

Report Title	PERFORMANCE UPDATE REPORT: 1 st APRIL – 31 ST DECEMBER 2025
Meeting	Executive
Meeting Date	19 th February 2026
Report Author	Marie Mason / Daniel McCaffrey
Directorate	Resources
Lead Executive Member(s)	Cllr. D. Hartley
Wards Affected	N/A
Public. Part Exempt, or Fully Exempt	Public
Appendices (if any)	App A – Performance Summary – Quarter 3, 2025/26 App B – SRR Update Summary – Quarter 3, 2025/26

1. Executive Summary

- 1.1 The purpose of this report is to provide the Executive with performance monitoring information for the period 1st April 2025 – 31st December 2025.

2. Recommendations

For the reasons set out in this report, Executive is recommended to:

- 2.1 It is recommended that members of the Executive comment as appropriate on the performance monitoring information provided and note the update.

3. Information: The Rationale & Evidence for the Recommendations

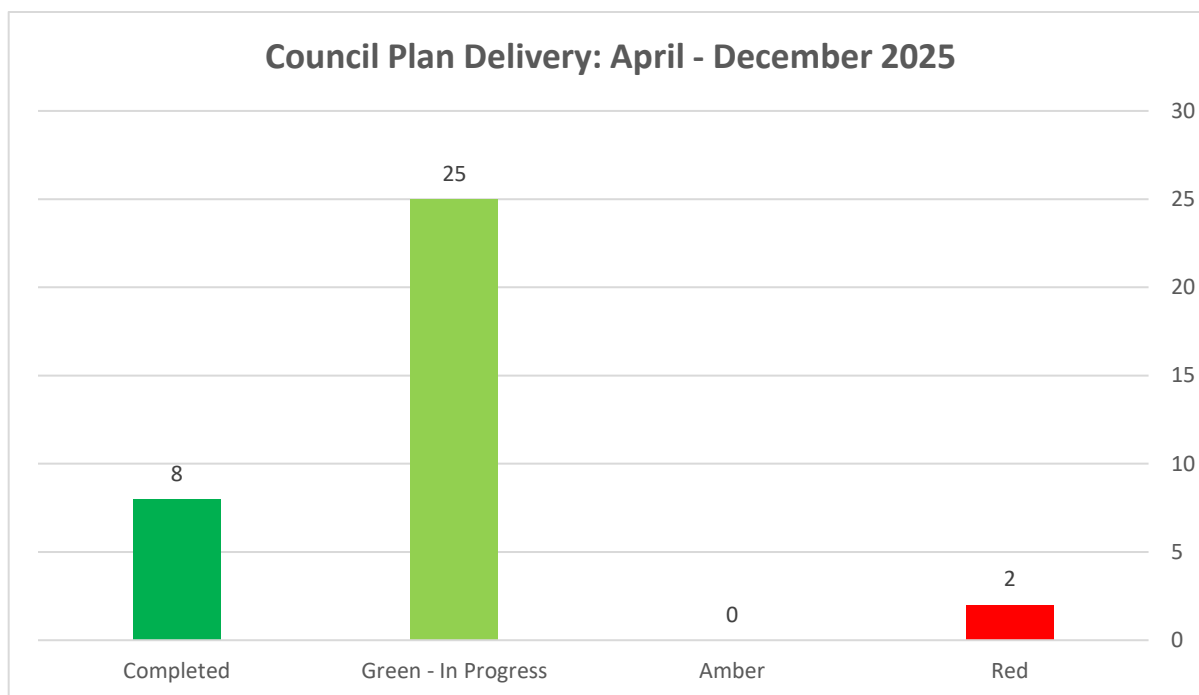
- 3.1 The purpose of this report is to provide the Executive with information on progress made with the delivery of the corporate actions in the current Council Plan and the Council's KPIs and risk management arrangements as of 31st December 2025.

- 3.2 The performance information relating to the delivery of the Council Plan is structured around the Council's four corporate priorities. A summary of progress with actions in each of the corporate priorities is provided together with performance information relating to the 25 key performance indicators (KPIs). Full details are shown in Appendix A.

