

<i>Meeting</i>	OLC	<i>Agenda Item No.</i>	5
		<i>Paper No.</i>	97.4
<i>Date of meeting</i>	17 July 2019	<i>Time required</i>	20 Minutes

<i>Title</i>	Quarterly Performance Report
<i>Sponsor</i>	Brendan Arnold, Director of Corporate Services and Steve Pearson, Head Ombudsman
<i>Status</i>	OFFICIAL
<i>To be communicated to:</i>	Members and those in attendance

Executive summary
<p>This paper presents a summary of corporate and operational performance at the end of Q1 2019/20</p> <p>The key points of briefing are:</p> <p>Corporate:</p> <ol style="list-style-type: none"> 1. The financial position for Q1 2019/20 appears elsewhere on this agenda and is stable. 2. Uptime for major ICT systems remains in excess of 99% for the fifth consecutive quarter. 3. Human Resources have continued to address resourcing, capability and staff engagement issues. <p>Operations:</p> <ol style="list-style-type: none"> 4. In both April and May 2019 the closure of cases was within Business Plan tolerances. In June performance fell short of the target although the trend is still positive and within tolerance. 5. The remaining Legacy cases will be closed out by the end of July. 6. Performance against timeliness KPIs remains consistent and is expected to improve as remaining Legacy work closes; and 7. For LeO as a whole 22 key deliverables contained in the 2019/20 Business Plan remain Green and 2 have moved to Amber. <p>The Executive continues to focus on improving performance on all fronts.</p>
Recommendation/action required
Board is asked to NOTE the report.

17 July 2019

Quarterly strategic update

General Observations

1. The work undertaken by LeO falls into three tranches:
 - The process of dealing with cases that are assessed and are accepted for investigation. In Q1 there were over 22,000 new customer contacts (including phone calls, emails and letters). 1100 new files went into the Pre-Assessment Pool across the quarter.
 - Across the quarter individual caseholdings increased, the outstanding legacy work progressed and, in total, 1528 cases were closed.
 - The process of providing feedback to legal practitioners. In this regard during Q1 of 2019/20 LeO staff have attended 5 speaking events, conducted 1 professional learning course, contributed to 1 webinar and published one piece of guidance. Activity has been lower than usual in this quarter due to recruitment for a maternity cover role to coordinate this area of work. This is in addition to the impact of LeO's decisions on complainants and providers in the legal services market.

Corporate Performance

2. The financial position is set out in an accompanying report on this Agenda.
3. For ICT major activities in Q1 have been that:
 - Bandwidth to/from Edward House has been successfully doubled, eliminating the call dropping that was being experienced during periods of peak demand.
 - Azure rationalisation completed with CMS2 now running entirely in the more modern version of Microsoft's Cloud platform.
 - New SCCM ("System Center Configuration Manager") server in place, re-enabling the application of endpoint protection for enhanced information security as well as the automated distribution of operating systems, builds, software and updates and providing a range of helpful IT management and administration tools.
 - Uptime for major ICT systems remains above 99% for the fifth consecutive quarter.
 - Prepared the ICO Audit Action Plan and has commenced implementation.

4. For HR the highlights are:

- The team has run multiple recruitment campaigns across the organisation including a number of key campaigns including Investigators, Operations Manager, Call Handlers, Team Leader, SQL Specialist, External Relationships (Maternity) and PA to Chief Ombudsman. Internal recruitment has successfully sourced a Senior Ombudsman and Level 1 Ombudsman.
- A significant amount of time has been spent providing proactive business partner and employee relations support at all levels with a focus on robust management of performance, disciplinary and attendance issues. This has included a review of our application of the Attendance Policy and briefing managers. Human Resources are also progressing a programme of wider policy reviews.
- The team has managed the Celebrating Success reward scheme and launch of annual awards and end of year awards.
- The team have specified and progressed the procurement of bullying, harassment and discrimination training as an action from our survey priority action plan and have rolled out mandatory training for Equality and Diversity. The team have engaged with the chair of the BAME network on progress on the Race action plan.
- HR has facilitated the exit of 9 staff members and is supporting active performance management of 17 staff members. The Team is also engaged with 56 staff members in the management of Attendance of which 5 are within the figure of 17 referred to above.

