Council Plan Refresh 2023/24

KEY for rationale:

- Dark green = Keep performance measure No change to target
- Dark blue = Keep performance measure Change to target Increase target (harder to achieve)
- Light blue = Keep performance measure Change to target Reduce target (easier to achieve)
- Light green = Keep performance measure Change Move to Goldilocks/Gauge Format Type
- Red = Remove performance measure
- Orange = New performance measure

1. Priority – PEOPLE – Supporting residents to realise their potential

1.1. Outcome – Healthy and active communities

1.1.1. Programme – Improving everyone's health and reducing inequalities

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
PH13	Rate per 100,000 of self- reported 4 week smoking quitters aged 16 or over (cumulative)	Children & Adults/Public Health	Aim to Maximis e		363 (Q4 21/22)	82 (Q1 22/23)	85 (Q1 22/23)	Amber (Q1 22/23)	IMP (Q1 22/23)	DET (Q1 22/23)	425 (Q1 = 85 (20% of total), Q2 = 170 (40% of total), Q3 = 255 (60% of total), Q4 = 425 (100% of total))	295 (Q1 = 59 (20% of total) Q2 = 118 (40% of total) Q3 = 177 (60% of total) Q4 = 295 (100% of total)	Keep PI – reduce target. Rationale: Stop smoking support services have historically been delivered at a range of intervention settings. Namely Medway Council's Public Health local stop smoking service, alongside GP practice and pharmacy settings. However, due to demands on pharmacies to deliver more NHS services and the lack of capacity in primary care, there is now very limited availability for GP practices and pharmacies to support smoking quit attempts. Therefore, a decrease is proposed for this measure's target due to the wider systems reduced capacity. The target will instead reflect the smoking quit attempts that will now mainly occur within Medway Council's Public Health stop smoking service. This measure is reported a quarter in arrears.
PH14	Excess weight in 4-5 year olds	Children & Adults/Public Health	Aim to Minimise	24% (18/19 annual)	25.5% (19/20 annual)	31.5% (20/21 annual)	22.6% (20/21 annual)	Red (20/21 annual)	DET (20/21 annual)	DET (20/21 annual)	23% (annual) Change to 23.3%	ТВС	The 2021/22 target has been updated to 27.7% and is based on the England value for 2020/21. The 2022/23 target has been updated to 23.3% and is based on the England value for 2021/22.

													The 2023/24 target will be based on the England value for 2022/23, which will be published around November 2023. Delivery of this target relies on partnership working across a range of organisations, not just Public Health. This measure is reported a year in arrears.
PH15	Excess weight in 10-11 year olds	Children & Adults/Public Health	Aim to Minimise	36.2% (18/19 annual)	36.9% (19/20 annual)	44.2% (20/21 annual)	34.3% (20/21 annual)	Red (20/21 annual)	DET (20/21 annual)	DET (20/21 annual)	35.2% (annual) Change to 37.8%	TBC	The 2021/21 target has been updated to 40.9% and is based on the England value for 2020/21. The 2022/23 target has been updated to 37.8% and is based on the England value for 2021/22. The 2023/24 target will be based on the England value for 2022/23, which will be published around November 2023. Delivery of this target relies on partnership working across a range of organisations, not just Public Health. This measure is reported a year in arrears.
PH17	Breastfeeding initiation	Children & Adults/Public Health	Aim to Maximis e	68.32%	65.42%	69.39%	70%	Amber	IMP	IMP	70% (annual and quarterly)	70% (annual and quarterly)	Keep PI – no change to target. Rationale: Delivery of this target relies on partnership working across a range of organisations, not just Public Health. Reword PI name to: Percentage of women initiating breastfeeding within 48 hours of birth. Change PI to reporting a quarter in arrears. The data is usually received by an external organisation after the end of the quarter.
PH23	Dementia friendly settings (cumulative)	Children & Adults/Public Health	Aim to Maximis e	6	2	2	2	Green	DET	STATIC	6 (Q1 = 0, Q2 = 2, Q3 = 4, Q4 = 6)	6 (Q1 = 0, Q2 = 2, Q3 = 4, Q4 = 6)	Keep PI – no change to target. Rationale: The Dementia friendly alliance has been through a lot of change over the last year and lost some support from the Alzheimer's Society. It is therefore run wholly by volunteers with lived experience supported by the council. At this time, we can't commit to increasing this target as there isn't the resource. Reword PI name: Number of new settings which are dementia friendly (cumulative).
PH8	Percentage of children and young people achieving a lifestyle improvement as a result of completing a young people weight management service	Children & Adults/Public Health	Aim to Maximis e		67.7%	72.4%	75.0%	Amber	IMP	IMP	75.0% (annual and quarterly)	75.0% (annual and quarterly)	Keep PI – no change to target. Rationale: The service has been impacted by Covid19. So far in 2022/23 there has been a steady increase in the percentage of children and young people achieving a lifestyle improvement through the young people weight management programmes. However, there is still low uptake and reduced engagement from schools.
NEW	Proportion of people who self- report high levels	Children & Adults/Public Health	Aim to Maximis e	NA	NA	NA	NA	NA	NA	NA	80.00% (2022/23 annual)	TBC in 24/25 refresh	New PI. Rationale: This new indicator has been included to add a measure related to wellbeing, which is a

