

**Committee and Date** 

Item

Transformation & Improvement Overview & Scrutiny Committee

17th November 2025

**Public** 









# **Q2 Performance Report**

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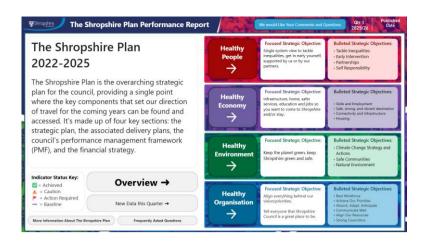
Cabinet Member (Portfolio Holder): Cllr Heather Kidd - Leader

## 1. Synopsis

The Shropshire Plan clarifies our vision and priorities, aligning our resources to deliver positive outcomes for our people, businesses and communities. Delivery of our outcomes is measured through the developing Performance Management Framework, demonstrating progress to date.

## 2. Executive Summary

- 2.1. The Shropshire Plan (TSP) 2022 to 2025 was created to clarify Shropshire Council's vision, priorities and strategic objectives. These objectives are the outcomes we aim to achieve within our available financial envelope. The Shropshire Plan is structured around four key priorities: Healthy People, Healthy Economy, Healthy Environment and Healthy Workforce. We monitor our success and understand delivery of our strategic objectives within each 'Healthy' through a suite of Key Performance Indicators (our performance framework), which forms the basis of this report.
- 2.2. This performance report covers the second quarter of the 2024/25 financial year (July to September 2025). Performance is reported on an exception basis, where performance may not be meeting targets.
- 2.3. The interactive <u>The Shropshire Plan Performance Dashboard</u> is the main source of performance information enabling greater insight, transparency and scrutiny of the Council's performance and delivery of its outcomes. This visualises each KPIs trends and comparison to other local authorities where possible. **This report should be viewed in conjunction with the dashboard-see the 'New Data This Quarter' page.** A guide on navigating the dashboard is included in the Appendices.



- 2.1. The Corporate Plan is undergoing its refresh and the plan for 2025/26-2026/27 will be considered by Council in December 2025. Subject to Council approval, the performance management framework (PMF) will need to be reviewed and strengthened to align with our strategic objectives to ensure we are an evidence-led and performance-managed council. A full list of the current KPIs can be found in the Appendix.
- 2.2. This Performance Report complements the Financial Outturn Q1 2025/26 Report but provides a different perspective. We may therefore find that the position on KPIs is favourable, but that the finance position is adverse because the activity levels (the cost drivers) are higher than anticipated. As Shropshire Council continues to manage an unprecedented financial position, significant management action is required over the remainder of the financial year to ensure the Council's financial survival. This may involve scaling down initiatives, changing the scope, delaying implementation, or extending delivery timescales therefore potentially impacting on performance in some areas.

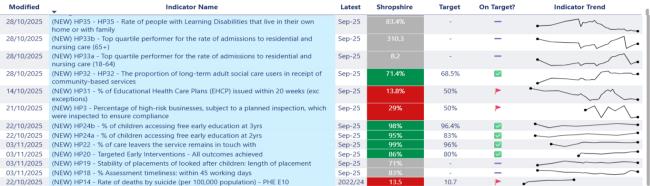
#### **Key Findings and context**

2.3. In Quarter 2 of 2025/26, a total of 41 Key Performance Indicators (KPIs) have been updated in <a href="The Shropshire Plan Performance Dashboard">The Shropshire Plan Performance Dashboard</a>. 14 of these KPIs are grey, meaning that they do not have a target set for various reasons, such as: information only indicators or the KPI definition has changed.

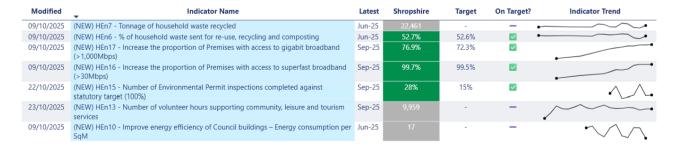
Of the 27 newly reported KPIs with targets:

- 74% (20KPIs) are above their target (green).
- 4% (1 KPI) of indicators were similar to their target (amber).
- 22% (6 KPIs) are below their target and are exceptions (red). The
  reasons for this are reported in the <u>Additional Information section</u> of this
  report.
- 2.4. Healthy People: Demand for adults and children's social care remains high this quarter. We continue to experience a significant rise in the number of requests for education, health and care plans for children with special educational needs and disabilities. Staff shortages have led to delays in meeting the government's 20-week timescales. Despite creating specialist teams and recruiting permanent staff, resources are still insufficient in meeting rising demand, making it difficult to achieve