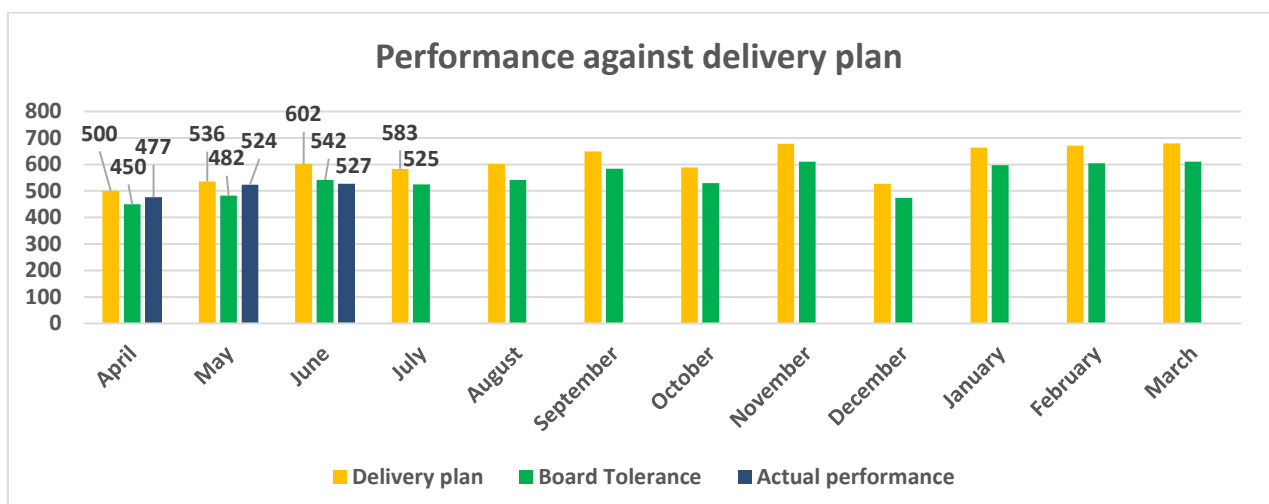
5. The Finance Team has:

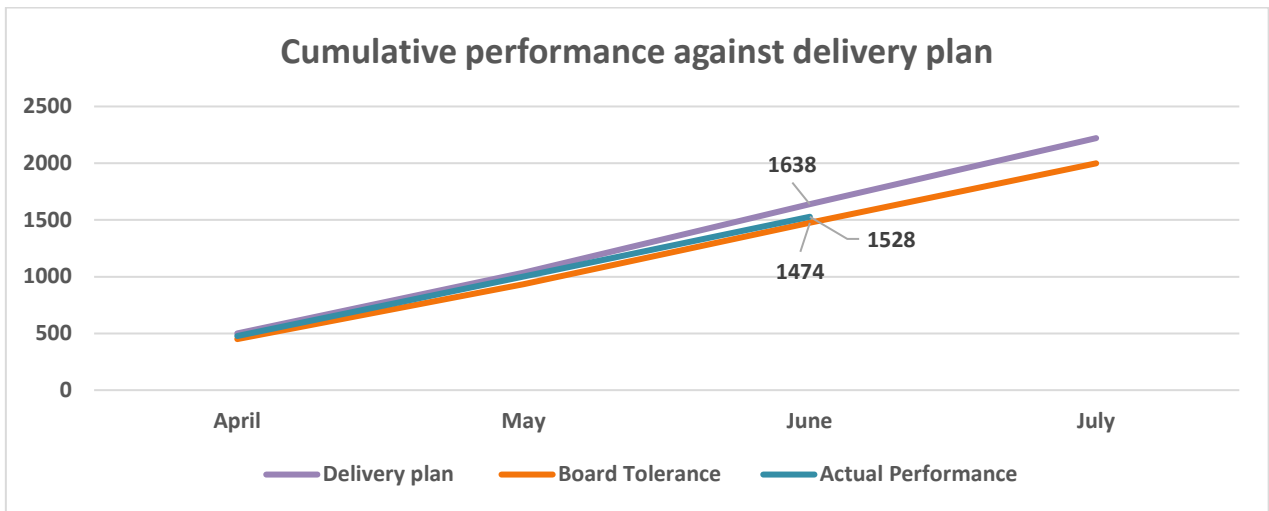
- With External Affairs prepared the Annual Report and Accounts which confirm the Budget remains in balance.
- Undertaken three monthly financial reviews.

