

<i>Meeting</i>	OLC	<i>Agenda Item No.</i>	6
		<i>Paper No.</i>	95.6
<i>Date of meeting</i>	29 April 2019	<i>Time required</i>	30 mins

<i>Title</i>	Quarterly Strategic and Performance Report
<i>Sponsor</i>	Brendan Arnold, Interim 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 Q4 2018/19.</p> <p>The key points of briefing are:</p> <p>Corporate:</p> <ol style="list-style-type: none"> 1. The financial position for 2018/19 appears elsewhere on this Agenda. 2. The Modernising LeO programme has been concluded in line with plan and closed. 3. Uptime for major ICT systems remains in excess of 99% for the fourth consecutive quarter. 4. Human Resources have continued to address resourcing, capability and staff engagement issues. <p>Operations:</p> <ol style="list-style-type: none"> 5. Work has been undertaken throughout 2018/19 to improve quality and performance. In Q4 some aspects improved as a consequence of this endeavour but – as expected – challenges remain in 2019/20. 6. The conclusion of Legacy cases has been notably successful but this has had a negative impact on the timeliness KPIs for handling within 180 and 365 days. Otherwise there is an improving trend in the attainment of timeliness KPIs. 7. Performance improvements generally – as noted at Q3 – have continued to be suppressed by various factors. These – and their mitigations - are discussed in the report. 8. The improvements already achieved and those in train are expected to have a positive impact on performance in 2019/20. 9. The CMC Jurisdiction has transferred successfully to the Financial Ombudsman Service. <p>Overall high performance in the Legacy team and a number of other teams has been offset by pockets of poor performance. Levels of output in some teams have impacted LeO's ability to keep pace with levels of incoming cases. Management solutions have been adopted including the ongoing deployment of a workload management tool and development of the Quality and Feedback Model.</p> <p>Appendix 1 Business Plan & Performance Update Q4 2018/19</p> <p>Appendix 2 KPI Performance Q4 2018/19</p>
Recommendation/action required
Board is asked to NOTE the report.

29 April 2019

Quarterly strategic update

Overall Progress against the business plan in 2018/19

1. Appendix 1 shows progress against business plan deliverables in Q4.
 - a. 68% of business plan deliverables have green status or have been completed.
 - b. Two deliverables relating to operational learning and development under Objective 1 have been de-scoped as they duplicated other items.
 - c. 20% are amber, in the main because the activity is carrying on into 2019/20, and two (6%) have a red status, those related to the delivery plans for the Legal and the CMC jurisdictions. The latter jurisdiction has been transferred to FOS and the performance issues for the Legal Jurisdiction are discussed in this report.
2. As previously highlighted, significant challenges remain as LeO enters 2019/20 and these are acknowledged in this report. For the avoidance of doubt the latest version of the Business Plan – recently approved by Board – has taken account of these issues in establishing performance targets.

Modernising LeO

3. The Modernising LeO Programme closed in March and all outstanding activities are being transferred to business as usual.

General Observations

4. The work undertaken by LeO falls into three tranches:
 - a. Customer Contact: in 2018/19 there were 125,300 customer contacts (including phone calls, emails and letters) and from these 39,900 files were created. Of these 6,800 were taken forward for Assessment. Customer experience has also been improved through the introduction of the Customer Assessment Tool and the immediacy of response.
 - b. The process of dealing with cases that are assessed and are accepted for investigation. Commentary on these matters forms the bulk of this report.
 - c. The process of providing feedback to legal practitioners. In this regard during 2018/19 LeO staff attended 17 speaking events, conducted 7 professional learning courses, produced 8 webinars/videos, published 8 items of external guidance/newsletters and posted 8 case studies on the website. This is in addition to the impact of LeO's decisions on complainants and providers in the legal services market.

5. Work has been undertaken during 2018/19 to improve quality and performance. Although there is still more to be done, Q4 continued to reflect the positive elements that had been seen in earlier quarters.

Corporate Performance

6. The financial position is set out in an accompanying report on this Agenda.
7. For ICT major activities in Q4 have been that:
 - a. The CMS2 was upgraded to version 9 and further functionality enhancements introduced to reflect business process improvements.
 - b. The Website Replacement Programme has been initiated for delivery in 2019/20.
 - c. Reflecting the transfer of the CMC Jurisdiction to the Financial Ombudsman Service data has been transferred in line with plan.
 - d. The Better Records and Information Management Project (BRIM) was commenced for delivery in 2019/20.
 - e. A voluntary audit was undertaken by the Information Commissioner's Office. An action plan has been prepared and the final report is awaited.
8. For Human Resources, major issues in Q4 have been supporting line management in the improvement in performance. There has been a higher than usual level of complex issues involving grievance, disciplinary matters, and employment relations issues; complicit with this staff morale is low in some areas and higher in others. Staff engagement is and will continue to be a priority for the Executive in 2019/20.
9. On the recruitment front 12 new Investigators started on 18 March and a further recruitment campaign for the Operational teams is underway. In addition 5 staff have moved to the Legal Jurisdiction as a result of the CMC transfer.

Operational Performance in Q4

10. The key points are:
 - a. Case closures in Q4 continued to be suppressed by sub-optimal levels of resource and variable performance. Closures for the quarter were 1,613 against the planned 2,324. Overall performance for 2018/19 financial year was 6,206 against a plan of 8,000.
 - b. In response to this level of performance additional recruitment is planned and this, together with roll out (1) of the Quality and Feedback model and (2) Workload Management Guidance (already achieved), is expected to set output on an improving course.
 - c. There have been higher than expected levels of case reallocations as a result of staff absence and staff turnover in Q4. Reallocations, when combined with the issues around the points based pull system, resulted in only 1,070 new cases being taken forward for investigation compared to a planned total of 2,110. For the 2018/19 year 4,087 cases were accepted against a planned target of 7,500.