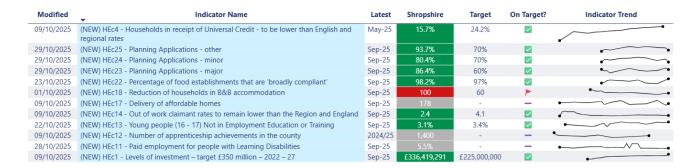
timeliness targets. Whilst the suicide rate in Shropshire has risen to above the national average, we remain mid range compared to our statistically similar neighbours. Food hygiene statutory inspections in Q2 is slightly behind target due to staff vacancies, and increased poor compliance in premises requiring more extensive follow up. Uptake of free early education among 2 and 3 year olds remains strong, supporting better developmental outcomes. Adult social care support in the community also remains high this quarter, we continue to support more people to live in their communities. Support of the Early Help Team and timely delivery of targeted early interventions continues to be good and we continue to remain in contact with almost all of our care leavers.



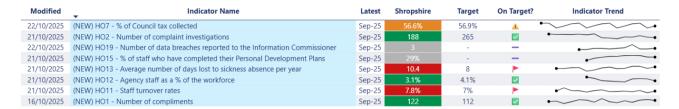
2.5. Healthy Environment: Key measures around waste, recycling and pollution show that we are sending a smaller proportion of waste to landfill and are maintaining environmental permit inspections. Availability of the infrastructure to deliver high speed internet remains high across Shropshire, however coverage does not mean that residents or businesses are connected or able to access the service. An area may be marked as having superfast broadband coverage because the network infrastructure (such as fibre-optic cables) is in place, but the service is not yet live or operational. We are successfully maintaining the number of volunteers who support the Culture, Leisure and Tourism service, providing social and physical benefits and work experience opportunities.



2.6. Healthy Economy: We are showing strong economic performance in the county among measures for benefits and employment with rates of households in receipt of universal credit, out of work claimants and young people not in education, training and employment being favourable compared to regional and national rates. Food hygiene compliance remains high, supporting a vibrant food, tourism and leisure sector. Planning applications continue to be delivered within target. Although more affordable homes were delivered this quarter, a current challenge for the council is an increasing number of households presenting as homeless or at risk of homelessness which has led to a rise in households in B&B accommodation.



2.7. Healthy Workforce: We are receiving more positive feedback from residents and customers and a lower number of complaints suggesting the delivery of high-quality services. However, despite a reduction in the use of interim and agency staff, the council is experiencing rising rates of sickness absence and staff turnover, which is placing additional strain on remaining staff.



2.8. In Quarter 2, 3 KPIs continue to be exceptions. Progress updates from officers can be found in the Additional Information section.

#### 3. Recommendations

It is recommended that Cabinet:

- Note progress to date in achieving the outcomes of The Shropshire Plan, utilising the interactive <u>Shropshire Plan Performance Dashboard</u>
- 3.2. Collectively review and align Shropshire's Performance Management Framework and the associated suite of KPIs with the new administration's priorities, Corporate Plan and the Local Government Outcomes Framework metrics.

## Report

## 4. Risk Assessment and Opportunities Appraisal

- 4.1. The management of the Council's Performance Management Framework is a key process in ensuring strategic risks are mitigated and the Council can carry out business as intended and planned for within TSP.
- 4.2. The management of key performance indicators is a key process to monitoring progress in the delivery of outcomes as set out in TSP. This provides insight into whether corrective action is required to bring performance back on track.

- 4.3. The performance report and dashboard provide a high-level lens into the performance of Shropshire Council allowing for further targeted detail analysis to support the mitigation of any risks identified.
- 4.4. Regular financial reporting is part of the governance and risk management approach within the Council ensuring that it delivers sustainable and value for money services as required under statute. Risk management continues to be an active part of this process, and Officers review potential risk and opportunity scenarios each month. The Council holds two finance related strategic risks regarding managing the current financial situation and so this remains under constant review to consider appropriate management action of the situation.
- 4.5. The dashboard includes instructions for use and a feedback form is available for questions or feedback. Members have been shown how to use the dashboard, and the Business Intelligence and Insight team are available for training for new Members.
- 4.6. Monitoring will be in place using the dashboard so any issues can be resolved in a timely manner.
- 4.7. Ultimately, the Council must risk assess the delivery of strategic objectives within TSP and adjust, accordingly, to ensure an acceptable balance of outcomes are achieved at a strategic level. This may mean the prioritisation of some objectives over others to react to the evidence presented within the PMF. It may not be possible to achieve optimal performance across all indicators and it may be necessary to oversee expected reductions in performance in some areas to remain within the overall financial envelope and ensure full focus is given to prioritised areas of activity by officers including significant management action required over the remainder of the financial year to ensure the Council's financial survival.

