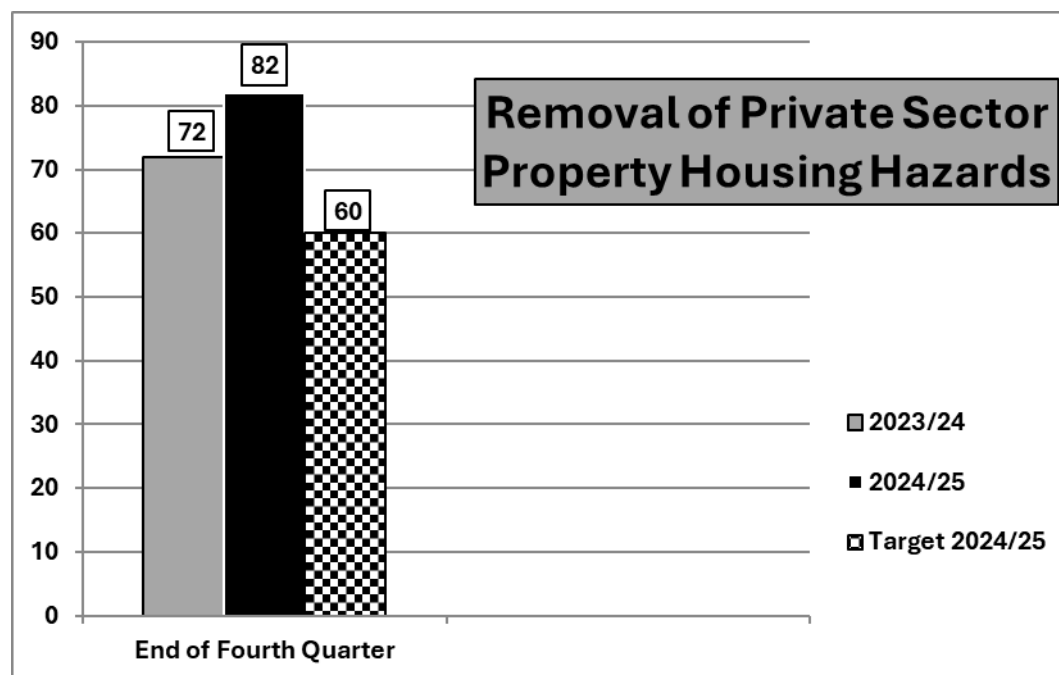


Measure of performance: **Processing Private Sector Disabled Facility Grants**



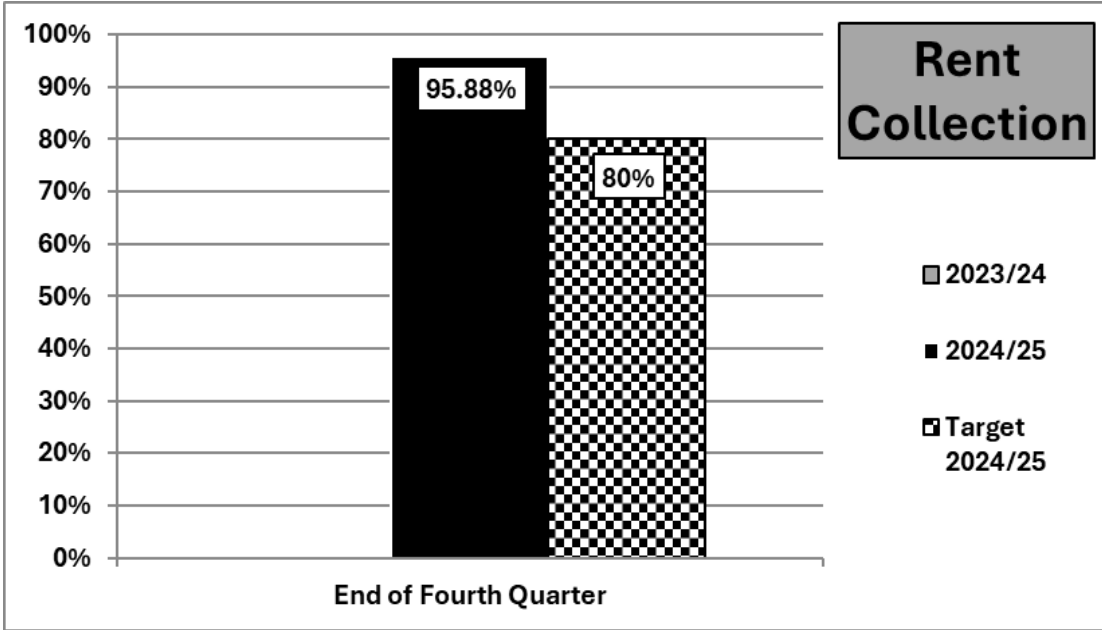
Measure details	End of Fourth Quarter Performance 2024/25 (2023/24)	Comments	Trend
Processing Private Sector Disabled Facility Grants	30 weeks (43 weeks)	The target for 2024/25 is 35 weeks. The Capital Expenditure project referenced in the third quarter data summary is now having the very positive effect anticipated, with performance ending 2024/25 comfortably better than the 35 week target.	😊

