

Meeting	OLC Board	Agenda Item No.	6
		Paper No.	104.5
Date of meeting	27 April 2020	Time required	20 minutes

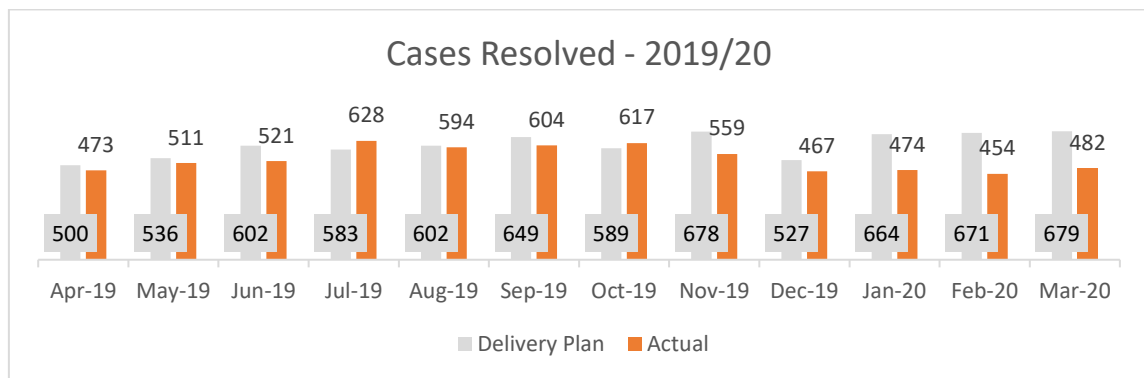
Title	Performance Report March 2020 and Year End Review of KPI's
Sponsor	Steve Pearson (Head Ombudsman) and Brendan Arnold (DCS)
Status	OFFICIAL

Executive summary
<p>The key points of briefing are:</p> <ol style="list-style-type: none"> 1. Case closures for the whole year were 6384 and therefore have fallen 896 short of the original target adopted in Business Plan 2019/20. March performance of 482 was also off plan and the reasons for the position in March are referred to in the report. 2. The reasons for the shortfall against the annual target have been the subject to significant discussion through the budget process and the Delivery Plan which supports the People Plan 2020/21 and were considered at a meeting of RemCo on the 16 April. 3. The year end position reflects an ongoing reduction in Customer Journey Times although following the decision to adopt a 'standstill' budget because of the public health emergency presents a risk to this position being maintained. 4. Attrition has fallen in March from 23.5% to 22.7% This is a welcome development further progress had been anticipated in the coming months although the impacts of Covid-19 make this uncertain. 5. The headline KPI's in March show 4 red traffic lights of which 2 are for timeliness of high complexity cases where small numbers of closures can influence the percentage disproportionately. The other red KPIs relate to attrition and unit cost which have also been discussed previously. 6. The impact of Covid-19 generally is the subject of another paper before this Board today. 7. Review of the overall KPI suite (see Appendix 3) shows that: <ol style="list-style-type: none"> a. Performance against key KPIs remains broadly consistent with previous quarters. b. Performance against quality and customer satisfaction KPIs continues to remain outside of tolerance. The performance against these measure have been discussed previously and remain the subject of management interventions as outlined in the appendix
Recommendation/action required: OLC Board is requested to NOTE the report