Corporate Priorities

- 3.3 As detailed below, at the end of December 2025, 25 of the 36 Corporate Priorities are green and progressing as planned, with eight of these Corporate Priorities already being completed. The remaining three comprise of two that

are slightly overdue and one having been cancelled (CP25 2.01 – Confident Communities). Details of these can be found in Appendix A to this report.



3.4 A summary of the impacts on the delivery of these actions / milestones is provided below.

3.5 **CP25 2.05 - Community Safety:** Working with the partners in the Community Safety Partnership, its Community Safety Strategy 2025-28 has been developed and was discussed at Pendle Community Safety Partnership (CSP) on 26 January 2026. Pendle CSP will continue to monitor progress of the strategy through its related delivery forums. The Serious Violence Duty plan has taken slightly longer than anticipated due to its management being brought into Pendle CSP from Pennine CSP. A Pendle CSP task and finish group has now been established to develop and deliver the Serious Violence Duty plan, which will support delivery of this priority in the Community Safety Strategy. This Council Priority is expected to complete in Q4.

3.6 **CP25 3.09 - Colne Levelling Up Programme:** The refurbishment of the Colne Market Hall is ongoing with public realm works now due to complete in spring 2026. An operator for the Market Hall has been identified; however, negotiations are ongoing with a comprehensive agreement now 80% complete. It is expected that an agreement will be reached in Q4 or in early Q1 2026/27 completing this Council Priority.

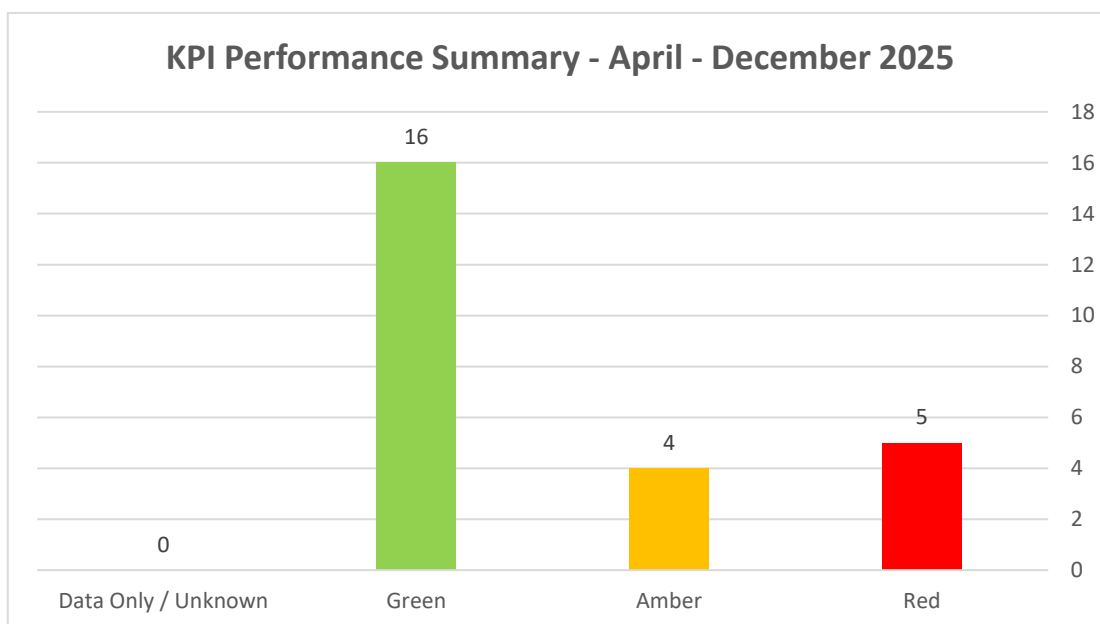
Key Performance Indicators (KPIs)

3.7 A basket of 25 corporate key performance indicators (KPIs) is used to provide the Council with a gauge of performance representing a range of services delivered by and on behalf of the Council (i.e. these include some Liberata and PLT PIs).