## 5. Financial Implications

- 5.1 Shropshire Council continues to manage unprecedented financial demands and a financial emergency was declared by Cabinet on 10 September 2025. The overall financial position of the Council is set out in the monitoring position presented to Cabinet on a monthly basis. Significant management action has been instigated at all levels of the Council reducing spend to ensure the Council's financial survival. While all reports to Members provide the financial implications of decisions being taken, this may change as officers and/or Portfolio Holders review the overall financial situation and make decisions aligned to financial survivability. All non-essential spend will be stopped and all essential spend challenged. These actions may involve (this is not exhaustive):
  - · scaling down initiatives,
  - changing the scope of activities,
  - delaying implementation of agreed plans, or
  - extending delivery timescales.
- 5.2The performance report provides progress on key activity targets which will have correlation to financial performance
- 5.3 It should be noted that positive improvement on activity may not necessarily

correspond to financial improvement, and this should be drawn out in the narrative of the financial and performance reports.

## 6 Climate Change Appraisal

- 6.2 The performance report includes KPIs for Healthy Environment with measures for monitoring Shropshire Council's direction of progress on climate change.
- 6.3 Recommendations within the Climate Strategy and Action Plan Monitoring Report 2023 were agreed by the Council on the 18th of July 2024, including two recommendations specific to key performance indicators which will be incorporated into the Shropshire Plan Performance Report for future reporting: Specific carbon emission reductions by activity and Energy efficiency.
- 6.4 Climate Change also has significant implications for Healthy People, a Healthy Economy and a Healthy Organisation and further work to develop additional KPIs, in partnership with the Climate Team will reflect this. There has been a reduction in size of the Climate Change team and as a result, future work programmes are being reviewed. Further indicators will be made available as new data becomes available to ensure that as high a percentage as possible of primary data collected is based on measured carbon emissions via a clear and transparent process such as carbon accounting, rather than estimating scope 3 emissions based on spend.
- 6.5 Measuring emissions also provides a baseline for setting climate targets and deciding where to start reducing emissions. Repeating the measurement process annually allows Shropshire Council to track and report progress in a clear, transparent way to ensure that key stakeholders members, regulators, employees, members of the public, other local authorities and system partners are informed about our collective climate action and impact.

## 7 Background

- 7.2The focus of the Council in 2025/26 and the immediate future is necessarily directed at the delivery of a balanced budget, and is currently, therefore, the highest priority strategic objective within TSP balanced alongside protecting our most vulnerable children.
- 7.3 Information on each KPI is presented within <a href="The Shropshire Plan Performance Dashboard">The Shropshire Plan Performance Dashboard</a>, which is published on a quarterly basis on the Council's website performance webpage. This includes performance status (red, amber, green currently reported based on variation from the target), trends and benchmarking information, where available. See the 'Frequently Asked Questions' to view thresholds for variation. A guide on navigating the dashboard is included in the Appendices.
- 7.4 The approach being taken by Shropshire Council is progressive and in advance of many other authorities and this places us in a strong position to continually improve our approach to managing performance and ultimately providing evidence of our ability to deliver the outcomes set out in TSP.
- 7.5 The dashboard is designed to be a dynamic tool, continuously improving based on user feedback and emerging requirements. Feedback on the design and usability of

- the dashboard and performance webpage is welcomed. A feedback form is available for questions and queries, which are reviewed regularly with responses provided and published where appropriate alongside the dashboard.
- 7.6 In July 2025, the Government published a new draft Local Government Outcomes Framework (LGOF), setting out a proposed structure for how central and local government might work together to measure progress on key public service outcomes. This includes 15 priority outcome areas to support more consistent, transparent monitoring of local performance over time. These will be underpinned by outcome metrics drawing from existing data sources to show how progress will be measured. The metrics will be confirmed in December 2025, with a 'go live' date in April 2026, which will be reported annually.
- 7.7 The newly elected administration of Shropshire Council assumed office in May 2025. A thorough review of Key Performance Indicators (KPIs), involving Portfolio Holders, relevant Members, Executive Directors, and Assistant Directors, is necessary to ensure alignment with the priorities of the new administration, the Local Government Outcomes Framework (LGOF), and the updated Corporate Plan. The complete list of current KPIs is provided in the Appendix.

