Appendix B – Key Performance Indicators

Standards of Service

Service Standard	2015/16	2016/17	2017/18	
We aim to achieve a 90% level of customer	Annual Survey results August 2015.	Annual Survey results August 2016.	Annual Survey results August 2017.	
satisfaction rated at 'Very Good' or	97% of customers rate the level of	98% of customers rate the level of	97% of customers rate the level of	
'Excellent'	service as Very Good or Excellent.	service as Very Good or Excellent.	service as Very Good or Excellent.	
- Literature - Lit	(99.6% rated the level of service as	(100% rated the level of service as	(100% rated the level of service as	
	Good/Very Good/Excellent).	Satisfactory/Very Good/Excellent).	Satisfactory/Very Good/Excellent).	
	Good/very Good/Excellent).	datisfactory, very dood/Executionity.	datisfactory, very dood/Executionity.	
	Continuous Comment Card	Continuous Comment Card	Continuous Comment Card	
	feedback:	feedback:	feedback:	
	99.2% rate the level of service as	99.5% rate the level of service as	99.4% rate the level of service as	
	Good/Very Good/Excellent	Good/Very Good/Excellent	Good/Very Good/Excellent	
The Customer Service Centre aim to answer	Monitoring at the Customer Service	Monitoring at the Customer Service	Monitoring at the Customer Service	
telephone calls in person within 5 rings (15	Centre changed to reflect average	Centre changed to reflect average	Centre changed to reflect average	
seconds)	Abandoned Rate. In 2015/16 this	Abandoned Rate. In 2016/17 this	Abandoned Rate. In 2017/18 this	
	was 8.9%.	was 9.4%.	was 7%.	
	There were changes to the service	There were changes to the service	There were changes to the service	
Please note in 2014/15 this changed to a	provider in April 2015 and this will	provider in April 2015 and this will	provider in April 2015 and this will	
percentage 'Abandoned Rate'	be monitored.	be monitored.	be monitored.	
	be monitored.	be memored.	be memored.	
We aim to see 90% of customers within 10	99% of customers seen at time of	99% of customers seen at time of	99% of customers seen at time of	
minutes of their appointment	appointment or within 10 minutes of	appointment or within 10 minutes of	appointment or within 10 minutes of	
	their appointment time. This	their appointment time. This	their appointment time. This	
	includes customers who are 10 mins	includes customers who are 10 mins	includes customers who are 10 mins	
	late themselves for appointments	late themselves for appointments	late thems elves for appointments	
	and seen straightaway.	and seen straightaway.	and seen straightaway.	
We will answer all correspondence,	Certificate applications = 99.9%	Certificate applications = 99.9%	Certificate applications = 99.9%	
including electronic, within 5 working days			11	
	Other correspondence = Internal	Other correspondence=Internal	Other correspondence=Internal	

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of receipt	monitoring.	monitoring.	monitoring.
We have a clear and accessible compliments	Registration & Celebratory	Registration & Celebratory	Registration & Celebratory
and complaints procedure	Standards of Service leaflet updated	Standards of Service leaflet updated	Standards of Service leaflet updated
	(September 2013) and adopted	(September 2013) and adopted	(April 2018) and adopted together
	together with Lincolnshire County	together with Lincolnshire County	with Lincolnshire County Council
	Council Complaints policy updated	Council Complaints policy updated	Complaints policy updated April
	April 2013.	April 2015.	2017.

Key Performance Indicator Summary Table for the Registration Service

	2014/15	2015/16	2016/17	2017/18
Performance indicators	Target 95%	Target 95%	Target 91%	Target 96.7%
Achievement against Good Practice Guide key performance indicators (excluding deaths)	97%	96%	92% (note slight difference in Key Performance Indicator basket)	99.54%

Statutory Standards: Key Performance Targets/Indicators (KPT/I)

The extract from the Annual Performance Report to the General Register Office for 2017-18 is below:

Part A (i). Key Performance Targets / Indicators				
Registration timeliness (national target)	2016-2017	2017-2018 (Please provide percentage attainment level)	Comments (e.g. explanation of trend and remedial actions/ good practice undertaken and expected timescales for KPT attainment. If considered to be a long-term issue, record reasons and improvement planning approach).	
Births - 98% registered within 42 days	98%	98%	Target met and monitored monthly through the KPI spreadsheet and management meetings. Average over the year is 97.8%, some minor variation between 96% and 99%.	
Still births - 98% registered within 42 days	100%	100%	Target exceeded, and consistent with 2016-17. We monitor this monthly through the KPI spreadsheet and management meetings.	
Deaths with MCCDs (no coronial involvement) - 90% registered within 5 days	63%	58%	This was a new national target area for 2016-17 so we have only comparable data for one previous year. This continues to be a challenging KPI both locally and nationally for the vast majority of local authorities as evidenced in the benchmarking data provided by GRO. In 2017-18 the percentage for all deaths (Non-Coroner and Coroner and without a post mortem) was 49%. Last year the attainment was 48%, yet with increased volumes over the last years across the whole range of death registrations. It continues to be recognised that providing customer choice in a large geographical area has an impact on this result. We have improved more direct signposting of the earliest death appointment; however we still experience a large number of people who wish to register at their local office. We continue to develop a new appointment booking system which should facilitate first appointment availability more easily. As we move to more on-line customer-booked appointments, this will automatically offer the earliest appointments first. Unfortunately this project has been delayed due to corporate issues. We sent a General Practitioner and various Funeral Director newsletters in 2017-18 and contact continues to be made with our local hospitals and Medical Practices. We remain committed to improve the standard of Medical Certificates of Cause of Death (MCCD)	

received for example by direct contact, training and also through these newsletters.

Regular annual audits of these certificates have been and will be made to gauge improvement. We are concentrating particularly on the MCCDs for January 2018, when we had a significant low level of deaths registered within 5 days.

A new hospital Bereavement Centre opened at Lincoln County Hospital and this is the first time they experienced winter pressures.

There has been a significant period of prolonged higher levels of death registrations, since November 2017 to date. Volumes in this section rose from 4432 to 4628, an increase of 196 or 4.4%.

2016 – 17 | **4432** | **1632** | **63**%

Total deaths reported:

Deaths registered in 2017-18 = 7,843 Deaths registered in 2016-17 = 7,646

Lincolnshire also suffered two periods of extreme weather, and in February 2018, an emergency/limited service only had to be provided due to county wide road closures and deep snow.