- d. Additional staff resources and a revised approach to investigators' case-holdings will increase our capacity to take new cases for investigation. The imminent return of Investigators from the Legacy Team to Operations in general is also expected to have a positive impact on the number of cases accepted for investigation in the course of 2019/20. The plans and targeting to reduce the cases awaiting allocation will be discussed at June Board.
- e. The Legacy Team closed 358 cases in Q4 bringing the total for that team alone to 1,544 in 2018/19 leaving work in progress at 438 cases. These will be closed during early 2019/20.
- f. Although positive, the closure of the Legacy cases has contributed to the non-attainment of KPIs for 180 and 365 day timeliness in 2018/19. This 'negative impact' will reduce moving forward.
- g. Performance against timeliness remains positive although subject to the same operating constraints referred to above. More cases are being closed within 90 days than formerly (41% at the end of March against a target of 26% and compared with 33% at the end of September) and this trend also applies for cases closed within 180 days.
- h. Given the matters referred to above Customer Satisfaction continued to be suppressed, but as previously stated, it is envisaged that this will recover as performance improves in the year ahead. However, it should be noted that this will take time to appear in data because of the lag between activity and reporting.

Focus for 2019/20

- 11. There are a number of key activities looking forward.
 - a. The Quality and Feedback Model will be rolled out.
 - b. Further recruitment campaigns are in preparation.
 - c. A continued focus on capability and staff engagement.
 - d. Further development of the Forecasting Model.

Strategic Risk

- 12. At the end of Q4, two of the strategic risks were at target (Impact, innovation responding to changing expectations and organisational capability and governance). The other three are above target because of the combination of current performance issues, the process of transition to new ways of working, and workforce and organisational challenges.
- 13. A key risk relating to Reputation and Credibility will only be mitigated by delivering a sustainable improvement in performance. The steps to be taken in the business to mitigate this have been rehearsed above. This includes exploration of alternative delivery models.
- 14. None of the risks have increased although the Operational Resource risk remains at black status, which reflects the difficulty of achieving a short-term increase in capacity

Appendix 1: Q4 2018-19 business plan and performance update

Summary of strategic risks – Q4

SUMMARY POSITION	Owner	Risk appetite	Current risk (IxL)	Target risk (IxL)	Trend	Commentary
Reputation and Credibility – OLC or Legal Ombudsman scheme lose credibility, trust and public confidence	RM	Open	12 (3x4)	9 (3x3)	No change	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. Planned controls are to realise the full benefits of the new front-end business process, implementation of the new quality and feedback model, scoping the impact of alternative business models and working with the LSB and LSCP on opportunities for improvement. The departure of the CEO may increase reputational risks but also presents an opportunity to create a more resilient organisational structure that is better aligned to the performance improvement agenda.
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 CO will undertake stakeholder engagement including profile raising for the Chief Ombudsman. Planned controls are to refresh the corporate narrative, develop an engagement plan for Welsh speakers and deliver against the business plan commitment to share insight. Contingency is securing additional specialist external affairs support, a specific campaign in case of a critical incident and market research should the Q4 stakeholder survey suggest lack of impact.
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 enhanced our operational and demand forecasting tools and refined our horizon scanning, both of which are helping refine our demand forecasting. Variability of performance and resourcing issues have impacted the ability to keep pace with demand. Recruitment campaigns and internal transfers and promotions have taken place to address these issues. Planned controls include completing delivery of the forecasting tool, reviewing recruitment and resource levels, improvement of GET processes, tracking implications of CAT, rolling out Quality and Feedback model. Contingency plans if demand changes significantly include reviewing KPI target levels, considering budget variations and re-prioritising business plan deliverables.
Operational resources – inability to recruit, develop and retain sufficient skilled people with the right skills, values and behaviours	RP	Open	16 (4x4)	9 (3x3)	No change	This risk is above target because of key challenge that we cannot increase our establishment in the short-term to utilise the extra one-off resources in 2018-19 and reduce it by April 2019 in the context of uncertainty about the impact of CMC transition on staffing, the need to absorb legacy budget and ongoing high turnover in a competitive marketplace. We are exploring access to a wider pipeline of candidates through a range of means, and ran a recruitment campaign in Q4. We have firm plans to roll out the quality and feedback model in '19-20. Planned controls include using your own device, leadership development, Project RACE and alternative delivery models. Contingency is use of temporary staff, expansion of the Ombudsman pool, seeking approval to change pay structures, re-prioritisation of business plan deliverables.
Organisational capability and governance – the organisation (governance, infrastructure, controls, people, process) is not capable of enabling effective delivery of the scheme	RP	Cautious	6 (2x3)	6 (2x3)	Reduced	This risk is at target. The current controls are proving effective and the Modernising LeO programme has been very successfully delivered, which reduces risk exposure. CMC transition has been completed. Planned controls include Project RACE, refreshing the workforce plan, pursuing options to increase the resilience of the Finance team and recruiting interim and permanent DCA.. Contingency includes specialist external support to address issues, external review of specific organisational capability or governance issues and redeployment of staff to address specific issues.