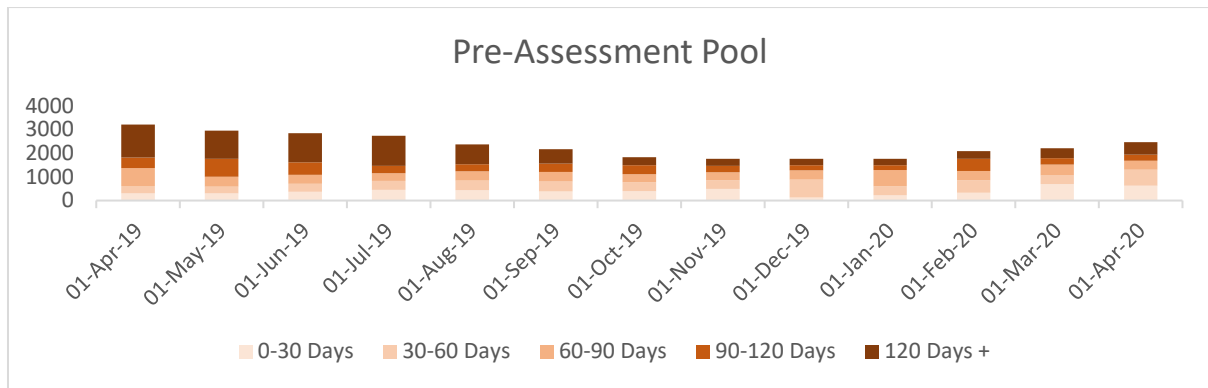
Performance Report

1. Key Observations

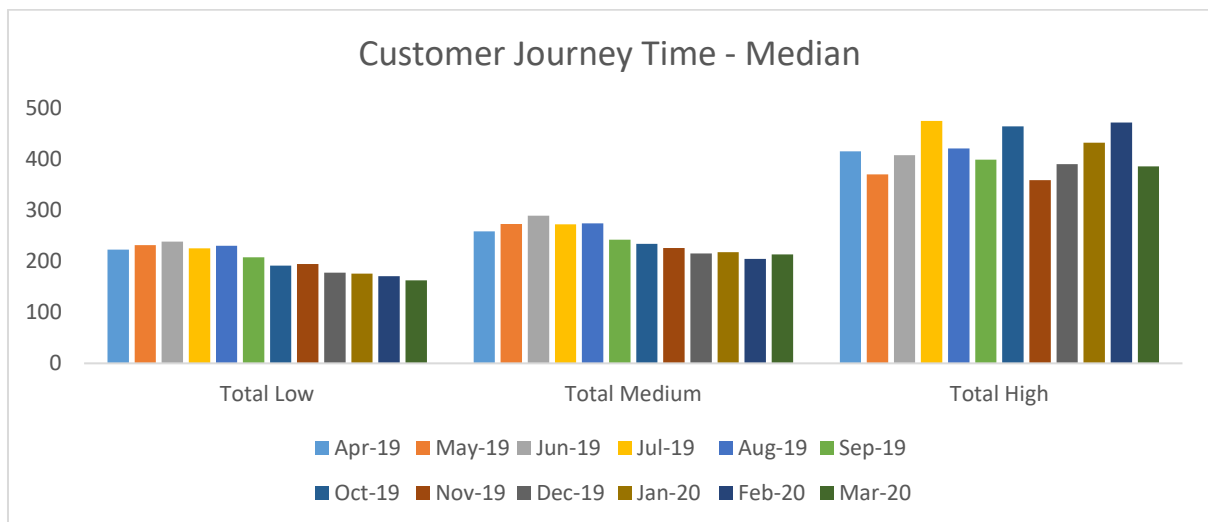
- 1.1. Closures for March were 482; 197 closures below the target outlined in the original 2019/20 delivery plan. The closures were also 39 below the revised target for March noted in the previous performance report.
- 1.2. The 39 drop against revised expectations laid out in the previous performance report reflects the impact of the last two weeks of March, where staff moved to homeworking and lockdown resulting in a disruption to final weeks' delivery.
- 1.3. The closure profile for 2019/20 as a whole is shown below and describes a shortfall of 896 closures against the original 2019/20 Delivery Plan.



- 1.4. The above shortfall against delivery across 2019/20 incorporates in-month adjustments where previously closed cases have needed to be subsequently re-opened or sent back for further review or even reinvestigation. The overall figure for these adjustments in 2019/20 is 84 cases and is described by month of original closure at Appendix 1.
- 1.5. Operational performance stabilised in quarter 4; our established investigators performed at a consistent rate, albeit one that has been impacted by attrition in that cohort. Overall, average investigator level performance was also negatively impacted by reliance on the significant number of investigators who are still relatively young in role and not yet operating at an optimal level.
- 1.6. The table below demonstrates that the Pre Assessment Pool had risen to 2,464 at 31 March and it is noted that this increase was in line with projections outlined in previous discussions.