Measure of performance: **Removal of Private Sector Property Housing Hazards**



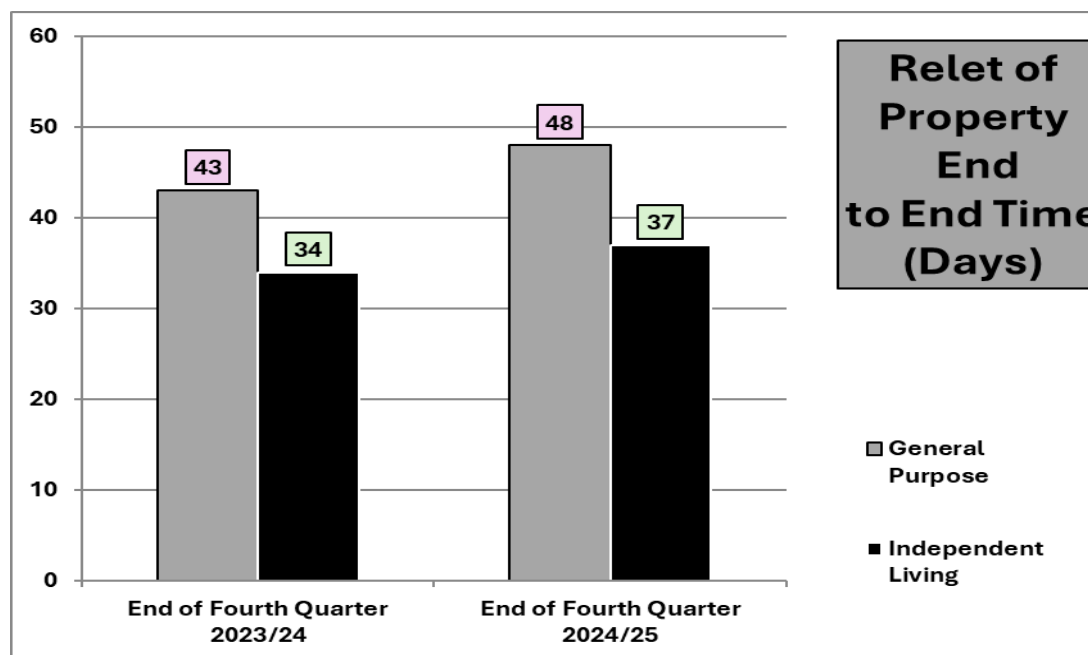
Measure details	End of Fourth Quarter Performance 2024/25 (2023/24)	Comments	Trend
<b>Removal of Private Sector Property Housing Hazards</b>	82 (72)	<p>There are hazards that may occur within housing that the Council has a duty to remove should they be rated as likely to cause injury or ill health using the national rating system. Examples of hazards include slips, trips, and falls, electrical, damp and mould, excess cold, food safety, personal hygiene, sanitation and drainage and entry by intruders. Hazards are identified via complaints or service requests to the team.</p> <p>The target for 2024/25 is 60.</p> <p>Dramatic improvement in performance in the fourth quarter (from 23 at the end of the third quarter) as the HEART section data (not available earlier in the year) is now included</p>	😊

Measure of performance: **Rent Collection**



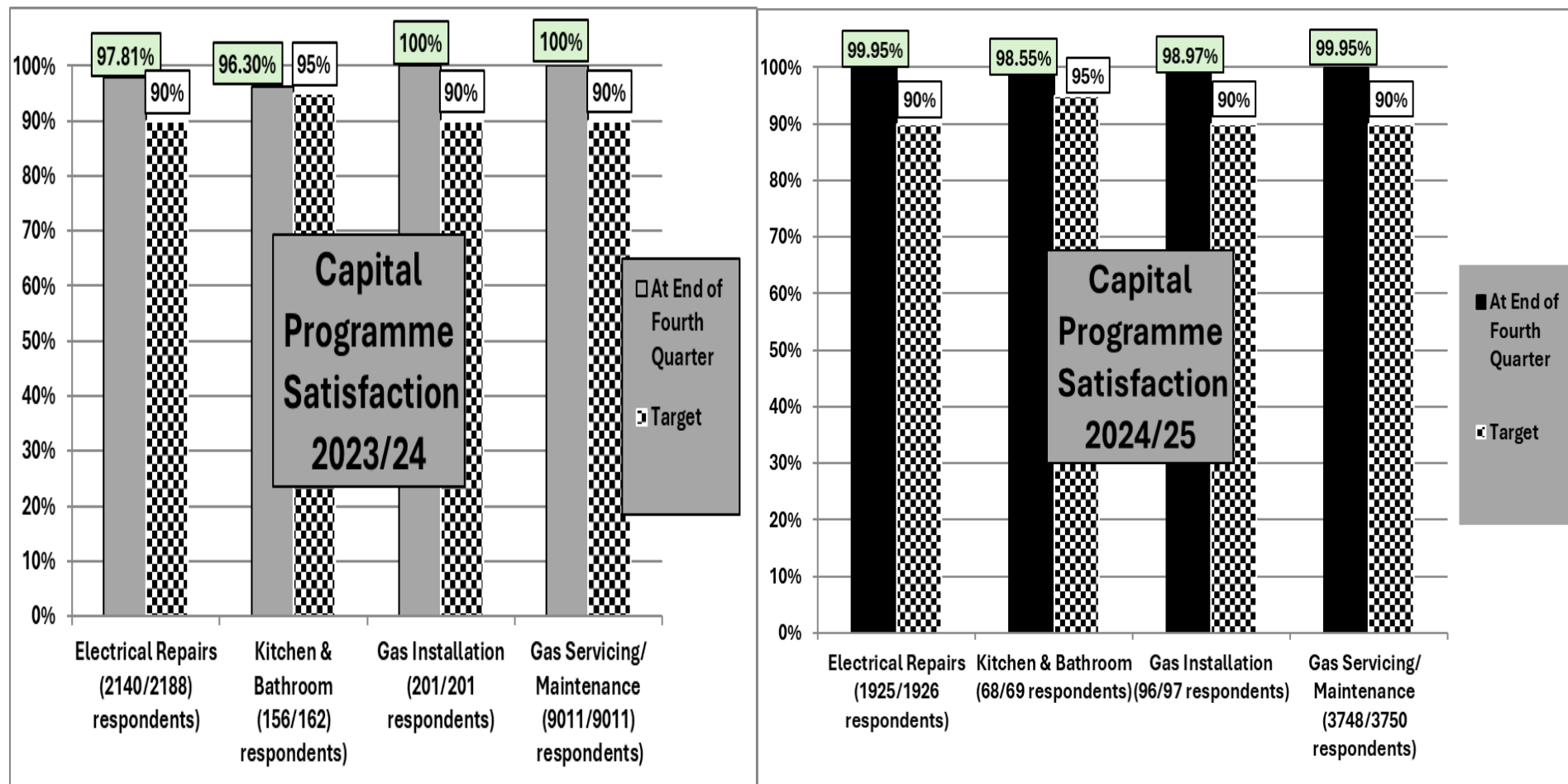
Measure details	End of Fourth Quarter Performance	Comments	Trend indicator
2023/24	No comparable data	The target for 2024/25 is 80% based on the confirmed arrears data. As the performance data now takes account of the verified arrears figures, no comparable trend data is available for 2023/24.  Performance at the end of the third quarter was 93.64%.	No trend data
2024/25	95.88%		