Objective 1: Effective, efficient and high quality resolution of complaints

Objective	Deliverable	Timescale	Who	Status and Progress
Deliver and implement a learning and feedback model across our operations	Implement a new operational learning and development programme	Q1-4	MH	De-scoped as duplicated within plan - reported on under objective 4.
	Establish operational hub to manage operational business risk, co-ordinate operational delivery, identify policy issues & ensure an effective control framework	Q1-4	SF	Operations support team established, control framework implemented.
	Strengthen framework to learn from service complaints and feedback from complainants and service providers	Q1-4	SF	Oversight of service complaint framework transferred to Operational Support Hub. New framework in place to track and capture key themes. Customer Experience Specialist in post from Sept '18 to resolve stage 1 service complaints, triage service complaint / escalated correspondence enquiries, enhancing Team Leader capacity and overseeing provision of effective feedback.
	Update quality improvement framework	Q1-4	SF	Piece of work postponed to 2019/ 20 to ensure aligned with revised Quality & Feedback model.
	Enhanced forecasting and capacity model informed by data on productivity and use of time	Q1-4	SF	Model for forecasting operational delivery is complete with reporting of performance against delivery plan reported weekly.
Deliver an improved customer service experience in the legal jurisdiction in line with our customer service principles	Accept up to 7,900 cases and close up to 8,425 cases	Quarterly in line with delivery plan	SP	Performance was behind plan in terms of takes and closures both in quarter and for the 2018/19. Further refinements to the process have been put in place at the front end to manage the unallocated assessment work going forwards. Further recruitment and internal staff moves will have a positive impact on performance into 2019/20.
	Achieve timeliness, quality and customer satisfaction KPIs	Q4	SP	Timeliness against 180 and 365 day KPIs was impacted by the closure of Legacy work. Cases progressed under the new case management system showed the positive impact of modernisation. Quality and customer satisfaction continue to be monitored by Operations Support team
Maintain quality of service during transition of the CMC jurisdiction to the Financial Ombudsman Service	Accept and close 1,750 CMC cases	Quarterly vs delivery plan	SP	Due to changes in the market and transition to FOS the number of new cases accepted declined and this in turn impacted closures. This was mitigated by a review of process and headcount.
	Deliver in line with timeliness targets: <ul style="list-style-type: none"> close 60% of cases within 90 days close 90% of cases with 180 days close 100% of cases within 365 days 	Quarterly in line with plan	SP	This duplicates the deliverable in the line below and so we propose to de-scope
	Achieve timeliness, quality and customer satisfaction KPIs	Quarterly in line with plan	SP 7	Performance against KPIs was consistent but March saw performance against 90 day KPI drop due to new cases not being progressed in anticipation of transfer to FOS.

Objective 2: Understand the legal service and CMC environments, and feed back to improve standards

Objective	Deliverable	Timescale	Who	Status and progress
Use our data and intelligence to support and facilitate improvements in the legal and CMC sectors	Develop refreshed communications and engagement strategy including strategic direction for feeding back to the profession	October 2018	MH	Communications and Engagement Strategy agreed by the OLC and implemented. New communications and engagement plan developed for 2019-2020
	Use our data and intelligence to support and facilitate sector improvement: <ul style="list-style-type: none"> • Improve quality of case studies, themed reports and consumer awareness guides • Deliver a minimum of six periscope-style videos • Pilot webinars/eLearning • Develop and deliver a minimum of four professional feedback courses per year 	Each year	MH	External guidance on signposting, reasonable service and Scheme Rules FAQs released this year. Negligence guidance and immigration thematic ready for release Q1 2019-20. 8 refreshed and improved case studies uploaded to website. 1 x webinar on cybercrime delivered in partnership with LawyerCheck. 1 x webinar on case fees delivered in partnership with Law Society. Periscopes replaced with improved Youtube video format – 5 x videos released following verification of annual complaints data. 7 professional learning courses delivered this year (3 legal, 4 CMC). 1 further legal course postponed to Q1 19-20 due to low numbers – now fully booked.
Support the legal and CMC sectors to be more effective in complaints resolution	Improve the value and impact of sharing our information, research and insights from the scheme (speaking events, exploiting our new web presence and social media)	Ongoing	MH	Stakeholder segmentation and mapping complete. 4 additional speaking events completed in Q4 – CLC annual conference, SRA Legalex conference, Lunch & Learn with Trowers Hamilin (OLC Board Chair) and CMC stakeholder event. Consistent use of social media, including promotion of new style video releases.
	Project to improve two-way data sharing with regulators: <ul style="list-style-type: none"> • Entity data received from regulators uploaded into case management system • LeO regulator data reports documented and operational 	April 2018 and ongoing	MH	Regulator data uploaded prior to CMS 2 launch and updated regularly as agreed with regulators. Regulator data reports are documented and operational

Objective 3: develop the scheme and the service we provide

Objective	Deliverable	Timescale	Who	Status and progress
Work with others to identify and explore potential opportunities to improve access to justice	Work with the Ministry of Justice and provide data available from our current business process to improve understanding of the unregulated sector	Q1-4	MH	Data collected by Operational Support hub to be provided to the MoJ on an annual basis.
	Work with regulators to develop a single register of regulatory data and overhaul the Legal Choices website	2018-19 to 2019-20	MH	LeO participating in steering group meetings for Legal Choices. Meetings on single digital register will commence in 2019
Consider approaches to alternative dispute resolution (i.e. mediation, adjudication) and include outcomes in scheme rules review	<ul style="list-style-type: none"> Conduct review of legislative framework, Scheme Rules and business process to maximise effectiveness and value for money, including the impact of case fees, especially on equality and diversity Implement findings of review Consult on proposed new framework for publishing decisions Review the scope to use additional mechanisms for resolving complaints 	Initial review Q1, final output Q2, implement findings Q4, consult Q1 and review scope Q3	MH	<p>Scheme Rules Review project completed and paper submitted to OLC Board December 2018. Workshops completed in Q4 to undertake initial scoping of areas for potential development, to be progressed further in 2019-2020.</p> <p>Business Process Review completed Q4 and reported to Modernising LeO Programme board. Benefits of mediation and other techniques to be scoped under 2019-20 business plan.</p> <p>New framework for publishing decisions did not require consultation and was approved by OLC Board. Scoping project for publication of full Ombudsman decisions forms part of 2019-20 business plan.</p>
Deliver project work to support transition to CMC jurisdiction to the Financial Ombudsman Service	Understand the impact on demand for LeO's services of CMCs becoming Alternative Business Structures and therefore being regulated by legal service regulators	Q4	SP	Discussions ongoing with key stakeholders about the likelihood of CMCs transferring to SRA regulation post April 2019.
	Produce transfer scheme to inform drafting of statutory instrument and agree the approach to dealing with open cases after April 2019	Dependent on activities required from FOS and HM Treasury	SP	Transfer agreement agreed and implemented, data transfer proceeded as planned.
	Manage staff vacancies to maximise opportunities for staff	Q1 onwards	SP	The transition of CMC staff within the business and to FOS was successfully co-ordinated.