of life satisfaction						key component of the Council Plan priority 'People' and outcome 'Healthy and active communities.
						The 2022/23 target has been based on the 2021/22 value for England (recently published).
						For information, in 2020/21 the value for Medway was 76.2% and the England value was 76.3%.
						The 2023/24 targets will be based on the England value for 2022/23, which won't be available until the end of 2023.
						This measure will be reported a year in arrears.

1.2. Outcome – Resilient families

1.2.1. Programme – Children's Services Improvement Plan

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
A10	The average number of days (over the last 36 months) between a child entering care and moving in with adoptive family (fostering adjusted)	Children & Adults	Aim to Minimise	NA (new measure for 22/23)	428	415	450	Green	IMP	IMP	450 (annual and quarterly)	450 (annual and quarterly)	Keep PI – no change to target. Rationale: Court processes are delaying decisions hence the target will be kept the same.
CSC0004	Number of LAC per 10,000 children	Children & Adults	Goldiloc ks	67.3	65.5	67.3	67.0	Green	IMP	IMP	Between 63 and 71 (mid-point 67.0 – annual and quarterly)	Between 65 and 73 (mid-point 69.0 – annual and quarterly)	Keep PI – increase target. Rationale: Increase as over the last year: Medway 7% rise, national 4% statistical neighbours 3% and the South East 6%. Over last three years: Medway 4.5%, National 4.5%; Statistical neighbours, 0.5% and South East 5%. Reword PI name: Number of CiC per 10,000 children
CSC0006	Number of CP per 10,000 children	Children & Adults	Goldiloc ks	32.0	35.0	34.0	37.0	Green	IMP	DET	Between 32 and 42 (mid-point 37.0 – annual and quarterly) [originally, between 19 and 25 agreed]	Between 32 and 42 (mid-point 37.0 – annual and quarterly)	Keep PI – no change to target. Rationale: The range represents a sensible level of need for the local authority hence the target will be kept the same.