Operational Performance in Q1

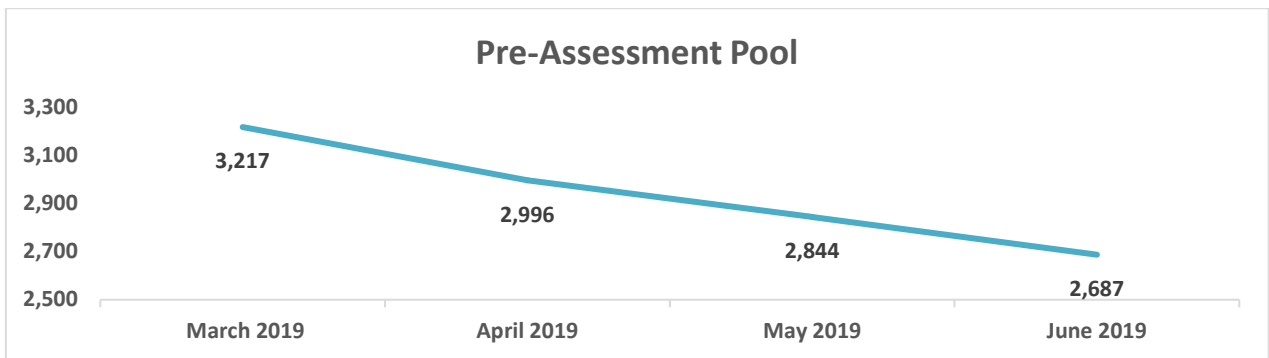
6. The key points are:

- The graphs below show that closure output has been delivered within Board tolerances, despite a disappointing June, and remains on a positive trajectory. It is expected that the positive trend will continue as Quality and Feedback is progressively implemented and as new recruits become fully operational.





- In line with expectations, the graph below shows that the Pre-Assessment Pool reduced over the quarter.



- The Legacy Team's remaining caseload was 80 at the end of Q1 and will have been closed out by the end of July. The Team are already being transitioned into focussing on low complexity cases to enhance customer experience by reducing files in the Pre-Assessment Pool.
- Performance against the 180 and 365 day KPIs is still impacted by the closure of historic legacy cases, but as those cases close in Q2 the impact will no longer influence the statistics looking forward.
- Performance against the Quality KPIs remains consistent. Customer satisfaction scores continue to be impacted by case outcome and by progression of the oldest legacy cases. However, as legacy cases close and as Quality and Feedback is rolled out across the business, those scores are expected to improve.

Strategic Risk

7. At the end of Q1, two of the strategic risks were at target. The other three are above target but are stable with the exception of Trust and Confidence which has been revised upwards following acknowledgement of the need to improve strategic relationships.