Objective 4: modernise LeO to deliver continuous improvement in performance – infrastructure, resources and efficiency

Objective	Deliverable	Timescale	Who	Status and progress
Enhance service and deliver efficiencies through digital developments	Enhance the functionality of our new case management system	October 2018	NG	All enhancements scheduled for 2018/19 completed, with some deferred to 2019/20 to be undertaken alongside BAU change requests.
	Refresh our external website: <ul style="list-style-type: none"> Improve accessibility of the website and stakeholder engagement mechanisms Design, develop and deliver customer assessment tool (complaint form) Strengthen our approach to cyber security to enable self-service functions 	March 2019	NG	CAT successfully completed. Website scoping undertaken and delivery activity will occur during 2019/20. Appropriate cyber security for the refreshed and re-platformed website will be core to its development.
Reduce our information footprint and improve cyber security	Decommission previous case management system	December 2018-March 2019	MH	All live cases transferred without issue. Database reader for storage of old CMS data currently operational and being refined. Full decommission of old CMS scheduled for Q1 2019-20, following completion of CMC data transfer.
	Enhance SharePoint Online to improve internal communications and knowledge sharing	September 2018	MH	Operations Transformation have reviewed guidance to ensure it is up to date. Process implemented for requesting changes to guidance.
Improve the quality, analysis, use and assurance of our data	Develop better data quality and assurance to support our research and feedback to the professions	September 2018	SF	Full review completed of data fields used for KPI reporting; annual data reporting; publishing decisions and key case fee fields. Weekly data exception reporting implemented for Operations with oversight by Operational Support and Transformation. Training provided for team leaders and ombudsman, Guidance updated and created to cover data integrity.
	Implement processes to improve information and records management	March 2019	NG	Project brief approved by Programme Board; the project will continue through 2019/20 and probably beyond.
	Ask the Information Commissioner's Office to undertake a voluntary data protection audit to assess GDPR compliance	March 2019	NG	ICO audit took place and there are conversations underway about the draft report. Once agreed an action plan will be developed for delivery during 2019/20.
	Develop dashboards for improved strategic MI: <ul style="list-style-type: none"> Implement revised budget management reports Refine, enhance and exploit new operational forecasting and capacity model Implement new operational performance dashboards Develop management information about business plan implementation/performance against balanced scorecard Exploit new reporting functionality in CMS/BI tool 	October 2018	SF	Operational delivery forecasting model has been delivered with weekly reporting provided of performance against the delivery plan. Operational performance dashboards have been delivered. Improved MI reporting for performance against the business plan / balanced scorecard has been implemented, including a suite of new weekly MI reports. BI Tool has been launched and Ops Support are now working with IT to transfer key reporting to BI Solution which will become bau reporting tool. Improving budget management reports has been de-scoped from this financial year's activity.

Objective 4: modernise LeO to deliver continuous improvement in performance – people and ways of working

Objective	Deliverable	Timescale	Who	Status and Progress
Attract and retain great people	Fully exploit new employee value proposition to achieve a stronger position in the recruitment market, maximising the benefits of our new flexible working policy and developing IT to support it; and meet our commitments on workplace well-being as set out in our <i>Time to Change</i> action plan	December 2018	MP	Good progress continuous to be made in embedding Flexible Working with a strong emphasis on the principles of earned autonomy based on performance and a successful launch of the Celebrating Success scheme. The extent and scale of recent changes in the organisation, and the ongoing focus on improving performance and productivity, mean there continue to be challenges around well-being, resilience/change and workload. Our recruitment offering and EVP continuous to prove to be attractive as shown by the Q4 Investigator campaign but in a competitive market we cannot be replacement.
	Develop partnerships with local academic institutions to improve pipeline of staff	July 2018	MP	Relationship with Birmingham City University forged and our first joint sandwich students started in September 2018. This has not been as productive and successful as anticipated and a review of the suitability of sandwich students for our roles will be undertaken.
Grow our own people	Design and develop effective career pathways, supervision, feedback, support and professional development for our staff: <ul style="list-style-type: none"> Design and develop a model supporting effective professional progression options and succession planning Design and deliver professional learning and development Review and align competency and appraisal frameworks in light of the development framework 	March 2019	MH	<p>Evaluation of supervision pilot taken to OLC Board in December and approval obtained to develop and implement Quality and Feedback model in 2019-20.</p> <p>Team Leader development programme undertaken, with 2 participants securing permanent TL roles. Development programme for Level 1 ombudsmen to be implemented in 2019-20.</p> <p>Membership commenced with the Institute of Customer Service. Launched to business in Q4 with initial benchmarking survey planned Q1 2019-20.</p> <p>Ops Transformation have redesigned 1:1 forms, encompassing new appraisal framework. To be launched in Q1 2019-20.</p>
Build our programme and project management capability	Establish Portfolio Management Office	June 2018	EI	Completed
	Undertake lessons learned review of Modernising LeO phase 1 and apply lessons to phase 2	July 2018	EI	Completed
	Undertake Gateway Review 5 to ensure Phase 1 benefits are being achieved	December 2018	EI	Complete

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)