ILAC1	Average Caseloads in Assessment teams	Children & Adults	Aim to Minimise	21.2	25	22.1	22	Amber	DET	IMP	22 (annual and quarterly)	22 (annual and quarterly)	Keep PI – no change to target. Rationale: Caseload levels are set to promote good practice hence the target will be kept the same.
ILAC2	Average Caseloads in Post Assessment teams	Children & Adults	Aim to Minimise		15.4	16.1	18	Green	DET	DET	18 (annual and quarterly)	18 (annual and quarterly)	Keep PI – no change to target. Rationale: Caseload hasn't been over target in 15 months hence the target will be kept the same.
ILAC3	Completed initial child and family assessments which started as S47, where the child was visited within 1 working day.	Children & Adults	Aim to Maximis e		81%	61%	90%	Red	DET	DET	90% (annual and quarterly)	90% (annual and quarterly)	Keep PI – no change to target. Rationale: This is a challenging target hence the target will be kept the same.
ILAC4	Completed initial child and family assessments which started as S17, where the child was visited within 5 working days.	Children & Adults	Aim to Maximis e		59%	39%	85%	Red	DET	DET	85% (annual and quarterly)	85% (annual and quarterly)	Keep PI – no change to target. Rationale: This is a challenging target hence the target will be kept the same.
ILAC5	% of children with long term fostering as a plan, where the child, carer and service have agreed for the placement to last until the child is ready to leave care.	Children & Adults	Aim to Maximis e		66%	66%	60%	Green	IMP	STATIC	60% (annual and quarterly)	65% (annual and quarterly)	Keep PI – increase target. Rationale: As performance has been green (achieving target) since March 2021, the target will be increased.
ILAC6	Rate of open CIN cases per 10,000	Children & Adults	Goldiloc ks		324	319	321	Green	IMP	IMP	Between 305 and 337 (mid- point 321 – annual and quarterly)	Between 305 and 337 (mid-point 321 – annual and quarterly)	Keep PI – no change to target. Rationale: The range represents a sensible level of need for the local authority hence the target will be kept the same.
ILAC7	The percentage of CSC Audits graded good or outstanding	Children & Adults	Aim to Maximis e		5% (Q4 21/22)	30% (Q1 22/23)	80% (Q1 22/23)	Red (Q1 22/23)	IMP (Q1 22/23)	IMP (Q1 22/23)	80% (annual and quarterly)	50% (annual and quarterly)	Keep PI – reduce target. Rationale: Targets should be aspirational and achievable. This target should be stepped over 2-3 years to meet the aspirational aim of 80%.
ILAC7(N)	The percentage of CSC Audits graded RI or higher (good or outstanding)	Children & Adults	Aim to Maximis e	NA (new measure for 22/23)	NA (new measure for 22/23) (Q4 21/22)	75% (Q1 22/23)	80% (Q1 22/23)	Red (Q1 22/23)	NA (new measure for 22/23) (Q1 22/23)	NA (new measure for 22/23) (Q1 22/23)	80% (annual and quarterly)	NA	Remove PI. Rationale: Having two very similar measures of audit activity has proved confusing. ILAC7(N) does not provide additional insight to that already provided by ILAC7.
N23	The percentage of children social care substantive posts not filled by permanent social workers	Children & Adults	Aim to Minimise		23%	32%	20%	Red	DET	DET	20% (annual and quarterly)	20% (annual and quarterly)	Keep PI – no change to target. Rationale: Vacancy levels are set to promote good practice hence the target will be kept the same.

1.2.2. Programme – The best start in life

Council Plan measures

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
CASEIEYFS Gap	Percentage achievement gap at Early Years Foundation Stage Profile between the lowest attaining 20 % of children and the mean	Children & Adults	Aim to Minimise	28.2% (16/17 academi c year)	31.8% (17/18 academi c year)	28.7% (18/19 academi c year)	30% (18/19 academi c year)	Green (18/19 academi c year)	IMP (18/19 academi c year)	IMP (18/19 academi c year)	30% (annual) (21/22 academic year)	NA	Remove PI. Rationale: This measure has been discontinued by the Department for Education (DfE).
PH16	Smoking at time of delivery	Children & Adults/Public Health	Aim to Minimise	10.75%	9.63% (Q3 21/22)	11.46% (Q4 21/22)	16% (Q4 21/22)	Green (Q4 21/22)	DET (Q4 21/22)	DET (Q4 21/22)	16% (annual and quarterly)	16% (annual and quarterly)	Keep PI – no change to target. Rationale: Smoking at time of delivery is a complex issue, strongly linked to deprivation. In Medway, work is always ongoing to try to reduce the proportion of pregnant women who smoke, with an ideal of having no women smoking while pregnant, but because of the complexity of inter- related factors like deprivation, this is unlikely to be achievable for many years. The external factors affecting this indicator can cause it to rise and fall, so reducing the target may drive the indicator to red (not achieving target – away from target by more than 5%) due to external factors. Reword PI name: Percentage of pregnant women smoking at time of delivery (SATOD). This measure is reported a quarter in arrears.

1.3. Outcome – Older and disabled people living independently in their homes 1.3.1. Programme – Improve support for vulnerable adults by working with partners and communities

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
ASCGBT001	% of Long term packages that are placements	Children & Adults	Aim to Minimise	31%	31.3%	33.1%	30%	Red	DET	DET	30% (annual and quarterly)	30% (annual and quarterly)	Keep PI – no change to target. Rationale: This is a stretching target, and the trend is deteriorating.