Measure of performance: **Relet of Property End to End Time (less difficult to let) – General Purpose and Independent Living Properties**



Measure details	End of Fourth Quarter Performance 2024/25 (2023/24)	Comments	Trend indicator
General Purpose	48 days (43 days)	<p>The overall measure for relet property end to end times comprises two measures – one for General Purpose and one for Independent Living properties. No targets are applicable. The figures exclude those properties that are classed as “difficult to let”.</p> <p>We continue to experience unprecedented times in terms of properties that are being returned to us (linked to major works) which places a huge demand across all teams and impacting on customers waiting for accommodation. We are prioritising the relet of properties in the quickest time possible in conjunction with external contractors.</p>	☹️
Independent Living	37 days (34 days)		☹️

Measure of performance: **Satisfaction with the Capital Work Programme**



Comments						Trend indicator
Performance is based on those respondents rating the service as good or better. All data shows performance above targets. Excellent results in both 2023/24 and 2024/25. The following table provides clarity on the end of second quarter satisfaction performance / respondents:						☹️
Area	2023/24		2024/25			
	Satisfaction Percentage	Satisfaction Respondents	Overall Response Rates	Satisfaction Percentage	Satisfaction Respondents	
Electrical Repairs (target 90%)	97.81%	2140 / 2188	1926 / 1993 (96.64%)	99.95%	1925 / 1926	
Kitchen and Bathroom (target 95%)	96.30%	156 / 162	69 / 81 (85.19%)*	98.55%*	68 / 69*	
Gas Installation (target 90%)	100%	201 / 201	97 / 106 (91.51%)*	98.97%*	96 / 97*	
Gas Servicing (target 90%)	100%	9011 / 9011	3750 / 3834 (97.81%)*	99.95%*	3748 / 3750*	
*= end of second quarter data shown for 2024/25						
<b>IMPORTANT NOTE</b> - Customer satisfaction surveys for gas installation, gas servicing and kitchen and bathroom: Due to the suspension of the contracts for gas installation and gas servicing from October 2024, there is no data for Q3 and Q4. In addition, the Kitchen and Bathroom programme ended in September 2024 and, consequently there is also no data for Q3 and Q4. The Capital Projects section is currently working on arranging for customer satisfaction surveys across all work streams.						

### **Summary:**

**The performance indicator trend data** shows that 2 of the 7 key indicators has improved, 2 have declined, 2 have stayed the same and 1 has no trend at end of the fourth quarter 2024/25.

## **NBBC Strategic Risk Register Summary**

### **Fourth Quarter 2024/25**

#### **Full Register Summary**

The total number of 'live' risks is now 25 as two new risks have been added:

- **R33 (Grayson Place Ltd. gives rise to unplanned liabilities)** - "net" amber
- **R34 (Corporate Fraud)** - "net" amber

In addition, the following risk status has changed from "net" amber to "net" green

- **R32 (Financial implications to NBBC following appeals / hearings processes for planning applications)** -

Therefore, as at the end of March 2025, the breakdown according to "net" risk is:

- "Net red" 2 (8%)
- "Net amber" 9 (36%)
- "Net green" 14 (56%)

Consequently, 23 (92%) risks are deemed "satisfactorily managed" – meaning that the 'traffic light' reporting position is "Green".

The "net red" risks are:

- **R1 - Potential failure to provide adequate accommodation to meet the needs of the borough with consequent impact on the lives of residents**
- **R4 - Failure to maintain the economic vibrancy of the borough / town centres**

#### **Housing and Communities OSP Risks Summary**

There are five strategic risks within the remit of the panel. One is "net red", one is "net amber" and three are "net green". Details of these risks are shown below.





# NBBC Strategic Risk Register

*Current Version: 15<sup>th</sup> April 2025*

Housing and Communities OSP Risks

## Risk Level Indicator Matrix and Descriptors

### Key

Green	Green 1-4 (acceptable)
Amber	Amber 6-9 (tolerable)
Red	Red 12-16 (unacceptable)

Likelihood

4	4	8	12	16
3	3	6	9	12
2	2	4	6	8
1	1	2	3	4
	1	2	3	4

Impact

### Likelihood

- 4: **Very High** – occurrence is most likely or has already happened and will do so again if control measures are not introduced  
 3: **High** – occurrence is anticipated within the next 12 months  
 2: **Significant** – occurrence is probable in the next 3 years  
 1: **Low** – foreseeable, but not probable in the next 3 years