Appendix 2 KPI performance Q4 2018-19

Quarterly KPI and tolerance report – Q4 2018-19

External KPIs

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			% LEGAL cases concluded in new CMS (CEQ2a)												
90 days (legal – low)	60%	10% off target for more than 2 consecutive months or 2 months out of 4, in any category		100%	100%	100%	89%	91%	82%	86%	84%	81%	78%	78%	
90 days (legal – med)	30%			100%	100%	100%	73%	61%	44%	52%	61%	57%	53%	51%	
90 days (legal – high)	0%			0%	0%	100%	40%	45%	0%	0%	50%	25%	33%	11%	
180 days (legal - low)	85%			100%	100%	100%	100%	100%	97%	99%	99%	98%	99%	96%	
180 days (legal - med)	80%			100%	100%	100%	100%	99%	87%	98%	92%	90%	94%	87%	
180 days (legal - high)	30%			0%	0%	100%	100%	100%	80%	85%	50%	75%	67%	32%	
365 days (legal – low)	99%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
365 days (legal – med)	90%			100%	100%	100%	100%	100%	99%	100%	100%	100%	99%	100%	
365 days (legal – high)	85%			0%	0%	100%	100%	100%	93%	100%	100%	75%	100%	100%	
			% LEGAL cases (all complexity) concluded (CEQ2a)												
Within 90 days	26%	10% off target for more than 2 consecutive months or 2 out of 4	11%	19%	20%	23%	32%	33%	38%	41%	45%	41%	42%	41%	Outside tolerance: The closure of legacy and historic CMS1 cases over the year has impacted on timeliness against 180 and 365 day KPIs.
Within 180 days	72%		46%	45%	34%	29%	47%	51%	56%	60%	62%	59%	64%	58%	

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
Within 365 days	90%		96%	91%	92%	90%	91%	90%	89%	90%	91%	87%	86%	74%	
			% CMC cases (all complexity) concluded (CEQ2a)												
Within 90 days	60%	10% off target more than 2 consecutive months or 2 out of 4	27%	20%	24%	29%	28%	54%	44%	65%	83%	62%	64%	39%	
Within 180 days	90%		88%	80%	95%	93%	90%	87%	66%	86%	94%	97%	100%	100%	
Within 365 days	100%		100%	100%	100%	100%	99%	100%	99%	99%	98%	100%	100%	100%	
Customer satisfaction – LEGAL (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	Service Provider – 92% Complainant – 94% (Q4)			Service Provider – 76% Complainant – 84% (Q1)			Service Provider – 91% Complainant – 93% (Q2)			Service Provider – 83% Complainant – 96% (Q3)			
% customer satisfaction with service at the end of the process (dissatisfied with outcome)	15%	<5% in one reporting period	Service Provider – 17% Complainant – 13% (Q4)			Service Provider – 0% Complainant – 8% (Q1)			Service Provider – 11% Complainant – 10% (Q2)			Service Provider – 3%* Complainant – 8% (Q3)			<p>Outside tolerance for Complainants.</p> <p>Drivers of dissatisfaction for complainants dissatisfied with the outcome of their complaint were (1) concerns about impartiality and LeO’s understanding of case details / evidence (2) concerns that LeO’s process is not fast enough.</p> <p>Improving the parties understanding of how we arrive at our decisions, and</p>

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
															<p>improving timeliness are key elements of the 'Quality & Feedback' model, which will be extended to all teams over the next year. While there will inevitably be a time lag, because we survey at the end of process, we anticipate modest incremental improvement in satisfaction levels for this group over time as a result of that activity.</p> <p>*3% result for service providers is not statistically reliable as based on a limited sample of 32 (of 137) Service Provider respondents who were dissatisfied with the outcome of LeO's investigation. Feedback from this group continues to be monitored.</p>

Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
Customer satisfaction – CMC (CEQ1a and CEQ1b)															
% customer satisfaction with service - end of the process (satisfied with outcome)	85%	<5% in one reporting period	Service Provider – 93% Complainant – 84% (17-18 annual figure)				Service Provider – 93% Complainant – 84% (17-18 annual figure)			Service Provider – 100% Complainant – 100% (Based on surveys of complaints closed between April and September 2018)			*Data due for report next quarter.		*Surveys for March '19 remain in progress at time of reporting. Results for 6 month period Oct – March will be reported in Q1.
% customer satisfaction with service - end of the process (dissatisfied with outcome)	15%	<5% in one reporting period	Service Provider – 7% Complainant – 15% (17-18 annual figure)				Service Provider – 7% Complainant – 15% (17-18 annual figure)			Service Provider – 0% Complainant – 15% (Based on surveys of complaints closed between April and September 2018)			*Data due for report next quarter.		*Surveys for March '19 remain in progress at time of reporting. Results for 6 month period Oct – March will be reported in Q1.
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	31%	34%			65%			11%				
			2	20%	6%			18%			7%				
			3	7%	2%			5%			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	2%	31%	Q1 - £650 Cumulative for 2018/19 - £650	Approach of staff	17%	2%	5%	0%	10%
				Timeliness	28%	6%	12%	0%	10%
				Communications	25%	5%	10%	3%	7%
2	1%	20%		Discrimination	0%	0%	0%	0%	0%
				Failure to follow process	16%	2%	4%	3%	8%
				Decision/advice	10%	3%	1%	0%	7%
3	0.4%	7%		Other	3%	0%	2%	0%	1%
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	1.7%	34%	Q2 - £2,000 Cumulative for 2018/19 - £2,650	Approach of staff	14%	3%	2%	0%	9%
				Timeliness	28%	13%	1%	0%	15%
				Communications	20%	7%	4%	0%	10%
2	0.3%	6%		Discrimination	2%	0%	0%	0%	2%
				Failure to follow process	13%	4%	2%	0%	7%
				Decision/advice	9%	2%	2%	0%	5%
3	0.1%	2%		Other	15%	6%	3%	0%	6%
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	3.7%	65.1%	Q3 - £500 Cumulative for 2018/19 - £3,150	Approach of staff	10%	4%	1%	1%	5%
				Timeliness	27%	11%	3%	2%	12%
				Communications	24%	11%	3%	3%	8%
2	1.0%	17.5%		Discrimination	4%	1%	1%	2%	0%
				Failure to follow process	14%	4%	2%	3%	6%
				Decision/advice	13%	4%	2%	3%	5%
3	5.0%	4.8%		Other	8%	7%	0.00%	1%	1%
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	1.6%	11.3%	Q4 - £850 Cumulative for 2018/19 - £4,000	Approach of staff	11%	4%	2%	0%	5%
				Timeliness	26%	4%	4%	0%	18%
				Communications	19%	7%	3%	0%	9%
2	0.9%	6.6%		Discrimination	2%	0%	1%	0%	1%
				Failure to follow process	14%	3%	3%	0%	7%
				Decision/advice	18%	3%	3%	0%	12%
3	0.0%	0.0%		Other	11%	2%	1%	0%	8%

