# **Proposed KPIs and Activity indicators for 2025/26**

## Key

KPIs, their targets and floors, and Activity indicators are the same as in 2024/25 unless otherwise stated. Any changes to targets and floors are shown by the previous value being crossed through (e.g. -80%).

## **Chief Executive's Department**

## Key Performance Indicators – Finance

| Ref           | Indicator Description  | 2024/25<br>Year end | 2025/26<br>Target | 2025/26<br>Floor |
|---------------|--|---------------------|-------------------|------------------|
| FN06          | % of outstanding debt due to KCC under 6 months old  | 34%                 | 70%               | 65%              |
| FN07          | % of invoices received by accounts payable within 30 days of KCC received date                 | 85%                 | 85%               | 80%              |
| FN08          | % of invoices received by accounts payable on time processed within 30 days                    | 96%                 | 98%               | 95%              |
| FN11          | % of financial assessments fully completed within 15 workings days of receipt of the referral  | 86%                 | 90%*              | 85%*             |
| FN12          | % of working days aggregate central bank balance is within approved overdraft limit.           | 99%                 | 100%              | 90%              |
| FN13          | % working days average credit rating for internally managed cash portfolio is no lower than AA | 100%                | 100%              | 90%              |
| FN14          | % third-party insurance claims resolved within the designated timescales                       | 99%                 | 95%               | 85%              |
| FN15<br>(New) | Publication of accounts deadlines met for draft and final statements                           | N/a                 | Deadlines<br>met  | N/a              |
| FN16<br>(New) | Publication of budget deadlines met for draft and final proposals                              | N/a                 | Deadlines<br>met  | N/a              |

<sup>\*</sup> April & May target is 60%, Floor 45% due to the Annual Reassessment process

## 2025/26 Review

The above KPIs have been reviewed with the Accountable Managers with two new additions for 2025/26.

### Activity indicators – Finance

| Ref   | Indicator Description                           |
|-------|---|
| FN06b | Value of debt due to KCC (£000s)                |
| FN07b | Number of invoices received by KCC              |
| FN11b | Number of financial assessments received        |
| FN14b | Number of third-party insurance claims resolved |

### Rationale

The activity indicators provide additional information which help to explain and contextualise the KPIs and are reported against previous year actuals for comparison.

### Key Performance Indicators - Governance and Law

| Ref  | Indicator Description   | 2024/25<br>Latest (Q3) | 2025/26<br>Target | 2025/26<br>Floor |
|------|---|------------------------|-------------------|------------------|
| GL01 | Council and Committee papers published at least five clear days before meetings | 99%                    | 100%              | 96%              |
| GL02 | Requests for information under FOI/EIR* completed within 20 working days        | 84%                    | 92%               | 90%              |
| GL03 | Data Protection Act Subject Access requests, completed within one month         | 60%                    | 90%               | 85%              |

<sup>\*</sup>FOI/EIR stands for Freedom of Information / Environmental Information Regulations

#### Rationale and review for 2025/26

The above KPIs cover core, measurable statutory requirements that fall under the Governance & Law Division, i.e. that we are performing well in terms of publishing Council and Committee papers and processing FOI/EIR and SARs to statutory timescales.

- GL01, is a statutory requirement and supports the smooth running of the democratic process. The current target of 100% published on time is proposed to remain.
- GL02 & 03, are\_statutory requirements; adherence with the Act reduces the risk
  of enforcement action against KCC by the Information Commissioner who
  oversees and monitors compliance. Targets are already challenging and will
  remain at the same level for 2024/25.

### Activity indicators - Governance and Law

| Ref   | Indicator<br>Description                          | Threshold                                    | Q1  | Q2  | Q3  | Q4  | 2025/26<br>Total |
|-------|---|--|-----|-----|-----|-----|------------------|
| GL01b | Number of<br>Committee<br>meetings                | Actuals reported against last year's figures |     |     |     |     |                  |
| GL02b | FOI/EIR requests completed                        | Upper  | 560 | 560 | 560 | 560 | 2,240            |
|       |   | Lower  | 460 | 460 | 460 | 460 | 1,840            |
| GL03b | Data Protection Act<br>Subject Access<br>requests | Upper  | 160 | 160 | 160 | 160 | 640              |
|       |   | Lower  | 130 | 130 | 130 | 130 | 520              |

#### Rationale

These show level of expected demand for each of these activities and help contextualise the KPIs.

