# Quarterly Corporate Performance & Monitoring Report: Appendix A

Q4 2024-25





## **Definition of RAG ratings**

Performance against target is assessed using a traffic light RAG (red, amber, green) rating. Definitions of these ratings are provided in table 1 below.

#### Table 1- Definitions for RAG ratings

Rating	Meaning					
Green	Performance is equal to or better than target.					
Amber	Performance is worse than target but within an acceptable tolerance.					
Red Performance is worse than target and falls outside of the acceptable tolerance.						





OFFICIAL

#### Portfolio Overview Children, Young People & Families

20 KPIs are available to be reported on this quarter of which 7 are rag rated green, 5 are amber and 8 are red rated. For an additional 2 KPIs data is not available.

Of the indicators the Children and Families directorate are directly responsible for, those relating to the issue of Education Health Care Plans (EHCP) and allocation of resourcebase provision or specialist placements have all ended the year rated red. There has been some improvement this quarter in the Percentage of EHCPs issued within 20 weeks excluding exceptions which is reported as a 12-month rolling average. Performance had dramatically declined over quarters 1 to 3, falling to 27.8% in Q3 but Q4 performance is reported at 45%, reflecting the improvement in recent monthly performance. There has been an increase in the number of children and young people (aged 5 – 16) with an EHCP awaiting resource-base provision for more than 12 weeks, with numbers reported having more than doubled from 86 at the start of the year to 185 in Q4. The number of children and young people with an EHCP awaiting specialist placements of more than 12 weeks have also increased as the year has progressed, however the year average is lower at 155.5 than last year (199.5) and 22/23 (283). Numbers of new assessments and maintained EHCPs continue to rise which inevitably impacts on those children and young people assessed as needing resource base or special school placements. In addition, there will always be higher numbers awaiting placements as the academic year progresses because any increases in commissioned places become available at the start of the academic year. The delivery of the SEND and Alternative Provision Improvement Plan remains a key priority of the Council's Improvement and Recovery plan.

Absence rates for primary, secondary and special schools have also all ended the year rated red, with the rate for each increasing quarter on quarter throughout the year. Poor attendance is a systemic issue across the UK caused by a range of factors including shifts in parental attitudes following the pandemic, a growing mental health crisis among children, and a breakdown of trust between schools and families. To address these issues the directorate has implemented an attendance strategy, is investing in an increased attendance team and is working in partnership with Department for Education and schools to support schools, families and children to improve attendance.

The percentage of applicants who received an offer to one of their top 3 schools have been reported this quarter, both have exceeded their target (primary 99%, secondary 97%) and are rated green.

The management of performance of Birmingham Children's Trust (BCT) is primarily monitored through the provisions set out in Schedule 6 (Performance Framework) of the Service Delivery Contract between BCC/BCT. This includes provision for regular monthly reporting of stipulated KPIs at the Operational Commissioning Group and also has provision for rectification and improvement in performance (if needed alongside outlined formal escalation processes). An annual review of contractual KPIs is also provisioned for, and is to be agreed and signed off following the Annual Review process set out in Schedule 3 of the contract.

BCT reports on five KPIs under this portfolio, three of which are rated green at the end of the year and two rated amber. Performance against the Percentage of Care Leavers in suitable accommodation has been rated amber throughout the year but year average performance is higher than that for the previous two years. Average social worker case load has increased this quarter and is also now rated amber. There has been an improvement in performance on the re-referral rate to BCT of 6-percentage points (smaller is better) from Q1 to Q4, results are now at their lowest since 22/23 and better than 23/24 core cities average.

#### Portfolio Performance Overview: Children, Young People & Families

A total of 20 KPIs are available to be reported on this quarter. 7 (35%) KPIs are on track or exceeding target, 8 (36%) are reported off track. 2 (29%) KPIs have improved, 2 (29%) KPIs have worsened.

			Previous P	erformance			Pe	erformance	Reported	l in Q4 2	024-25	
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual Results Cumulative	Benchmark Result
0												
L Children and Families												
BCT: Percentage of care leavers in suitable accommodation aged 19, 20 or 21 (CF_CP_02)	Bigger is better	93%	94%	93%	92%	95%	92%	March 25	Static	N/A	N/A	87% (2023/24)
BCT: Percentage of children who become the subject of a Child Protection Plan for a second or subsequent time within the last 2 years (CF_CP_07)	Smaller is better	11%	10%	10%	8%	14%	10%	March 25	Worse	N/A	N/A	24.81% (2023)
Early Years Entitlement: Percentage of 2 year olds accessing Early Education Entitlement (EEE)	Bigger is better	67%	NYD	64%	66%	74%	60%	Spring 25	Worse	N/A	N/A	70.80% (2024)
Early Years Entitlement: Percentage of 3 and 4 year olds accessing 15 hours Early Education Entitlement (EEE) (CF_CP_12)	Bigger is better	92%	NYD	89%	88%	94%	87%	Spring 25	Worse	N/A	N/A	93.60% (2024)
Number of children and young people (aged 5-16) with an EHCP awaiting specialist placements for more than 12 weeks (CF_CP_14)	Smaller is better	186	130	104	179	166	209	March 2025	Worse	N/A	N/A	N/A**
Absence Rate: Primary (CF_CP_15a)	Smaller is better	8%	5.80%	6%	NYD	5.90%	7.40%	Summer term 23/24	Improved	N/A	N/A	6.36% (2022)
Absence Rate: Secondary (CF_CP_15b)	Smaller is better	9%	7.40%	8.20%	NYD	9%	10.50%	Summer term 23/24	Improved	N/A	N/A	8.75% (2022)
Absence rate: Special (CF_CP_15c)	Smaller is better	N/A	13.80%	14.40%	NYD	13%	14.60%	Summer term 23/24	Worse	N/A	N/A	13% (2022)
Exclusion rate: primary (CF_CP_23a)	Smaller is better	0.01%	NYD	0.01%	NYD	0.0%	0.03%	Spring term 2023/24	Worse	N/A	N/A	0.02% (2022/23 (academic))
Exclusion rate: secondary (CF_CP_23b)	Smaller is better	0.09%	NYD	0.05%	NYD	0.18%	0.06%	Spring term 2023/24	Worse	N/A	N/A	0.20% (2022/23 (academic))
Exclusion rate: special schools (CF_CP_23c)	Smaller is better	0.07%	NYD	0.00%	NYD	0.07%	0.08%	Spring term 2023/24	Worse	N/A	N/A	0.07% (2021/22 (academic))



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.





#### Portfolio Performance Overview: Children, Young People & Families

A total of 20 KPIs are available to be reported on this quarter. 7 (32%) KPIs are on track or exceeding target, 8 (36%) are reported off track. 2 (29%) KPIs have improved, 2 (29%) KPIs have worsened.

			Previous Performance				Ре	rformance	Reported	in Q4 20	)24-25	
Key Performance Indicator Aim		2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result
♀ U Children and Families												
BCT Measure: Percentage of children in care experiencing three or more moves within a year (CF_CP_26)	Smaller is better	7%	7%	7%	7%	9%	7%	March 25	Static	N/A	N/A	9% (2023/24)
Percentage of applicants who received an offer to one of their top 3 preferred schools (Primary) (CF_CP_32)	Bigger is better	99%	NYD	NYA	NYD	98.60%	99.0%	2024-25	Improved	N/A	N/A	98.60% (2024/25)
Percentage of applicants who received an offer to one of their top 3 preferred schools (Secondary) (CF_CP_33)	Bigger is better	90%	NYD	NYA	NYD	95.60%	97.0%	2024-25	Improved	N/A	N/A	96% (2024/25)
Percentage of Children under 3 who have taken-up a place with an early year's provider for 30 hours where the parent has accessed an eligibility code (CF_CP_34)	Bigger is better	New Measure	NYD	93%	NYA	79%	NYA	Spring 25	N/A*	N/A	N/A	N/A**
Percentage of local authority maintained schools with a Good or Outstanding rating by Ofsted (CF_CP_35)	Bigger is better	88.70%	90.40%	91%	NYA	88.70%	NYA	March 25	N/A*	N/A	N/A	89% (2022/223 (academic))
Percentage of School Governor posts filled in mainstream schools (CF_CP_36)	Bigger is better	New Measure	82%	84%	87%	80%	86%	Jan 2025 - March 2025	Worse	N/A	N/A	N/A**
Number of children and young people (aged 5-16) with an EHCP awaiting resource base provision for more than 12 weeks (CF_CP_37)	Smaller is better	New Measure	86	105	164	72	185	March 2025	Worse	N/A	N/A	N/A**
Percentage of new Education Health Care (EHC) plans issued within 20 weeks, excluding exceptions (CF_VS_03)	Bigger is better	57.00%	55%	34.70%	27.80%	60%	45%	Feb 25	Improved	N/A	N/A	61.70% (2023)
Proportion of eligible pupils transported to school (CF_VS_04)	Bigger is better	TBC	NYA	99%	99%	99.50%	99%	Mar 25	Static	N/A	N/A	N/A**
BCT Measure: Re-referral Rate (CF_VS_19)	Smaller is better	23%	26%	23%	21%	22%	20%	March 25	Improved	N/A	N/A	23.30% (2023/24)
BCT Measure: Average social worker caseload (CF_VS_20)	Smaller is better	18	18	16	17	17	18	March 25	Worse	N/A	N/A	16.30 (Oct 2023 - Sep 2024)



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.

KPIs marked NYD are reported a quarter in arrears.