	Level of Impact	Service Delivery	Financial / Legal	Reputation / Community
4	Major	<ul style="list-style-type: none"> <li>A service delivery failure causes significant hardship to people for a period of 3 to 4 weeks or more or 1 week for anyone that is vulnerable, or failure to meet a nationally mandated deadline</li> <li>Loss of major stakeholder/partner.</li> <li>Adverse outcome of a serious regulatory enquiry</li> </ul>	<ul style="list-style-type: none"> <li>Financial loss over £400,000</li> <li>Serious risk of legal challenge</li> </ul>	<ul style="list-style-type: none"> <li>Sustained adverse TV/radio coverage</li> <li>Borough wide loss of public confidence</li> <li>Major damage to local environment, health and economy</li> <li>Multiple loss of life</li> </ul>
3	Serious	<ul style="list-style-type: none"> <li>A service delivery failure causes significant hardship for a period of 2 to 3 weeks or 3 to 7 calendar days for vulnerable people</li> <li>Formal regulatory inquiry</li> <li>Loss of a key partner or other partners</li> </ul>	<ul style="list-style-type: none"> <li>Financial loss between £200K and £399K</li> <li>High risk of successful legal challenge</li> </ul>	<ul style="list-style-type: none"> <li>Significant adverse coverage in national press or equivalent low national TV coverage</li> <li>Serious damage to local environment, health and economy</li> <li>Extensive or multiple injuries &amp;/or a fatality</li> </ul>
2	Moderate	<ul style="list-style-type: none"> <li>A service delivery failure causes significant hardship for 1 to 2 weeks or 1 -2 calendar days for vulnerable people</li> <li>Loss of a significant non-key partner</li> <li>Legal concerns raised</li> <li>Loss of employees has moderate effect on service provision</li> </ul>	<ul style="list-style-type: none"> <li>Financial loss between £50K and £199K</li> <li>Informal regulatory enquiry</li> </ul>	<ul style="list-style-type: none"> <li>Significant adverse coverage in local press or regional TV</li> <li>Large number of customer complaints</li> <li>Moderate damage to local environment, health and economy</li> <li>Moderate injuries to an individual</li> </ul>
1	Low	<ul style="list-style-type: none"> <li>Disruption to services for up to 1 week</li> <li>Minor legal implications</li> <li>Loss of employees not significantly affecting service provision</li> </ul>	<ul style="list-style-type: none"> <li>Financial loss up to £49K</li> </ul>	<ul style="list-style-type: none"> <li>Minor adverse media coverage</li> <li>Minor environmental, health and economy damage</li> <li>Minor increase in number of customer complaints</li> <li>One or more minor injuries to an individual</li> </ul>

## NET RED RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R1	Potential failure to provide adequate accommodation to meet the needs of the borough with consequent impact on the lives of residents	Very High / Major <b>(RED)</b>	1. Housing / Homelessness Strategy.	1:Assistant Director (Strategic Housing)	Very High / Serious <b>(RED)</b>	1. Housing Needs Survey, Strategic Housing Market Assessment, Housing and Economic Development Needs Assessment (HEDNA), Sustainable 30 Year HRA Business Plan.	Strategic Director (H&CS) / PH – H / H & COM OSP
			2. Warwickshire Heads of Housing Group (WHOH).	2: Assistant Director (Strategic Housing)		2. Minutes of WHOH meetings.	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			3. Affordable Housing Supplementary Planning Document (Borough Plan).	3: Assistant Director (Strategic Housing)		3. Document in place.	
			4. Housing Revenue Account (HRA) Development and Acquisition Strategy.	4: Strategic Director (H&CS)		4. Documents / minutes of meetings.	
			5. Investment Partner status with Homes England.	5: Strategic Director (H&CS)		5. Documents / minutes of meetings.	
			6. Development Team for HRA new builds.	6: Strategic Director (H&CS)		6. Management Team minutes	
			7. Nominations agreements with registered providers.	7: Assistant Director (Strategic Housing)		7. Agreement records.	
			8. Annual review of HRA Business Plan	8: Strategic Director (H&CS)		8. Approved plan in place.	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			9.Landlord Liaison Officers to support sustainable tenancies in private sector housing.	9: Assistant Director (Strategic Housing)		9. Landlord Forum minutes and casework.	
			10.Tenancy Support Officer for HRA stock.	10: Assistant Director (Social Housing and Community Safety)		10.Officer in place / casework notes.	
			11.Creation of Homelessness Prevention Team (January 2024).	11: Assistant Director (Strategic Housing) 12		11.Team in place / casework notes.	
			12.HRA stock "Right-sizing" Policy and Tenant Liaison Officer established	12: Assistant Director (Social Housing and Community Safety)		12.Policy in place / casework records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			13.Revised Homelessness Strategy.	13:Assistant Director (Strategic Housing)		13.Strategy in place.	
			14.Reviewed Housing Strategy (December 2024).	14: Assistant Director (Strategic Housing)		14. Revised strategy in place	
			<b><u>Planned:</u></b>				
			1. HRA / GF development programme.	1: Capital Investment Service Manager / Strategic Director (H&CS)		1. Programmes in place	
			2. Consultation and formulation of a Town Centre Strategy (2025/26).	2: Assistant Director (Economy)		2. Strategy in place	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			3. Review of Borough Plan (Revised plan early 2024, approval and sign-off fully Autumn 2025).	3: Assistant Director (Planning)		3. Publication of revised plan	
			4. Review of Housing Revenue Account Development and Acquisition Strategy.	4: Assistant Director (Social Housing and Community Safety)		4. Elected Member – approved document in place.	
			5.Researching of new initiatives to promote the best use of housing stock (June 2025).	5: Assistant Directors (Strategic Housing) / (Social Housing and Community Safety)		5. Associated research / reports and new policies.	
			6. Up-to-date Strategic Housing Marketing Assessment (SHMA) evidence (in Autumn 2025).	6: Assistant Director (Planning)		6. Local Plan.	