## **Deputy Chief Executive's Department**

### Key Performance Indicators – Marketing and Resident Experience

| Ref         | Indicator Description  | 2024/25<br>Year End | 2025/26<br>Target | 2025/26<br>Floor |
|-------------|--|---------------------|-------------------|------------------|
| CS01        | Percentage of callers to Contact Point who rated the advisor who dealt with their call as good | 97%                 | 97%               | 90%              |
| CS04<br>(a) | Percentage of daytime calls to Contact Point which were answered                               | 92%                 | 90%               | 85%              |
| CS04<br>(b) | Percentage of out of hours calls to Contact Point which were answered                          | 95%                 | 95%               | 90%              |
| CS06<br>(a) | Percentage of daytime calls to Contact Point achieving 85% of quality scorecard                | 75%                 | 70%               | 65%              |
| CS06 (b)    | Percentage of out of hours calls to Contact Point achieving 85% of quality scorecard           | 77%                 | 70%               | 65%              |
| CS07        | Percentage of complaints responded to in timescales  | 69%                 | 85%               | 80%              |

#### Rationale

The first five KPIs above relate to our contract with Agilisys for the provision of Contact Point. They cover the core elements of good performance, i.e. that calls are answered, and then that the service provided is of good quality. The last KPI relates to the key area of complaints response.

CS01, monitors public satisfaction with the service they receive from Contact
Point Advisors in dealing with their calls – to provide an element of the voice of
the service user in the assessment of overall performance, and to capture
performance of the advisors specifically.

- CS04a & b, monitor the performance of Contact Point in respect of answering calls. There are separate performance measures covering daytime and out of hours calls, so that the Committee is able to gain the assurance that a high proportion of calls to Contact Point are being answered regardless of whether they are placed during or outside of core working hours noting however the differing types of operation with Out Of Hours being an emergency line only.
- CS06a & b, are contractual KPIs with Agilisys to monitor the quality of the
  Contact Point service provided to the public via a quality scorecard that covers
  aspects of how calls are handled (information gathered, advice given, data
  protection and customer service). There are separate performance measures
  covering daytime and out of hours calls, so that the Committee is able to gain
  the assurance that callers receive a high-quality service, regardless of whether
  they contact us during or outside of core working hours.
- CS07, monitors our performance around complaint handling through the extent to which KCC is meeting complaint service standards as advertised to the public. These are that complaints are answered within 20 days, which is a service standard in the KCC customer feedback policy.

### 2025/26 Review

In 2023/24 KCC, like many other councils, recognised the limitations of measuring percentage of calls answered (CS04a&b) and introduced average speed of answer (ASA). Targets of between 3 and 5 minutes are now being widely used as a measure of ASA for all services and in April 2023 this measurement was added to the activity indicators (CS13 and CS14). CS14 is an indicator for all KCC services, and CS13 is an indicator of the average speed of answer for the priority services combined (adult social care, children's social care, highways emergency and death registrations). The current contract end date is 31st March 2026 and the Marketing and Resident Experience team are in the process of procuring a replacement service.

#### Activity Indicators - Marketing and Resident Experience

| Ref  | Indicator<br>Description   | Threshold | Q1      | Q2      | Q3      | Q4      | 2025/26<br>Total |
|------|--|-----------|---------|---------|---------|---------|------------------|
| CS08 | Number of calls  | Upper     | 118,000 | 121,000 | 108,000 | 113,000 | 460,000          |
| C306 | answered by Contact<br>Point   | Lower     | 96,000  | 102,000 | 89,000  | 96,000  | 383,000          |
| 0040 | Number of visits   | Upper     | 2,150   | 2,130   | 1,690   | 1,780   | 7,750            |
| CS12 | (sessions) to KCC<br>website (000s)                                      | Lower     | 1,750   | 1,750   | 1,390   | 1,460   | 6,350            |
| CS13 | Average speed of answer (ASA) by Contact Point – priority services (NEW) | Upper     | 2 mins  |         |         |         |                  |
|      |  | Lower     |         | 30 secs |         |         |                  |
| CS14 | Average speed of answer (ASA) by   | Upper     | 5 mins  |         |         |         |                  |
| 0014 | Contact Point – all services (NEW)                                       | Lower     | 3 mins  |         |         |         |                  |

#### Rationale

Activity indicators provide the relevant context around the volume of demand being seen by services covered by the performance indicators, as well as providing oversight of activity and demand levels in the key services falling under the Marketing and Resident Team. Expected activity levels are articulated through upper and lower values, which provide an aid to interpretation of demand levels versus expectations.