### Portfolio Performance Red Rated KPIs: Children, Young People & Families

#### A total of **8** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
☐ Children and Families		
Early Years Entitlement: Percentage of 2 year olds accessing Early Education Entitlement (EEE) (CF_CP_11)	Performance relates to Spring term 2025. The result of 60% is below the target of 74% and the tolerance of 70% and as such is RAG rated red. There has been a decrease from the Q3 (Autumn term) result of 66% which is the lowest result reported corporately. The annual result for the academic year is not yet available as this KPI is reported in arrears. There has been no update to benchmarking information reported last quarter relating to 2024 which shows Birmingham performance of 65.6% below the core city average of 71.8% (ranked last) and below the CIPFA near neighbour average of 70.2%.	We are working with partners to develop new focused district action plans to increase take-up. We are analysing take-up data to target areas/communities in the city where take up is low and developing local strategies to increase take-up. We are also exploring the cross-over of eligibility between the two 2-year-old offers (disadvantaged and 30 hours). We will recruit an Early Education Entitlement Outreach officer to target areas with low take up and develop local strategies to encourage those communities to access the offer.
Early Years Entitlement: Percentage of 3 and 4 year olds accessing 15 hours Early Education Entitlement (EEE) (CF_CP_12)	Performance relates to Spring term 2025. The result of 87% is below the target of 94% and tolerance of 90% and therefore is RAG rated red. Performance has slightly decreased since 88% reported in quarter 3 for the autumn term 2024. This continues a decreasing trend since 2023-24 quarter 4 and the average performance so far this year is still down on that of last year (91%). The annual result for the academic year is not yet available as this KPI is reported in arrears. There has been no update to benchmarking information reported last quarter relating to 2024; this shows Birmingham performance of 89.5% below a core city average of 91.3% (ranked 6th) but above the CIPFA near neighbour average of 88.6%.	We are working with the partners to develop new focused district action plans to increase take-up as well as analysing the take-up data to target areas/communities in the city where take up is low and to develop local strategies to increase take-up. We will recruit an Early Education Entitlement Outreach officer to target areas with low take up and develop local strategies to encourage those communities to access the offer.
Number of children and young people (aged 5-16) with an EHCP awaiting specialist placements for more than 12 weeks (CF_CP_14)	Q4 performance of 209 is significantly above the target of 166 and tolerance of 199.2 and is therefore rated red. Numbers this quarter are the highest since Q2 (104) however end of year average of 155.5 remains below that of last year's 199.5.	Numbers of new assessments and maintained EHCPs continue to rise which inevitably impacts on those children and young people assessed as needing resource based or special school placements. In addition there will always be higher numbers awaiting placements as the academic year progresses because any increases in commissioned places become available at the start of the academic year. We have a SEND Sufficiency Strategy in place for 2024-2030 with plans to significantly increase our available places in both resource bases and special schools on an ongoing basis. We are currently in the implementation phase and for special schools there has been an increase of 101 places to a total of 5090 commissioned places from September 2025.





### Portfolio Performance Red Rated KPIs: Children, Young People & Families

#### A total of **8** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
☐ Children and Families		
Absence Rate: Primary (CF_CP_15a)	The performance reported this quarter relates to the Summer term of the 23/24 academic year. The absence rates of 7.4% is higher than the target of 5.9% and the tolerance of 6.2% (smaller is better) and consequently is RAG rated red. Absence rates have increased from the 6% reported in the 2023-24 Spring term. The annual result for 2023-24 is 6.4% which is higher than the average for core cities of 5.9% and children's statistical neighbours average of 5.7%.	To address poor primary attendance, Birmingham City Council has implemented a comprehensive Attendance Strategy for 2024-2028. This strategy emphasizes collaboration between schools, families, and partners to identify and tackle barriers to regular attendance. Key actions include the development of a multi-agency approach through the "Team around the school" model, which ensures that children, families, and schools receive timely and appropriate support. New investment has been made in the city's attendance team, with additional posts being created to strengthen the existing team, and further complimentary investment in alternative provision and exclusions. Specific actions taken include: Funding for the Supporting Families initiative has been allocated directly to schools, resulting in £287,500 being distributed to support 1150 families in the past year. Attendance has formed part of the early help offer from Birmingham Children's Trust, where, supported by Birmingham City Council attendance team, attendance- related concerns can be highlighted and addressed collaboratively. The LA has established an Attendance, Exclusion and Part Time Timetable taskforce to design and deliver a 2–3-year programme of work
Absence Rate: Secondary (CF_CP_15b)	The performance reported this quarter relates to the Summer term of the 23/24 academic year. The absence rates of 10.5% is higher than the target of 9% (smaller is better) and consequently is RAG rated red. Absence rates have increased from the 8.2% reported for the 2023/24 Spring term when this KPI was rated green.	Birmingham City Council has implemented a comprehensive Attendance Strategy for 2024-2028. This strategy emphasizes collaboration between schools, families, and partners to identify and tackle barriers to regular attendance. Key actions include the development of a multi-agency approach through the "Team around the school" model, which ensures that children, families, and schools receive timely and appropriate support. New investment has been made in the city's attendance team, with additional posts being created to strengthen the existing team, and further complimentary investment in alternative provision and exclusions
Absence rate: Special (CF_CP_15c)	The performance reported this quarter relates to the Summer term of the 23/24 academic year. The absence rates of 14.6% is higher than the target of 13% (smaller is better) and consequently is RAG rated red. Absence rates have increased slightly from the 14.4% reported for the 2023/24 Spring term.	Birmingham City Council has implemented a comprehensive Attendance Strategy for 2024-2028. This strategy emphasizes collaboration between schools, families, and partners to identify and tackle barriers to regular attendance. Key actions include the development of a multi-agency approach through the "Team around the school" model, which ensures that children, families, and schools receive timely and appropriate support. New investment has been made in the city's attendance team, with additional posts being created to strengthen the existing team, and further complimentary investment in alternative provision and exclusions.





### Portfolio Performance Red Rated KPIs: Children, Young People & Families

#### A total of 8 KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
☐ Children and Families		
Number of children and young people (aged 5-16) with an EHCP awaiting resource base provision for more than 12 weeks (CF_CP_37)	Q4 performance of 185 is above the target of 72 and the tolerance of 86.4 (smaller is better) and is therefore rated red. Performance has continued to decline since the start of the year when the number of children waiting resource based provision was reported as 86 and numbers have increased again from the 164 reported last quarter when performance was also rated red. No benchmarking information is available for this indicator.	Numbers of new assessments and maintained EHCPs continue to rise which inevitably impacts on those children and young people assessed as needing resource base or special school placements. In addition there will always be higher numbers awaiting placements as the academic year progresses because any increases in commissioned places become available at the start of the academic year. We have a SEND Sufficiency Strategy in place for 2024-2030 with plans to significantly increase our available places in both resource bases and special schools on an ongoing basis. We are currently in the implementation phase and have delivered an extra 79 resource base places and an overall total of 876 commissioned places from September 2025. Four new resource bases are scheduled to open at that time and three others are awaiting DfE approval and could potentially open in September. In addition, one more is scheduled to open in January 2026 and eight existing resource bases are increasing their numbers. Overall there are over 40 schools in discussions around resource base provision.
Percentage of new Education Health Care (EHC) plans issued within 20 weeks, excluding exceptions (CF_VS_03)	Performance reported this quarter relates to the 12 month rolling average as at end of February 2025. The result of 45% is RAG rated red and remains below the target of 60% but is an improvement from the quarter 3 result of 27.8%. This is the first time the result has improved since quarter 3 of 2023-24. The current 12 month rolling average for 2024-25 is below the 2023-24 outturn of 57%. There has been no update to benchmarking information which shows Birmingham's performance during 2023 of 60.5% above the core city average of 51.6% and above the CIPFA nearest neighbour average of 52.7%.	Operational analysis is produced weekly allowing officers to review individual delays and progress the assessment process. SENAR and EP are in close communication to keep track of delays and have input into strategies that allow slightly more time in the advice writing cycle. The weekly analysis has identified improvements that are now being made in issuing of a draft plan and managing the timeline around this. The Head of SENAR has met one-to-one with all Senior Case Officers in assessments and a Quality and Improvement Officer has met with all case officers as part of the focused work to understand the challenges within the service. The first new permanent Service Manager in Assessments has started in April and the second permanent Service Manager is starting in September due to notice period. An experienced officer from the quality team has been moved across to fill the current vacant post and has had a positive impact on the compliance of the team





#### Portfolio Overview Digital, Culture, Heritage and Tourism

There are 5 KPIs reported under Digital, Culture, Heritage and Tourism of which 3 KPIs are RAG rated Green and 2 Red rated. All KPIs under this portfolio are local measures, therefore not benchmarkable.

Corrective actions for red-rated indicators are noted in the table below.

The percentage of customer / citizen complaints responded to within SLA - Stage 2 results is 72% (Red rated). Performance showed an improvement from Q1 to Q3, however, performance has declined and is below target by 13% at Q4 cycle, but it's an improvement from last years' outturn (67%) by 5 percentage points. In contrast, the Percentage of customers registering satisfaction with council services indicator has been volatile and red rated throughout 2024-25 reporting period. Performance showed an improvement in Q2 (52%) but performance declined by 1 percentage point in Q3 (51%), and has slightly improved at Q4 (52%). The latest results is below last years' outturn (54.17%).

While the percentage of customers/ citizens complaints responded to within SLA stage 1 achieved 89% and RAG rated green (met target), the performance trend has seen a gradual decline since Q2 (91%), but the year-end results have exceeded last year's outturn of 81%.

The complaints service is focusing on streamlining internal systems and processes, using the newly created stage 2 tracker to promote a timelier allocation of repeat complaints to an independent complaint officer. This will ensure a quicker response to a citizen's request to escalate a stage 1.

Compliments received per 1,000 indicator has met its target and rated green (results - 0.07), however, this is 15 times less than the volumes of complaints received (Q4 results - 1.07).

### Portfolio Performance Overview: Digital, Culture, Heritage and Tourism

A total of **5** KPIs are available to be reported on this quarter. **3** (60%) KPIs are on track or exceeding target, **2** (40%) are reported off track. **1** (20%) KPIs have improved, **4** (80%) KPIs have worsened.