## NET AMBER RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R25	Noncompliance with regulations relating to : <ul style="list-style-type: none"> <li>Freedom of Information</li> <li>Environmental Information</li> <li>General Data Protection</li> </ul> resulting in penalties applied by the Information Commissioner's Office	Very high / major <b>(RED)</b>	<u>Freedom of Information / Environmental Information</u>		Significant / major <b>(AMBER)</b>		Management Team / PH – Cabinet / H&CR, H&COM, E&L & BRP OSPs
			1.Monthly FOI reports to designated service areas.	1: Customer Experience Officer		1.Reports.	
			2.Dash Customer Service Workflow application used to manage outstanding cases.	2: Strategic Director (CR)		2.Dash application.	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			3.Email alerts on receipt of new requests.	3: Strategic Director (CR)		3.Emails.	
			4.Nominated officers in some service areas to monitor outstanding requests.	4: Chief Executive / Strategic Directors		4.Nominated Officers.	
			5.Workflow process regularly reviewed and updated if necessary	5: Information Management Group (IMG)		5.Request reports.	
			6. Regular targeted training on meeting FOI request deadlines.	6: Information Management Group (IMG)		6.Training records.	
			7. Nominated employees to monitor and manage FOI / EIR requests.	7: Strategic Director (CR)		7. Officer in place.	
			8. Qualified DPO co-ordinating information in line with the Freedom of Information Act 2000	8: Strategic Director (CR)		8. Officer in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<b><u>Planned:</u></b>				
			1.Refresher training for Senior Managers (February 2025).	1: Assistant Director (Central Operations)		1.Senior Management Team minutes / training records.	
			<b><u>General Data Protection Regulations (GDPR)</u></b>				
			1. Corporate Information Governance Group (CIGG) / Information Management Group.	1: Assistant Director (Democracy and Governance)		1.Meeting minutes.	
			2. Use of an accredited contractor to dispose of electrical equipment (including IT equipment). The contractor guarantees data destruction & provides certification accordingly.	2: Strategic Director (CR)		2. Contractor agreement and meetings minutes	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			3. Compliance with Public Services Network Code of Connection (PSN Co-Co).	3: Strategic Director (CR)		3. Annual PSN Compliance Certification / "Cyber Essentials Scheme" certification.	
			4. Senior Information Risk Owner (SIRO) and Deputy appointed.	4: Strategic Director (CR)		4. SIRO's Job Description	
			5. Information Governance Framework/ ICT Code of Conduct for Employees/Member Protocol for the Use of IT Resources.	5: Assistant Director (Central Operations)		5. Individual Cabinet Member Decision	
			6. Data Protection Officer (DPO) in line with Data Protection regulations.	6: Assistant Director (Central Operations)		6. DPO in place.	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			7. Data audit and publication of privacy notices.	7: Assistant Director (Democracy and Governance) .		7. Audit records (records of processing activity)/notices on council website.	
			8. External Audit undertaken (Option via Central Midlands Audit Partnership).	8: Assistant Director (Democracy and Governance)		8. Report in place.	
			9. Data Protection training available on Delta.	9: DPO and Training Officer		9. Delta training records	
			10. Refresh of Corporate Governance Group (CGG) / Information Management Group (October 2023) – including monitoring of data breach reports.	10: Assistant Director (Democracy and Governance) / DPO		10.Meetings minutes	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<b><u>Planned:</u></b>				
			1. Data Protection policy to be updated (April 2025).	1: DPO		1. Policy approved.	
			2. Data Protection information to be made available to employees via the new Intranet when available (April 2025).	2: DPO		2. Intranet.	
			3. Information Asset Register to be established (timescale to be agreed with Information Management Group).	3: DPO / Information asset owners		3. Register in place.	
			4. Data protection and Freedom of Information Act training for Senior Managers (on-going).	4: DPO		4. Senior Management meeting records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Data Protection training to be reviewed to ensure that it is up to date and appropriate (on-going).	5: DPO and Training Officer		5. Delta training records.	

## NET GREEN RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R5	Failure to reduce the fear of crime and disorder.	High /- Serious <b>(RED)</b>	1. Nuneaton and Bedworth Safer Communities Partnership (NABSCOP). Meets monthly. Action points identified & regularly reviewed. Has own Risk Register.	1: Communities and Community Safety Manager	Sig / Moderate <b>(GREEN)</b>	1. Minutes of NABSCOP meetings, including crime performance statistics. External OSP reports.	Strategic Director (H&CS) / PH – LC&H / H&COM OSP
			2. Police & Crime Commissioner (PCC) grants.	2: Communities and Community Safety Manager		2. Financial accounts (PCC grant receipt and usage). External OSP reports.	
			3. Annual strategic assessment of crime, the level of crime & its impact on the community.	3: Communities and Community Safety Manager		3. Confidential strategic document in place / Minutes of NABSCOP meetings.	



<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			4. Corporate Community Safety Group.	4: Communities and Community Safety Manager		4. Minutes of Corporate Community safety Group.	
			5. Anti-Social Behaviour & Harassment Policy / Anti-Social Behaviour Strategy	5: Communities and Community Safety Manager		5. Relevant case management records in Flare system / ASB Case Management Group minutes.	
			6. Communities Officer (anti-social behaviour).	6: Communities and Community Safety Manager		6. Officer in place.	
			7. CCTV coverage.	7: Assistant Director (Economy)		7.CCTV records / British Standard BS7958 Certification / Police Tasking Group minutes.	
			8. Public Space Protection Orders (PSPOs) relating to begging control and anti-social cycling in town centres.	8: Communities and Community Safety Manager		8. Cabinet meeting minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			9. Dedicated ASB team for Landlord Services.	9: Assistant Director (Social Housing and Community Safety)		9. Performance reports to Strategic Director and portfolio holder.	
			10. Additional full time Community Safety Officer role within the Council's establishment.	10: Communities and Community Safety Manager		10. Officer in place.	
			11. Establish initiatives via the UK Shared Prosperity Fund (SPF) – 3-year plan ends March 2025.	11: Communities and Community Safety Manager		11. Cabinet approval / initiatives in place. Grant paperwork / criteria.	
			12. Serious Violence Duty delivery plan.	12: Communities and Community Safety Manager		12. Cabinet report / minutes.	
			13. Certification for landlord ASB service	13: Landlord Services Manager		13. Certification in place.	
			<b>Planned:</b>				