#### 8 Additional Information

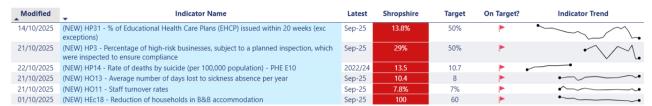
#### Improvements of note

- 8.2 HP24a and HP24b % of children accessing free early education at 2yrs and 3yrs: the proportion of children accessing free early education at 2 years continues to perform well. We are happy to report that Shropshire holds a code validation rate of 95% for 2 year olds. This means that 95% of parents with a child who is 2 years old turn this code into an actual early years place. In comparison, West Midlands and Nationally held data shows 94%. This ultimately is an indication of the health of the sufficiency picture in Shropshire and the hard work that is done to ensure timely submission of codes to providers in order to transform this into a place. Shropshire also holds a 98% code validation rate for children accessing free early education at 3 years meaning that 98% of parents who request a code are able to convert this into an active early years place within a setting. In comparison, the national picture data shows 96% while West Midlands neighbours average at 94%. We are reported to be 2nd in the country overall, behind a small local authority and this is celebrated within the Early Years team and made possible through hard work and our relationships with providers and settings to ensure the codes can be converted effectively and efficiently.
- 8.3 **HEc1 Levels of investment target £350 million 2022 27**: Levels of Investment continue to rise. Between July and September 2025, the amount of investment secured was significantly higher than the quarterly target (£90 million against a target of £15 million). However, it is expected that investment levels will fluctuate considerably on a quarterly basis and historic figures are liable to change if additional investments are identified. Shropshire continues to perform well against the cumulative target, and as of September 2025 was 50% ahead of target.
- 8.4 **HEn6 % of household waste sent for re-use, recycling and composting:** there has been an improvement this quarter to 52.7%, now meeting the target for the first

- time in since Q3 24/25. Subscriptions rose significantly in spring which led to an extension and reopening of signups to accommodate demand.
- 8.5 **HO12 Agency staff as a % of the workforce**: With ongoing efforts to reduce third-party spending, the number of agency staff has continued to decline, down to 3.1% of our workforce being agency staff bringing us below our target.

#### **Exceptions**

There are 6 exceptions reported in Quarter 2 from the newly reported data:



(Source: The Shropshire Plan Performance Dashboard)

Table 1 provides progress updates from officers regarding KPIs that remain as exceptions in quarter 2, as well as newly identified exceptions for this quarter.

Interpretation: Red dots indicate where a KPI is not meeting the target (exception) and green dots indicate where the KPI is meeting the target.

	Q1 2025/26	Q2 2025/26
Exception in Q1 and Q2		
Exception in Q1 only		
New exception in Q2		

Table 1. Exceptions

KPI No.	KPI name	Q1 2025/26	Q2 2025/26	Progress update from Council officers
HP13	% of EHCPs issued within 20 weeks (excl. exceptions)	•	•	The quarterly EHCPs issued within 20 weeks dropped from 18.5% in Q1 to 13.5% in Q2, still well below the 50.0% target and behind 2024 figures for England (46.4%), statistical neighbours (50.2%), and the regional average (42.3%). The chart below shows the monthly rate for Shropshire which has been under target since December 2024. Reasons for this are detailed below.  **BHC Plans completed on time**  **BHC Plans completed on time**
				90.0 80.0 70.0 60.0 50.0 40.0 30.0 20.0 10.0 0.0 0.0 0.0 0.0 0.0 0.0
				Team Structure & Restructure: Up to December 31, 2024, the SEN Team consisted of 25 staff (including Senior SEN Case Officers, Annual Review Officers, ECHNA Coordinators) and a separate Business Support Team of 6 staff handling administrative tasks. In January 2025, after formal consultation starting in October 2024, the team was restructured and became the EHCP Team, aiming for a permanent and sustainable workforce.  Leadership Changes: An Interim Team Manager had led the team for two years, overseen by
				a strategic lead for SEND. The current EHCP Team Manager was appointed after an open recruitment process. Strategic oversight is now provided by the Principal Educational Psychologist and Early Intervention Lead.  Staffing Challenges: The service relied heavily (~ 80%) on contract Case Officers, which led to instability due to short notice periods (one week) and difficulties in timely recruitment. This caused a staff deficit.  Recruitment & Current Team Composition: A comprehensive recruitment process began in January 2025, resulting in 7 permanent EHCP Case Officers starting on May 1, 2025. The team