ASCOF 1C(2i)	Percentage of clients receiving a direct payment for their social care service	Children & Adults	Aim to Maximis e	31.7%	32.4%	32.3%	30%	Green	IMP	DET	30% (annual and quarterly)	33% (annual and quarterly)	Keep PI – increase target. Rationale: Increase as performance has been improving over the last year and has been above target since Dec-21.
ASCOF 1G (n)	Proportion of adults with a primary support reason of learning disability support who live in their own home or with their family	Children & Adults	Aim to Maximis e	40%	44%	45%	77%	Red	IMP	IMP	77% (annual and quarterly)	65% (annual and quarterly)	Keep PI – reduce target. Rationale: Targets should be aspirational but achievable. Our published year end outturn (from short and long term (SALT)) was 60%, statistical neighbours 81% and National 79%. We have been under 60% for 2.5 years. Hence it is proposed that the target be reduced.
ASCOF 2A(1)	Permanent admissions to care homes per 100,000 pop – 18-64	Children & Adults	Aim to Minimise	11.3	Redacte d	Redacte d	4	Green	IMP	STATIC	16 (quarterly profile of 4)	16 (quarterly profile of 4)	Keep PI – no change to target. Rationale: 21-22 published data was 15.4 for Medway, National 13.9 and statistical neighbour 15.4. Hence, the target can stay the same.
ASCOF 2A(2)	Permanent admissions to care homes, per 100,000 pop – 65+	Children & Adults	Aim to Minimise	680.2	187.7	119.3	145	Green	IMP	IMP	580 (quarterly profile of 145)	650 (quarterly profile of 162.5)	Keep PI – reduce target. Rationale: There has been a rise in demand. 21- 22 published data was 669 for Medway, 538 nationally and 585 for statistical neighbours. The target should reflect this, hence a higher numerical value for the target is proposed.

1.4. Outcome – All children achieving their potential in education 1.4.1. Programme – High quality education provision for all

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
CA13	The percentage of children permanently excluded from school (upheld only)	Children & Adults	Aim to Minimise		0.02%	0.01%	0.01%	Green	IMP	IMP	Proposed 22/23 target = 0.04% (quarterly profile of 0.01%) Originally approved 0.02%.	0.05% (quarterly profile of 0.0125%)	Keep PI – reduce target. Rationale: 20-21 national is 0.47%, and Medway is 0.013%. So far, 22-23 financial year is at 0.03%. We know we had a higher rate of absence in the pandemic and consequent issues. The measure will be monitored in 22/23 with an annual target of 0.04% with a quarterly profile of 0.01%.
CASEIKS4 Oftsed	Partnership measure :Percentage of all Secondary Schools judged good or better,	Children & Adults	Aim to Maximis e		94.4%	94.4%	85%	Green	STATIC	STATIC	85% (annual and quarterly)	90% (annual and quarterly)	Keep PI – increase target. Rationale: Each school's weighting is 5.3%. Currently one school is inadequate, and one has no inspection. 17 are Good or better. To drive performance improvement, the target is being increased.