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R28	Arson or accidental fire in General Purpose flats and Independent Living Complexes / bungalows / HRA-owned hostels	Significant / Major <b>(AMBER)</b>	1. Fire Management Groups (Operational / Strategic / Governance).	1: Strategic Director (H&CS)	Low / Major <b>(GREEN)</b>	1. FMG meeting minutes. HASCOG reports.	Strategic Director (H&CS)/ PH – H / H&COM OSP
			2. Regularly serviced fire detection & alarm systems / fire extinguishers and appropriate Fire Risk Assessments (FRA) regularly reviewed.	2: Assistant Director (Social Housing and Community Safety) /Capital Projects Investment Manager		2. Service records, Fire extinguisher service records & records of FRA outcomes. External report (review of arrangements).	
			3. Regular Health & Safety inspections give attention to fire risks.	3: Assistant Director (Social Housing and Community Safety) /Capital Projects Investment Manager		3. Quarterly Health & Safety inspection records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			4. Annual Capital Fire Safety Work Programme in Housing Revenue Account stock.	4: Assistant Director (Social Housing and Community Safety) / Capital Projects Investment Manager		4. Cabinet reports and Capital Projects Meeting Minutes.	
			5. External Wall Insulation specification reviewed.	5: Assistant Director (Social Housing and Community Safety) / Capital Projects Investment Manager		5. Property records.	
			6. Maglock doors fitted to communal areas of Independent Living Complexes.	6: Assistant Director (Social Housing and Community Safety) / Capital Projects Investment Manager		6. Doors in place.	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			7. Certified fire doors.	7: Assistant Director (Social Housing and Community Safety) /Capital Projects Investment Manager		7. Doors / Certification in place.	
			8:Review of evacuation policy in complexes (signed off January 2023).	8: Assistant Director (Social Housing and Community Safety)		8. Report in place.	
			9. Implementation of Social Housing (Regulation) Act 2023 regulations and other legislation related to fire detection and carbon monoxide detection systems.	9: Capital Projects Investment Manager / Senior Health and Safety Officer (Housing)		9. Effective detection systems in place.	

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			10.External risk audit report by insurers (Gallagher Bassett) February 2023.	10: Capital Projects Investment Manager / Senior Health and Safety Officer (Housing)		10.Action plan and MT minutes.	
			11. Existing property insurance policy documents.	11: Assistant Director (Finance)		11. Policy documents in place.	
			12. Liaison with Warwickshire Fire and Rescue Service Fire Prevention Team.	12: Capital Projects Investment Manager / Senior Health and Safety Officer (Housing)		12. E-mail records and meeting minutes / outcomes.	
			13. On-going fire safety training (internal and external).	13: Capital Projects Investment Manager / Senior Health and Safety Officer (Housing)		13. Training records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			<b><u>Planned:</u></b>				
			1. Implement periodic Internal Audit report recommendations.	1: Head of Safety and Environmental Health / Capital Projects Investment Manager / Senior Health and Safety Officer (Housing)			
			2. Act on appropriate recommendations arising from public enquiries / legislation changes (on-going).	2: Strategic Director (H&CS) / Assistant Director (Social Housing and Community Safety) / Head of Safety and Environmental Health			

<b>Risk Ref</b>	<b>Risk Description</b>	<b>Gross Risk</b>	<b>Mitigation Control Existing / Ongoing</b>	<b>Mitigation Owner</b>	<b>Net Risk / Status</b>	<b>Sources of Assurance</b>	<b>Risk Owner / Portfolio (PH) / OSP</b>
			3.Review and refresh Business Continuity Plans (September 2025).	3: Strategic / Assistant Directors			
			4.Fire safety information to be produced and published for all tenants and leaseholders (including Tenancy Packs).	4:Assistant Director (Social Housing and Community Safety)			



Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
<b>R30</b>	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after completion of our complaints process	High / Low <b>(GREEN)</b>	1. Formal complaints policy and process.	1: Customer Experience Officer	High / Low <b>(GREEN)</b>	1. Policy and procedure in place.	Strategic Director (CR) / PH Cabinet / H&CR, H&COM, E&L & BRP OSPs
			2. Designated Customer Experience Officer.	2: Customer Experience Officer		2. Designated Customer Experience Office. in place	
			3. Review / Final check of service area escalated responses.	3: Customer Experience Officer		3. Review records retained.	
			4. Ombudsman monitoring by Management Team (Strategic Performance Report).	4: Management Team		4. Strategic Performance Report.	

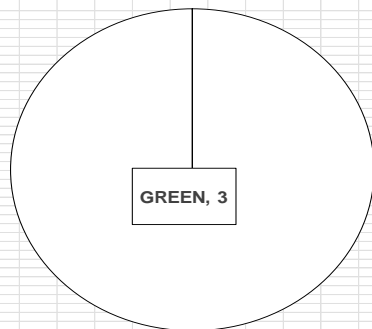
Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Annual Ombudsman report to Scrutiny panel.	5: Customer Experience Officer		5. FPS meeting minutes.	
			<b><u>Planned:</u></b>				
			1. Update complaints policy following regulatory changes (June 2025)	1: Assistant Director (Central Operations)		1. Updated policy in place.	