1.7 The overall reduction in median Customer Journey Time continued in March, except in relation to medium cases where the efforts spent in recent months to ensure progression of older cases has created a slight increase in the Customer Journey Time.



2. Attrition

2.1 In March attrition on a rolling average basis decreased from 23.5% to 22.7%. Although 9 investigator leavers in quarter 4 was above historic levels of attrition (around 2 investigators per month, with an overall organisation rate of 18%), it was an improvement on quarter 3 levels and, it was hoped, marked the beginning of a reducing trend. However, the inevitable impact of the current health crisis will make it difficult to draw any conclusions in the short/medium term.

3. KPIs Reviewed in this Report

- 3.1. A commentary on the performance against key KPIs to the end of March 2020 appears at Appendix 2.
- 3.2. For timeliness indicators, two KPIs were out of tolerance, both relating to high complexity cases, where very low numbers affect reporting. It is noted that

reallocations arising from quarter 3 attrition have impacted other timeliness KPIs.

- 3.2 Unit Costs were outside of tolerance in March because of the lower than planned level of closures. As noted above, attrition remains outside of tolerance.

4. The Full KPI Suite

- 4.1 The year end results for the entire KPI suite and a detailed commentary are shown in Appendix 3.
- 4.2 In quarter 4 we continued to see a number of KPIs around delivery and customer service being outside tolerance. Performance against these KPIs has been discussed previously and remains the subject of management interventions.
- 4.3 Performance against attrition and sickness KPIs remains outside of tolerance but has shown signs of moving in a positive direction. Performance against Unit Cost KPI at end of year was out of tolerance being calculated at £1,934 against a target for the year of £1,695.

5. Conclusion

- 5.1 In summary, March performance was disappointing, but consistent with previous months, once COVID-19 impacts accounted for. The relevant diagnosis of the issues impacting performance was discussed at the RemCo meeting of 16 April and the proposed interventions, which are significantly centred on the People Plan, were discussed at the same RemCo meeting.

Appendix 1:

Table showing reported in month performance against delivery plan:

Monthly Performance Against Delivery Plan (2019/20)			
Months	Delivery Plan Target	Actual Closures	Over (+)/Under (-) Attainment of Target
April	500	477	-23
May	536	524	-12
June	602	525	-77
July	583	639	56
August	602	610	8
September	649	613	-36
October	589	621	32
November	678	567	-111
December	527	472	-55
January	664	481	-183
February	671	457	-214
March	679	482	-197
Total	7,280	6,468	-812

Table showing year end adjustment to reported in month closures, resulting from later re-opens:

Closures

Month	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	TOTAL
Delivery Plan	500	536	602	583	602	649	589	678	527	664	671	679	7280
Actual	473	511	521	628	594	604	617	559	467	474	454	482	6384
Previously reported	477	524	525	639	610	613	621	567	472	481	457	482	6468
Adjustments	-4	-13	-4	-11	-16	-9	-4	-8	-5	-7	-3	0	-84