CASEISPEC Ofsted	The percentage of special schools in Medway judged to be good or better	Children & Adults	Aim to Maximis e		100%	100%	90%	Green	STATIC	STATIC	90% (annual and quarterly)	90% (annual and quarterly)	Keep PI – no change to target. Rationale: There are five special schools. All are currently Good or better. Hence the target will be kept the same.
EDU3(b)	The percentage of children who were persistently absent from school	Children & Adults	Aim to Minimise		25.1% (T1-2 21/22 academi c year)	24.3% (T1-4 21/22 academi c year)	13% (T1-4 21/22 academi c year)	Red (T1- 4 21/22 academi c year)	DET (T1-4 21/22 academi c year)	IMP (T1- 4 21/22 academi c year)	13% (annual and quarterly) (21/22 academic year)	23.5% (annual and quarterly) (22/23 academic year)	Keep PI – reduce target. Rationale: Change the target to bring it in line with National (23.5%) (Terms 1-2 2021-22). This measure is reported a year in arrears.
OfstedPrimMnt	The percentage of Maintained primary schools in Medway judged to be good or better	Children & Adults	Aim to Maximis e		96%	100%	93%	Green	IMP	IMP	93% (annual and quarterly)	NA	Remove PI. Rationale: Remove as no longer of use to measure because schools continue to academise (cohorts are different), and so it is difficult to make comparisons over time.
SE KS2	The percentage of children who the required standard or above in Reading, Writing and Mathematics at KS2	Children & Adults	Aim to Maximis e	NA (19/20 academi c year)	NA (20/21 academi c year)	56.0% (21/22 academi c year)	65.0% (21/22 academi c year)	Red (21/22 academi c year)	DET (21/22 academi c year)	NA (21/22 academi c year)	65.0% (annual) (21/22 academic year)	58.0% (annual) (22/23 academic year)	Keep PI – reduce target. Rationale: The 2021/22 academic year Medway result was 56%. The target has been set to match National and South East level (58%). This measure is reported a year in arrears.
SE KS2Mnt	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 in Maintained Schools only	Children & Adults	Aim to Maximis e	NA (19/20 academi c year)	NA (20/21 academi c year)	64% (21/22 academi c year)	65% (21/22 academi c year)	Amber (21/22 academi c year)	NA (21/22 academi c year)	NA (21/22 academi c year)	70% (annual) (21/22 academic year)	65% (annual) (22/23 academic year)	Keep PI – reduce target. Rationale: Reduce the target to an achievable but aspirational target as the 21-22 academic year outturn for Medway was 64%. This measure is reported a year in arrears.
SE2 OEPr	Partnership measure: Percentage of all Primary Schools judged good or better,	Children & Adults	Aim to Maximis e	88.2%	88.0%	90.7%	87.5%	Green	IMP	IMP	87.5% (annual and quarterly)	93% (annual and quarterly)	Keep PI – increase target. Rationale: Currently at 91% (68 schools). National is 89%, and South East is 91%, 93% depicts 70 schools are Good or better. The target is being increased to drive performance improvement.
SEKS4A8	Average attainment 8 score	Children & Adults	Aim to Maximis e	45.5 (16/17 academi c year)	46 (17/18 academi c year)	46.6 (18/19 academi c year)	46.6 (18/19 academi c year)	Green (18/19 academi c year)	IMP (18/19 academi c year)	IMP (18/19 academi c year)	47 (annual) (21/22 academic year)	49 (annual) (22/23 academic year)	Keep PI – increase target. Rationale: Medway (provisional) outturn for 2021-22 academic year is 47.8, National 48.7 and South East 50 for the same time period. The target is being increased to drive performance improvement. This measure is reported a year in arrears.

2. Priority – PLACE – Medway: A place to be proud of

2.1. Outcome – A clean and green environment

2.1.1. Programme – Enhancing the public realm, street scene, parks and green spaces

Council Plan measures

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
GH6 CP	Satisfaction with parks and green spaces - direct users CP	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e		79.3%	78.4%	75%	Green	DET	DET	75% (quarterly only)	75% (quarterly only)	Keep PI – no change to target. Rationale: Retain this indicator as it is a useful ongoing measure to identify satisfaction levels in greenspaces.
NI 195a	Improved street and environmental cleanliness: Litter	Regeneration, Culture & Environment (Frontline Services)	Aim to Maximis e	96.67%	98.00%	97.00%	96.00%	Green	STATIC	DET	96.00% (annual and quarterly)	96.00% (annual and quarterly)	Keep PI – no change to target. Rationale: The selected criteria remain important indicators in our performance for waste, recycling, and air quality. These and their respective national indicators have remained relatively static. Aside from this, in their atomised format they also provide a consistent benchmarking point for year-on-year comparison. For these reasons we need to maintain them until the guidance from the Environment Act 2021 provides further clarification.
W6 CP	Satisfaction with refuse collection – Citizens Panel result	Regeneration, Culture & Environment (Frontline Services)	Aim to Maximis e		90%	90.9%	85%	Green	IMP	IMP	85% (annual and quarterly)	85% (annual and quarterly)	Keep PI – no change to target. Rationale: See NI 195a.

2.1.2. Programme – Replacing Medway's streetlights

Council Plan measures

There are no council plan performance measures for this programme

2.1.3. Programme – Improving air quality in air quality management areas in Medway

Council Plan measures

There are no council plan performance measures for this programme

2.1.4. Programme – Climate Change

Council Plan measures

There are no council plan performance measures for this programme

2.2. Outcome – Put Medway on the map

2.2.1. Programme – Medway, a great place to live, work, learn and visit

Council Plan measures

There are no council plan performance measures for this programme

3. Priority – GROWTH – Maximising regeneration and economic growth - growth for all 3.1. Outcome – A strong diversified economy