- CS08, provides context for the Contact Point performance indicators (particularly CS04a & b), and shows demand for the service vs expectations
- CS12 measures how many visits (sessions) the website receives so that the council can monitor digital take-up and web traffic vs expectations
- CS13 and CS14 provide context for the Contact Point performance (particularly CS04a &b) and sets expectations for average call wait time.

#### 2025/26 Review

The activity indicators remain relevant and so no changes to these measures are proposed. Thresholds are based on past trends and future expectations.

### Key Performance Indicator – Human Resources and Organisational Development

| Ref           | Indicator Description  | 2024/25<br>Year End | 2025/26<br>Target | 2025/26<br>Floor |
|---------------|--|---------------------|-------------------|------------------|
| HR09          | Percentage of live learning events evaluated by responding participants as having delivered stated learning outcomes           | 99%                 | 97%               | 95%              |
| HR10<br>(NEW) | Percentage of e-learning training programmes evaluated by responding participants as having delivered stated learning outcomes | 99%                 | 97%               | 95%              |

#### Rationale

The above KPI relates to our performance in the key area of training.

- HR09, provides assurance around the quality and purposefulness of the live learning events delivered to staff, by monitoring the extent to which staff feel that each piece of training they have received meets the stated learning outcomes of the course/activity.
- HR10 provides assurance around the quality and purposefulness of the elearning available to staff, by monitoring the extent to which staff feel that each piece of e-learning training they have completed meets the stated learning outcomes of the course/activity.

#### 2025/26 Review

The Human Resources and Organisational Development Division reviewed the current KPIs and targets and deemed them suitable to be carried forward to 2025/26. Additionally, a new KPI has been introduced to evaluate e-learning training programmes, allowing the Division to monitor the quality of all training undertaken by staff.

## Activity Indicators - Human Resources and Organisational Development

| Ref   | Indicator<br>Description                                  | Threshold | Q1     | Q2     | Q3     | Q4     | 2025/26<br>Total |
|-------|---|-----------|--------|--------|--------|--------|------------------|
| HR12  | Number of current   | Upper     | 90     | 90     | 90     | 90     | 90               |
| HINIZ | change activities being supported                         | Lower     | 80     | 80     | 80     | 80     | 80               |
|       | Total number of E-<br>learning training                   | Upper     | 21,250 | 21,250 | 21,250 | 21,250 | 85,000           |
| HR13  | programmes<br>completed                                   | Lower     | 17,500 | 17,500 | 17,500 | 17,500 | 70,000           |
| HR16  | Number of registered users of Kent Rewards                | Upper     | 23,000 | 23,000 | 23,000 | 23,000 | 23,000           |
| HKIO  |   | Lower     | 19,000 | 19,000 | 19,000 | 19,000 | 19,000           |
|       | Number of current people management cases being supported | Upper     | 100    | 100    | 100    | 100    | 100              |
| HR21  |   | Lower     | 90     | 90     | 90     | 90     | 90               |
|       | Percentage of staff                                       | Upper     | 90%    | 90%    | 90%    | 90%    | 90%              |
| HR23  | who have completed<br>all 3 mandatory<br>learning events  | Lower     | 85%    | 85%    | 85%    | 85%    | 85%              |
| HR24  | Total number of live                                      | Upper     | 375    | 375    | 375    | 375    | 1,500            |
| (NEW) | learning events delivered                                 | Lower     | 250    | 250    | 250    | 250    | 1,000            |

#### Rationale

The indicators provide oversight of activity, uptake and demand levels in the key services falling under the Human Resources and Organisational Development Division. Expected activity levels are articulated through the upper and lower thresholds, which provide an aid to interpretation of demand levels versus expectations.

#### 2025/26 Review

The activity indicators remain relevant, with the only change being the addition of a new indicator to monitor the number of live learning events delivered. This allows the Division to monitor the availability and uptake of all training available to staff.

Thresholds are based on past trends and future expectations for HR13, HR16 and HR23. For HR12 and HR21 these are based on levels of demand which can be adequately supported by the Human Resources and Organisational Development Team. However, it is recognised that the volumes may not fully capture or reflect the complexity and required resources for each case or piece of change activity.

### Key Performance Indicator – Health and Safety

| Ref  | Indicator Description   | 2024/25<br>Year End | 2025/26<br>Target | 2025/26<br>Floor |
|------|---|---------------------|-------------------|------------------|
| HR25 | Percentage of completed Health and Safety audits sent to recipients within 7 working days | 100%                | 95%               | 85%              |

### Rationale

HR25, monitors our performance around Health & Safety audits through the
extent to which audits are communicated within 7 working days of completion of
the audit. Ensuring the outcomes of health and safety audits are communicated
quickly, provides assurance that any issues highlighted can then be acted upon
in a timely way.