Appendix 2: Monthly KPI and tolerance report – March 2020

Target met:		Target not met but within tolerance:					Target not met & outside tolerance:									
Measure	KPI	Tolerance	A%	M%	J%	J%	A%	S%	O%	N%	D%	J%	F%	M%	Notes	
% cases concluded in new CMS (CEQ2a)																
90 days (low)	65%	10% off target for more than 2 consecutive months or 2 months out of 4, in any category	89	83	83	86	86	85	77	71	73	58	63	61	Performance is outside of tolerance for high complexity cases where the small numbers of closures can disproportionately influence the performance against KPIs Note: Performance against 90 day KPIs dipped in Q4 as a result of the impact of attrition in Q3 and resultant case reallocations Ongoing performance against 90 day KPIs is likely to be impacted by Covid-19 in the coming months as service providers' ability to engage within usual timescales are affected by the situation.	
90 days (med)	40%		54	50	45	52	45	49	41	42	39	30	36	32		
90 days (high)	0%		25	11	8	13	18	0	4	14	17	15	18	17		
180 days (low)	90%		98	99	99	98	98	99	98	98	96	96	96	95		93
180 days (med)	85%		92	91	85	85	84	90	85	89	86	79	85	75		
180 days (high)	33%		75	56	33	20	27	30	9	24	17	38	18	28		
365 days (low)	99%		100	100	100	100	100	100	100	100	100	100	100	100		
365 days (med)	95%		100	100	98	100	100	99	99	99	96	98	98	99		
365 days (high)	85%		100	100	83	93	88	91	57	76	75	69	36	72		
% cases (all complexity) concluded (CEQ2a)																
Within 90 days	45%	10% off target for more than 2 consecutive months or 2 out of 4	48	51	50	59	67	63	60	61	49	53	51			
Within 180 days	78%		63	72	70	74	84	89	89	91	89	89	85			
Within 365 days	95%		69	78	77	83	94	96	96	97	97	98	97	98		
Turnover (PLC2a/b)																
Quarterly rolling annual turnover rate	Rolling annual turnover <18%	>2% above rolling annual target for two consecutive quarters	18.7	20.2	21.8	21.6	21.6	22.0	21.3	19.0	22.5	22.3	23.5	22.7	leaver numbers have begun to reduce in Q4 but the impacts of Covid-19 will make analysis of future performance difficult in short / medium term.	
Unit Cost per case (IRE8)																
Legal all complexities – net of estates income and gross costs	£1695	>£100 over target – 3 month rolling average	2118	2047	1952	1554	1574	1665	1657	1645	1921	2206	2454	2392	Unit costs continue to be outside tolerance in month arising from lower levels of closures.	

Appendix 3: Quarterly KPI and tolerance report – Q4 2019-20

External KPIs

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			% cases concluded (CEQ2a)												
90 days (low)	65%	10% off target for more than 2 consecutive months or 2 months out of 4, in any category	89%	83%	83%	86%	86%	85%	77%	71%	73%	58%	63%	61%	Out of tolerance: High complexity cases against 180 and 365 day KPIs. Performance is disproportionately impacted by the relatively small number of cases closed in this category.. Note: Performance against 90 day KPIs dipped in Q4 as a result of the impact of high levels of attrition in Q3 and resultant case reallocations
90 days (med)	40%		54%	50%	45%	52%	45%	49%	41%	42%	39%	30%	36%	32%	
90 days (high)	0%		25%	11%	8%	13%	18%	0%	4%	14%	17%	15%	18%	17%	
180 days (low)	90%		98%	99%	99%	98%	98%	99%	98%	98%	96%	96%	95%	93%	
180 days (med)	85%		92%	91%	85%	85%	84%	90%	85%	89%	86%	79%	85%	75%	
180 days (high)	33%		75%	56%	33%	20%	27%	30%	9%	24%	17%	38%	18%	28%	
365 days (low)	99%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
365 days (med)	95%		100%	100%	98%	100%	100%	99%	99%	99%	96%	98%	98%	99%	
365 days (high)	85%		100%	100%	83%	93%	88%	91%	57%	76%	75%	69%	36%	72%	