(ARRT), 4 EHCP Case Officers on one-year fixed contracts for Annual Reviews, and Business Support Officers). A business plan has been developed to secure these resources.

**Demand & Process Adjustments:** Due to rising demand for Needs Assessments locally and nationally, and the need to induct and train new Case Officers in Q1 and Q2, the Business Support Team has taken on the Needs Assessment process up to the 'yes to plan' stage (the first 12 weeks of the statutory timescale). This enables Case Officers to focus on plan writing and statutory casework.

**Growth in EHCPs:** There has been an increased demand on the workforce with number of children and young people with EHC plans increasing to 3,016 as of January 2025 census day, a 21% rise from 2024, which is faster than the national increase of 11%. EHCNA requests have also increased, for example there were 47 requests in January 2024 compared to 80 in January 2025.

During 2024, the Team's focus was on timeliness and making a recovery from 7.9% in January 2024 and achieving 38.6% by December 2024. It has been necessary to evaluate and understand current risk and demand in some areas of the service. For example, the Annual Reviews. The SEN Team, prior to 2025, had focussed largely on the increasing demand for EHCNAs and the resulting writing of plans. In managing the reach for achieving the KPI target of 50%+ timeliness (HP31), and in response to the Written Statement of Need from the Ofsted outcome in 2022, response times of Annual Reviews had slipped. The impact of this resulted in a significant backlog of Annual Reviews.

In order to manage recovery of this area of work, it was necessary to develop a further arm to the team, the Annual Review Recovery Team (ARRT) which was formed in November 2024.. ARRT is now made up of a Senior EHCP Case officer on a fixed term contract for one year and 3 FTE contract staff. After advertising the 3 posts for Case Officers, the calibre of and skill-set of applicant therefore remaining staff were retained given their skills, knowledge and understanding of Shropshire, for the life of the project. This is under constant review. This surety of the main cohort of the team has been achieved in terms of permanent staffing but resource versus demand and achieving statutory timescales remains a risk. This is similar in the ARRT. As we continue to review the backlog, the progress is limited, due to the poor quality of previous plans and those which have remained unamended for too long. 90% of Annual reviews in the backlog, require amended plans and case work to complete to a standard which achieves our quality assurance thresholds.

Actions to date:

Service redesign.

		<ul> <li>Thorough induction and training programme for new and existing staff.</li> <li>Weekly group case discussion providing on-going learning, reflective practice and</li> </ul>
		<ul> <li>development opportunities.</li> <li>Monthly supervision sessions 121 to target individual performance and gaps in knowledge.</li> <li>Weekly monitoring of the drafts and finals due by Seniors EHCP Case Officers and overseen by the Team Manager, with a narrative on progress and barriers to progress.</li> <li>Weekly focus areas for the team cohorts, for example, those cases extending beyond 30 weeks to finalise. Art of the possible conversations.</li> <li>Review of the Quality Assurance framework, to allow for smarter working and faster churn.</li> </ul>
		<ul> <li>Improved quality of EHC Plans.</li> <li>Improved communication with families and partners through Touch Point and communications strategy.</li> <li>Planned, joined up working to support achieving phase transfer deadlines.</li> <li>Development of internal processes in collaboration with partners to support rigour around decision making, for example, Cease EHCP Panel supported by multi-agency partners and an EOTIS (Education Other Than In School) Policy.</li> <li>Key staff assigned to Local Authority Specialist Settings/ Schools – Senior EHCP Case Officers fortnightly meeting with our LA special schools.</li> <li>Data quality cleanse.</li> </ul>
HO13	Average number of days lost to sickness absence per year	What is needed: Review of service resource versus demand.  The sickness absence average to September 2025 is 10.4 days lost per FTE, up from 9.2 last quarter and above the 8-day target. If this trend continues, 2025/26 could see over 11 lost days per FTE. For 2024/25, Shropshire matched the regional (10.2 days) and national (9.5 days) medians, but forecasts for 2025/26 suggest it will exceed both, even if benchmarking figures rise. Several factors will influence the increase in sickness absence, including the cost of living crisis causing stress outside the workplace and financial pressures within the Council leading to pressure on resources. To address this increase, the Council is focusing on more targeted monitoring, proactive HR interventions, and increased utilisation of HR surgeries with managers and signposting to new implemented Employee Assistance Programme.
HEc18	Reduction of households in B&B accommodation	In Q2 25/26, there were 100 households in B&B accommodation, more than the target of 60.  B&B numbers have been monitored weekly since May 2022, where the highest recorded number of placements was 198 households provided with accommodation using hotels. Since this date the number of households placed in B&B has steadily decreased in Shropshire, falling to 69 households in March 2025. However, more recently there has been a rising trend to