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			See below			
a. How would you rate the guidance?												Relevant 79% Useful 80%			Responses to a. + b. are an average of responses to Q1-Q3. Q4 data is not available until May.
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%			
			Q1			Q2			Q3			Q4			
Advocacy – LEGAL (CEQ7a and 7b)															
% of complainants satisfied with their outcome who would speak highly of LeO	80%	-5% in one reporting period	2017-18 Legal Complainant – 78%			2017-18 Legal Complainant – 78%			2017-18 Legal Complainant – 78%			2017-18 Legal Complainant – 78%			Note: Data is reported annually
% of complainants dissatisfied with their outcome who would speak highly of LeO	10%	-5% in one reporting period	2017-18 Legal Complainant – 5%			2017-18 Legal Complainant – 5%			2017-18 Legal Complainant – 5%			2017-18 Legal Complainant – 5%			Note: Data is reported annually
Advocacy – CMC (CEQ7a and 7b)															
% of complainants satisfied with their outcome who would speak highly of LeO	80%	-5% in one reporting period	2017-18 CMC Complainant – 95%			2017-18 CMC Complainant – 95%			2017-18 CMC Complainant – 95%			2017-18 CMC Complainant – 95%			Note: Data is reported annually

% of complainants dissatisfied with their outcome who would speak highly of LeO	10%	-5% in one reporting period	2017-18 CMC Complainant – 9%	2017-18 CMC Complainant – 9%	2017-18 CMC Complainant – 9%	2017-18 CMC Complainant – 9%	Note: Data is reported annually
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Measure	KPI	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			Unit Cost per case (IRE8)												
LEGAL all complexities – <i>net of estates income and gross costs</i>	£1580 (+1% uplift)	>£100 over target – 3 month rolling average	Quarterly actual £2,112			Quarterly actual £1,711			Quarterly actual £1,720			Quarterly actual £2076			<p>Outside tolerance: Annual actual £1933, £353, 22.3% variance</p> <p>Note - changes to reported figures due to cases that were closed being reopened.</p>
CMC all complexities – <i>net of estates income and gross costs</i>	£1,219(+1% uplift)	>£100 over target – 3 month rolling average	Quarterly actual £1,453			Quarterly actual £1,217			Quarterly actual £790			Quarterly actual £1209			<p>Outside tolerance: Annual actual £1136, £83, 7% variance</p> <p>Note – small changes to figures reported previously</p>

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 <12%	>3% above rolling annual target for two consecutive quarters	18.6 %	17.6%	21.0%	19.7%	16.3%	17.7%	18.3%	16.6%	16.4%	15.4%	15.8%	18.5%	Outside tolerance: Turnover continues to run at a high level due to a combination of strong external competition and active performance management.

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	10.5 employee days	11.2 employee days	11.4 employee days	11.8 employee days	Outside tolerance: Sickness days per employee continues to increase with an increase in reported work related stress a factor along with long term sickness cases. Active case management working with line managers is ongoing with a wider review of our approach.
Engagement (PLC1a/b)							
Civil service and Pulse engagement index	>60%	<50% in any quarter	49.4% on Q1 Pulse Survey	No new data in quarter.	50% 2018 Civil Service Survey	No new data in quarter	Note:

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	Not available			Low – 51 days Medium – 63 days High – 91 days			Low – 50 days Medium – 75 days High – 130 days			Low – 56 days Medium – 89 days High – 210 days			
		Age band of open cases (CEQ2c)												
Age band analysis of open cases by case complexity - LEGAL	No tolerance	See Q1 report			See Q2 report			See Annex 1			See Annex 1			
Age band analysis of open cases by case complexity - CMC	No tolerance	See Q1 report			See Q2 report			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														
Legacy team remaining work in progress – within 10% of plan – (CEQ2e)	>10% off plan for more than 2 consecutive months	1,760 (ahead of plan)	1,616 (ahead of plan)	1,468 (ahead of plan)	1,343 (ahead of plan)	1,225 (ahead of plan)	1,105 (ahead of plan)	1,049 (plan of 997: 5% behind plan)	907 (plan of 827: 9% behind plan)	801 (plan of 617: 23% behind plan)	677 (plan of 527: 22% behind plan)	568 (plan of 377: 33% behind plan)	438 (plan of 167: 62% behind plan)	Outside tolerance: Legacy WIP has been impacted by a number of cases that had previously been suspended or closed for other reasons returning for investigations to be completed during the year.
Current work in progress – LEGAL by case complexity – within 10% of plan (tolerance > 20% variation to plan for more than 2 consecutive months) – (CEQ2f)	>20% variation to plan for more than 2 consecutive months	Actual 1,664 Plan = 1,522 Var = -8.5%	Actual 1,689 Plan = 1,550 Var = -8.9%	Actual 1,635 Plan = 1,736 Var = 5.8%	Actual 1,579 Plan = 1,897 Var = 16.7%	Actual 1,709 Plan = 2,097 Var = 18.5%	Actual 1,780 Plan = 2,172 Var = 18.0%	Actual 1,773 Plan = 2,282 Var = 22.3%	Actual 1,692 Plan = 2,388 Var = 29.1%	Actual 1,655 Plan = 2,514 Var = 34.2%	Actual 1,663 Plan = 2,627 Var = 36.7%	Actual 1,499 Plan = 2,710 Var = 44.7%	Actual 1,375 Plan = 2,780 Var = 50.5%	Outside tolerance: WIP has been impacted by a combination of: high levels of absence and attrition which has necessitated case reallocations; variable performance across the business; low levels of closures; and the application of the points based “pull system”.