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			% cases (all complexity) concluded (CEQ2a)												
Within 90 days	45%	10% off target for more than 2 consecutive months or 2 out of 4	48%	51%	50%	59%	67%	67%	63%	60%	61%	49%	53%	51%	
Within 180 days	78%		63%	72%	70%	74%	84%	89%	89%	91%	89%	89%	89%	85%	
Within 365 days	95%		69%	78%	77%	83%	94%	96%	96%	97%	97%	98%	97%	98%	
			Customer satisfaction – (CEQ1a and CEQ1b)												
			Q1		Q2		Q3		Q4						
% customer satisfaction with service at the end of the process (satisfied with outcome)	85%	<5% in one reporting period	97% complainants 80% service providers		93% complainants 83% service providers		92% complainants 84% service providers		95% complainants 82% service providers		Note: Q4 data covers closures between 01.10.19 and 31.12.19.				
% customer satisfaction with service at the end of the process (dissatisfied with outcome)	15%		7% complainants 11% service providers		14% complainants 7% service providers		6% complainants 10% service providers		7% complainants 12% service providers		Outside tolerance: 7% for complainants. This quarter's results are consistent with the 2018-19 average score for complainants of 8%. Key drivers of dissatisfaction for this group were concerns about LeO's understanding of the complaint / impartiality. These issues are closely linked with dissatisfaction with outcome. Issues with the speed of the service were the other key driver of dissatisfaction. Ensuring that cases are progressed efficiently remains a focus for operational management.				

Measure	KPI	Tolerance		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			Quality – Service Complaints (CEQ6a)													
% service complaints upheld at each stage of process	Trend	No tolerance	Stage	Q1 Upheld % against service complaint received	Q2 Upheld % against service complaint received	Q3 Upheld % against service complaint received	Q4 Upheld % against service complaint received									
			1	55.1%	68.4%	63.1%	52.2%									
			2	68.6%	59.4%	72.7%	73.9%									
			3	55.6%	57.1%	59.2%	79.0%									
			All	57.7%	64.2%	63.2%	59.9%									

[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
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1	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
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3	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	5.9%

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
Reputation and raising professional standards (RPS1)															
			Q1			Q2			Q3			Q4			
% of stakeholders agreeing that LeO provides value-adding insight	Trend	No tolerance													Nb: no baseline or target as this is a new measure
a. How would you rate the guidance?													Relevant % Useful %		Annual figure available 26.5.20 following completion of customer satisfaction surveys
b. How would you rate the training?													Relevant % Useful %		
c. % stakeholders agree we have effectively shared learning/insights with them over the last 12 months													87%		Annual figure reported in Q4. Increase on 2018/19 figure of 68% (based on neutral / agree / strongly agree).
d. % stakeholders agree we have effectively shared learning/insights with service providers over the last 12 months													93%		Annual figure reported in Q4. Increase on 2018/19 figure of 79% (based on neutral / agree / strongly agree).
Unit Cost per case (IRE8)															
LEGAL all complexities – <i>net of estates income and gross costs</i>	£1695	>£100 over target – 3 month rolling average	£1952 cost per case £256 variance, 15.1%			£1616 cost per case £80 variance, 4.7%			£1,835 cost per case £139 variance, 8.2%			£1934 cost per case £239 variance, 14.1%			Outside tolerance: Overall cost per cost out of tolerance as a result of the impact of lower than anticipated closures across the year. *note changes to reported figures due to cases that were closed being reopened

Measure	KPI	Tolerance	April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
Turnover (PLC2b)															
Quarterly rolling annual turnover rate	Rolling annual turnover <18%	>2% above rolling annual target for two consecutive quarters	18.7	20.2	21.8	21.6	21.6	22.0	21.3	19.0	22.5	22.3	23.5	22.7	Outside tolerance: Turnover continues to be higher than tolerance, particularly in the Investigator cohort.
Sickness (PLC3a/b)															
Average days per employee lost to sickness (all)	Below CIPD public sector averages (8.5 days per FTE)	<10 days per FTE	10.6 days			10.8			10.6			10.9			Outside tolerance: Sickness trend has stayed consistent across the year. Activity to apply stricter application of absence triggers and warnings to target a reduction in sickness has not so far impacted as expected.
Engagement (PLC1a/b)															
Civil service and Pulse engagement index	>60%	<50% in any quarter	50%			50%			42%			42%			Note: This is the engagement score from the 2019 Civil Service Survey released in January 2020. Engagement is significantly lower than tolerance and there are issues around employee engagement, workload, leadership and change management that need to be resolved. Our People Plan 20/21 focused on three key pillars, enhance employee proposition, develop leadership capability and ensuring excellent performance is designed to address these challenges.