#### 2025/26 Review

The current KPI and target was reviewed by the Department Management Team and considered appropriate to be carried forward to 2025/26.

## <u>Key Performance Indicators – Technology</u>

| Ref   | Indicator Description   | 2024/25<br>Year End | 2025/26<br>Target | 2025/26<br>Floor |
|-------|---|---------------------|-------------------|------------------|
| ICT01 | Calls to ICT Help Desk resolved at the first point of contact     | 78%                 | 70%               | 65%              |
| ICT02 | Positive feedback rating with ICT help desk                       | 96%                 | 95%               | 90%              |
| ICT03 | Working hours where Kent Public Sector Network available to staff | Over 99.9%          | 99.8%             | 99.0%            |
| ICT04 | Working hours where ICT Service available to staff                | 99.7%               | 99.0%             | 98.0%            |
| ICT05 | Working hours where email is available to staff                   | 100%                | 99.0%             | 98.0%            |

#### Rationale

The above KPIs relate to our performance around ICT, some aspects of which are included within our Service Level Agreement with Cantium. They cover the core elements of good performance, i.e. that the help desk is performing well (in terms of resolving issues and securing positive feedback) and that core ICT services/systems are available to staff.

- ICT01, measures to what extent service disruptions to staff and KCC are minimised by issues being dealt with at first point of contact.
- ICT02, measures to what extent the service provided to our customers is of a high quality, by enabling them to appraise the service received at point of ServiceNow ticket closure.

- ICT03, measures the quality of service provided by a third party, which is fundamental to the provision of data and voice networking to all KCC and many partner buildings. As a key foundation to ICT services, monitoring network availability is critical.
- ICT04, ICT service availability is fundamental to the delivery of many of the services that KCC provides and as such, this indictor is a measure of how effectively ICT are able to support the Council.
- ICT05, Email is a business-critical communications tool that supports the whole
  of KCC's operations in delivering their strategic objectives.

#### 2025/26 Review

These KPIs still reflect key service delivery and remain the same as in 2024/25.

### <u>Activity indicators – Technology</u>

| Ref    | Indicator Description                            |
|--------|--|
| ICT01b | Calls to ICT Help Desk                           |
| ICT02b | Feedback responses provided for ICT Help<br>Desk |

These show the level of demand for each of these activities and help contextualise the KPIs, and are reported against previous year actuals for comparison.

### Key Performance Indicators – Infrastructure

| Ref  | Indicator Description  | 2024/25<br>Year End | 2025/26<br>Target   | 2025/26<br>Floor |
|------|--|---------------------|---------------------|------------------|
| PI01 | Invoiced Rent Outstanding at 60 Days                         | 6.6%                | 5%                  | 10%              |
| PI05 | Planned Preventative Maintenance Tasks completed by due date | 98%                 | 90%                 | 85%              |
| PI06 | Reactive Help Desk Tasks completed by due date               | 93%                 | 90%<br>80%<br>(NEW) | 71%              |
| PI07 | Help Desk Telephone Response Times                           | 99%                 | 90%                 | 85%              |

#### Rationale

The above KPIs support monitoring of the delivery of the Asset Management Strategy, i.e. that we are performing well in terms of securing rent receipts and meeting SLA standards on task completion.

 PI01, supports monitoring of theme 3 of the Asset Management Strategy – effective asset and estate management  PI05/6/7, supports monitoring of the Asset Management Strategy, specifically, theme 1 – innovation and customer focus, theme 2 – safe, warm, dry and proactively compliant, and theme 3 – effective asset and estate management.

### 2025/26 Review

The KPIs and targets have been checked to ensure that they align with the current facilities management contract. With regards to PI06, the previous target of 90% is the stretch target for the contractor (exceeds expectations), whereas the standard target they are required to meet is 80% (meets expectations). For this reason, the target has been amended to reflect the standard target they are required to achieve within the current contract.

## <u>Activity indicators – Infrastructure</u>

| Ref   | Indicator Description    |
|-------|--------------------------|
| PI01b | Total rent invoiced      |
| PI03  | Capital receipts         |
| PI05b | PPM tasks completed      |
| PI06b | Reactive tasks completed |
| PI07b | Telephone calls handled  |

## Rationale

- PI01b, provides context for PI01.
- PI03, supports monitoring of theme 4 of the Asset Management Strategy an
  efficient, adequate and appropriate estate, as well as KCC's capital programme.
- PI05b, PI06b, PI07b provide context for their respective performance indicators.