3.8 We currently have 16 KPIs which are performing on or above the expected service level / target (i.e. are 'Green'). It is always important to acknowledge good performance and an example of this for this quarter is detailed below:

WM 15 - Percentage of reported number of missed bin collections dealt with within 24hrs of report being shared with Waste Management Team (excludes evenings and non-working days) - the performance of this KPI has been consistently high despite the high volumes of service requests Operational Services deal with. Officers continue to make good use of both the JADU and onboard CCTV system to investigate and respond to missed collection reports. The introduction of in cab technology has resulted in an increase in the speed of communication from the frontline resulting in reports being handled much quicker and more thoroughly than they would have been prior to installation and resulting in the team's not returning for bins that were contaminated or not presented on the day. Performance was 95.5% for Quarter 3 during which the service emptied 596,518 bins from 41,550 properties.

3.9 As detailed below, we currently have 5 KPIs which are 'Red' (i.e., falling below the expected service levels / targets) and 4 KPIs which are 'Amber' (i.e., falling slightly below the expected service levels / targets). The reasons for this are summarised below with further details provided in Appendix A:



3.10 **Waste Services – Recycling (Red) and Composting (Amber)** – Performance relating to the percentage of the total tonnage of household waste which has been recycled (WM 8c) and the percentage of household waste sent for composting (WM 8d) has continued to drop when compared to the same period in 2024/25. A comprehensive update has been provided in Appendix A to explain issues impacting in this area and as reported previously, data provided by LCC shows that Pendle continues to recycle more than our

nearest neighbours but is also collecting more waste through our none recycling schemes such as bulky household collections and grey bin.

- 3.11 **Planning Appeals (Amber)** – The percentage of appeals determined in line with officer recommendations (PBC 1a) is performing just below target. The target for this KPI is set at 80% and current cumulative performance is 77.27%. Consistently high performance of this KPI is difficult to achieve due to the low overall number of cases that are appealed; this quarter only two appeals were determined against officer recommendations
- 3.12 **Food Safety (Amber)** – the percentage of premises scoring 3 or higher on the National Food Hygiene Rating Scheme (NFHRS) (HHED 6) has performed significantly under target this quarter at 77.3%. This is due to some inspected businesses in the local area not complying the standards of the NFHRS. However, cumulatively performance stands at 81.7% which is only slightly off target. Council officers continue to inspect and support local businesses, but compliance remains the responsibility of the business making this KPI difficult to achieve.
- 3.13 **Complaints (Red)** – Complaints handled within timescales (DIR 1) has previously been untargeted and for data collection purposes only whilst our processes and systems were reviewed and improved. This work is c90% complete and so from Quarter 3, 2025/26:
- the target for the KPI has been set at 95%.
 - in line with recent updates to the JADU Complaints system, our approach to reporting has changed and any cases that were later identified as service requests have been removed from the complaint totals. This ensures that our performance indicators accurately reflect actual complaints received and allow us to focus on improvements in genuine complaint handling.
 - Staff training is planned for early 2026.
- 3.14 **Sickness Absence (Red)** – Sickness absence (BV 12) continues to be above the desired target (4.8 days) for the year up to end November 2025 at just over 7.8 days. There have been a significant number of long-term sickness cases during the quarter and cases continue to be closely monitored with Managers and HR taking action as appropriate in line with Council policy.

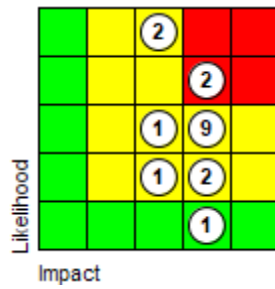
Some examples of current activity and interventions are detailed below:

- Consistent application of sickness absence procedures, e.g. use of welfare meetings, formal improvement notices and attendance capability hearings.
- Support for employees, such as phased return to work plans implemented where appropriate, provision of the Employee Assistance Programme (EAP), provision of physiotherapy support as appropriate.
- Communication and engagement via bi-monthly health and wellbeing newsletter and policy refresher training delivered ensuring consistent understanding and application.
- Targeted Management Interventions such as focussed support and coaching for depot managers to address local absence issues and ongoing health surveillance for noise exposure and HAVS.