Appendix 1: Q1 2019-20 business plan and performance update

Summary of Strategic Risks – July 2019

Summary Position	Owner	Risk Appetite	Current Risk (IxL)	Target Risk (IxL)	Trend	Commentary
Trust and Confidence - OLC or Legal Ombudsman scheme loses credibility, trust, public confidence and fails to secure confidence in key stakeholders	RM	Cautious	12 (3x4)	9 (3x3)	Increased	The risk is above target as a result of ongoing work to address current performance issues, and the reputational risk associated with the time it will take to achieve sustained improvement in performance and a need to secure collaborative relationships with the LSB. Planned controls are implementation of the new quality and feedback model following evaluation of pilots, embedding workload management and other tools to improve performance and to seek a refreshed set of relationships with the LSB and other key stakeholders.
Impact, innovation and responding to changing expectations: Failure to innovate, achieve positive impact and respond effectively to a changing strategic landscape and stakeholder expectations	MH	Open	9 (3x3)	9 (3x3)	No change	The main focus to manage this risk is implementation of our stakeholder engagement and communications strategy. The CEO and CO have undertaken stakeholder engagement as part of business planning consultation. Planned controls are to implement the stakeholder survey, produce six monthly review of engagement for Board, options paper on innovative delivery models and mediation, focussed feedback to the sector on key areas as identified by our data.
Demand: Trust and confidence in the Legal Ombudsman scheme is impacted negatively by significant (>10%) unplanned changes in demand	SP	Cautious	9 (3x3)	6 (3x2)	No change	During 2018-19 we have enhanced our operational and demand forecasting tools and refined our horizon scanning, as well as increasing the ombudsman pool and implementing supervision model pilots. We need to complete the third phase of the forecasting tool, refresh the workforce plan, implement further improvement in GET processes, work with the SRA on handbook implications, and track incoming contact volumes, as well as scoping viability of alternative delivery models..
Operational resource: Inability to recruit, develop and retain sufficient skilled people with the right skills values and behaviours	BA	Open	12 (4x3)	9 (3x3)	No change	This red rating reflects the fact that OR is of critical importance to the organisation, that progress is being made in recruitment and that some of the issues that contributed to the former rating of 16 have been removed, for example the separation of the CMC jurisdiction and the attendant problems regarding recruitment at that time. Planned controls include introducing Use Your Own Device, continued leadership development, work on innovative delivery pilots, Project RACE.
Organisational capability and governance: The organisation (governance, infrastructure, controls, people, process) is not capable of enabling effective delivery of the scheme	BA	Cautious	6 (2x3)	6 (2x3)	No change	This risk is now at target given the completion of Modernising LeO. The bulk of the Modernising LeO programme has been very successfully delivered, which reduces risk exposure. Successful CMC transition has also reduced the risk rating as has the successful recruitment of a permanent DCS. Planned controls include Project RACE action plan, refreshing the workforce plan and succession planning, as well as increasing resilience for the finance function.

Outcome 1: Enhance trust and confidence in LeO by sustaining performance and quality

Objective	Key Deliverable	Timescale	Who	Status and Progress
Improve quality of casework and sustainable case progression	Develop and implement quality and feedback model	Q1 – design Q2-Q3 – implementation Q2 and Q4 – monitor and evaluate	MH	Model fully designed and signed off, with guidance developed for conversion of teams onto Q&F. Staged rollout underway
	Remain within tolerances against delivery plan, including reduced wait times for assessment	Q1-4	SP	Performance is within tolerance across the quarter and will improve as newer staff become fully operational. Performance against timeliness will improve as historic WIP is cleared. The assessment unallocated is already reducing incrementally as performance improves, this will continue through the year. We are looking at supplementary delivery initiatives that might improve the reduction even further.
	Implement new quality management framework	Q1 – design; Q2- testing/reporting; Q3 - implement	SF	Good progress made with design but not fully concluded in Q1 as planned. Resulting in change to Amber status. Two key members of staff working on project required to cover work of member of staff leaving and extended leave of another. Affected time available to project. Resignation of one of those two key members of staff at the end of Q1 poses a further risk to resource available from September. Immediate steps taken to address this risk and no adjustment to Q2 timescale anticipated at present.
Develop casework capability	Roll out Ombudsman development programme	Q1 – scoping, Q2- Q3 – design and development, Q4 - implementation	MH	Project fully scoped and programme of training and courses developed. Course content to be finalised and delivery scheduled Q2 – Q4.
	Develop operational leadership skills to support high performance culture	Q1 – scoping, Q2- Q3 – design and development, Q4 - implementation	MH	121 process and quarterly conversations redesigned. Q2 review of management skills and gaps analysis to follow, to inform content of development programme.
Improve redress through a better and more inclusive service	Scope benefits of mediation and other techniques to achieve agreed outcomes	Q1 – OLC Board Workshop, research and review, options paper	MH	Workshop and research completed. Initial paper presented to June OLC Board with supplementary paper being presented in July.
	Implement Institute of Customer Service action plan	Q1 – agree plan; Q1- Q4 implementation; Q4 – review/repeat ICS benchmarking	MH	Survey held open longer than anticipated to maximise responses. Plan to be agreed early Q2.
	Progress the actions from the 2018-19 Scheme Rules review	Q1-Q4	MH	Actions scheduled to commence in Q4