			Previous Performance				Performance Reported in Q4 2024-25						
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result	
Corporate Services													
Percentage of customers registering satisfaction with council services (CM_OH_07)	Bigger is better	54.17%	48%	52%	51%	60%	52%	1st Jan - 31st March 2025	Improved	N/A	N/A	N/A**	
% of customer / citizen complaints responded to within SLA - Stage 1 (CM_OH_08a)	Bigger is better	81%	87%	91%	90%	85%	89%	1st Jan - 31st March 2025	Worse	N/A	N/A	N/A**	
% of customer / citizen complaints responded to within SLA - Stage 2 (CM_OH_08b)	Bigger is better	67%	71%	76%	79%	85%	72%	1st Jan - 31st March 2025	Worse	N/A	N/A	N/A**	
Complaints received per 1,000 residents (CM_OH_09)	Smaller is better	1	1.38	1.33	1.31	2	1.07	1st Jan - 31st March 2025	Improved	N/A	N/A	N/A**	
Compliments received per 1,000 residents (CM_OH_19)	Bigger is better	0.05	0.05	0.05	0.04	0.05	0.07	1st Jan -31st March 2025	Improved	N/A	N/A	N/A**	



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.



### Portfolio Performance Red Rated KPIs: Digital, Culture, Heritage and Tourism

#### A total of **2** KPIs reported Red this quarter

Measure &	Corporate Performance Analysis	Directorate Response & Actions
☐ Corporate Services		
Percentage of custom registering satisfaction council services (CM_C	with services whereby contact is handled through the contact centre. It is not the	Overall Customer Satisfaction Score (CSAT) of 52% (vs. 60% target) is based on 4474 responses, while agent willingness (AW) was 80% vs. 83% target. This demonstrates that, whilst overall CSAT is low, the Contact Centre generally does everything they can to resolve the issue for the citizen. The feedback we receive, for example, are frustrations with incomplete repairs, Penalty Charge Notices, lack of housing, and ongoing missed refuse collections. Breakdown of top services (making up 94.3% of response volumes): Adults Social Care (144): 40% CSAT, 83% AW   Benefits (136): 51% CSAT, 78% AW   Clean Air Zone (220): 19% CSAT, 56% AW   Highways (133): 30% CSAT, 69% AW   Housing Repairs (1242): 52% CSAT, 86% AW   Housing Solutions and Support (226): 32% CSAT, 66% AW   Revenues (551): 47% CSAT, 80% AW   Tenancy Estate Management (903): 80% CSAT, 83% AW   Waste Management (269): 30% CSAT, 76% AW .
	This is a local measure and therefore not benchmarkable.	
% of customer / citize complaints responded within SLA - Stage 2 (CM_OH_08b)	5	





For Q4, there are 8 KPIs reported corporately under the Economy and Skills Portfolio: 5 are rated green, 2 amber, and 1 red. Overall performance has declined compared to the start of the year - in Q1, 7 KPIs were rated green and 1 amber.

Throughout 2024-25, consistently strong performance has been maintained across two PPS Planning KPIs, both of which have held a green rating: the percentage of major planning applications overturned on appeal and the percentage of non-major planning applications overturned on appeal. However, average performance across the year for both measures is lower than in 2023-24. Compared to other local authorities, in Q4, the result for major planning applications (1%) outperformed the benchmark (1.6%), while the result for non-major planning applications (1%) underperformed compared to the benchmark (0.8%).

Performance has been mixed for the remaining three PPS Planning KPIs. The percentage of other planning applications determined on time declined between Q1 (with a result of 84% and a green rating) and Q2 (64% with a red rating), but has shown improvement over Q3 and Q4. This KPI is rated amber for Q4 with a result of 81%; however, and the annual average (75.5%) is below both last year's outturn (90%) and the national benchmark (88%). The percentage of major planning applications determined on time remained green from Q1 to Q3, but fell to amber in Q4, declining from 95% in Q1 to 77% in Q4. The average for this year (89.75%) is below last year's outturn (93%) but slightly above the national benchmark (89%). The percentage of minor planning applications determined on time declined, dropping from 87% in Q1 to 59% in Q4. This KPI has remained red since Q2, and this year's average (66.75%) is below last year's outturn (88%) and the national benchmark (83%).

For Children and Families, the percentage of 16 and 17 year olds that are not in education, employment or training has achieved the target and been rated green throughout the year. Q4 performance (3.6%) has outperformed the benchmark (4.9% in 2024). Throughout the year, the percentage of 16 and 17 year olds whose status isn't know has met the target and been rated green, with the exception of Q2, when numbers typically increase at the start of the academic year. Q4 performance (2%) has outperformed the benchmark (2.4% in 2024).

### Portfolio Performance Overview: Economy and Skills

A total of 8 KPIs are available to be reported on this quarter. 5 (63%) KPIs are on track or exceeding target, 1 (14%) are reported off track. 1 (14%) KPIs have improved, 4 (57%) KPIs have worsened.

			Previous P	erformance		Performance Reported in Q4 2024-25						
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result
Children and Families												
BCT: Percentage of care leavers in employment, education or training (EET) on their 19th to 21st birthday (CF_CP_01a)	Bigger is better	62%	61%	63%	63%	62%	62%	March 25	Worse	N/A	N/A	56.00% (2023/24)
Percentage of 16 and 17 year olds that are not in education, employment or training (NEET) (CF CP 28a)	Smaller is better	3.50%	4%	2.90%	3.10%	5%	3.60%	March 25	Worse	N/A	N/A	4.90% (2024)
Percentage of 16 and 17 year olds that their status isn't known (CF_CP_28b)	Smaller is better	2.30%	2.40%	19.30%	3.70%	4%	2%	March 25	Improved	N/A	N/A	2.40% (2024)
Place, Prosperity and Sustainability												
Percentage of major planning applications overturned on appeal (PPS_CP_14)	Smaller is better	0.03%	0.00%	1%	1%	30%	1%	1/1/2025 - 31/3/2025	Static	N/A	N/A	1.60% (2023 Q2 (24 months ending))
Percentage of non-major planning applications overturned on appeal (PPS_CP_15)	Smaller is better	1.05%	2%	1%	1%	30%	1%	1/1/2025 - 31/3/2025	Static	N/A	N/A	0.80% (2023 Q2 (24 months ending))
Percentage of major planning applications decided on time (within 13 weeks) (PPS_VS_11)	Bigger is better	93%	96%	100%	86%	80%	77%	1/1/2025 - 31/3/2025	Worse	N/A	N/A	89% (2023/24)
Percentage of minor applications determined on time (within 8 weeks) (PPS_VS_12)	Bigger is better	88%	87%	57%	64%	80%	59%	1/1/2025 - 31/3/2025	Worse	N/A	N/A	83% (2023/24)
Percentage of other applications determined on time (within 8 weeks) (PPS_VS_13)	Bigger is better	90%	84%	64%	73%	83%	81%	1/1/2025 - 31/3/2025	Improved	N/A	N/A	88% (2023/24)

\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.





### Portfolio Performance Red Rated KPIs: Economy and Skills

#### A total of **1** KPIs reported Red this quarter

Measure Ø	Corporate Performance Analysis	Directorate Response & Actions
☐ Place, Prosperity and Sustainability		
Percentage of minor applications determined on time (within 8 weeks) (PPS_VS_12)	The Q4 result (59%) has not met the target (80%) and is rated red for the third consecutive quarter. Performance has decreased from Q3 (which achieved a result of 63%) and has declined significantly compared to Q1 (which achieved a result of 87%). This year's average (66.75%) is below last year's average of 88% and the national benchmark (83%).	The results for the decision times are improving, alongside increased numbers of applications in many categories, however the results in part are below the local stretch targets. To address vacancies in the planning service area, recruitment has been progressing, with offers going out in March 2025. Although, the recruitment faced initial delays as a result of challenges getting the back-office processes resolved and aligning this recruitment campaign with other roles across planning, new staff are due to join BCC in May 2025. With current and future capacity and assuming a steady level of new incoming applications, it is estimated that the current backlog of 670 historical applications will be at a sustainable and 'BAU' level processed by June 2025, when the KPI is expected to meet its target. Therefore, we expect the stats to remain lower than usual over the next quarter, but continuing to improve.





For Q4, there are 7 KPIs reported for the Environment and Transport Portfolio: 1 is rated green, 3 amber, and 3 red. Data hasn't been provided by City Operations for the percentage of offensive / racist graffiti incidents cleared by the Street Cleansing Team within 1 working day. Overall, performance is consistent compared to the start of the year - in Q1, all KPIs had the same RAG-rating.

For City Operations, five measures have consistently underperformed. Two of these remained amber throughout 2024-25: the percentage of household waste sent for recycling and the recycling contamination rate. Both measures are reported one month in arrears so aren't comparable against the benchmark; however, compared to the same time last year, the percentage of household waste sent for recycling is underperforming slightly, while the recycling contamination rate has improved slightly. Three measures remained red throughout 2024-25: reported missed collections; fly tipping incidents cleared within 7 calendar days; and, the percentage of food inspections completed. The rate of missed collections has increased significantly – from 310 per 100,000 scheduled collections in Q1, to 960 in Q4. This increase is attributed to the impact of industrial action within Waste Management, which is also impacting other Waste Management and Street Scene measures, including the fly tipping collection rate. Food inspections underperformed compared to last year, with a Q4 result of 70.1% compared to 99.7% for 2023-24. This has been attributed to vacancies within the team causing a backlog of inspections, and a plan has been agreed with the Food Standards Agency to get performance back on track for 2025-26. None of these KPIs are benchmarkable.

Performance has been mixed for one City Operations' measure: non-recyclable waste per household. This was rated green in Q1, amber in Q2 and Q3, and green in Q4, with the Q4 result of 604.46kg achieving the target of 607.19kg. This measure is reported one month in arrears so isn't comparable with the national benchmark.

For PPS, the proportion of non-compliant vehicles entering the Clean Air Zone has remained amber throughout the year; however, quarter-onquarter improvements have been observed, and average performance for this year (4.39%) has improved against last year's average (4.9%). If this trajectory continues, the KPI is expected to turn green during 2025-26. This KPI is not benchmarkable.