Strategic Board performance measures

Measure	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
		Q1			Q2			Q3			Q4			
Median time to resolution – (CEQ2b)														
Median time to conclude a case (by case complexity)	No tolerance	Low – 49 days Medium – 90 days High – 153 days			Low – 49 days Medium – 90 days High – 241 days			Low – 62 days Medium – 100 days High – 308 days			Low – 76 days Medium - 114 days High – 334 days			
Age band of open cases (CEQ2c)														
Age band analysis of open cases by case complexity – LEGAL	No tolerance	See Annex 1			See Annex 1			See Annex 1			See Annex 1			
Measure	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
Work in Progress (CEQ2e)														
Legacy team remaining work in progress – within 10% of plan – (CEQ2e)	>10% off plan	Actual 251	Actual 180	Actual 80	Actual 0	Actual 0	Actual 0	Actual 0	Actual 0	Actual 0	Actual 0	Actual 0	Actual 0	
		Plan 260	Plan 152	Plan 0	Plan 0	Plan 0	Plan 0	Plan 0	Plan 0	Plan 0	Plan 0	Plan 0	Plan 0	
		Var 3.5%	Var -18.4%	Var N/A	Var N/A	Var N/A	Var N/A	Var N/A	Var N/A	Var N/A	Var N/A	Var N/A	Var N/A	

Measure	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info	
Work in Progress (CEQ2f)															
Current work in progress – LEGAL by case complexity – within 10% of plan (tolerance > 20% variation to plan) – (CEQ2f)	>20% variation to plan	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	
		1,164	1,288	1,363	1,572	1,674	1,729	1,722	1,667	1,675	1,599	1,684	1,619		
		Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	
		1,345	1,382	1,228	1,515	1,501	1,428	1,382	1,438	1,349	1,332	1,386	1,389		
		Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var		
		13.4%	6.8%	11.0%	3.8%	11.5%	21.1%	24.6%	16.0%	24.2%	20.0%	21.5%	16.6%		
Variance from Delivery Plan (IRE5)															
		Q1			Q2			Q3			Q4				
Monthly/quarterly variance between delivery plan and actual cases accepted and closed Measures – Variance <5% (IRE5)	>10% variance for more than two consecutive months	Cases accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Cases Accepted	Outside Tolerance: Variance against plan for cases accepted has been exacerbated in this quarter by the impact of high levels of staff attrition and related reallocations as well as the sub-optimal levels of closure delivery. The closure variance to plan has also caused by attrition but also by the performance ramp up of cohorts of new starters
		407	529	495	712	619	616	639	486	465	394	540	475		
		Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	
		500	536	602	583	602	649	589	678	527	664	671	679		
		Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	
		18.6%	1.3%	17.8%	18.1%	2.8%	-5.1%	8.5%	-28.3%	-11.8%	-40.7%	-19.5%	-30.0%		
Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved	Cases resolved		
477	524	526	639	610	613	621	567	472	481	457	482				
Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan	Plan		
500	536	602	583	602	649	589	678	527	664	671	679				
Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var	Var			
4.6%	2.2%	12.8%	9.6%	1.3%	-5.5%	5.4%	-16.4%	-10.4%	-27.6%	-31.9%	-29.0%				

Measure	Tolerance	KPI	April	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			Q1			Q2			Q3			Q4			
Customer satisfaction at investigation															
% satisfaction (complainant/ service provider) at investigation stage (CEQ1c)	65%	>5% below target for two consecutive reporting periods	Complainant: 61%			Complainant: 58%			Complainants: 65%			Complainants: 62%			<p>Outside tolerance: Service Provider (52%). Performance against this measure has remained relatively stable, given that our sample size was only 66 in Q4, down from 101 in Q3. There has been a large reduction (18%) in the amount of negative feedback from service providers. 57% of negative feedback related to the wait time before our investigations start. 38% of negative feedback related to the timescales we set for responses (once our investigation starts) being unreasonable, with this being exacerbated by our processing times at the front end. Service Provider feedback continues to suggest an improvement to front end processing times will have a positive impact on reported satisfaction levels.</p>
Quality															
% all cases assessed as meeting appropriate customer service principles – (CEQ4a)	90%	>5% below target for two consecutive reporting periods	General Enquiries Team: 81%			General Enquiries Team: 93%			General Enquiries Team: 89%			General Enquiries Team: 94%			<p>Outside tolerance: Investigator & L1 Ombudsman (78%) This is an increase from last quarter, but still outside of tolerance. 'We will make good use of everyone's time' has been the key service area leading to cases failing to achieve a reasonable service overall. This is due to shortcomings in effective progression and / or adequate updates to the parties.</p> <p>Performance management activity in the RC remains focused on effective progression of cases and use of the workload management tool</p>