Outcome 2: Maximise our impact through feedback and engagement

Objective	Deliverable	Timescale	Who	Status and progress
Improve customer service and first tier complaints handling by sharing insights and information	Publish regular summary of casework trends, including specific briefing for Wales	Q1 – scope and agree process; Q2 – commence publication	AM	Data is available but this work will fully commence in Q2 when maternity cover is in place.
	Deliver within tolerance against communications, engagement and feedback plan	Q1-Q4	AM	Costs thematic report published. 7 speaking events attended in Q1. Work to progress areas such as case studies, courses delayed due to lack of maternity cover as above.
Increase access to our data and progress our future transparency work	Share data with regulators/Legal Choices and SRA	Q2 – commence sharing of insights	AM	Discussions took place in Q1 to clarify where data sits on Legal Choices site.
	Complete scoping project for publishing full Ombudsman decisions	Q2 – consultation starts	AM	Project has been re-planned to take into account team and organisational resources. Expect to bring a discussion paper to September board for approval.
	<ul style="list-style-type: none"> Deliver new website 	New site developed and launched by end of Q4	NG	On target; requirements almost finalised, technology options being developed, with engagement work on look, feel and content now commenced. As we move into delivery of the project it is worth noting that resources to implement the project are tight, and are likely to be impacted by BAU requirements.
Enhance relationships and engagement with key stakeholders	Engage stakeholders in development of new OLC strategy	Q3 – consultation and engagement; Q4 – final strategy approval	AM	Timeline for development of strategy in place, and on target to deliver consultation in Q3.
	Continue close work with SRA on implications of handbook changes	Q1-Q4	AM	On target. Changes due to be implemented Nov 25 th . We have commented on their guidance to the profession/employers. Awaiting feedback from SRA on proposed example case studies.

Enabling Strand to support the delivery of LeO's Priorities

Deliverable	Timescale	Who	Status and progress
Scope, and where appropriate, pilot innovative delivery models	Q1-3	MH	Initial paper presented to June OLC Board with further update to follow.
Enhance operational forecasting model	Q2 – review; Q3-4 implement changes and test	SF	Timeframes remain as planned.
AI/digital projects	Q1 – scoping and EQIA; Q2-4 – Project Delivery	NG	Early scoping commenced, but tangible benefits are yet to be defined to justify activity on the options considered.
Improved security and business continuity	Q3 – use your own device in place; Q4 – improved anti-phishing solution/email encryption	NG	Not yet started – preparatory work due to commence in Q2.
Better records and information management	Q1-4 – policy, processes, system changes and staff training	NG	BRIM will now be subsumed by an ICO Audit Recovery Plan project, for which a brief has just been prepared and mobilisation will commence in early Q2.
Effective recruitment, retention and development	Q1- CIPHR onboarding module; Q2 – review current arrangements for reward and recognition	MP	CIPHR onboarding now live. Initial pay remit guidance issued by Government in mid June – MoJ guidance to follow
Deliverable	Timescale	Who	Status and progress
Embed our inclusive service strategy, informed by our Equality, Diversity and Inclusion data	Q1-2 – review effectiveness of existing provision; Q3-4 – implement improvements identified	SF/MP	Thematic review underway to assess provision of inclusive service to customers with particular reference to the identification and handling of reasonable adjustments. 2018-19 E&D data collated with analysis due early Q2. Both these pieces of work will inform an assessment of the effectiveness of current provision.
Raise staff awareness of issues for LGBT+ people and people with disabilities, to build a more inclusive service and organisation	Q1-4 – demonstrate improved staff survey results on equality, diversity and inclusion	MP	Diversity & Inclusion mandatory training rolled out to all staff in June 19. Birmingham Pride and Stonewall anniversary celebrated in Q1
Deliver our action plan to recognise and nurture Black and Minority Ethnic (BAME) talent within the organisation	Q4 – implement RACE action plan by end of year	MP	Diversity & Inclusion mandatory training rolled out to all staff in June 19. Race action plan reviewed by Head of HR, DCS in partnership with the head of the now established LeO BAME network