September 2025 with the latest figure showing a rise of 6 households compared to the previous quarter. Whilst Shropshire showed a fall to March 2025, nationally, there was a rise with the total number of households in temporary accommodation now at record levels in England, both for households with and without children.

Most people in B&B accommodation in Shropshire are single / couple households (ie, have a 1 bed need) therefore we have focused on increasing in-house temporary accommodation at this cohort of clients. In January 2025 we opened the Tannery which is 60 bedspaces for single applicants and saw our weekly numbers in B&B drop as low as 58 households in mid March 2025. We have an additional 50 units opening during October and November 2025 which should see numbers decrease again.

The number of households in B&B placements has increased at the end of Q2 and there are three central factors that have affected this performance.

- There has been a reduction in available alternative temporary accommodation with the number of voids taking longer to be returned via STAR Housing. STAR have advised they have a new contractor in place, and the backlog will be back to normal by mid-October. This impact is estimated at 30 units of accommodation.
- 2. There has been a reduction generally of social housing lettings. This year to date there has been a 25% reduction in available properties to let via HomePoint. This has meant a significant reduction in homeless households moving out of temporary accommodation into permanent housing. The estimated effect of this is between 20 30 more placements in B&B placements.
- 3. The three new temporary accommodation facilities at Coton Hill House, Parish Rooms and 70, Castle Foregate have been handed back to us much later than expected. If these had been returned during Q1 of 2025 then this would have reduced numbers in B&B by 40 50. These facilities are due to be let in the next quarter and with the return of the backlog of voids we should return figures to below target.

The reason that this figure is rising in recent quarters is because Shropshire is seeing an increase in the number of households presenting as homeless or at risk of homelessness, with an 11% rise between 24/45 to 2025/26 (Q1-3). This trend is also happening nationally. Further to this, we have seen a decrease in the available properties being let via social housing providers – we suspect this is due to a reduction in new build scheme completing this year but are in discussion with our partners.

Although the numbers have not decreased to the levels we predicted, they have decreased from the forecasted figures we had prior to the investment in and opening of our in-house

HO17	Responding to FOIs within statutory timescales (20 working days)	benefit to the able to acces term. In the recognised became approach to less that the shropshire's not available	Council but equally do ss more intense suppo recent Corporate Peer y the reviewers who st homelessness" Q1 figure was 60%, w and will become avails	emonstrates signt and therefore Challenge, the tated "There are which is below the able in late Oct	ne numbers in B&B has a gnificantly better outcome be be better equipped to see hard work of the Housing examples of excellence the 95% ICO target. The stober as FOIs received of eare reporting a partial fire	es for those clients ustain a tenancy long ng team was e such as the September figure is n 30 September are
uays)	average for the	he months of July and	August. In Jun	ne and July, 57% of FOIs KPI will likely continue to	were responded to	
		Year: 2025	Number received	% on time	Quarterly Average	
		Jan-25	153	75		
		Feb-25	164	73		
		Mar-25	180	67	72%	
		Apr-25	127	66		
		May-25	141	55		
		Jun-25	120	64	62%	
		Jul-25	150	59		
		Aug-25	137	55	57%	
		Sep-25	108	TBC	TBC	
		at 80% (1,69)  Planned imp Change to teather services Greate Leade	5 FOIs received).  orovements ge in process currently ms due to respond and ce Directors. ter awareness and guidership Board on 7 Octo	y underway: red d reducing the dance: being red ober 2025	Ols received) lower comp ducing the overall burder need for responses to be eviewed as part of the NC formation as possible wh	n by sending directly e authorised by DM agreed by