### Portfolio Performance Overview: Environment and Transport

A total of **7** KPIs are available to be reported on this quarter. **1** (14%) KPIs are on track or exceeding target, **3** (43%) are reported off track. **2** (29%) KPIs have improved, **5** (71%) KPIs have worsened.

			Previous P	erformance		Performance Reported in Q4 2024-25							
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result	
City Operations													
Reported missed collections per 100k collections scheduled (CO_CP_21a)	Smaller is better	166	310	272	356	72	960	01/01/2025 	Worse	N/A	N/A	N/A**	
Percentage of household waste sent for recycling (without bottom ash) (CO_CP_23a)	Bigger is better	23.06%	25.29%	25.12%	24.80%	24.94%	23.0%	01/04/2024 to 28/02/2025	Worse	24.94%	NYD	30.29% (2022/23)	
Percentage of offensive / racist graffiti incidents cleared by the Street Cleansing Team within 1 working day (CO_CP_25)	Bigger is better	45.58%	NYA	100%	90%	100%	NYA		N/A*	N/A	N/A	N/A**	
Non-recyclable waste per household (kg) (CO_CP_32)	Smaller is better	654.86	169.0	282.59	446.72	607.19	604.46	01/04/2024 to 28/02/2025	Worse	607.19	NYD	530.93 (2022/23)	
Recycling contamination rate: proportion of household waste sent for recycling that is rejected (CO_CP_33)	Smaller is better	9.79%	7.67%	7.84%	8.23%	8.63%	9.15%	01/04/2024 to 28/02/2025	Improved	8.63%	NYD	8.93% (2022/23)	
Percentage of fly-tipping incidents cleared by the Street Cleansing Team within 7 calendar days (CO_CP_34)	Bigger is better	New Measure	65%	61%	74%	95%	73%	01/01/2025 _ 31/03/2025	Worse	N/A	N/A	N/A**	
Percentage of food inspections completed against the Food Law Enforcement Plan (CO_VS_31)	Bigger is better	99.70%	15.30%	36.60%	56.70%	100%	70.10%	01/04/2024 _ 31/03/2025	Worse	N/A	N/A	N/A**	
Place, Prosperity and Sustainability													
Proportion of non-compliant vehicles entering the Clean Air Zone (PPS_CP_16)	Smaller is better	4.90%	4.70%	4.46%	4.40%	3.80%	4%	1/1/2025 - 31/3/2025	Improved	N/A	N/A	N/A**	



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.

KPIs marked NYD are reported a quarter in arrears.



### Portfolio Performance Red Rated KPIs: Environment and Transport

#### A total of **3** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
☐ City Operations		
Reported missed collections per 100k collections scheduled (CO_CP_21a)	<ul> <li>The Q4 result of 960 has not met the target of 72, resulting in a red rating for this KPI.</li> <li>This marks the fourth consecutive quarter of underperformance since Q1, with a significant deterioration in performance from Q3 (356) to Q4 (960).</li> <li>Profiled targets were set to decrease over the year, from 126 in Q1 to 72 in Q4, reflecting planned improvements to performance. However, the deteriorating trend highlights the significant negative impact of current challenges being faced with strike action.</li> <li>Additionally, the yearly average for 2024-25 stands at 474.5, which is substantially higher than the previous year's average of 166 for 2023-24.</li> <li>This KPI is not benchmarkable against other local authorities.</li> </ul>	Due to Industrial Action, there has been a change to all services across Waste and Street Management, which is impacting several corporate KPIs. This has resulted in the Council declaring a major incident, allowing us to provide an emergency response to waste collection and street cleansing. We will continue to monitor the Industrial Action and the impact this is having on our services and communities. There is a robust governance framework in place to ensure key messages are passed to all services impacted and cohesive messaging is shared. We have implemented a range of mitigating actions to ensure we minimise the impact on citizens and the city as much as possible. This includes deploying 60% of street cleansing teams to remove fly tipping, securing mutual aid support from other local authorities, utilising HiGrab vehicles, extending opening hours at the city's Household Recycling Centres, and increasing collections at mobile refuse centres.
		We have also engaged external partners to provide caged tippers and crews to remove accumulated fly-tipped waste and deliver a targeted deep clean across the 15 most affected wards, helping to restore the city to a good level of cleanliness. This has led us to engage external partners to deliver a month-long programme of activity to further focus on the 15 wards identified as needing the most attention.
Percentage of fly-tipping incidents cleared by the Street Cleansing Team within 7 calendar days (CO_CP_34)	The Q4 result (73%) has not met the target (95%) for four consecutive quarters, therefore, has been rated red since Q1. There is a slight decline in the direction of travel between Q3 (74%) and Q4 (73%). The 2024-25 yearly average is 68.25%, which is lower than the annual target of 95%.	Please refer to the commentary against 'reported missed collections' (above).
	This KPI is not benchmarkable against other local authorities.	





### Portfolio Performance Red Rated KPIs: Environment and Transport

#### A total of **3** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
<ul> <li>City Operations</li> <li>Percentage of food</li> <li>inspections completed</li> </ul>	The Q4 result of 70.10% has not met the target of 100%, resulting in a red rating for this KPI. This marks the fourth consecutive quarter of	Environmental Health is currently operating with 8 vacancies due to staff promotions and transfers to other local authorities. Spend control approval has been sought, and recruitment for these posts is underway. Efforts are ongoing
against the Food Law Enforcement Plan (CO_VS_31)	underperformance since Q1. Additionally, the year-end figure for 2024- 25 is significantly lower than the previous year's outturn of 99.70% for 2023-24. This KPI is not benchmarkable against other local authorities.	to ensure the competency of the 5 Environmental Health Officers (EHO) and 7 Food Safety Officers (FSO) recently brought in, with many now inspecting premises at varying risk levels to contribute to the food programme. Additionally, 2 Enforcement Officers are expected to graduate from their apprenticeships as EHOs this year, and a steady stream of Enforcement Officers are undertaking apprenticeships to meet future demand.
		Strategies targeting lower-risk businesses have successfully identified those that have ceased trading, allowing resources to be focused on higher-risk areas.
		The Food Standards Agency is aware of the current challenges and is satisfied with the progress, aiming for the Council to be compliant with inspections in 2025/2026. High-risk inspections will be prioritised, and alternative enforcement will be used for lower-risk inspections were permitted by the food law code of practice. Any deviation from 100% is considered a failure.
		There will still be a backlog of lower-risk inspections leading into 2025/26 due to this year's underperformance, which will be addressed based on risk.





There are 7 KPIs reported corporately for the finance directorate, of which 6 are rated green at Q4 and have met their target and 1 rated amber (below target but within acceptable tolerance). There are no red-rated KPIs reported for this quarter.

The two housing application indicators have outperformed the latest benchmarking scores, making them top performers.

Council tax - The year-end figure at Q4 24/25 was 91% vs target 93.25%, with performance above last year's figure of 90.91%. The net liability for the year was £576,6 million; we have collected £524.7 million, which is £12.9m million short of the profiled target but up on last year's collection figure by £55.3m. The service set a stretch target for 24/25, and whilst this wasn't achieved, there was an improvement in collection performance last year despite a challenging collections environment and a 10% rise in the Council Tax charge.

Business Rates collection has consistently met its target and rag rated green at Q4 24/25. For the year-end figure, the results were 95.76% vs profile target of 93.50%, an increase of 2.26 percentage points. We have collected £433.3 million against a profiled target of £423.1 million at year-end.

Housing rent collection rates reached 100.48% in Q4 2024/25, surpassing the target of 98%. This is equivalent to £309.00m collected against collectables of £307.53m - an increase of £1.47m.

### Portfolio Performance Overview: Finance

A total of **7** KPIs are available to be reported on this quarter. **6** (86%) KPIs are on track or exceeding target, **0** (**0**) are reported off track. **4** (67%) KPIs have improved, **1** (17%) KPIs have worsened.

			Previous Performance			Performance Reported in Q4 2024-25							
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result	
Corporate Services													
Procurement: Percentage of non-contracted (non- managed) spend (CM_OH_18)	Smaller is better	25.70%	9%	10%	10%	15%	10%	01/01/2025 - 31/03/2025	Static	N/A	N/A	N/A**	
U Finance													
Council tax collection rate (CM_OH_03)	Bigger is better	90.91%	27.80%	51.58%	75.51%	93.25%	90.44%	Jan-Mar 2025	Improved	93.25%	91%	91.59% (2023/24)	
Business rates collection rate percentage of annual amount due (CM_OH_04)	Bigger is better	94.15%	33.11%	60.16%	83.62%	93.50%	94.62%	Jan-Mar 2025	Improved	N/A	95.76%	96.60% (2023/24)	
Percentage of housing rents collected (CM_OH_05)	Bigger is better	98.34%	94.55%	96.68%	98.79%	98%	100.48%	Jan-Mar 2025	Improved	N/A	N/A	TBC	
Percentage of supplier invoices paid on time (within payment terms) (CM_OH_17)	Bigger is better	82%	82%	80%	82%	81%	82%	1st Jan - 31st March 2025	Static	N/A	N/A	N/A**	
Average number of days to process changes to housing benefit (CM_VS_16)	Smaller is better	7	5.37	6.63	5.62	6	3.88	Jan-Mar 2025	Improved	6	5	6 (2023/24)	
Average number of days to process new housing benefit applications (CM_VS_17)	Smaller is better	15	12.85	14	13.29	15	13.74	Jan-Mar 2025	Worse	15	13	19 (2023/24)	



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.



There are 12 KPIs reported for Health and Social Care portfolio: 7 are green rated, 3 are amber and 2 are red.