RAG status definitions

Delivery on track	Some risk to delivery to original plan	Delivery significantly off target	Complete	De-scoped
Action is on track for delivery to the original timetable	Action is not on track as originally anticipated but any slippage or change of scope can be managed within a reasonable tolerance (either within the relevant business year or within a reasonable tolerance of the stated date)	Action is significantly off target and is unlikely to be recovered within the relevant business year or a reasonable timescale for the specific action based on risk	Action has been delivered and completed	We have agreed to de-scope the action (for items in the published strategy and business plan this needs Board approval)

KPI performance Q1 2019-20

Quarterly KPI and tolerance report – Q1 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 (legal – low)	65%	10% off target for more than 2 consecutive months or 2 months out of 4, in any category	89%	83%	83%										
90 days (legal – med)	40%		54%	50%	45%										
90 days (legal – high)	0%		25%	11%	8%										
180 days (legal - low)	90%		98%	99%	99%										
180 days (legal - med)	85%		92%	91%	85%										
180 days (legal - high)	33%		75%	56%	33%										
365 days (legal – low)	99%		100%	100%	100%										
365 days (legal – med)	95%		100%	100%	98%										
365 days (legal – high)	85%		100%	100%	83%										

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%										Outside tolerance: Performance against 180 and 365 day measures still impacted by closure of legacy WIP. The impact should reduce from early Q2 onwards as remaining WIP is closed.
Within 180 days	78%		63%	72%	70%										
Within 365 days	95%		69%	78%	77%										
			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												*Note Q1 data covers closures between 01.01.19 and 31.03.19.
% customer satisfaction with service at the end of the process (dissatisfied with outcome)	15%		7% complainants 11% service providers												Outside tolerance: 7% for complainants. Complainants who are dissatisfied with the outcome of their complaint continue to report limited levels of satisfaction with LeO's service, as they have over the previous 3 quarters. Key drivers of dissatisfaction for this group remain closely aligned with outcome (e.g. handling of case & evidence / wanting a different result, etc). Issues with the length of investigation are also cited and work continues, as reported elsewhere, to

								reduce the overall length of the customer journey .
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Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
Quality – Service Complaints (CEQ6a)															
% service complaints upheld at final 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	25.5%											
			2	0.0%											
			3	0.0%											

Trends Dashboard - Quality – Service Complaints (CEQ6a)									
Quarter 1									
Stage	Upheld % against cases accepted for investigation	Upheld % against service complaint received	Remedies awarded	Type	Received	Closed stage 1	Closed stage 2	Closed stage 3	Open
1	0.84%	25.53%	Q1 - £1,550 Cumulative for 2019/20 - £1,550	Approach of staff	12.2%	3.7%	0.0%	0.0%	8.5%
				Timeliness	32.9%	15.9%	0.0%	0.0%	17.1%
				Communications	24.4%	7.3%	0.0%	0.0%	17.1%
2	0.00%	0.00%		Discrimination	2.4%	0.0%	0.0%	0.0%	2.4%
				Failure to follow process	3.7%	1.2%	0.0%	0.0%	2.4%
				Decision/advice	15.9%	3.7%	0.0%	0.0%	12.2%
3	0.00%	0.00%		Other	8.5%	0.0%	0.0%	0.0%	8.5%
Quarter 2									
Stage	Upheld % against cases accepted for investigation	Upheld % against service complaint received	Remedies awarded	Type	Received	Closed stage 1	Closed stage 2	Closed stage 3	Open
1			Q2 - £ Cumulative for 2019/20 - £	Approach of staff					
				Timeliness					
				Communications					
2				Discrimination					
				Failure to follow process					
				Decision/advice					
3				Other					
Quarter 3									
Stage	Upheld % against cases accepted for investigation	Upheld % against service complaint received	Remedies awarded	Type	Received	Closed stage 1	Closed stage 2	Closed stage 3	Open
1			Q3 - £ Cumulative for 2019/20 - £	Approach of staff					
				Timeliness					
				Communications					
2				Discrimination					
				Failure to follow process					
				Decision/advice					
3				Other					
Quarter 4									
Stage	Upheld % against cases accepted for investigation	Upheld % against service complaint received	Remedies awarded	Type	Received	Closed stage 1	Closed stage 2	Closed stage 3	Open
1			Q4 - £ Cumulative for 2019/20 - £	Approach of staff					
				Timeliness					
				Communications					
2				Discrimination					
				Failure to follow process					
				Decision/advice					
3				Other					

Please note that in each quarter open complaints are carried over from the previous quarter, meaning that the number received and number at each stage are not the same.