	1		
HO19	Number of data breaches reported to the Information Commissioner	•	In Q2, there were 3 breaches reported to the ICO (Information Commissioners Office) compared to 2 breaches last quarter.
	Commissioner		In Q2, there was a significant number of breaches reported to Information Governance Team (IGT), with 70 breaches reported compared to 43 the previous quarter:
			2025 Q1 : 2 reported to the ICO out of a total of 43 breaches reported to Information Governance Q2 : 3 reported to the ICO (70 breaches in total) This is a significant increase
			2024 Q1: 2 reported to the ICO (65 breaches in total) Q2: 3 reported to the ICO (55 breaches in total) Q3: 4 reported to the ICO (52 breaches in total) Q4: 2 reported to the ICO (42 breaches in total)
			Information Governance Team (IGT) has updated and added to the advice and guidance on the Intranet, including a team briefing sheet that we ask managers to include on team meetings if their areas experience a high number of incidents. Along with the offer to attend team meetings and discuss any issues. IGT are approaching other key areas, eg business support teams, to ensure they know what to do if there is an incident so that the right actions are taken asap to reduce the impact on those affected.
			Statistics relating to breaches is reported quarterly to Information Governance Leadership and Organisational Oversight group (IGLOO). It was agreed at the last IGLOO – September 2025, that IGT will report to Service Directors monthly and give them a breakdown of the following:  • the number of breaches  • the level of risk associated with them (0 – incident but no actual breach; 1 – a low level
			<ul> <li>breach; 2 – a medium level breach; 3 – serious breach reportable to the ICO)</li> <li>the cause of the breach</li> <li>link to best practice, advice and guidance on actions they may take to reduce the number</li> <li>an offer to work directly with the team to discuss issues and talk through solutions.</li> </ul>

HP3 Percentage of high-risk businesses, subject to a planned inspection, which were		•		This KPI relates to high risk food business inspections (Cat A and B). The Food Hygiene Inspection Performance against Food Standards Agency Code of Practice are below:					
	inspected to ensure compliance			Inspection Category	Inspections Done (Q2)	Total Number Due (Q4)	Percentage		
				Α	9	13	69%		
				В	19	84	23%		
			High risk food hygiene performance shows we have completed 29% at the end of Q2. The reason for this is that not all of the year's programme of premises are equally spread across the year – 85% of those due by the end of Q2 were completed. The figure is against the Q4 target. Due to staff vacancies, we are slightly behind our Q2 performance. Increased poor compliance in premises means longer and more follow up in poorer performing premises. Due to recruitment difficulties we still have 1 FTE vacancy within the team. We are 3 FTE below the minimum resource level required on our service plan to complete 100% of all categories of inspections. Due to significant non compliances longer interventions and follow ups are required in high risk food premises. We have undertaken a total of 677 interventions by Q2 including 110 complaints, 17 food samples. We have received 336 new registration requests by Q2.						
HO11	Staff Turnover rate (%)	•	•	almost a third of all volu majority of those being Services areas which h	untary leavers sighting ' front line staff. Just ove ave different drivers) ha		e. Overall turnover for		
HEn6	% household waste sent for reuse, recycling and composting	•	•	This KPI is reported in a for Q1 of 2025/26. Ther 2026, up from 43.7% to England (42.7%, 2023/2) led residents to dispose and we noticed a significant control of the contr	arrears, the rate reporter has been a slight incomes 52.7%, now above target). This improvement a of more garden wasted icant boost in subscript	ed in this Q2 2025/26 represse in the recycling perget and higher than the list largely due to the ward. Spring 2025 was particions during these month	port is showing the figure creentage for Q1 2025-latest comparator data for mer months, which has cularly good for growing,		
HEc7	Improving productivity in reducing the gap in GVA per hour worked with the national average by 50% by 2027		N/A	In June 2025, the latest ONS. The KPI was repo	orted in the Q1 2025/26	report, as a 23.7% gap	vorked was published by between Shropshire and ch there is no up-date for		

