



REPORT of CHIEF EXECUTIVE

to
PERFORMANCE GOVERNANCE AND AUDIT COMMITTEE
18 SEPTEMBER 2025

BALANCE SCORECARD EXCEPTIONS REPORT

1. PURPOSE OF THE REPORT

- 1.1 To report exceptions to operational service reporting for Committee review and discussion.
- 1.2 The Corporate Performance and Governance framework requires this Committee to be given visibility of any identified Balance Scorecard Key Performance Indicators (KPI) that have met their threshold, supported by an action plan to ensure targets are met. This gives assurance that Operational performance is being managed proactively and effectively.
- 1.3 To give visibility of statutory planning performance as well as appeals information.

2. RECOMMENDATIONS

- (i) That the Committee review and comment on exceptions to service reporting provided in this report;
- (ii) That Members note the additional performance in **APPENDIX 1**;
- (iii) That Members confirm they are assured through this review; Operational performance is being managed effectively.

3. SUMMARY OF KEY ISSUES

- 3.1 Services have been monitoring performance data, and officers have centralised this into an internal 'Balance Scorecard' that is reviewed monthly by the Extended Leadership Team to operationally track our performance.
- 3.2 The following indicators were exceptions in the last report but have since been removed due to performance now being back on target.
 - Number of food hygiene inspections outstanding
 - Invoices within 30 days
 - Two Service monthly reporting compliance (Commercial and Assets, Coast & Countryside)

3.3 The following KPIs are reporting as exceptions and are ***underperforming***, covering the period of January to June 2025

Area	Measure	Current Data	Target	Explanation	Action
Across Authority	Service plan Red, Amber, Green (RAG) ratings	1 Red 4 Amber (Out of 13)	Not Applicable (N/A)	<p>Risks and issues are reported monthly to the Corporate Leadership Team (CLT) through highlight reports.</p> <p>Out of 13 services, 1 service was reporting as Red (<i>Commercial</i>) and 4 services reporting as Amber (<i>Finance, Housing & Community Safety, Development Management & Building Control and Planning Policy & implementation</i>)</p> <p>Issues that are causing the Red and Amber reporting are:</p> <ul style="list-style-type: none"> • Staff vacancy/sickness and impact to delivery • New projects or government requirements impact to Business as Usual (BAU) • Decision making impacts on planned delivery. 	<p>To support red and amber services back to a green rating the following actions are being progressed.</p> <ul style="list-style-type: none"> • Management of resourcing gaps via officer recruitment and working to bring back staff from long term sickness • Prioritising officer workload to accommodate influx of demand. • Regular service reviews with management to track prioritisation, impacts and service delivery. • Meetings are taking place with both internal and external stakeholders to ensure progress and resolutions are sought where decisions are impacting delivery timescales
Across Authority	Service plan monthly reporting compliance	4 out of 13 areas	Non-compliance (twice in a 6 monthly period)	<p>Of the 12 service plan areas, four have missed the reporting deadline on two or more reporting months between January and June 2025</p> <p>(<i>Customer Services / Community Engagement. / Development Management & Building Control / Finance</i>)</p>	<p>Assistant Directors (ADs) are responsible for the delivery of the monthly highlight reporting.</p> <p>Areas of non-compliance are addressed as part of the Corporate Leadership team monthly meetings. Where repeat non-compliance has been seen, specific area discussions are taking place with</p>

Area	Measure	Current Data	Target	Explanation	Action
				<p>Annual leave and vacancies have contributed to compliance, as well as service pressures, with overall compliance for service plan reporting being 83% as of June 2025</p> <p><u>Note:</u> the areas that saw compliance improvement since the last report were Commercial & Assets, Coast and Countryside</p>	appropriate management to identify cause and mitigate future misses
Across Authority	Overdue contact us cases	June: 49 Cases	Reduction &/minimal overdue cases	<p>There has been a steady increase of overdue contact us cases over the last 4 months due service area pressures</p> <p><u>Note:</u> There are two service areas that are impacting the upward trend of overdue cases; Development Management / Building Control, & Coast and Countryside</p>	<p>The cases that are overdue as of June were shared with appropriate service areas for priority action. Additionally work continues with regular housekeeping exercises for historic cases, some of which were due to historic system issues.</p> <p>To ensure regular monitoring of cases being actioned within time, monthly Extended Leadership team meetings closely review the data and follow up with the relevant areas where cases are overdue for action, as well as individual service resource management.</p>
Strategy and Resources - Compliance	Data protection breaches	April – 1 May – 1	None	<p>One breach related to a posting error where two letters were placed in one envelope as part of a large bulk postal run.</p> <p>The second related to an error in inputting information into the computer system which resulted in</p>	A review was undertaken of the posting procedures which has been adjusted to ensure two staff members taking part in the process. This allows for matters to be checked. A reminder was given to all staff and additional training to advise news staff of the correct procedures.