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	Not available until survey in Q4			Not available until survey in Q4			Not available until survey in Q4						Nb: no baseline or target as this is a new measure
a. How would you rate the guidance?												Relevant 79% Useful 80%			
b. How would you rate the training?												Relevant 76% Useful 76%			
c. % stakeholders agree we have effectively shared learning/insights with them over the last 12 months												68%			
d. % stakeholders agree we have effectively shared learning/insights with service providers over the last 12 months												79%			
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%									Outside tolerance: Note - changes to reported figures due to cases that were closed being reopened.

Measure	KPI	Tolerance	April	May	June	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										Outside tolerance: Turnover continues to rise as we manage performance, capability and behaviours robustly
Measure	KPI	Tolerance	Q1			Q2			Q3			Q4			Tolerance exception report/additional info
			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												Outside tolerance: HR are team working with the endorsement of the MT, partnering team leaders and managers, to apply stricter application of absence triggers and warnings to target a reduction in sickness in the next 6 months
			Engagement (PLC1a/b)												
Civil service and Pulse engagement index	>60%	<50% in any quarter	50%												Note: This is the engagement score from the 2018 Civil Service Survey released in November – no new data since then.

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 = 1,164 Plan = 1,345 Var = 13.4%	Actual = 1,288 Plan = 1,382 Var = 6.8%	Actual = 1,363 Plan = 1,228 Var = 11.0%	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Actual = Plan = Var = %	Outside tolerance:.
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 = 407 Plan = 500 Variance = 18.6% Case Resolved = 477 Plan = 500	Cases Accepted = 529 Plan = 536 Variance = 1.3% Case Resolved = 524 Plan = 536	Cases accepted = 495 Plan = 602 Variance = 17.8% Case resolved = 525 Plan = 602										Note:

Measure	Tolerance	KPI	April	May	June	July	Aug	Sept	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%				Service Provider - 49%									
Quality																
% all cases assessed as meeting appropriate customer service principles – (CEQ4a)	90%	>5% below target for two consecutive reporting periods	General Enquiries Team: 81%				Investigator and Level 1 Ombudsman: 77%			Pool & Level 2 Ombudsman: 100%						Outside tolerance: Investigator & Level 1 Ombudsman - efficient progression of files (Service Principle ‘We will make good use of everyone’s time’) remains the area requiring greatest improvement, with 54% of reviewed cases meeting the required standard. Management of performance in this area remains a key focus for team leaders, and the continued roll out of the Q&F model also supports a focus on meeting expected timescales.
% 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%						
Measure	Tolerance	KPI	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info	
			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%												*Annual measure based on customer satisfaction surveys conducted 2018/19.
% of complainants dissatisfied with their outcome who would speak highly of LeO	10%	-5% in one reporting period	3%												<p>Out of tolerance: Performance has decreased slightly from 5% in 2017/8 to 3% for 2018/19.</p> <p>Key drivers of dissatisfaction with service remain (i) concerns re our process (e.g. should side with complainants; perceptions of bias, etc) (ii) speed efficiency (iii) staff competence / communication (iv) wanting a different result.</p> <p>Roll out of the quality and feedback model and the closure of the outstanding legacy cases should positively affect this measure.</p>
Measure	Tolerance	KPI	April	May	June	Jul y	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			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%												
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				
			Klout Social Media (RSP4)				
Klout social media (RPS4)	>40	No tolerance	47				
% using legal services in last 2 years who had heard of LeO (RPS7)	Trend analysis	No tolerance	75%				Figure provided via annual YouGov survey

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 infrastructure) – (IRE1)	<1%	>2%	0.26% average (0.8% CMS, 0% infrastructure, and 0% telephony)													
Budget Variance																
% variance against budget YTD forecast – (IRE9)	<1%	Variance >2%	3.7% underspend													Outside tolerance: 1.7 outside tolerance
People, Leadership and culture																
MIND workplace well-being index (PLC13)	Bronze status	No tolerance	54% - Bronze status achieved													This is an annual survey

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