## Partnership KPIs

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HP14	Rate of deaths by suicide (per 100,000 population)	The latest DHSC Fingertips data (three-year average 2022–2024) shows that Shropshire's suicide rate has risen to 13.5 per 100,000, which is statistically higher than the England average (10.9 per 100,000) and currently the highest in the West Midlands. While this position is concerning, Shropshire remains mid-range compared with its statistical neighbours (ranked 7th of 16), suggesting that broader demographic and geographic factors may be influencing risk.  Every death by suicide is a tragedy for families, friends, and communities. Reducing suicide is a shared responsibility across our whole system and communities. No single, organisation can prevent suicide alone – it requires every partner, employer, service and resident to play their part in creating hope, reducing stigma and ensuring that people in distress receive timely and compassionate support.  Shropshire has a well-established multi-agency Suicide Prevention partnership with clear governance, shared accountability, and active delivery of a robust local action plan. Significant new work has been implemented in 2024–25 to strengthen prevention, awareness, and community resilience. Partners are asked;  • Promote the new Orange Button Community Scheme to recruit a network of trained volunteers to promote talking about suicide and reducing stigma Orange Button Community Scheme   Shropshire Council  • Encourage take-up and completion of suicide prevention training (including the free to access Zero Suicide Alliance e-learning available at: ZSA FREE online training)  • Embed safety planning approaches across all services as supported by the publication of the NHS England Staying Safe from Suicide guidance and free training available at: MindEd Hub  • Be aware and share information about local support Mental health   Shropshire Council and Suicide concerns and prevention   Shropshire Council

We will be reviewing data/intelligence to help understand specific themes that may have contributed towards this increase but also recognise we did undertake an audit last year of suicide deaths covering the period 2021-2023 and many of these themes will still apply to latest reporting period given the cross over timeframes.

The initiatives that have been launched in 2025 following recognition of the increasing rate over the past few years include the following

- Launch of the Orange Button Community Scheme in September 2025 and the Suicide Prevention Network are in the process of recruiting volunteers to this and raising the profile of the offer
- New suicide death review panels (launching soon, delayed due to getting ISA in place and logistics with partners but with a new PH Development Officer in place as of August 2025 this has helped to progress)
- Refresh of Shropshire Suicide Prevention Action Plan in July 2025. We have been meeting with partners to add further detail and understanding as to their role and how to demonstrate progress
- Continued focus on subsidised training and promotion of suicide prevention resources this includes working with Joint Training to design a new half day training course for awareness and safety planning. The group have designed a training matrix for suicide prevention, bereavement and self-harm to help the workforce understand what is available, what is most appropriate for their role and how to access this will be published within the next month. I am in discussion with Joint Training as to how we can undertake a suicide skills audit across the workforce to help identify where gaps may still be and what can be done to try and influence.
- Publication of the GP and Primary Care Suicide Prevention toolkit launched at the GP Safeguarding forum in April 2025
- Launch of a MH Community Grant aimed at SMI cohorts with suicide risk our Action Group supported review of applications to award funds to community organisations supporting a range of offers including programmes aimed at men/boys from designs in mind, Eastern European populations from Shropshire European Organisation, a programme aimed at men who have been victims of sexual abuse by Axis, Shropshire Supports Refugees with targeted offers to address wellbeing concerns and Men's Sheds to strengthen their local offer to engage men with open, safe discussions about anything they are struggling with including loneliness.

				Our Action Group will be refreshing the Healthy Shropshire webpage information and the Zcard (as there are some offers which have changed during the course of this year)
HEc6	% of households in fuel poverty (annual)	•	N/A	In Quarter 1 2025/26, the latest published figure (2023) for the % of households in fuel poverty in Shropshire was reported as 17.7%, higher than the national rate of 11.4%, second highest among our statistical neighbours and 8 <sup>th</sup> highest nationally. This measure is based on annual rather than quarterly data; as such there is no up-date for quarter 2.

#### 9 Conclusions

- 9.2 The key performance pressure remains the delivery of a balanced budget which are detailed in the financial report.
- 9.3 Considering the financial constraints, overall Q2 25/26 shows reasonable performance in achieving The Shropshire Plan and its objectives, with 78% of the 27 newly updated indicators meeting or exceeding their target.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Local Member: All

Consultation with Local Member – Please consider the Local Member Protocol (see page E60 onwards of part 5 of the Constitution) and determine whether it is necessary to consult with the local member over the proposal set out in this report. This may not always be applicable (eg where the proposal affects all of Shropshire) but it should always be a consideration and in some cases a necessity so as to comply with the spirit of the Protocol.

### **Appendices**

**KPI List** 

A guide on navigating the dashboard (Video):

The Shropshire Plan Performance Report Walkthrough.mp4

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