# Strategic Performance Report – Executive Summary January 2025

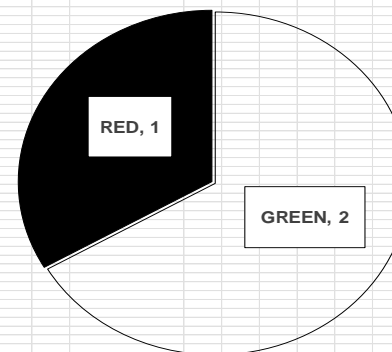
(Data as at the end of December 2024)

## Charts Summary

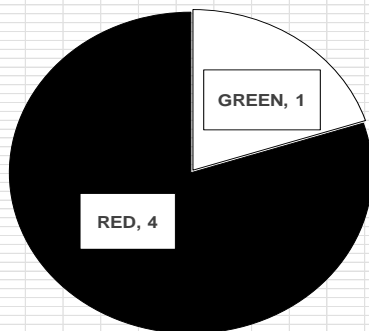
1. FINANCE COLLECTION



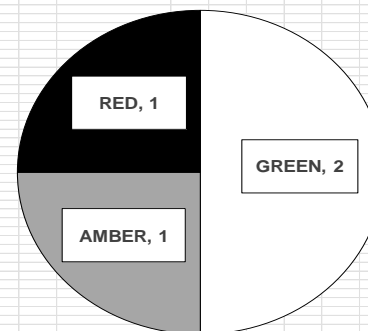
2. PEOPLE AND SERVICE DELIVERY (P&SD)



3. PROCESSES



4. IMPROVEMENT



RED AND AMBER MEASURES BY CATEGORY *		
CATEGORY	RED	AMBER
FINANCE	0	0
P & S D	1	0
PROCESSES	4	0
IMPROVEMENT	1	1

\* = see Executive Summary narrative (areas for improvement).

# **Strategic Performance Report – Executive Summary**

## **January 2025**

**(Data as at the end of December 2024)**

### **Positive aspects**

- **Rent collection** is 91.51% against the 80% target at the end of December – no comparable data for 2023/24
- **Strategic Risk Register monitoring** is 91% against the 80% target at the end of the third quarter 2024 (91% last quarter)

### **Areas for Improvement**

- **Processing of new benefits claims** is 34.64 days (35.24 days last month) against the 22 days good performance benchmark and compared to 21.11 days in December 2023. Improvement month-on-month since September is expected to accelerate towards good benchmark performance of 22 days in the final quarter of 2024/25
- **Working days lost to short term sickness absence** is 3.32 days per full time equivalent (FTE) against the profiled target of 2.61 days/FTE at the end of December (3.42 days/FTE at the end of December 2023)
- **Working days lost to long term sickness absence** is 5.49 days per full time equivalent (FTE) against the profiled target of 3.95 days/FTE at the end of December (5.27 days/FTE at the end of December 2023)
- **Short term return to work interview compliance** rolling average is 56.15% within 3 days (53.91% last month). The average time to complete all interviews is 1.92 days (1.60 days last month)

### **Breakdown of Short Term Return to Work Interview Compliance**

<b>DIRECTORATE</b>	<b>COMPLIANCE WITHIN 3 DAYS (ROLLING MONTHS)</b>	<b>DAYS TO COMPLETE ALL INTERVIEWS (ROLLING MONTHS)</b>
<b>Chief Executive</b>	<b>100%</b>	<b>0</b>
<b>Corporate Resources</b>	<b>67.25%</b>	<b>0.69</b>
<b>Place and Economy</b>	<b>65.71%</b>	<b>1.35</b>
<b>Housing and Communities</b>	<b>57.34%</b>	<b>1.34</b>
<b>Public Services</b>	<b>32.57%</b>	<b>6.50</b>

# Strategic Performance Report – Executive Summary

## January 2025

**(Data as at the end of December 2024)**

### Areas for Improvement

- **Agency staff spend** £822,094 as at the end of December compared to £577,435 at the end of December 2023:

General Fund	£	441,978	54%
HRA	£	380,116	46%
<b>Total</b>	<b>£</b>	<b>822,094</b>	<b>100%</b>

As the pay award was distributed in November, the 5% provision has been removed from the salary figures. Salary figures are now based on actuals - however the agency figures still include a 4% provision as we have not received any potential back pay on the agency invoices as of yet. This is netted against an estimated (£1.74M) salary underspend, creating a NET underspend of (£912k) across the general fund and HRA budgets.

	Underspend	Net Underspend
General Fund	- 1,080,880	- 638,902
HRA	- 653,510	- 273,394
<b>Total</b>	<b>- 1,734,390</b>	<b>- 912,296</b>

The top three cost areas are:

<b>DOMESTIC REFUSE</b>	£158,220
<b>REACTIVE REPAIRS</b>	£131,796
<b>REPAIRS &amp; MAINTENANCE - VOIDS</b>	£113,962
<b>TOTAL</b>	<b>£403,978 (49% of total agency spend)</b>

- **Building a Better Borough (BaBB) monitoring** is 66% against the 80% target at the end of the third quarter (70% last quarter)
- **Health and Safety monitoring** is 77% against the 80% target (80% last quarter)

### ADDITIONAL NOTE

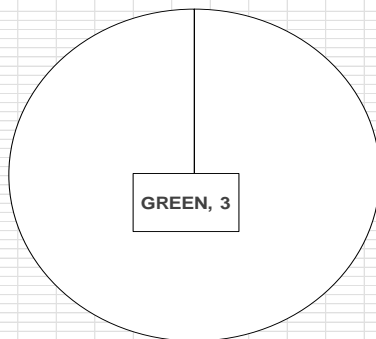
There are 15 performance indicators within the Strategic Performance Report, reported by exception with performance being on or around target / good performance benchmark unless otherwise stated in this summary.