Performance against the percentage of concluded Adult Social Care Safeguarding enquiries where the person's risk was reduced or removed has fluctuated between amber and green over the course of the year, highest results were in Quarter 1 of 85% and lowest in Q2 of 75%. Q4 performance of 78% has not returned to the performance at the start of the year and is rated amber. Average performance this year of 79.95% falls below the 23/24 outturn figure of 85%. There have been changes to the structure of the team which has impacted on performance and performance levels are being monitored and addressed through fortnightly Director performance boards. These boards also provide assurance that our safeguarding responsibilities are effectively delivered despite demand and capacity challenges.

The percentage of people who receive adult social care in their own home has been stable throughout 24/25, with social work and occupational therapy teams ensuring a strengths-based approach to enable citizens to return home, a technology enabled care pilot has been implemented to support citizens to remain safely at home.

The proportion of patients discharged from hospital into pathway 0 (home with no support) and pathway 1 (home with support) has remained static over the 2024/25 reporting year. The work of Hospital Discharge and Early Intervention Teams follows a strengths-based approach to ensure citizens are able to return home following discharge from hospital, work is ongoing with domiciliary providers to ensure sufficient capacity is available to support hospital discharges.

Uptake of direct payments is the other amber rated indicator and has been reported as below the target but within tolerance throughout the year. Performance has gradually declined over the last few years, however, remains above that of core cities according to 23/24 benchmarking data. A review of the direct payment approach and the trends for reductions will be completed by summer 2025 and performance continues to be monitored within the fortnightly Director performance boards. The take up of direct payments is also influenced by citizen preference and so whilst we actively promote direct payments our performance is impacted by citizen preference for commissioned services.

Performance against the Proportion of New Birth Visits completed within 14 days, reported one quarter in arrears, has been below target and tolerance and rated red throughout the year. Results however compare favourably to latest core cities average performance of 84.6%. Performance has been impacted by instances where the mother and baby remain in hospital care beyond 14 days and home visits are therefore not possible within the 14 day period. Where these instances are removed from the calculation, performance is above target. The tolerance figure for this indicator will be revised for 25/26 to take this into account.

Latest performance reported (Q3 as this KPI is reported 1 quarter in arrears) for the KPI Number of individuals identified as target population (routine and manual workers, those under the age of 18 years and pregnant women) accessing stop smoking support and quitting at 4 weeks has declined from results in quarters 1 and 2 and moved from green to red. Some quarterly variation in performance is expected due to seasonal fluctuations in people seeking support which may explain the decline. Work is ongoing to understand the variation in quarterly activity so more effective strategies to boost uptake can be adopted. Performance against the Number of individuals accessing stop smoking support and quitting at 4 weeks (also reported 1 quarter in arrears) has however increased from last quarter and has shown an overall improvement across the year.

Performance against the indicator Successful completion of drug and alcohol treatment: opiate users, shows an overall decline across the year from it's green rated quarter 1 position of 6%. Performance has improved a little in Q4 at 4.31% from the Q3 position of 4.11% but remains below target and is rated amber.

Quarter 4 performance of 92% on Be Active Plus users classed as fairly active (30-149 minutes of physical activity per week) upon programme exit has bounced back from the decline reported in quarter 3 (78%).

For City Operations, throughout 2024–25, consistently strong performance has been observed for the number of visits utilising the Be Active leisure offer across Birmingham Wellbeing and Leisure Centres. This measure (reported one quarter in arrears) has shown year-on-year improvement, with the Q3 result reaching 368,801 visits, up from 221,825 in 2022–23 and 318,729 in 2023-

### Portfolio Performance Overview: Health and Social Care

A total of 12 KPIs are available to be reported on this quarter. 7 (58%) KPIs are on track or exceeding target, 2 (17%) are reported off track. 3 (50%) KPIs have improved, 3 (50%) KPIs have worsened.

			Previous P	erformance			Р	erformance	Reported	in Q4 202	24-25	
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result
0												
Adult Social Care and Health												
Percentage of concluded Adult Social Care Safeguarding enquiries where the person's risk was reduced or removed (ASC_CP_05a)	Bigger is better	85%	85%	75%	82%	80%	78%	Jan-Mar 2025	Worse	N/A	N/A	N/A**
Percentage of people who receive Adult Social Care in their own home (ASC_CP_06)	Bigger is better	70.75%	71%	71%	70.40%	65%	70%	01/04/2025	Worse	N/A	N/A	N/A**
Proportion of patients discharged from hospital into Pathway 0 (home with no support) and Pathway 1 (home with support) (ASC_CP_07)	Bigger is better	98%	98%	97.60%	98%	95%	98.10%	Jan-Mar 2025	Improved	N/A	N/A	N/A**
Proportion of clients receiving Residential, Nursing or Home Care, or Care and Support (supported living) from a provider that is rated Silver or Gold (ASC_CP_10)	Bigger is better	77%	77%	73.70%	76.60%	75%	76.20%	Oct-Dec 24	Worse	N/A	N/A	N/A**
Uptake of Direct Payments (ASC_VS_09)	Bigger is better	37.50%	37.10%	37.30%	36.90%	38%	37.10%	01/04/2025	Improved	N/A	N/A	23.20% (2023/24)
□ Adult, Social Care and Health - Public Health												
Percentage of the eligible population aged 40-74 who received an NHS Health Check (SEP_CP_02d)	Bigger is better	11.60%	3%	2.73%	5.74%	2.50%	2.68%	01/10/2024 - 31/12/2024	Worse	10%	NYD	2.20% (2024-25 Q2)
Proportion of New Birth Visits completed within 14 days (SEP_CP_06)	Bigger is better	New Measure	85%	85%	88%	92%	86%	01/10/2024 - 31/12/2024	Worse	N/A	N/A	84.60% (2023/24 Q4)
Successful completion of drugs and alcohol treatment: opiate users (SEP_CP_07)	Bigger is better	New Measure	6%	4.46%	4.11%	5%	4.31%	01/01/2025 - 31/03/2025	Improved	N/A	N/A	5.47% (2023)
Number of individuals accessing stop smoking support and quitting at 4 weeks (SEP_CP_08)	Bigger is better	4,226	NYD	1663	1564	1,502	1804	01/10/2024 - 31/12/2024	Improved	5,206	NYD	N/A**
Number of individuals from high risk target population accessing smoking support and qutting at 4 weeks (SEP_CP_09)	Bigger is better	1,078	NYD	392	303	319	215	01/10/2024 - 31/12/2024	Worse	1,100	NYD	N/A**



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.

KPIs marked NYD are reported a quarter in arrears.



### Portfolio Performance Overview: Health and Social Care

A total of **12** KPIs are available to be reported on this quarter. 7 (58%) KPIs are on track or exceeding target, **2** (17%) are reported off track. **3** (50%) KPIs have improved, **3** (50%) KPIs have worsened.

			Previous Performance			Performance Reported in Q4 2024-25							
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result	
Adult, Social Care and Health - Public Health													
Be Active Plus users classed as fairly active (30-149 minutes of physical activity per week) upon programme exit (SEP_CP_10)	Bigger is better	New Measure	93%	99%	78%	75%	92%	01/01/2025 - 31/03/2025	Improved	N/A	N/A	N/A**	
L City Operations													
Number of children and adult visits utilising the Be Active free leisure offer across all Birmingham Wellbeing and Leisure Centres (CO_CP_20)	Bigger is better	432,411	432,411	128,076	262,874	292,000	368,801	01/04/2024 _ 31/12/2024	Improved	N/A	NYD	N/A**	



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark. KPIs marked NYD are reported a quarter in arrears.



### Portfolio Performance Red Rated KPIs: Health and Social Care

#### A total of **2** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
<ul> <li>☐ Adult, Social Care and Health</li> <li>- Public Health</li> </ul>		
Proportion of New Birth Visits completed within 14 days (SEP_CP_06)	Performance reported this quarter relates to Q3 2024/25, as we report with a quarter lag. Results of 86% remains below target and tolerance and is therefore rated red. It has dropped by 2 percentage points from that of Q2 although is up slightly from that of Q1. (Reported performance has recently been adjusted following corrected notification by directorate). Performance compares well to 23/24 average core city performance of 84.6%.	This data relates to Q3 2024/25, as we report with a quarter lag. Performance levels are in the main due to Health Visitors being unable to visit some parents and/or babies at days 10-14 as they are in hospital. There would be no adverse consequences for these parents/babies as they are in a safe space, with regular monitoring but it does impact on achieving the target of the mandated 10-14 day visit. Health Visitors will pick the family back up once they have been discharged home, completing the expected mandated visit, just at a later date. If we excluded parents/babies in hospital at 10-14 days during this timeframe, then the target would be exceeded by 3%, with the provider making 95% of New Birth Visits during 10-14 days.
Number of individuals from high risk target population accessing smoking support and qutting at 4 weeks (SEP_CP_09)	Performance is reported a quarter in arrears and so relates to Q3 of this year. The result of 215 is below the profiled quarterly target of 319 and tolerance of 287 and therefore rated red. Benchmarking is not possible for this indicator, which was a new indicator this year so trend analysis is limited but shows a decline in results each quarter.	We expect quarterly variation in performance due to seasonal fluctuations in people seeking support for services. Work is ongoing to better understand the variation in quarterly activity so we can employ more effective strategies to boost uptake, particularly among those communities most at risk. We expect to see a general increase in performance from Q1 25-26 due to a number of new services recently commissioned.





There are 21 KPIs reported for the Housing and Homelessness portfolio this quarter: 9 are rated green, 7 are amber and 6 are red.

Within this Portfolio, 17 KPIs were reported for the City Housing directorate. Throughout the year, this directorate focused on addressing key areas of non-compliance with the Consumer Standards. The Regulator for Social Housing has provided positive feedback regarding improvements in data quality and assurance processes. Landlord health and safety compliance has improved significantly since April 2023, with testing programmes sitting at circa 30%, now increased and stable at >90% for all testing programmes. The service has a tolerance level for 95% across all testing programmes because of the risk associated with non-compliance and this doesn't always reflect the significant progress made to bring these programmes up to standard. Lifts, fire and gas are within tolerance and are performing at BAU. Asbestos has dropped slightly due to the delay in contract mobilisation but will be back up to >95% by the end of June 2025. Electrical safety is the only significant area of risk; testing programmes have just reached 90% following a total review of the programme. This means electrical safety has remained red throughout the reporting period, with a view to achieve green RAG status by September 2025.