- 3.15 **Customer Services (Amber)** – The target for calls answered within 40secs (TS 1b) has performed above target for six out of the last seven months. However, cumulatively performance has been impacted by poor performance in April and May 2025 resulting in the KPI currently being 2.16% below the target of 80%. It is important to note that the target for January-March 2026 increases to 82% due to continued improvements in performance expected as work to implement the Customer Contact & Digital Strategy continues.
- 3.16 **Council Tax Collection (Red)** – The collection of Council Tax (BV 9) is slightly below target (by 0.87%) and is only 0.6% below that reported at the same time last year. We continue to monitor collection closely and look to assist charge payers in making payments on time. It is important to note that at the end of November 2025, Pendle had the fifth highest collection rate across all Lancashire Councils.
- 3.17 **PLT Wetside Attendance (Red)** – The total number of wetside attendances (PLT 07a(ii)) is below target (97,085) with 87,126 users of PLT's wet facilities in quarter 3. This is due to the expected seasonal decrease and a two-week closure in December which reduced the number of attendees by over 10,000. Performance is expected to improve in quarter 4.

Risk Management Issues

- 3.18 It is good management practice to keep under review the key risks we face to the delivery of our Corporate Priorities as set out in the Council Plan. As the Council operates within a dynamic environment the risks facing the Council, and indeed their threat level, do change over time.
- 3.19 A review of the SRR with each of the Risk Owners and the Corporate Leadership Team has been carried out in Quarter 3, validating existing risk scores against the criteria outlined in the Risk Management Toolkit.
- 3.20 Some key notable changes are:
- A new risk has been added to the Strategic Risk Register. **SRR-16 Homeless Services** has been set up to monitor the council's statutory homelessness duties. This new risk is included in Appendix B and the heat map below.
 - The strategic risk **Organisational Capacity to Deliver (Local Waste Transfer Station Closures) (SRR-02b)** is to be removed from the SRR. This is due to the County Council continuing to arrange for the treatment and transfer of residual and bulky household waste albeit at a different location to the one we have used in the past. The cost implication to Pendle has reduced from the those reported in previous reports to Committee. The risk is still included in the summary below and Appendix B for completeness and will be removed from future updates on the register.
- 3.21 The heat map below provides a quick glance summary of the Current Risk Scores within the Strategic Risk Register. A full update will be reported to the next meeting of the Accounts & Audit Committee in March 2026.



3.22 To confirm, the Risk Model Matrix adopted by the Council is shown below for reference:

Likelihood	Almost certain	5	5	10	15	20	25
	Likely	4	4	8	12	16	20
	Moderate	3	3	6	9	12	15
	Unlikely	2	2	4	6	8	10
	Remote	1	1	2	3	4	5
			1	2	3	4	5
			Insignificant	Minor	Moderate	Major	Catastrophic
			Impact				

4. Link to Council Plan Priorities: (Providing High Quality Services and Facilities, Proud and Connected Communities and Places, Good Growth and Housing and Healthy Communities)

4.1 Links to Council Plan Priorities are set out in this report.

5. Implications

5.1 Financial Implications

The financial implications are as set out in this report.

5.2 Legal and Governance Implications

There are no legal and governance implications related to this report.

5.3 **Climate and Biodiversity Implications**

There are no climate and biodiversity implications related to this report.

5.5 **Human Resources Implications**

There are no HR implications related to this report.

5.6 **Equality and Diversity Implications**

There are no Equality and Diversity implications related to this report.

6. **Consultation**

6.1 No consultations have taken place.

7. **Alternative Options Considered**

N/A

8. **Statutory Officer Sign off** (please put an x in the relevant box below)

Section 151 Officer	X
Monitoring Officer	X

9. **Background Documents**

- Council Plan Priorities Report
- Council PI & KPI Report
- Council Strategic Risk Report

Contact Officers

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