

ANNEXE 2

Performance Indicator Action Plan			
PI Ref: LPL5a	PI Description: Percentage of complete Building Control applications checked within 15 days	Reporting Period: 2011/12 Q4 – 63% 2012/13 Q1 – 73%	
Lead Officer: Paul Frame		Target Value: 70%	Current Value: 73%
Reasons for Failure to meet Target: <i>(Please explain why the Target Value has not been met)</i> An audit of the case files has revealed that when surveyors contact architects by phone or email (rather than by letter) they are not keeping a record of the date. With no evidence on the file, the final decision date is being recorded instead. Making the performance look worse than it is.			
Proposed Remedial Action: <i>(Please list or describe the action steps that will be taken to improve performance)</i> A file sheet has been modified to include a field for recording the date and means of communication. All surveyors have been reminded to record this information.			
Prospects for Improvement: <i>(Please indicate the likelihood that the proposed action steps will result in the Target Value being met)</i> Good			
Anticipated Completion Date: <i>(Please indicate the anticipated timescales for completing each action step and for achieving the Target Value)</i> Actions completed. Should be at or above 70% target for 2012/13 Q1.			
Any additional comments: Update following Quarter One of 2012/13: Improvement achieved, performance for Q1 2012/13 is 73% - exceeding the target of 70%.			

Performance Indicator Action Plan

PI Ref: LPL3b	PI Description: % of enforcement cases actioned within 12 weeks from receipt	Reporting Period: Q1 12/13 (April-June 2012)	
Lead Officer: Beth Howland-Smith Enforcement Team Leader		Target Value: 70%	Current Value: 42%
<p>Reasons for Failure to meet Target: <i>(Please explain why the Target Value has not been met)</i></p> <p>Current focus in line with Members' direction is to reduce number of older cases. With every old case closed the % is reduced. This position has been explained and discussed at Area Planning Committees over past year and particularly the past seven months. As a consequence, whilst the Performance Indicator has not been met, the backlog of cases has reduced as follows – September 2011 – 606 Current (10/09/12) – 385</p>			
<p>Proposed Remedial Action: <i>(Please list or describe the action steps that will be taken to improve performance)</i></p> <p>Enforcement Action plan (updated May 2012) (fully scopes work of team, identifies priorities, indicators and contains detailed action plan to meet objectives) in place which acknowledges 'performance' drop and sets time frames and targets for future performance.</p>			
<p>Prospects for Improvement: <i>(Please indicate the likelihood that the proposed action steps will result in the Target Value being met)</i></p> <p>High</p>			
<p>Anticipated Completion Date: <i>(Please indicate the anticipated timescales for completing each action step and for achieving the Target Value)</i></p> <p>November 2012 → ≥ 80% cases actioned in 12 weeks</p>			
<p>Any additional comments:</p> <p>The council has identified additional resources to reduce backlog of cases: September 2011 – 606 cases on hand Current – 385 cases on hand This is the focus of Members' main concern.</p>			

Performance Indicator Action Plan

PI Ref: LLe4b	PI Description: Visits to and use of museums and galleries – visits in person, per 1,000 population	Reporting Period: 2011/12 Q4 – 69.1 2012/13 Q1 – 102.25	
Lead Officer: Charlotte Hall		Target Value: 73	Current Value: 102.25
<p>Reasons for Failure to meet Target: <i>(Please explain why the Target Value has not been met)</i></p> <p>During Q4 2011/12, preparations for the transfer of the management of the Museum of Farnham to Farnham Maltings were underway, with the focus being put on successful handover of operations rather than initiatives to encourage increased attendance at that time.</p>			
<p>Proposed Remedial Action: <i>(Please list or describe the action steps that will be taken to improve performance)</i></p> <p>None at present, as the failure to achieve the target is likely to be due to the operational change and is not expected to denote an ongoing trend.</p>			
<p>Prospects for Improvement: <i>(Please indicate the likelihood that the proposed action steps will result in the Target Value being met)</i></p> <p>High. There is a new curator at Farnham and Godalming Museum enjoyed a record attendance in April 2012 due in large part to the Titanic Centenary exhibition.</p>			
<p>Anticipated Completion Date: <i>(Please indicate the anticipated timescales for completing each action step and for achieving the Target Value)</i></p> <p>It is expected that the target will be met in Q1 2012/13</p>			
<p>Q1 2012/13 update from Janice Trayner at the Museum of Farnham: You will see that these are vastly increased on previous months and last year's figures. LLe4a = Godalming has had a tremendous success with their Titanic Exhibition and Museum of Farnham has seen an increase in website visits and had success in the continued with the Garden Gallery; LLe4b = The visitors to the Godalming Museum is reflected in this Covalent score by trebling it. The Museum rose to the Titanic Exhibition challenge, hence the work done outside the Museum did not significantly decrease the final Covalent figure. The Museum of Farnham has a lower score than Godalming as the work with schools outside the Museum School Visits has begun to increase plus the website visits and phone enquiries have also increased thus reducing the overall score for Visits in Person.</p>			