There has been a year-on-year improvement in the homelessness prevention rate. The average for 2024-25 is 58% (1647 households), this is higher than 54% (1514 households) in 2023-24 and 45% (1063 households) in 2022-23 - BCC's current performance also exceeds the latest Core Cities' average of 53% (2023-24) and the Nearest Neighbour's average of 52% (2023-24). The Council have seen a gradual improvement between Q2 (26.65%) and Q4 (29.31%) in terms of compliance against the Decent Homes Standard. Throughout April 2025, the service have been ratifying the investment undertaken over 2024/2025, amounting to £236m, ensuring all works completed were uploaded in systems. This means that the end of year position for compliance against Decent Homes Standards now sits at 36%. A trajectory for delivery over 2025/2026 has been agreed by the Regulator of Social Housing, the Cabinet Member and Commissioners, planning for a 7% increase across the next financial year. This enables the service to remain on track to deliver across the 7 year investment programme, as per the commitments in the HRA Business Plan.

Additionally, four measures have demonstrated overall improvement between Q1 and Q4. The percentage of complaints resolved within service level agreement improved from 83% in Q1 to 88% in Q4. The number of complaints overdue reduced (improved) from 119 in Q1 to 67 in Q4. The proportion of emergency repairs completed within landlords' target timescales also saw improvement between Q1 at 87% to 91% in Q4 and non-emergency repairs from 80% in Q1 to 91% in Q4.

However, two KPIs have consistently underperformed throughout this year. The number of families in Bed & Breakfast accommodations for over six weeks has remained red-rated throughout 2024-25, although there was some improvement from 698 families in Q3 to 638 families in Q4. The average days void turnaround, which measures the period a property remains unoccupied between tenancies, has shown a declining trend, with the highest for the year in Q4 at 53 days compared to 40 days in Q1 (2024-25).

For City Operations, both measures have demonstrated sustained improvement, transitioning from red in Q1 to green in Q4: the number of completed inspections for licensable mandatory Houses in Multiple Occupation and the number of properties improved in the Private Rented Sector. For the latter, the Q4 result of 585 exceeded the target of 540, marking the highest recorded figure for this KPI since its corporate reporting began in 2021-22.

For PPS, the Direct Delivery house building programme (consisting of affordable homes built using the Birmingham Municipal Housing Trust (BMHT) model and resulting in rental properties owned by the Council) has also shown sustained improvement across the year. This KPI was rated red in Q1 with a result of 66.67% against a target of 68%, but has now achieved the year-end target of 100% (60 homes built) and is therefore rated green, outperforming last year's result of 85%. The second PPS measure, the percentage of affordable homes built by all developers, is an annual, cumulative measure reported one year in arrears. It is rated red this year, with a 2011-2024 result of 17.35%, falling below the 38% target. 5,414 affordable homes were built within this period, out of a target of 31,200. This represents a slight decrease from last year's result of 17.53% (with 4,971 homes built between 2011-2023, out of a target of 28,350).

### Portfolio Performance Overview: Housing and Homelessness

A total of 22 KPIs are available to be reported on this quarter. 9 (41%) KPIs are on track or exceeding target, 6 (30%) are reported off track. 13 (65%) KPIs have improved, 7 (35%) KPIs have worsened.

			Previous P	erformance		Performance Reported in Q4 2024-25							
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result	
City Housing													
Percentage of households owed a prevention duty, where homelessness was successfully prevented within 56 days (CH_CP_03)	Bigger is better	54.15%	53.05%	62.52%	61.80%	55%	53.79%	1/1/2025- 31/3/2025	Worse	N/A	N/A	53% (2023/24)	
Total numbers of families with dependents in Bed and Breakfast over 6 weeks (CH_CP_07)	Smaller is better	451	548	698	698	372	638	1/4/2025	Improved	N/A	N/A	100 (2024- 25 Q1)	
Percentage of gas safety checks undertaken on all relevant properties (CH_CP_08a)	Bigger is better	99.80%	99.93%	99.79%	94.34%	99%	98.11%	1/4/2025	Improved	N/A	N/A	99.95% (March 2024)	
Percentage of gas safety checks undertaken on all relevant blocks (CH_CP_08b)	Bigger is better	100%	100%	100%	96.72%	99%	100%	1/4/2025	Improved	N/A	N/A	N/A**	
Percentage of Electrical Installation Condition Report tests undertaken in all relevant properties (CH_CP_09a)	Bigger is better	72.80%	89.30%	86.30%	79.62%	99%	86.58%	1/4/2025	Improved	N/A	N/A	97.34% (March 2024)	
Percentage of Electrical Installation Condition Report tests undertaken in all relevant blocks (CH_CP_09b)	Bigger is better	83.54%	90.23%	88.39%	70.09%	99%	91.0%	01/04/2025	Improved	N/A	N/A	N/A**	
Percentage of asbestos surveys undertaken in all relevant communal properties (block only) (CH_CP_10)	Bigger is better	17.20%	77.77%	90.86%	92.19%	99%	71.11%	1/4/2025	Worse	N/A	N/A	N/A**	
Percentage of legionella tests undertaken in all communal areas (block only) (CH_CP_11)	Bigger is better	100%	100%	100%	88.43%	99%	100%	1/4/2025	Improved	N/A	N/A	N/A**	
Percentage of fire risk assessments undertaken in High- rise blocks (CH_CP_12a)	Bigger is better	95.22%	99.51%	100%	95.82%	99%	98.92%	1/4/2025	Improved	N/A	N/A	N/A**	
Percentage of fire risk assessments undertaken in Low- rise blocks (CH_CP_12b)	Bigger is better	34.64%	94.63%	96.81%	94.76%	99%	98.92%	1/4/25	Improved	N/A	N/A	N/A**	





KPIs marked NYD are reported a quarter in arrears.



### Portfolio Performance Overview: Housing and Homelessness

A total of 22 KPIs are available to be reported on this quarter. 9 (41%) KPIs are on track or exceeding target, 6 (30%) are reported off track. 13 (65%) KPIs have improved, 7 (35%) KPIs have worsened.

			Previous Pe	erformance			Ре	rformance	Reported	in Q4 20	24-25	
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result
City Housing												
Percentage of monthly Lift Operations and Lifting Equipment Regulations (LOLER) checks undertaken (CH_CP_13)	Bigger is better	100%	99.72%	100%	98.90%	99%	100%	1/4/2025	Improved	N/A	N/A	N/A**
Percentage of Council homes that meet the decent homes standard (CH_CP_14)	Bigger is better	36.90%	31%	26.65%	27.52%	30%	29.31%	1/4/2025	Improved	30%	36.00%	88.40% (2022/23)
Percentage change in the decent home's standard following the annual investment programme (CH_CP_15)	Bigger is better	6.9%	-3.30%	-4.09%	NYA	8%	5%	1/4/2024- 31/3/2025	N/A*	N/A	NYA	N/A**
Customer complaints: a) Increase - Percentage of customer complaints resolved within service-level agreement timescales (CH_CP_16a)	Bigger is better	68%	83%	87%	89%	85%	88%	1/1/2025- 31/3/2025	Worse	N/A	N/A	N/A**
Customer complaints: b) Decrease - Number of complaints overdue(including any backlog) (CH_CP_16b)	Smaller is better	462	119	69	33	200	67	1/1/2025- 31/3/2025	Worse	N/A	N/A	N/A**
Proportion of respondents who report that they're satisfied with the overall service from the Council as their landlord (CH_CP_17)	Bigger is better	52.10%	NYA	NYA	59%	N/A	NYD	1/4/2024- 31/12/2024	N/A*	N/A	N/A	62.30% (2023/24)
Proportion of non-emergency repairs completed within landlords' target timescale (CH_CP_18a)	Bigger is better	New Measure	79.73%	85.79%	80.0%	78%	90.85%	1/4/2025	Improved	N/A	N/A	77.50% (2023/24)
Proportion of emergency repairs completed within landlords' target timescale (CH_CP_18b)	Bigger is better	New Measure	87%	91.46%	89.36%	91%	90.85%	1/4/2025	Improved	N/A	N/A	85.76% (2023/24)
Proportion of respondents who have received a repair in the last 12 months who report that they're satisfied with the overall repair service (CH_CP_19)	Bigger is better	56.30%	NYA	NYA	64%	N/A	NYD	1/4/2024- 31/12/2024	N/A*	N/A	N/A	N/A**



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.

KPIs marked NYD are reported a quarter in arrears.



### Portfolio Performance Overview: Housing and Homelessness

A total of 22 KPIs are available to be reported on this quarter. 9 (38%) KPIs are on track or exceeding target, 6 (30%) are reported off track. 13 (65%) KPIs have improved, 7 (35%) KPIs have worsened.

			Previous P	erformance		Performance Reported in Q4 2024-25						
Key Performance Indicator	Aim	2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result
<b>Q</b>											cumulative	
L City Housing												
Average days void turnaround (the period of time when a property is unoccupied between two tenancies. Excludes Major works) (CH_CP_20)	Smaller is better	35.79	39.49	47.77	48	28	53.31	1/4/2025	Worse	N/A	N/A	55.27 (2023/24)
□ City Operations												
Number of properties improved in the Private Rented Sector as a result of the Council's intervention (CO_CP_17)	Bigger is better	413	108	269	481	540	585	01/04/2024 - 31/03/2025	Improved	N/A	N/A	N/A**
Number of completed inspections for licensable Mandatory Houses in Multiple Occupation (HMO) (CO_VS_29)	Bigger is better	364	61	190	305	350	363	01/04/2024 - 31/03/2025	Worse	N/A	N/A	N/A**
Place, Prosperity and Sustainability												
Percentage of homes built that are affordable (and number) (PPS_CP_17)	Bigger is better	17.53%	NYD	NYD	NYD	38%	17.35%	2011 - 2024	Worse	38%	N/A	N/A**
Percentage of the Direct Delivery house building programme delivered against the quarterly plan (PPS_CP_18)	Bigger is better	85%	66.67%	NYD	97%	100%	100%	1/4/2024 - 31/3/2025	Improved	N/A	N/A	N/A**



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.