# Strategic Performance Report – Executive Summary April 2025

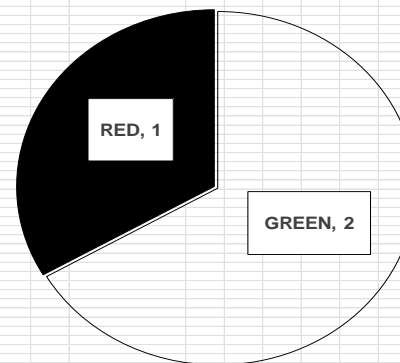
(Data as at the end of March 2025)

## Charts Summary

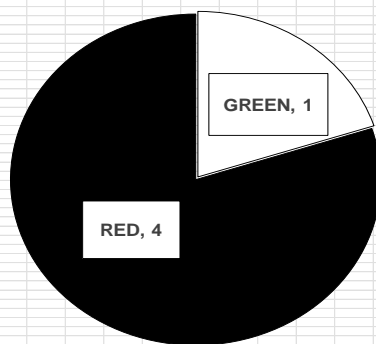
### 1. FINANCE COLLECTION



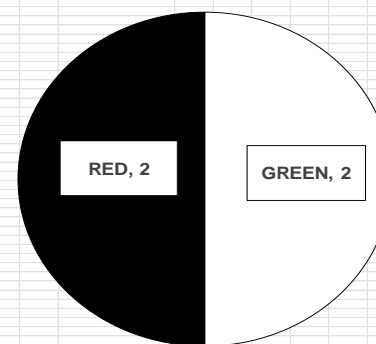
### 2. PEOPLE AND SERVICE DELIVERY (P&SD)



### 3. PROCESSES



### 4. IMPROVEMENT



#### RED AND AMBER MEASURES BY CATEGORY \*

CATEGORY	RED	AMBER
FINANCE	0	0
P & S D	1	0
PROCESSES	4	0
IMPROVEMENT	2	0

\* = see Executive Summary narrative (areas for improvement).

# **Strategic Performance Report – Executive Summary April 2025**

**(Data as at the end of March 2025)**

## **Positive aspects**

- **Rent collection** is 95.88% against the 80% target at the end of March– no comparable data for 2023/24
- **Planning permissions for affordable homes** is 26% against the 25% target at the end of the fourth quarter 2024/25
- **Percentage of waste recycled and composted** is 38.83% at the end of February against the profiled target of 35% (normally reported one month in arrears of other data) - figures for 2024/25 exclude the contamination rate pending a verification process
- **Strategic Risk Register monitoring** is 91% against the 80% target at the end of the fourth quarter 2024/25 (91% last quarter)

## **Areas for Improvement**

- **Processing of new benefits claims** is 33.67 days (34.35 days last month) against the 22 days good performance benchmark and compared to 21.43 days in March 2024. Improvement month-on-month since September continues but again, not at the anticipated rate at the end of the final quarter 2024/25
- **Working days lost to short term sickness absence** is 4.41 days per full time equivalent (FTE) against the profiled target of 3.50 days/FTE at the end of March (4.84 days/FTE at the end of March 2024)
- **Working days lost to long term sickness absence** is 6.88 days per full time equivalent (FTE) against the profiled target of 5.25 days/FTE at the end of March (6.94 days/FTE at the end of March 2024)
- **Short term return to work interview compliance** rolling average is 55.70% within 3 days (57.09%% last month). The average time to complete all interviews is 1.69 days (1.79 days last month)

# Strategic Performance Report – Executive Summary April 2025

**(Data as at the end of March 2025)**

## Areas for Improvement

### Breakdown of Short Term Return to Work Interview Compliance

DIRECTORATE	COMPLIANCE WITHIN 3 DAYS (ROLLING MONTHS)	DAYS TO COMPLETE ALL INTERVIEWS (ROLLING MONTHS)
Chief Executive	100%	0
Corporate Resources	59.05%	0.74
Place and Economy	62.22%	1.32
Housing and Communities	59.52%	1.31
Public Services	40.39%	4.85

- **Agency staff spend** is £1,084,441 as at the end of March compared to £779,066 at the end of March 2024:

General Fund	£ 571,226	53%
HRA	£ 513,215	47%
<b>Total</b>	<b>£ 1,084,441</b>	<b>100%</b>

As the pay award was distributed in November, the 5% provision has been removed from the salary figures. Salary figures are now based on actuals. We also received an additional invoice in February for £8K which covers any backpay related to the pay award, so the 4% provision has been removed from agency costs. This is netted against an estimated (£2.24M) salary underspend, creating a NET underspend of (£1.15M) across the general fund and HRA budgets.

	Underspend	Net Underspend
General Fund	- 1,313,733	- 742,507
HRA	- 924,063	- 410,848
<b>Total</b>	<b>- 2,237,796</b>	<b>- 1,153,355</b>

The top three cost areas are:

<b>REACTIVE REPAIRS</b>	£216,988
<b>DOMESTIC REFUSE</b>	£200,868
<b>REPAIRS &amp; MAINTENANCE - VOIDS</b>	£137,760
<b>TOTAL</b>	<b>£555,616 (51% of total agency spend)</b>



# **Strategic Performance Report – Executive Summary April 2025**

**(Data as at the end of March 2025)**

## **Areas for Improvement**

- **Building a Better Borough (BaBB) monitoring** is 66% against the 80% target at the end of the fourth quarter 2024/25 (also 66% last quarter)
- **Health and Safety monitoring** is 72% against the 80% target at the end of the fourth quarter 2024/25 (77% last quarter). Targets have not been met for Legionella linked to the new contract starting in March 2025, risk assessment reviews and recycling monitoring inspections

## **ADDITIONAL NOTE**

There are 15 performance measures within the Strategic Performance Report. Reporting is by exception with performance being on or around target / good performance benchmark unless otherwise stated in this summary.