3.1.1. Programme – Inward investment and business growth

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
ECD13	% of square footage let at Innovation Centre Medway (ICM)	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e	98.16%	97.16%	100.00%	90.00%	Green	IMP	IMP	90.00% (annual and quarterly)	90.00% (annual and quarterly)	Keep PI – no change to target. Rationale: Based on track record and consideration of the challenging national economic environment, based on performance history the target is still appropriate. Reword PI name to: Percentage of square footage let at Innovation Centre Medway (ICM).
ECD20	% of square footage let in council owned business units	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e	91.62%	93.5%	94.88%	90%	Green	IMP	IMP	90% (annual and quarterly)	90% (annual and quarterly)	Keep PI – no change to target. Rationale: Based on track record and consideration of the challenging national economic environment, based on performance history the target is still appropriate. Reword PI name to: Percentage of square footage let in council owned business units.
GVAPJ M	GVA per job – Medway	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e	£54,267. 00 (18/19 annual)	£55,929. 00 (19/20 annual)	£56,529. 00 (20/21 annual)	Data only (20/21 annual)	Data only (20/21 annual)	IMP (20/21 annual)	IMP (20/21 annual)	Data only (annual)	Data only (annual)	Keep PI – no change to target. Rationale: Gross value added (GVA) per filled job is better considered over a longer period. Trends over a longer period are less likely to be the result of the volatility around any single year estimate and are more likely to be showing a change in the economic performance of Medway. Hence this measure is a data only one. This measure is reported a year in arrears.

3.2. Outcome – Residents with jobs and skills

3.2.1. Programme – Jobs, skills, and employability

Council Plan measures

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
NI 117(N&U)	The percentage of 16-17 year olds who are not in education, employment or training or whose status is 'not known'	Children & Adults	Aim to Minimise	NA (new measure for 22/23)	6.9%	4.2%	7%	Green	IMP	IMP	7% (annual and quarterly)	7% (annual and quarterly)	Keep PI – no change to target. Rationale: This is a challenging target. Hence the target will stay the same.
MAE 2	% retention rate	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e	90.64% (academi c year)	91.19% (Q3 academi c year)	89.56% (Q4 academi c year)	94% (Q4 academi c year)	Amber (Q4 academi c year)	DET (Q4 academi c year)	DET (Q4 academi c year)	94% (annual and quarterly)	94% (annual and quarterly)	Keep PI – no change to target. Rationale: This should stay the same as it is a challenging target that demonstrates the quality of service being provided for learners and ensuring they are on the right courses.
MAE 3	Achievement rate (pass rate)	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e	97.24% (academi c year)	98.43% (Q3 academi c year)	96.39% (Q4 academi c year)	96% (Q4 academi c year)	Green (Q4 academi c year)	DET (Q4 academi c year)	DET (Q4 academi c year)	96% (annual and quarterly)	96% (annual and quarterly)	Keep PI – no change to target. Rationale: This should stay the same as it is a challenging target that demonstrates the quality of service being provided for learners and ensuring they are on the right courses.
LRCC4a	Number of jobs created and safeguarded (cumulative)	Regeneration, Culture & Environment (Regeneration)	Aim to Maximis e	257	77	103	90	Green	DET	DET	200 (Q1 = 60, Q2 = 90, Q3 = 150, Q4 = 200)	200 (Q1 = 60, Q2 = 90, Q3 = 150, Q4 = 200)	Keep PI – no change to target. Rationale: Though Q3 22/23 has already surpassed the annual target, the effects of the cost-of-living crisis, the recession predicted through to Q3 2023/24 and the increasing unemployment rate it is unlikely this upward trend will be consistent over the coming year.

3.3. Outcome – Preventing homelessness

3.3.1. Programme – Preventing homelessness

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
NI 156	Number of households living in temporary accommodation	Regeneration, Culture & Environment (Culture & Community)	Aim to Minimise	309	339	365	400	Green	DET	DET	400 (annual, quarterly and monthly)	400 (annual, quarterly and monthly)	Keep PI – no change to target. Rationale: Whilst target has been met for several years, rises in homelessness and the general cost of living increases will have an impact on increased temporary accommodation usage, that will be difficult to achieve.

HC3	No. of households with dependent children in B&B who have resided there for 6+ weeks at the end of the quarter	Regeneration, Culture & Environment (Culture & Community)	Aim to Minimise	0	0	0	0	Green	STATIC	STATIC	0 (annual, quarterly and monthly)	0 (annual, quarterly and monthly)	Keep PI – no change to target. Rationale: There is a legal requirement for the target to be zero. Reword PI name to: Number of households with dependent children in bed and breakfast (B&B) accommodation who have resided there for 6+ weeks.
HC4	Number of private sector properties improved as a result of the Council's intervention	Regeneration, Culture & Environment (Culture & Community)	Aim to Maximis e	939	191	278	250	Green	IMP	IMP	900 (Q1 = 175, Q2 = 250 Q3 = 237 Q4 = 238	800 (quarterly profile of 200)	Keep PI – reduce target. Rationale: To reflect future changes that may affect the number of properties that can be improved.