#### A total of **6** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
☐ City Housing		
Total numbers of families with dependents in Bed and Breakfast over 6 weeks (CH_CP_07)	<ul> <li>Performance for this quarter is 638 against the target of 372 and rag rated red. However, direction of travel has improved compared Q3 24/25 with a reduction of 60 families with dependants not in B&amp;B over 6 weeks.</li> <li>Recent benchmarking data for Core English Cities from Q1 2024-25 ranks Birmingham 5th (worst performer), with 528 cases (37.73 cases per 100,000). It ranks 15th when compared to other Core Cities and London boroughs. Ealing has the highest number of cases at 329, or 87.65 per 100,000.</li> <li>Manchester and Leeds are joint top performers, both reporting zero cases.</li> </ul>	As at 31st March 2025, the total numbers of families with dependents in B&B over 6 weeks was 638, higher than the profile target of 372. The level of homeless presentation of homeless families is greater than accessible, affordable supply, and alternate temporary accommodation, resulting in the use of B&B. Cost of living pressures, housing costs and population increase, including as part of inward migration, all contribute to this pressure. Following the S114 declaration and the need to radically change the approach to reducing this figure, a new Temporary Accommodation (TA) Strategy was approved at Cabinet in September 2024. This and the Homelessness Prevention Strategy 2024 set out the approach to preventing homelessness and proving both sufficient temporary and permanent housing. The implementation of the Homelessness Prevention Strategy has led to further increases in prevention outcomes, averaging 57% across 2024-25, and to changes in case management so that there is a focus on the different needs of single homeless people compared to families. The TA Strategy has seen four Regulation 10 deals secured for reduced cost hotel provision, a new framework for 10 year leasing from private landlords, acquisitions at a significant scale and further investment in private rented sector outcomes. A new reduction plan and targets has been developed in conjunction with the Ministry of Housing, Communities and Local Government. These targets are replicated in the KPI's reported for 2025-26, which align with financial targets and seek to have no households with dependents in B&B over 6wks by July 2027.
Percentage of Electrical Installation Condition Report tests undertaken in all relevant properties (CH_CP_09a)	Against a target of 99% for Q4, 86.58% of Electrical Installation Condition Report tests have been undertaken in all relevant properties. This means the KPI has not met the target and continues to be red rated for the fourth consecutive quarter since Q1 2024-25. There has been an improvement in the direction of travel from 79.62% in Q3 to 86.58% in Q4, matching performance achieved in Q2 2024-25. BCC's performance continues to be lower when compared to the benchmark figure of 97% for LAs & ALMOs with over 10,000 housing stock.	The Directorate has been working closely with the Regulator for Social Housing to address areas of non-compliance and receiving positive feedback regarding progress. The expected target is 98-100% (excluding no access/in a legal process) to ensure compliance with statutory regulations. Contractors are working at an increased pace, with on average 1000 of the overdue being caught up each month. This is in addition to the standard programme of works. The target does not include those properties where no access has been possible. Previously highlighted discrepancy in the orders raised resulted in a shortfall in objective with the contractors. This has now been rectified; however, the recovery period is expected to take until June 2025. The consequences of our current performance levels mean a lack of statutory compliance which could result in regulatory interest and/or fines. The team have raised additional orders. Contractors meet for specific meetings on a frequent basis to address the gaps in compliance. There is also an additional resource within the compliance team who are booking previous no access directly with the residents. We are targeting completion of the servicing programme by September 2025. Remedial tasks continue to be a focus working with our business partners who have increased resource to respond to the volume of tasks. A risk to this is gaining access being made available by our residents. Internally, a project team has been created to enable a new why of processing and assigning remedial tasks that will be a positive development in achieving their completion





#### A total of **6** KPIs reported Red this quarter

Measure ©	Corporate Performance Analysis	Directorate Response & Actions
☐ City Housing	Against a target of 000/ for 0.4,010/ of Electrical Installation	The Directorete has been working cleach with the Deculator for Social Housing to address process of new compliance and
Percentage of Electrical Installation Condition Report tests undertaken in all relevant blocks (CH_CP_09b)	Against a target of 99% for Q4, 91% of Electrical Installation Condition Report tests have been undertaken in all relevant blocks. This means the KPI has not met the target and continues to be red rated for the fourth consecutive quarter since Q1 2024- 25. There has been significant improvement in the direction of travel from 70% in Q3 to 91% in Q4, which is the highest achieved for this year (2024-25).	The Directorate has been working closely with the Regulator for Social Housing to address areas of non-compliance and receiving positive feedback regarding progress. The expected target is 98-100% (excluding no access/in a legal process) to ensure compliance with statutory regulations. There has been dedicated focus in this area and performance has improved by 7 percentage points between February (84%) and March (91%). Previously highlighted discrepancy in the orders raised resulted in a shortfall in objective with the contractors. The team has raised additional orders. Contractors meet for specific meetings on a frequent basis to address the gaps in compliance. There is also a dedicated resource focusing on the block EICR programme.
		The consequences of our current performance levels mean a lack of statutory compliance which could result in regulatory interest and/or fines.
		We are targeting completion of the servicing programme by September 2025. Remedial tasks continue to be a focus working with our business partners who have increased resource to respond to the volume of tasks. A risk to this is gaining access being made available by our residents. Internally, a project team has been created to enable a new way of processing and assigning remedial tasks that will be a positive development in achieving their completion.
Percentage of asbestos surveys undertaken in all relevant communal properties (block only) (CH_CP_10)	Against a target of 99% for Q4, 71% of asbestos surveys have been undertaken in all relevant communal properties. This means the KPI has not met the target and continues to be red rated for the third consecutive quarter since Q2 2024-25. There has been significant decline in the direction of travel from 92% in Q3 to 71% in Q4, which is the lowest achieved for this year (2024-25).	The Directorate has been working closely with the Regulator for Social Housing to address areas of non- compliance and receiving positive feedback regarding progress. The expected target is 98-100% to ensure compliance with statutory regulations. The expected go live in February was further delayed due to contract signing and purchase order processing delays. Both contracts have now started on site surveys and have added additional resources to make up for the protracted delay in commencement.
	Benchmarking comparison is not available for this KPI.	The consequences of our current performance levels mean Birmingham City Council having the initial Asbestos Management Surveys in place, highlighting the areas of risk. The programme is now in its re-inspection stage (BAU) where it is unlikely to identify any additional asbestos containing materials. Therefore, whilst we are not currently meeting the reinspection element of the Control of Asbestos Regulations the risk is very low. Both contracts have now started on site surveys and have added additional resources to make up for the protracted delay in commencement.
		The programme is expected to complete by June 2025 with any outstanding remedials completed by September 2025, at which point the required level of compliance will be achieved. Internally, a project team has been created to enable a new why of processing and assigning remedial tasks that will be a positive development in achieving their completion.





#### A total of **6** KPIs reported Red this quarter

Directorate Response & Actions
Poor performance by one contractor has affected overall performance, along with supply chain issues, retention of esources and local competition. Many of the supply chain tell the contractors that working on the Birmingham properties "is hard" and not as commercially beneficial. Wider sector economic conditions mean that there is more work in the local area for supply chain. Turnaround time has been affected leading to increased rent loss, increase cost of Temporary Accommodation, Bed and Breakfast. A formal rectification notice has been issued to contractor which is in place and being monitored. Step in arrangements have been activated for last three months with diversion of works to alternative contractor. Performance is improving but will take time to show through especially as some old voids are handed back. Weekly neetings are taking place with the contractor organisation. Performance against the service improvement plan is expected to be on target by mid-May 2025 and a formal eport on end April performance is expected on 30 April. Contractor performance has improved across the city with epair times down overall from February to March by 10 days (35 days to 25 days average across all areas) for normal voids and 156 days down to 86 days for major which reflect the clear down and completion of some legacy arge properties. The team continue to focus on the South area plan and performance has improved in this area form 39 days to 28 days by end March 2025 across all void categories. This improvement is reflective of the proactive work carried out to date as well as implementing step in arrangements and the team continue to monitor
A france Per Per Per Per Per Per Per Per Per Pe





#### A total of **6** KPIs reported Red this quarter

Measure	Corporate Performance Analysis	Directorate Response & Actions
<ul> <li>Place, Prosperity and Sustainability</li> </ul>		
Percentage of homes built that are affordable (and number) (PPS_CP_17)	The percentage of affordable homes built by all developers is an annual, cumulative measure reported one year in arrears. It is rated red this year, with a 2011-2024 result of 17.35%, falling below the 38% target. 5,414 affordable homes were built within this period, out of a target of 31,200. This represents a slight decrease from last year's result of 17.53% (with 4,971 homes built between 2011-2023, out of a target of 28,350). 5,414 new affordable dwellings have been completed between 2011 and 2024. This is 6,442 affordable dwellings below the cumulative affordable housing target of 11,856 for the same period. This is also just 17% of the overall housing target of 31,200 new dwellings for the same period, whereas 38% should have been delivered.	It is recognised that performance has fallen well below the affordable housing requirement set within the Birmingham Development Plan 2017 (which KPI PPS_CP_17 relates to). This is a problem locally as well as nationally. A new planning policy approach is being prepared as part of the Birmingham Local Plan. The Local Plan "Preferred Options" Document suggests a zoned approach, with different levels of affordable housing that can more realistically be achieved by developers in different areas of the city. The new Labour government also has a greater emphasis on the delivery of social rented housing. The government will need to supplement these policy changes by providing grant funding and introducing mechanisms to facilitate the delivery of new affordable housing. Several mitigating actions have been taken to bolster the supply of affordable housing within the city. This includes rebuilding relationships with partners such as Registered Providers (RPs) to enable them to deliver more affordable homes. The Affordable Housing Delivery Team (AHDT) meet quarterly with all registered providers that operate within the city. These enable the Council to build relationships with RPs and offer support to help them overcome issues with developments.