% all cases assessed as having a fair and reasonable outcome – (CEQ4b)	95%	>5% below target for two consecutive reporting periods	General Enquiries Team: 88% Investigator and Level 1 Ombudsman: 96% Pool & Level 2 Ombudsman: 93%	General Enquiries Team: 98% Investigator and Level 1 Ombudsman: 96% Pool & Level 2 Ombudsman: 96%	General Enquiries Team: 91% Investigator and Level 1 Ombudsman: 93% Pool & Level 2 Ombudsman: 100%	General Enquiries Team: 91% Investigator and Level 1 Ombudsman: 95% Pool & Level 2 Ombudsman: 91%	
			Q1	Q2	Q3	Q4	
Advocacy – (CEQ7a and 7b)							
% of complainants satisfied with their outcome who would speak highly of LeO	80%	-5% in one reporting period	87%				Note: Annual measure based on customer satisfaction surveys for concluded cases. 2019/20 due from research provider 26.5.20 following conclusion of surveys for cases closed March 2020
% of complainants dissatisfied with their outcome who would speak highly of LeO	10%	-5% in one reporting period	3%				Note: As above
			Q1	Q2	Q3	Q4	
Send Backs (IRE7)							
% of tasks and decisions sent back by Ombudsman LEGAL (IRE7)	<10%	>10% above target	April (5.6%) May (8.4%) June (7.9%). Q1: 7.5%	July (7.8%) August (6.6%) September (4.9%) Q2: 6.9%	October (7.0%) November (4.7%) December (5.9%) Q3: 5.9%	January (4.8%) February (7.4%) March (6.1%) Q4: 6.1%	

			Reputation and raising professional standards (RSP2)				
% professional feedback plan delivered, % target attendees and % positive feedback (RPS2)	Green status (>70%)	No tolerance	100% - plan delivered 85% - target attendees 100% positive feedback	n/a	100% - plan delivered 87% - target attendees 100% positive feedback	100% - plan delivered 87% - target attendees 93.5% positive feedback	
			Klout Social Media (RSP4)				
Klout social media (RPS4)	>40	No tolerance	N/A	N/A	N/A	47	Reported annually in Q4. No movement on 2018/19 fig - which was also 47.
% using legal services in last 2 years who had heard of LeO (RPS7)	Trend analysis	No tolerance	N/A	N/A	N/A	79%	Annual figure from YouGov survey reported in Q4 – increase from 75% in 2018/19.

Measure	Tolerance	KPI	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			Q1		Q2			Q3			Q4				
			IT downtime												
% unplanned downtime (CMS, telephony and infra-structure) – (IRE1)	<1%	>2%	0.26% average (0.8% CMS, 0% infrastructure, and 0% telephony)			0.0% average (0% CMS, 0% infrastructure, and 0% telephony)			0.09% average (0% CMS, 0% infrastructure, and 0.3% telephony)			0.51% average (0% CMS, 0% infrastructure, and 1.5% telephony)			
			People, Leadership and culture												
MIND workplace well-being index (PLC13)	Bronze status	No tolerance	54% - Bronze status achieved			54% - Bronze status achieved			54% - Bronze status achieved			54% - Bronze status achieved			This is conducted on a bi-annual basis at LeO

Annex 1 – CEQ2C – Age Band of active cases by Complexity – (excludes cases awaiting Ombudsman decisions)