3.4. Outcome – Delivering new homes to meet the needs of Medway's residents

3.4.1. Programme – Delivering new homes to meet the needs of Medway's residents

Council Plan measures

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
NI 154	Net additional homes provided	Regeneration, Culture & Environment (Culture & Community)	Aim to Maximis e	647 (18/19 annual)	1130 (19/20 annual)	1082 (20/21 annual)	1000 (20/21 annual)	Green (20/21 annual)	IMP (20/21 annual)	DET (20/21 annual)	1675 (agreed in 22/23 year) [TBC in Apr-22 as per governance process] (annual)	TBC	Rationale: The local housing need figure gets updated annually with the publication of the housing affordability ratio in March. So, from April 2023, we are likely to have an updated figure. This measure is reported a year in arrears.

3.5. Outcome – Getting around Medway

3.5.1. Programme – Tackle congestion hotspots by transport and public realm improvements

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
NI 167	Average journey time along 5 routes across Medway (mins per mile)	Regeneration, Culture & Environment (Frontline Services)	Aim to Minimise	2.99 (2019 calendar year)	2.14 (2020 calendar year)	2.95 (2021 calendar year)	4.00 (2021 calendar year)	Green (2021 calendar year)	DET (2021 calendar year)	DET (2021 calendar year)	4.00 (annual and quarterly)	4.00 (annual)	Keep PI – no change to target. Rationale: The target will remain at 4 minutes per mile. Officers are undertaking work to ascertain whether this target, established in 2011, is still an achievable and appropriate target given the increase in car ownership and journeys made over

						this time period. Any changes to targets as a result of this research will be reflected next year. Data is supplied by the Department for Transport annually and therefore we suggest this is reflected in the reporting frequency. This remains the most appropriate and cost-effective way to report against this measure.
						Reword PI name to: Average journey time along five routes across Medway (minutes per mile).
						This measure is reported a year in arrears.

4. Values 4.1. Financial Resilience

Council Plan measures

Performance measure code	Performance measure name	Directorate / Service	Gauge Format Type	21/22 Value	Q1 22/23 Value	Q2 22/23 Value	Q2 22/23 Target	Q2 22/23 Status	Q2 22/23 Long Trend	Q2 22/23 Short Trend	2022/23 targets	2023/24 proposed targets (distinguish between annual / quarter / month – if applicable)	Rationale for no change / change / new performance measure
Fin 12	Unmodified audit opinion on statement of accounts	Finance and Business Improvement (Finance Strategy)	Aim to Maximis e	Prior data unavaila ble	Yes (18/19 annual)	Yes (19/20 annual)	Yes (19/20 annual)	Green (19/20 annual)	STATIC (19/20 annual)	STATIC (19/20 annual)	Yes (annual)	Yes (annual)	Keep PI – no change to target. Rationale: This measure's target needs to stay 'Yes' because this demonstrates compliance with accounting standards. This measure is reported a year in arrears.
FIN 18	Unmodified VFM Conclusion from external auditors	Finance and Business Improvement (Finance Strategy)	Goldiloc ks	Prior data unavaila ble	Yes (18/19 annual)	Yes (19/20 annual)	Yes (19/20 annual)	Green (19/20 annual)	STATIC (19/20 annual)	STATIC (19/20 annual)	Yes (annual)	Yes (annual)	Keep PI – no change to target. Rationale: This measure's target needs to stay 'Yes' because this demonstrates compliance with accounting standards. Reword PI name to: Unmodified value for money (VFM) conclusion from external auditors. This measure is reported a year in arrears.

4.2. Digital Enablement

Council Plan measures

There are no council plan performance measures for this programme

4.3. Creativity and Innovation

Council Plan measures

There are no council plan performance measures for this programme

4.4. Tackle Climate Change

Council Plan measures There are no council plan performance measures for this programme

4.5. Working together to empower communities

Council Plan measures

There are no council plan performance measures for this programme

4.6. Child-friendly

Council Plan measures

There are no council plan performance measures for this programme