For Q4, there are 5 KPIs reported for the Social Justice, Community Safety and Equalities Portfolio: 2 are rated green and 3 amber. Overall, performance has improved compared to the start of the year - in Q1, 2 KPIs were rated green, 1 amber, and 2 red. All measures within this portfolio come under City Operations.

Throughout 2024–25, consistently strong performance has been observed across two indicators, both of which have maintained a green rating: the percentage of short-notice burials conducted within one day of booking (which achieved an annual average of 99.33%) and the percentage of community safety "front door" enquiries resolved within 28 days. For Q4, the latter measure (reported one quarter in arrears) has achieved a result of 87% against a target of 75%, although this is a slight decline from the Q3 result of 88%. Neither of these KPIs are benchmarkable.

Two KPIs, the percentage of non-coronial deaths registered on time and the percentage of births registered on time, have demonstrated significant improvement between Q1 and Q4, increasing from 27% to 91% (against a target of 98%) and from 63% to 89% (against a target of 95%) respectively. The births KPI is now rated amber for the first time this year, and the result surpasses the most recent England and Wales benchmark of 87%. The deaths KPI is not benchmarkable.

One KPI, the percentage of Case Review enquiries received per the number of anti-social behaviour incidents reported to the Council, has consistently underperformed, remaining amber throughout 2024-25. This year's average (0.65%) has underperformed compared to last year which achieved an average of 0.48%. This KPI is not benchmarkable.

### Portfolio Performance Overview: Social Justice, Community Safety and Equalities

A total of **5** KPIs are available to be reported on this quarter. **2** (40%) KPIs are on track or exceeding target, **0** (0) are reported off track. **3** (60%) KPIs have improved, **2** (40%) KPIs have worsened.

		Previous Performance				Performance Reported in Q4 2024-25							
Key Performance Indicator Aim		2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result Cumulative	Benchmark Result	
City Operations													
Percentage of Community Safety 'front door' enquiries closed within 28 days (CO_CP_27)	Bigger is better	86%	93%	86%	88%	75%	87%	01/10/2024 - 31/12/2024	Worse	75%	NYD	N/A**	
Percentage of Case Review enquires received per the number of anti-social behaviour incidents reported to the Council (CO_CP_28a)	Smaller is better	0.48%	0.40%	0.80%	0.74%	0.35%	0.65%	01/01/2025 - 31/03/2025	Improved	N/A	N/A	N/A**	
Percentage of births registered within the statutory timescale after the birth (42 days) (CO_CP_35)	Bigger is better	26%	27%	46%	76%	98%	91%	01/01/2025 - 31/03/2025	Improved	N/A	N/A	87% (2022)	
Percentage of non-coronial deaths registered within 5 days of receipt of the medical certificate of cause of death (CO_CP_36)	s of receipt of the medical certificate of cause of better Measure		95%	89%	01/01/2025 - 31/03/2025	Worse	N/A	N/A	N/A**				
Percentage of short notice burials carried out within 1 day after booking (excluding funerals delayed through family or funeral director choice) (CO_CP_37)		New Measure	100%	100%	98%	98%	99.33%	01/01/2025 - 31/03/2025	Improved	N/A	N/A	N/A**	



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.



There are 5 KPIs reported under Transformation, Governance and HR of which 3 are rag rated green, 1 amber and 1 red.

Three KPIs relate to early intervention and prevention, performance against all of which has exceeded the target and is rated green throughout this year. These KPIs are local measures and not benchmarkable.

Performance against the KPI Total number of domestic abuse survivors supported through the Part 4 new statutory duty, has exceeded its quarterly target throughout the year and has almost doubled the annual target. Latest Q3 performance (reported a quarter in arrears) is 1,592 against a target of 558. Performance has declined over the course of the year but this was anticipated as contracts are coming to an end and targets were profiled accordingly. This service will continue next year as Domestic abuse remains a critical issue, but targets will be reduced to allow for the new contract coming into effect and to fit more closely with the parameters of the Part 4 duty in the Domestic Abuse Act 2021 and what must be reported to the Ministry of Housing, Communities and Local Government (MHCLG).

Performance on the 2 maximising income for citizens KPIs has remained green for this performance year. Income achieved by the Neighbourhood Advice and Information Service has increased quarter on quarter, exceeding targets. Income achieved by third sector providers has also exceeded targets each quarter, but the value of income achieved has dropped from quarter 2 to quarter 3 (reported one quarter in arrears). The degree to which they have exceeded the target has also dropped, so that where it exceeded Q2 target by nearly £3m, in Q3 it exceeded its target by £300k.

Freedom of Information KPI has been consistently underperforming and rag rated red for this fiscal year. The latest results is 69% for Q3 2024/25 (reported a quarter in arrears), which equates to 381 FOIs responded to within 20 working days. Performance is below last year's average outturn (2023/24 - 79%). The end of year average is not available as this KPI reports a quarter in arrears and will be monitored in Q1 25/26 at directorate level.

The KPI Average number of sickness absence FTE days per employee – Council wide has 2024/25 end of year results (cumulative) of 11.51 days, which has remained static compared to last year's outturn of 11.57 days. When comparing our performance with Core English Cities, the average is 13.60 days, based on data from three out of eight local authorities. This limited data does not provide a complete picture of overall performance. The average for all English Met boroughs is 12.6 days and in contrast, the average benchmark for all English authorities is 9.3 days (for 2022/23), with the best performer achieving a score of 2 days (Gloucester) and the worst performing at 69 days (Sheffield). This indicates that our performance is currently below the national average.

#### Portfolio Performance Overview: Transformation, Governance and HR

A total of **5** KPIs are available to be reported on this quarter. **3** (60%) KPIs are on track or exceeding target, **1** (20%) are reported off track. **2** (40%) KPIs have improved, **3** (60%) KPIs have worsened.

		Previous Performance			Performance Reported in Q4 2024-25							
Key Performance Indicator Aim		2023-24 Outturn	2024-25 Q1 Result	2024-25 Q2 Result	2024-25 Q3 Result	Quarter Target	Result	Reference Date	Trend	Annual Target	Annual result	Benchmark Result
<b>Q</b>											Cumulative	
Corporate - Early Intervention and Prevention												
Maximising income for citizens: a) total additional income achieved for citizens from benefits / charitable sources by the Neighbourhood Advice and Information Service (£) (EIP_CP_01)	Bigger is better	19,921,702	NYD	5,175,085	10,319,876	9,000,000	13,587,677	Apr-Dec 2024	Worse	N/A	N/A	N/A**
Maximising income for citizens: b) total additional income achieved for citizens from benefits / charitable sources by third sector advice providers contracted by the Council ( $\pounds$ ) (EIP_CP_02)	Bigger is better	4,997,458	NYD	1,347,378	5,175,085	3,600,000	3,977,999	Apr-Dec 2024	Improved	N/A	N/A	N/A**
Total no. of domestic abuse survivors supported through the Part 4 new statutory duty (EIP_CP_03)	Bigger is better	2,178	5,041	2,973	1,890	558	1,592	Sep-Dec 2024	Worse	N/A	N/A	N/A**
Corporate Services												
Percentage of Freedom of Information requests complied within the statutory time limit (20 working days) (CM_OH_23)		79%	76%	75%	79%	90%	69%	1st Oct- 31st Dec 2024	Worse	N/A	N/A	TBC
HR, Organisation Development and Payroll												
Average number of sickness absence FTE days per employee – Council wide (for the period) (CM_OH_26)	Smaller is better	11.57	2.90	2.71	3.08	2.80	2.82	1st January - 31st March 2025	Improved	11.50	11.51	13.60 (2022/23)



\*Trend information is not (N/A) available due to the KPI reporting corporately for the first time. \*\*KPI is not comparable to an external benchmark.





### Portfolio Performance Red Rated KPIs: Transformation, Governance and HR

#### A total of **1** KPIs reported Red this quarter

Measure ©	Corporate Performance Analysis	Directorate Response & Actions
☐ Corporate Services		
Percentage of Freedom of Information requests complied within the statutory time limit (20 working days) (CM_OH_23)	The results for this KPI is reported a quarter in arrears and refers to period 1st Oct-31st Dec 2024. The latest result is 69%, which has not achieved the target (90%), therefore rated red for 4 consecutive quarters. The direction of travel has declined and performance is 10 percentage points lower than the previous reporting period (Q3 - 79%, which was our best performing results). Moreover, our performance is below 2023/24 outturn of 79%. This KPI is not benchmarkable, however, when comparing our results with 4 other local authorities within the Core English Cities group, our latest results are lower than the average (84.17%) and median (86%) performance.	<ul> <li>This KPI reports a quarter in arrears.</li> <li>Between 1st October 2024 - 31st December 2024 a total of 554 FOI requests were received. A total of 381 were answered on time which is 69%.</li> <li>153 FOIs were not responded within 20 working days. Below is a breakdown of service area that received the highest FOI which were not responded to within the timeframe:</li> <li>Adult social care had 35 out of time responses (an increase of 9 additional out of time responses from last reporting period and 22.9% from all out of time responses for the period);</li> <li>Children and Families had 24 out of time responses (an increase of 22 out of time responses from last reporting period and 16.3% from all out of time responses for the period);</li> <li>City Housing had 23 out of time responses (an increase of 5 from last reporting period and 14.4%) from all out of time responses for the period ;</li> <li>City Operations had 21 out of time cases (a decrease of 4 additional out of time responses).</li> <li>As reported in previous quarter, services have had capacity and resource issues, which led to underperformance of this KPI. New staff are currently being trained up on standards to bring performance to an acceptable threshold.</li> </ul>