Measure	Tolerance	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
		Q1			Q2			Q3			Q4			
Current work in progress – CMC – (CEQ2f)	>20% variation to plan for more than 2 consecutive months	Actual 535 Plan= 535 Var = 0%	Actual 474 Plan = 606 Var = 22%	Actual 386 Plan = 625 Var = 38%	Actual 323 Plan = 655 Var = 51%	Actual 315 Plan = 657 Var = 52%	Actual 258 Plan = 490 Var = 47%	Actual 346 Plan = 511 Var = 32.3%	Actual 309 Plan = 518 Var = 40.3%	Actual 310 Plan= 496 Var= 37.6%	Actual 248 Plan = 504 Var = 50.8%	Actual 250 Plan = 499 Var = 49.9%	Actual 162 Plan = 495 Var = 67.3%	Outside tolerance: CMC WIP was actively managed to facilitate the transfer of CMC to FOS.
Monthly/quarterly variance between legal cases accepted and closed, by complexity <5% (tolerance > 10% variance for more than 2 consecutive months) – (IRE5)	High	-44%	-12%	-25%	-389%	-10%	-217%	-381%	-82%	-57%	-181%	-350%	-215%	Outside tolerance: The application of the points based “pull system” contributed to the imbalance between the number of accepts and closures. The work done by the ombudsmen to clear a WIP of ageing high and medium complexity decisions has also increased the proportion of cases closed against those accepted.
	Medium	-79%	-75%	-79%	-85%	-58%	-56%	-63%	-26%	-56%	-30%	-35%	-139%	
	Low	-22%	-100%	-127%	-60%	90%	-44%	-61%	-11%	-113%	-31%	-16%	-42%	

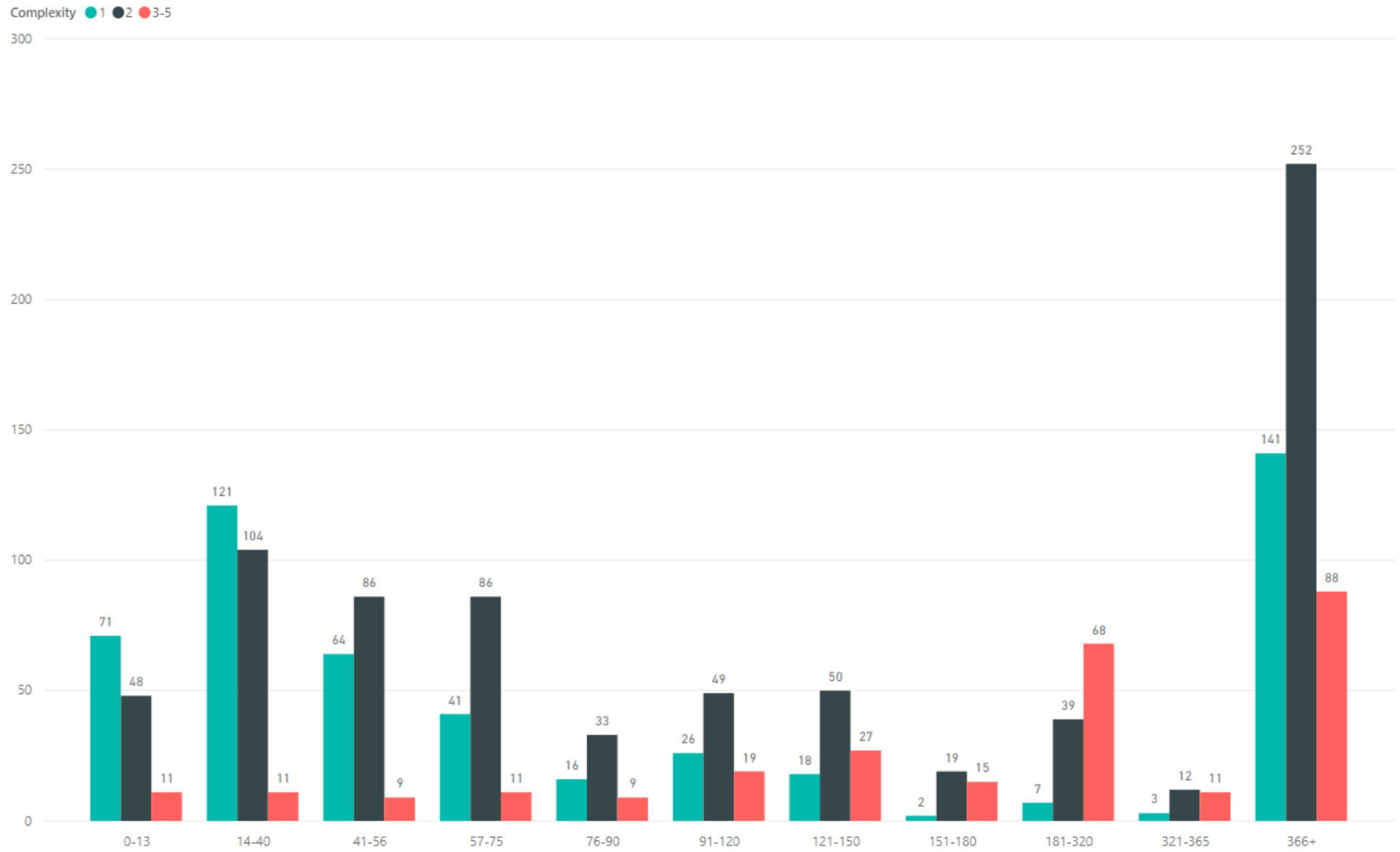
Measure	Tolerance	KPI	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			Q1			Q2			Q3			Q4			
Customer satisfaction at investigation															
% satisfaction (customer/ service provider) at investigation stage – LEGAL (CEQ1c)	65%	>5% below target for two consecutive reporting periods	Representative data not available. For CMS1: Q1 % Satisfaction: Complainant 54%; Service Provider 42% (Total: 89 complainant responses; 43 Service Provider responses)	Representative data not available. Q2 % Satisfaction: Complainant 49%; Service Provider 45% (Total: 35 complainant responses; 25 Service Provider responses).	Representative data not available. Q3 % Satisfaction: Complainant 48%; Service Provider 45% (Total 81 complainant responses and 36 Service provider Responses)	Q4 % Satisfaction: Complainant 57%; Service Provider 63% (Total 289 complainant responses and 261 Service provider Responses)	Outside Tolerance for complainants. Caution must be used when comparisons are made with previous quarters as Q4 is the first where a statistically reliable sample size was achieved. Drivers for dissatisfaction for complainants this quarter were delay, lack of updates and communication. Improvement in these areas is a key focus of the Quality & Feedback model that will be rolled out to all teams over 2019-20. Effective case progression is also a focus of performance management within the Resolution Centre.								
% satisfaction (customer/ service provider) at investigation stage – CMC (CEQ1c)	65%	>5% below target for two consecutive reporting periods	Customer (CMC) – 50% Service Provider (CMC) – 100%	Sample size too small this quarter to provide meaningful data. Verbatim comments continue to be reviewed and addressed.	Complainant: 58% Service Provider: 100%	Complainant: 86% Service Provider: 67%	Verbatim comments continue to be reviewed and addressed.								
Quality															
% all cases assessed as meeting appropriate customer service principles – LEGAL (CEQ4a)	90%	>5% below target for two consecutive reporting periods	General Enquiries Team: 80% Investigator and Level 1 Ombudsman: 75% Pool & Level 2 Ombudsman: Data not available	General Enquiries Team: Data not available. Investigator and Level 1 Ombudsmen: 68% Pool & Level 2 Ombudsman: 100%	General Enquiries Team: 92% Investigator and Level 1 Ombudsman: 85% Pool & Level 2 Ombudsman: 88%	General Enquiries Team: 87% Investigator and Level 1 Ombudsman: 80% Pool & Level 2 Ombudsman: 96%									
% all cases assessed as meeting appropriate customer service principles – CMC (CEQ4a)	90%	>5% below target for two consecutive reporting periods	Investigator and Level 1 Ombudsmen: 100%	Investigator and Level 1 Ombudsmen: 100%	Investigator and Level 1 Ombudsmen: 90%	Investigator and Level 1 Ombudsmen: 100%									