Area	Measure	Current Data	Target	Explanation	Action
				a letter being sent to the wrong individual.	<p>While this was human error staff have been reminded of their obligations under data protection act legislation and the importance of checking data when it is first entered onto our systems.</p> <p>Staff have annual training on data protection requirements and where identified by line managers additional team training can be provided.</p>
Strategy and Resources – Resources	Sickness Levels	<p>Long term sick as of Q1: 4.98 days</p> <p>Short term sick as of Q1: 3.99 days</p> <p><u>Total:</u> 8.97 days</p>	8 days	<p>Quarter 1 results are slightly over target.</p> <p>Long Term Absence 58% Full Time Equivalent (FTE) days lost long term absences (six employees)</p> <p>1 x Musculoskeletal – now returned to work 5 x Psychological – 3 x work related, 2 x non work related 2 have since returned to work, 2 left MDC and 1 ongoing absence.</p> <p>Short term absence 38 employees were absent due to sickness in Q1.</p> <p>Supporting individual with long term condition which has caused frequent short-term absence (13% of total Q1 short-term absence -</p>	<p>HR continue to work closely with managers to manage sickness and do all they can to support staff and help them return to work or find more suitable employment.</p> <p>As can be seen in the narrative this continues to very effective for long term and short-term sickness.</p> <p>The current uncertainty around upcoming structural changes and Local Government Reorganisation (LGR) is causing anxiety and stress. Resilience training has been offered along with the continued Human Resources (HR) and manager support and the Employee Assistance Programme (EAP).</p> <p>The recruitment reviews underway to ensure vacancies are quickly covered should also help staff not feel the strain of teams that are not fully resourced.</p>

Area	Measure	Current Data	Target	Explanation	Action
				<p>there has been a significant improvement in Q2).</p> <p>Seeing an increase in short term absences related to Stress (work and non-work related), likely to be more apparent in Q2.</p>	

3.4 The following Key Performance Indicators (KPI) have been noted for **closer monitoring**.

Area	Measure	Current Data	Target	Explanation
Across Authority	Mandatory Staff Training. (<i>E-Learning & Boxphish</i>)	<p>Boxphish: 85%</p> <p>E-Learning:</p> <ul style="list-style-type: none"> - Data Protection -80% - Equality & Diversity – 78% - Procurement – 73% - Safeguarding - 72% - Sexual harassment – 65% - Risk Management – 64% -Climate Change – 56% - Anti Fraud & Corruption – 47% 	85% Completion Rate	<p>All Mandatory Learning is monitored monthly. Completion rates are provided broken down into Assistant Director areas and they are responsible for ensuring completion rates are always above 85%</p> <p>Boxphish completion rate is 85%, however there are areas which are not meeting the target (Finance, Leadership team, Members & Customer Services and Operations)</p> <p>Ads are responsible for completion rate and CLT to ensure compliance</p> <p>E-Learning completion rates are underperforming with all modules not meeting set targets</p> <p>Staff and Members are regularly reminded of the importance of security and this training.</p> <p>ADs are responsible for completion rate and CLT to ensure compliance.</p>
Across Authority	H&S Service Actions	Not all services have reviewed the health and safety actions in their service plan	N/A	In June Extended Leadership Team meeting a direct action was given to all services to ensure their health and safety actions are updated / being progressed to ensure service specific activity.

4. CONCLUSION

- 4.1 The exceptions reported in this paper are provided for Member review. Where thresholds have been met, the supporting action will be executed to enable KPI to be brought back on track

5. IMPACT ON PRIORITIES AS SET OUT IN THE CORPORATE PLAN 2025 – 2028

- 5.1 It is important that performance is monitored and managed effectively, to ensure that Maldon District Council progresses towards and/ or achieves its stated priorities.

6. IMPLICATIONS

- (i) **Impact on Customers** – Performance management covers the monitoring of key operational performance indicators to support customer service and delivery of our corporate plan which includes delivery for our customers.
- (ii) **Impact on Equalities** – None
- (iii) **Impact on Risk (including Fraud implications)** – If performance is not managed effectively by the Council, it puts the Council's corporate outcomes' delivery at risk and increases unnecessary exposure to potential, operational, reputational, or regulatory consequences.
- (iv) **Impact on Resources (financial)** – All performance management is undertaken within existing planned budgets.
- (v) **Impact on Resources (human)** – All performance management is undertaken within existing planned budgets.
- (vi) **Impact on Devolution and Local Government Reorganisation** -If performance is not managed effectively by the Council, it puts the Councils strategic delivery at risk and increases unnecessary exposure to potential, operational, reputational, or regulatory consequences

Background Papers: None.

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