<p>% all cases assessed as having a fair and reasonable outcome – LEGAL (CEQ4b)</p>	<p>95%</p>	<p>>5% below target for two consecutive reporting periods</p>	<p>Investigator and Level 1 Ombudsman: 87%</p>	<p>Investigator and Level 1 Ombudsman: 92%</p> <p>Level 2 Ombudsmen: 100%</p>	<p>General Enquiries Team: 92%</p> <p>Investigator and Level 1 Ombudsman: 93%</p> <p>Pool & Level 2 Ombudsman: 95%</p>	<p>General Enquiries Team: 92%</p> <p>Investigator and Level 1 Ombudsman: 98%</p> <p>Pool & Level 2 Ombudsman: 100%</p>	
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Measure	Tolerance	KPI	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Tolerance exception report/additional info
			Q1			Q2			Q3			Q4			
Quality															
% all cases assessed as having a fair and reasonable outcome – CMC (CEQ 4b)	95%	>5% below target (2 consecutive periods)	100%			100%			100%			100%			
% of tasks and decisions sent back by Ombudsman LEGAL (IRE7)	<10%	>10% above target	5.2%			8.1%			7.9%			6.6%			
% of tasks and decisions sent back by Ombudsman CMC (IRE7)	<10%	>10% above target	1.4%			7.1%			4.2%			0.0%			
Reputation and raising professional standards															
% professional feedback plan delivered, % target attendees and % positive feedback (RPS2)	Green status (>70%)	No tolerance	Green			Green			Green			Red			One course planned for Q4 but was postponed due to low numbers. It has been re-scheduled for Q1 2019-20
Klout social media (RPS4)	>40	No tolerance	47			47			47			47			
% using legal services in last 2 years who had heard of LeO (RPS7)	Trend analysis	No tolerance	64% (2017-18)			Available annually			Available annually			64%			

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%	0.81% (CMS 1.3%, Telephony 1.1%, Infrastructure 0%)			0.27% (CMS 0.8%, telephony 0%, infrastructure 0%)			0.37% (CMS: 0.7%, telephony 0.2%, infrastructure 0.2%)			0.61% (CMS 1.2%, telephony 0.1%, infrastructure 0%)			Increase largely due to a partial outage to CMS following the v9 upgrade.
Budget Variance															
% variance against budget YTD and forecast outturn – (IRE9)	<1%	Variance >2%	Legal 11% CMC 16%			Legal 2.5% under CMC 6.1% under			Legal 4% under CMC 2.2% over			Legal 1.1% under CMC 0.7% under			
People, Leadership and culture															
MIND workplace well-being index (PLC13)	Bronze status	No tolerance	Available in Q4			Available in Q4			Available in Q4			Bronze status achieved			

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



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

